



Allergy & Asthma Curriculum

NGMC- Family Medicine Residency Program
Gainesville, Ga

PGY: 1, 2, 3

Description of Rotation:

This is a four-week outpatient experience with direct supervision by allergists. Supplemental longitudinal learning in the FMP supervised by Family Physician Faculty is also expected. Residents will see patients with asthma, as well as those with a variety of other allergic conditions, in both inpatient and outpatient settings.

Overall Goal of Allergy and Asthma PGY1, 2, 3 Rotation:

Residents will learn to provide evidence-based, compassionate, comprehensive care for adult and pediatric patients suffering with both acute and chronic allergic conditions. They will be skilled in identifying conditions which require assistance from specialists for management. They will develop technical skills necessary to evaluate and diagnose patients with these conditions and the knowledge to provide appropriate treatment for them.

Rotation Location: NGPG Allergy and Asthma (Allergist Office)
2510 Limestone Parkway
Gainesville, GA 30501

Preceptor(s): Faria Khan, MD
William "Andy" Nish, MD
Kimberley Shanks, MD

Sample PGY 2 Rotation Schedule

M	T	W	TH	F	Sat	Sun
Allergist Office	FM Clinic	FM Clinic	Allergist Office	Allergist Office		
Allergist Office	FM Clinic	Didactic Half Day	Allergist Office	Allergist Office		

Patient Care:	
PGY level	By the end of the rotation:
1-3	Be able to demonstrate knowledge of the diagnosis, treatment, and prevention of allergic and immunologic conditions (including, but not limited to, rhinitis, asthma, urticaria, anaphylaxis, immunodeficiency, and hypersensitivity reactions) by taking care of such patients appropriately. (PC1)
1-3	Be familiar with the performance and interpretation of spirometry and skin testing. (PC5)
1-3	Be able to discuss diagnostic, therapeutic, and preventive strategies for allergic and immunologic conditions with the patient and his or her family in a compassionate, effective manner. (PC1)
1-3	Be able to discuss diagnostic, therapeutic, and preventive strategies for allergic and immunologic conditions with the patient and his or her family in a compassionate, effective manner. (PC3)



Medical Knowledge Objectives and Competencies:	
PGY level	By the end of the rotation:
1-3	Biochemical and histological basis of the immune response, including the role and function of: (MK1) <ol style="list-style-type: none"> T and B lymphocytes Cytokines IgE immunoglobulins Mast cells Complement
1-3	Classification scheme of immune damage (MK1) <ol style="list-style-type: none"> Type I (anaphylactic/immediate, late phase, dual reactions) Type II (cytotoxic reactions) Type III (Arthus reaction) Type IV (delayed) Type V (antireceptor)
1-3	Pathophysiology, identification, and treatment of primary and secondary immunodeficiency syndromes

Interpersonal and Communication Skills:	
PGY level	By the end of the rotation:
1-3	Develop rapport and builds therapeutic relationships with patients (IC11)
1-3	Communicate effectively with patients and families. (ICS1)
1-3	Communicate effectively with physician colleagues at all levels (ICS2)
1-3	Communicate effectively with all non-physician members of the health care team to assure comprehensive and timely care of patients. (ICS2)
1-3	Present information concisely and clearly both verbally and in writing on patients. (ICS3)

Systems Based Practice Objectives and Competencies:	
PGY level	By the end of the rotation:
1-3	Understand and utilize the multidisciplinary resources necessary to care optimally for patients. (SBP2)
1-3	Engages with patients in shared decision making, informed by each patient's payment models. (SBP3)
1-3	Describe when to ask for help and advice from senior residents and attending physicians. (SBP2)
1-3	Effective collaboration with other members of the health care team, including residents at all levels, medical students, nurses, clinical pharmacists, occupational therapists, physical therapists, nutrition specialists, patient educators, social workers, case managers, and providers of home health services to advocate for patients (SBP2)

Practice Based Learning and Improvement Objectives and Competencies:	
PGY level	By the end of the rotation:
1-3	Commitment to professional scholarship, including systematic, critical perusal of relevant print and electronic literature, with emphases on integration of basic science with clinical medicine, and evaluation of information considering principles of evidence-based medicine (PBLI1)
1-3	Identify and acknowledge gaps in personal knowledge/skills in the care of ambulatory patients. (PBLI2)
1-3	Willingness and ability to incorporate faculty feedback into clinical/academic performance and participate in system change (PBLI2)



Professionalism Objectives and Competencies:	
PGY level	By the end of the rotation:
1-3	Acceptance of professional responsibility as the primary care physician for patients under his/her care (PROF1)
1-3	Willingness to acknowledge errors when committed and perform self-analysis to avoid future similar mistakes (PROF3)
1-3	Behaves with humanistic qualities of respect, compassion, integrity, and honesty in all patient/staff interactions with similar and differing cultures (PROF3)
1-3	Understand ethical concepts of confidentiality, consent, autonomy and justice. (PROF1)
1-3	Display professionalism through integrity, altruism and resolving conflict of interest. (PROF2)

Additional Osteopathic Objectives and Competencies:	
By the end of the rotation/residency:	
Perform an accurate and complete structural and physical exam including somatic dysfunction (PC1)	
Be able to independently apply direct and indirect OMT to the clinical scenario that is presented (PC2)	
Integrate knowledge of anatomy, physiology, and pharmacology with osteopathic assessment models (biomechanical, neurology, behavioral, etc (MK1)	
Apply the Tenets of Osteopathic Medicine in the development of patient treatment plan and patient presentations that emphasizes: <ul style="list-style-type: none"> • 1. The body is a unit; the person is a unit of body, mind, and spirit. • 2. The body is capable of self-regulation, self-healing, and health maintenance. • 3. Structure and function are reciprocally interrelated. • 4. Rational treatment is based upon an understanding of the basic principles of body unity, self-regulation, and the interrelationship of structure and function.” (MK2) 	
Document and apply appropriate billing and coding to their patient encounters according to level of complexity and modifiers for procedures such as OMT and injections. (SBP3)	
Utilize OMM continuity clinic to foster continuity of care and the development of meaningful patient relationships. (ISC1)	

Teaching Methods	
Clinical Teaching	Faculty Role Modeling
Case Based Teaching	Supervised Clinical Management
Didactic	Guided Research

Research Scholarly requirement: (refer to scholarly activity or discuss and we will add)	
Patient Oriented Point of Care Research	Critical Appraisal Topic



Procedures/Skills Taught (PC5)

In the appropriate setting, the resident should demonstrate the ability to independently perform or appropriately refer the following skills:

1. Appropriately performing and interpreting pulmonary function tests
 - a. Peak expiratory flow rate (PEFR) versus symptomatic monitoring. PEFR is not considered superior to symptomatic monitoring but is still recommended for patients who have difficulty recognizing symptoms (e.g., patients on beta blockers, patients who have diabetes and neuropathy)
 - b. Spirometry, including measurements of forced expiratory volume (FEV), particularly forced expiratory volume in one second (FEV1), forced vital capacity (FVC), and FEV/FVC ratio and response to bronchodilator administration.
 - c. Flow volume loops
 - d. Exercise challenge testing
2. Appropriately ordering and interpreting the following:
 - a. Skin testing
 - i. Puncture or prick testing
 - ii. Intradermal
 - iii. Interfering conditions and medications
 - b. In vitro testing: IgE assay techniques, Methods of reporting, Interpretation, sensitivity, and specificity
3. Counseling patients and their families about the proper techniques to avoid environmental triggers for allergic conditions
4. Conducting a comprehensive history and physical examination, with special emphasis on the diagnosis and management of allergic and immunologic conditions
5. Integrating factors in the patient's family, home, and general lifestyle into the diagnostic and therapeutic process
6. Demonstrating an awareness of over-the-counter products and proper utilization of these products versus the need for prescription medications
7. Consulting with physicians and other health care professionals, including critically evaluating and selectively using consultant advice, and integrating management in critical care situations
8. Using local and national reporting systems for allergic reactions to pharmaceutical agents

Supervision/Evaluation:

Resident will work one-on-one and be supervised by board certified physicians. While the resident will interact with several health care providers, supervision of patient care, behavior and diagnostic interpretations will be provided by the preceptor. The faculty preceptor will directly observe patient care and the performance of all procedures.

Assessment Methods

Direct Observation	Procedure evaluation
End of Rotation Evaluation	Chart Review
Evaluation of Journal Club	Procedure Log
Case Log	



Additional Osteopathic Curricular Elements	
Osteopathic Considerations in the Allergy Patient	SDOFM 2nd edition <ul style="list-style-type: none"> • Chapter 21 – The Patient with Otitis Media <ul style="list-style-type: none"> ○ Read pages 226 - 233 ○ View PowerPoint on <i>The Patient</i> with Otitis Media • Chapter 24 – The Patient with Upper Respiratory Infection <ul style="list-style-type: none"> ○ Read pgs. 258 - 273
<i>Otalgia / Otitis Media</i>	OMT Video Library <ul style="list-style-type: none"> • View videos under <i>Otalgia / Otitis Media</i>
<i>Sinusitis</i>	OMT Video Library <ul style="list-style-type: none"> • View videos under <i>Sinusitis</i>
<i>Pharyngitis</i>	OMT Video Library <ul style="list-style-type: none"> • View videos under <i>Pharyngitis</i>
Osteopathic Foundations in Care of Allergy Patient	Foundations of Osteopathic Medicine fourth edition <ul style="list-style-type: none"> • Read pgs. 1386-1416 (HEENT Disorders) • Read pgs. 1447 - 1457 (General Surgery)

EPA's
(EPA 2) Care for patients and families in multiple settings. (PC-1, 2, 3, 4)
(EPA 6) Evaluate and manage undifferentiated symptoms and complex conditions. (MK-1, 2)
(EPA 7) Diagnose and manage chronic medical conditions and multiple co-morbidities. (SBP-1, 2)

Resources: Required Reading	
Allergy Testing: Common Questions and Answers	https://www.aafp.org/afp/2018/0701/p34.html
Food Allergy Guidance	https://www.aafp.org/afp/2012/0701/afp20120701p43.pdf
Asthma	https://www.aafp.org/afp/topicModules/viewTopicModule.htm?topicModuleId=3
Atopic Dermatitis	https://www.aafp.org/afp/2012/0701/p35.html