

Family Medicine Residency
In-house II Rotation (updated June 2021)
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Rotation Goal

Admission, evaluation, treatment and appropriate specialty consultation of adult hospitalized patients from either the ER, outpatient transfer, or directly from the UT clinic. During the rotation, residents will become familiar with the following:

- obtain adequate information through history and physical examination with assistance as needed from faculty and upper level residents.
- write admission orders including labs for further diagnostic evaluation and treatments.
- evaluate patients with unstable vital signs and incorporating ACLS protocol into resuscitation of patients as needed.
- use of quality care markers and published guidelines for specific disease states such as congestive heart failure exacerbation, acute coronary syndromes, and pneumonia.
- discuss overall situation, plan of care and prognosis of patients who are being admitted to the hospital.
- follow patients admitted to the hospital on a daily basis with emphasis of care for patients admitted to the intensive care unit.
- participate in the review of new admissions, initial orders and diagnostic testing for understanding of acceptable variations in care plan/management protocols.

Supervision

Supervision is provided by direct observation by 3rd year residents, direct observation by faculty, and verbal consultation with 3rd year residents and/or faculty.

Rotation Objectives

By the end of the Internal Medicine In-house I rotation, PGY II residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. Since competencies mastered in the first year of residency are competencies required for a successful clinician, the second year resident will demonstrate achieved objectives in year one with expanded knowledge, more efficiency in performance of procedures, and additional knowledge in pathophysiology encompassing more complex disorders. The resident should exhibit an increasing level of responsibility and independency as he or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	<p>SPECIALTY SPECIFIC OBJECTIVES</p> <p>With more autonomy, refine skills to perform the following procedures generally performed on the Inhouse Internal Medicine Rotation (procedures denoted with an “*” are optional)</p> <ul style="list-style-type: none"> • Advanced cardiac life support • Admission to cardiac monitor/telemetry (10) 	<p>Conferences/Didactics</p> <p>Grand Rounds</p> <p>Patient Assessment</p> <p>Case Presentations</p> <p>Self-Directed Learning</p>	<p>Direct Feedback</p> <p>Global Evaluation</p> <p>In-training Exam</p> <p>QA Review</p>	<p>Daily</p> <p>Monthly</p> <p>Annually</p> <p>Monthly</p>

	<ul style="list-style-type: none"> • Admission to intensive care unit • <i>Number of Admissions</i> (15) • Medical Resuscitation (10) • X-Ray Interpretation (10) • Electrocardiogram interpretation (25) • *Endometrial biopsy (1) • Fracture management simple non-displaced (5) • Foreign body removal (1) • Laceration repair (5) • Lumbar puncture adult (3) • *Lumbar puncture pediatric (3) • I&D abscess or cyst (3) • Intrauterine device placement and removal (3) • Joint aspiration and injection (1) • Nasogastric intubation (1) • *Pediatric Advanced Life Support • *Neonatal Advanced Life Support • Regional anesthetic block (1) • Skin biopsy (1) • Soft tissue injections (1) • Uncomplicated joint reduction (3) • Wound debridement (2) • Bone marrow biopsy in adults (1) • Diagnostic paracentesis (1) • Diagnostic thoracocentesis (1) • Paracentesis (1) • Thoracocentesis (1) • Central venous access (10) • Intubation (5) • Procedural Sedation (5) • Eye Exam for Foreign Body (1) • Trauma Resuscitation (5) • Medical Resuscitation (10) • Anterior nasal packing (1) • Arterial puncture (1) 			
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	Integrate skills that allow for up to date, compassionate care of the adult patient admitted to the hospital while integrating evidence based medicine, local standards of care, nationally defined quality care markers and specialty recommendations upon consultation	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	Compare reasonable and safe methods of outpatient follow-up of patients upon discharge	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	<p>With guidance from attending, begin to evaluate, diagnose, and formulate treatment options for patients with the following diseases:</p> <ul style="list-style-type: none"> • Cardiovascular conditions including cardiac arrest, myocardial infarction, dysrhythmias, congestive heart failure, hypertension, cardiomyopathies, pericarditis and coronary artery disease. • Gastrointestinal disorders including hepatitis, cirrhosis, pancreatitis, colitis, diverticulitis, cholecystitis, peptic ulcer disease, and bowel obstruction. • Management and diagnosis of fluid and electrolyte disorders including hypo/hyperkalemia, hypo/hyponatremia, hypo/hypercalcemia, and acidosis/alkalosis. • Endocrine conditions including diabetes mellitus, thyroid disorders, adrenal diseases, and lipid disorders. • Renal conditions including urinary tract infections, nephrolithiasis, acute and chronic renal failure and obstruction. • Hematologic conditions including anemia, coagulopathies, mononucleosis, polycythemia, and major hemoglobinopathies. • Musculoskeletal conditions including back pain, rheumatoid arthritis, collagen vascular diseases and osteoarthritis. • Infectious diseases (bacterial, viral, and fungal) that are commonly encountered in the adult population. 			

	<ul style="list-style-type: none"> • Neurological conditions including stroke/TIA's, seizures, meningitis, coma, movement disorders, dementia, delirium, nerve entrapment syndromes and tumors. • Pulmonary disorders including asthma, COPD, bronchitis, pneumonia, thromboembolism, fibrosis, neoplasms, respiratory failure and evaluation of pulmonary function testing. 			
	Maintain adequate, compassionate communication between the patient and medical staff	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	With guidance from attending, begin to develop a rational plan of care for patients including diagnostic testing, initiation and alteration of medications, and specialty consultation	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	With minimal supervision, perform a comprehensive history and physical examination of the adult patient	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
Medical Knowledge	SPECIALTY SPECIFIC OBJECTIVES			
	Apply knowledge of the normal anatomy and physiology to the evaluation, diagnosis, and treatment of patients.	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	Describe normal variants in organ function in the older patient.	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	Refine knowledge of the common disorders of the adult medical patient with assistance from upper level residents and faculty	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
Practice Based Learning and Improvement	SPECIALTY SPECIFIC OBJECTIVES			
	See General Family Medicine Objectives for a comprehensive list.			

	Identify strengths, deficiencies and limits in one's knowledge and expertise; set learning and improvement goals; and identify and perform appropriate learning activities	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations Self-Directed Learning	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	Locate, appraise and assimilate evidence from scientific studies related to their patients' health problems (i.e., use information technology to optimize learning and evidence-based resources)	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations Self-Directed Learning	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	Participate in the education of patients, families, students, residents and other health professionals, as documented by evaluations of a resident's teaching abilities by faculty and/or learners	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
Interpersonal and Communication Skills	SPECIALTY SPECIFIC OBJECTIVES			
	See General Family Medicine Objectives for a comprehensive list.			
	Communicate effectively with families	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	Locate community resources available for patients and their families.	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	Compare the different psychosocial support and counseling options available to patients and families	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	Convey information in a clear and concise manner to patients, families, and other health professionals (i.e., use appropriate vocabulary choice, realistic outcomes, and working with difficult patients and family)	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
Professionalism	SPECIALTY SPECIFIC OBJECTIVES			
	See General Family Medicine Objectives for a comprehensive list.			

	Provide compassionate and high quality care to all patients regardless of gender, age, culture, race, religion, disabilities, sexual orientation or socioeconomic class	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations Press Gainey Survey	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	Behave in a professional manner	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations Press Gainey Survey	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	Participate in discussion with patients and family about “difficult situations” involving poor outcomes, poor prognosis, and/or risk versus benefit of various treatment modalities including terminal illnesses such as malignancy and chronic illnesses with poor outcome potential such as advancing dementias	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations Press Gainey Survey	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
Systems-Based Practice	SPECIALTY SPECIFIC OBJECTIVES			
	See General Family Medicine Objectives for a comprehensive list.			
	Analyze cost efficiency and risk-benefit issues in patient care	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	Advocate for quality patient care and optimal patient care systems	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	Anticipate the need of and appropriately integrate various ancillary modalities of patient care that are available including physical and occupational therapy, speech therapy, wound care, nutritional education	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
	Summarize the correct use of coding and billing relevant to internal medicine care.	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations Self-Directed Learning	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly

	Work effectively in various health care delivery settings and systems relevant to their clinical specialty and work in interprofessional teams to enhance patient safety and improve patient care quality	Conferences/Didactics Grand Rounds Patient Assessment Case Presentations	Direct Feedback Global Evaluation In-training Exam QA Review	Daily Monthly Annually Monthly
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Educational Resources

- www.uptodate.com (available free through www.utdol.com in Jackson General Hospital based computers)
- The Washington Manual of Medical Therapeutics, 2nd edition
- Practical Guide to The Care of the Medical Patient, Fred Ferri 6th edition
- www.epocrates.com
- www.emedicine.com
- ACLS Handbook
- Tarascon Internal Medicine
- Current Clinical Strategies in Family Medicine 2006 edition