Internal medicine ROTATION PLAN (2019-2020)

NAME OF ROTATION: IM Emergency Admit/Ambulatory

FOCUS OF THIS ROTATION

- This rotation provides PGY 2-3 Internal Medicine residents with experience in providing Internal Medicine consultation for patients with more complex clinical problems in the Emergency department and in Ambulatory clinics.
- The objectives listed will be completed, in part, during this GIM rotation. Completion of all goals is expected by the end of the PGY 3 year and will be accomplished through ongoing clinical exposure, participation in the formal academic curriculum and personal learning strategies. Residents are encouraged to prioritize goals during their initial focused clinical exposure to this discipline.

CBD stage(s) for this rotation:

COD

Length of this rotation:

2 blocks

PGY Level(s) for this rotation:

- PGY2
- PGY3

Locations for rotation:

- SHSC
- SMH •
- SHS (MSH) •
- UHN-TGH
- UHN-TWH

Required training experiences included in this rotation: Core stage:

Clinical training experiences: 1.

1.2. Ambulatory care: clinic and/or day hospital. This must include experience with a broad spectrum of conditions as well as patients with complex disorders

1.5. After hours coverage for a broad spectrum of inpatients and internal medicine consultation to the emergency department

1.6. Experience with critically ill patients with internal medicine consultation to the emergency department

Optional training experiences (Core stage):

Clinical training experiences: 4.

4.2. Internal Medicine for specific populations Care for vulnerable/marginalized populations 4.2.1.

4.4. Methods of delivery of internal medicine care Telehealth 4.4.1. Interprofessional ambulatory care 4.4.2. Other specialty areas relevant to Internal Medicine **Emergency Medicine 4.5.1** Other training experiences: 5.

5.1. Training in point-of-care ultrasound

EPAs Mapped to this rotation:	Total # of EPAs
COD 1 Assessing, diagnosing, and managing patients with complex or atypical acute medical presentations	2
COD 2A Assessing and managing patients with complex chronic conditions: Part A: Assessment, Diagnosis, and Management.	2
COD 2B Assessing and managing patients with complex chronic conditions: Part B: Assessment, Diagnosis,	1
COD 3A Providing internal medicine consultation to other clinical services: Part A: Patient Assessment and Decision-Making	1
COD 3B Providing internal medicine consultation to other clinical services: Part B: Written Communication:	1
COD 3C Providing internal medicine consultation to other clinical services: Part C: Oral Communication	0-1
COD 4A Assessing, resuscitating, and managing unstable and critically ill patients: Part A: Patient Care	Do whenever possible
COD 5 Performing the procedures of Internal Medicine	Do whenever possible
COD 6 Assessing capacity for medical decision-making	1
COD 7 Discussing serious and/or complex aspects of care with patients, families, and caregivers	0-1 (can do)
COD 8 Caring for patients who have experienced a patient safety incident (adverse event)	Do whenever possible
COD 9A Caring for patients at the end of life: Part A: Symptom Management in End of Life Care	Do whenever possible
COD 9B Caring for patients at the end of life: Part B: Discussion about transition away from disease modifying treatment	Do whenever possible
COD 10 Implementing health promotion strategies in patients with or at risk for disease	0-1 (can do)

		Other assessments during this rotation:	Tool Location / Platform (e.g. POWER, Entrada):
1	ITAR		POWER

	Key Objectives for this Rotation:	CanMEDS Role(s):
1.	Provide a robust differential diagnosis for a wide variety of complex and/or undifferentiated medical conditions in an efficient, prioritized, and hypothesis driven fashion.	Medical Expert
2.	Demonstrate consultancy skills in the assessment and management of patients with acute presentations of complex general internal medical problems in the emergency setting.	Medical Expert
3.	Demonstrate consultancy skills in the assessment and management of patients with acute and/or chronic presentations of complex general internal medical problems in the ambulatory setting.	Medical Expert
4.	Complete independently technical procedures commonly required in the management of patients on an internal medicine emergency or ambulatory service.	Medical Expert
5.	Demonstrate skills in writing/dictating patient consultation and follow up letters and specific oral or written communication with other	Communicator

	Key Objectives for this Rotation:	CanMEDS Role(s):
	providers as required which meet the needs of the relevant health care providers.	
6.	Demonstrate time management skills to effectively provide patient care in a timely and sustainable fashion.	Leader
7.	Identify socioeconomic and psychosocial barriers to equitable patient care and develop plans to overcome them (including for patients with no health care coverage and/or no drug coverage).	Health Advocate
9	Use self-reflection to promote stewardship in their practice.	Professional

Royal College Internal Medicine Competencies emphasized on the Emergency Admit/Ambulatory Medicine rotation.

Numbers refer to items identified in the Royal College Competencies document

Symptoms

- Abdominal pain
- Chest pain
- o Dyspnea
- o Falls
- Fatigue and weakness

Gastrointestinal bleeding

0

Fever

- o Peripheral arterial disease and edema
- Syncope/loss of consciousness
- o Weight loss

Disorders

Demonstrates a prioritized differential diagnosis and evidence based approach to the investigation and management of a wide variety of clinical problems including:

- Acute and chronic renal failure and electrolyte disorders
- Anemia and cytopenias
- Cellulitis
- o CHF
- o Cirrhosis
- COPD
- Diabetes (and its complications)

- o Gout
- Hypertension (and its complications)
- Pneumonia
- Renal failure (acute and chronic)
- Thromboembolic disease
- o Thyroid disease
- Urinary tract infections/urosepsis

Investigations

Be able to perform in a safe and effective manner, with support and supervision as needed and be able to interpret the results of:

- Arterial puncture for blood gas
- Knee aspiration

- o Paracentesis
- o Thoracentesis

• Lumbar puncture

Demonstrates accurate interpretation of: EKGs; Chest radiographs; Blood Gas Results

Therapies

Integrate knowledge of the indications/contraindications, side-effects and pharmacokinetics of the following therapies in the care of patients in both the emergency setting, an ambulatory setting:

- Use of antibiotics
- o Use of analgesics and other medications for symptom management
- Use of anticoagulants and anti-platelet agents 1.4.13.2.2.
- Use of antihypertensive medications
- Use of diuretics and other heart failure therapies
- Use of antihyperglycemic medications