



Family Medicine Inpatient Service Curriculum
NGMC- Family Medicine Residency Program
Gainesville, Ga

PGY:3

Description of Rotation:

This is a four-week block inpatient experience with by direct observation and verbal consultation with faculty. Supplemental longitudinal learning in the FMP supervised by Family Physician faculty is also expected. By the end of this rotation, PGY 3 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 third-year resident will demonstrate achieved objectives in year one and two 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.

Overall Goals of Inpatient Medicine Rotation:

Admission, evaluation, treatment and appropriate specialty consultation of adult hospitalized patients from either the ER, outpatient transfer, or directly from the FM clinic. 3rd year decisions and behaviors should mimic those of independent practice as allowed by faculty. During this rotation, residents will become familiar with the following goals:

- Improve skills in and assist/instruct interns/medical students
- Obtain adequate information through history and physical examination with assistance as needed from faculty.
- 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.
- Function as hospital team leader with emphasis on overseeing care for patients in all hospital settings and delegation of responsibility to lower level residents.
- Perform initial medical consultation as requested by private specialty physicians.
- Participate in the review of new admissions, initial orders and diagnostic testing for understanding of acceptable variations in care plan/management protocols

Patient Care Objectives and Competencies

- PC-1: Cares for Acutely ill or injured patients in urgent and emergent situations in all settings. PC-2: Cares for patients with chronic conditions.
- PC-3: Partners with the patient, family, and community to improve health through disease prevention and health promotion.
- PC-4: Partners with the patient to address issues of ongoing signs, symptoms, or health concerns that remain over time without clear diagnosis despite evaluation and treatment, in a patient-centered, cost-effective manner.

Objectives:

- Develop 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 (PC-4, PC-1/level-2)
- Describe reasonable and safe methods of outpatient follow up of patients upon discharge (PC-2/level 2)
- Develop skills to provide adequate, compassionate communication between the patient and medical staff



(PC3/level 2)

- Describe recommended plans of care for patients including diagnostic testing, initiation and alteration of medications, and specialty consultation (PC-1/level 2)
- Under direct supervision, perform a comprehensive history and physical examination of the adult patient (PC1/level 1)

Medical Knowledge Objectives and Competencies

- MK-1: Demonstrate medical knowledge of sufficient breadth and depth to practice family medicine.
- MK-2: Applies critical thinking skills in patient care.

Objectives:

- Develop basic understanding of the normal anatomy and physiology (MK 1/level 1)
- Develop a basic knowledge of the evaluation and appreciation of pathology (as noted above) as well as normal variants in organ function in the older patient (Mk2/level 1)
- Learn and help direct “big-picture” management, assessment, and discharge planning (MK2, Level 3)
- Develop a basic knowledge of the following diseases commonly seen on the Inpatient Medicine rotation (MK2/level 2):
 - 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
 - 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 imaging

Topics to cover in rotation:

MK Topic	Online Resource
COPD Exacerbation	https://www.aafp.org/afp/2010/0301/p607.html
DVT and PE	https://www.aafp.org/afp/2017/0301/p295.html
C.diff Infection	https://www.aafp.org/afp/2018/0201/p196.html
Acute Kidney Injury	https://www.aafp.org/afp/2012/1001/p631.html
Community Acquired PNA	https://www.aafp.org/afp/2016/1101/p698.html
Sepsis	https://www.aafp.org/afp/2013/0701/p44.html
Skin & Soft Tissue Infection	https://www.aafp.org/afp/2015/0915/p474.html
Pneumonia	http://www.aafp.org/afp/20040901/899.html
Delirium	https://www.aafp.org/afp/2014/0801/p150.html
Atrial Fibrillation	https://www.aafp.org/afp/2016/0915/p442.html



Interpersonal and Communication Skills Objectives and Competencies

C-1: Develop meaningful, therapeutic relationships with patients and families.

C-2: Communicates effectively with patients, families, and the public.

C-3: Develops relationships and effectively communicates with physicians, other health professionals, and health care teams.

C-4: Utilizes technology to optimize communication

Objectives:

- Communicate effectively with families while in the presence of their daily preceptor. (C1/level 2)
- Research and describe community resources available to patients and their families (c2/level 2)
- Recognizes nonverbal cues and use nonverbal communication in patient encounters (C2/level 3)
- 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) (C1, C3/level 2)
- 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 (C2/level 4)

Practice Based Learning and Improvement Objectives and Competencies:

- PBLI-1: Locates, appraises, and simulates evidence from scientific studies related to the patients’ health problems
- PBLI-2: Demonstrates self-directed learning
- PBLI-3: Improves systems in which the physician provides care

Objectives:

- Identify strengths, deficiencies and limits in one’s knowledge and expertise; set learning and improvement goals; and identify and perform appropriate learning activities (PBLI 2/level 2)
- 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) (PBLI 1/level 2)
- 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 (PBLI 2/level 2)

Professionalism Objectives and Competencies:

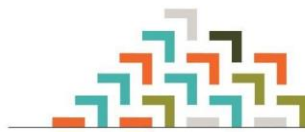
- PROF-1: Completes a process of professionalization
- PROF-2: Demonstrates professional conduct and accountability
- PROF-3: Improves systems in which the physician provides care

Objectives:

- Develop skills to provide compassionate and high-quality care to all patients regardless of gender, age, culture, race, religion, disabilities, sexual orientation or socioeconomic class (PROF 3/level 2)
- Behave in a professional manner when interacting with patients or other health care providers without external guidance (i.e., integrity, respect, accountability, punctuality) (PROF 2/level 4)
- Recognizes signs of impairment in self and team members, and responds appropriately (PROF-4, level 3)

Systems Based Practice Objectives and Competencies

- SBP-1: Provides cost-conscious medical care



- SBP-2: Emphasizes patient safety
- SBP-3: Advocates for individual and community health
- SBP-4: Coordinates team-based care

Objectives:

- Summarize the considerations of cost awareness and risk benefit analysis in patient care (SBP 1/level 2)
- Advocate for quality patient care, foster adherence to patient care protocols, and optimal patient care systems (SBP 2/level 4)
- Describe the role of various ancillary modalities of patient care that are available including physical and occupational therapy, speech therapy, nutritional education, developmental assessment and subspecialty referral (SBP 4/level 2)
- Develop an understanding of coding and billing relevant to inpatient care (SBP1/level 2)
- Accepts responsibility of team-based care. 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 (SBP4/level 4)