

UAMS

UNIVERSITY OF ARKANSAS
FOR MEDICAL SCIENCES

INTERNAL MEDICINE
RESIDENCY EDUCATION CLINICAL CURRICULUM
2019-2020

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INTRODUCTION

Purpose of Residency Training

During residency training you will acquire the knowledge and skills necessary for the comprehensive practice of internal medicine and the tools necessary for lifelong learning. What you take away from your experiences during residency will provide the foundation for careers in general internal medicine and in the internal medicine subspecialties. This document covers the clinical curriculum, (i.e. the goals and objectives of each clinical rotation), but does not include the program's didactic curriculum.

Overview of Rotation Objectives

For each rotation, your performance is measured by how effectively you achieve the objectives found in the body of this document. Please realize the specific goals and objectives do not include all that you are expected to learn or will learn during a rotation.

For faculty evaluations of resident performance, there are 2 types of objectives, those that are **content-based** and those that are **process-based**. **Content-based** objectives are specific to each rotation and generally reflect the core competencies of medical knowledge and patient care. **Process-based** objectives generally reflect the core competencies of systems-based practice, practice-based learning and improvement, professionalism, and interpersonal and communication skills.

Evaluations

We use multiple sources to evaluate you during residency. These sources include:

1. End-of-rotation evaluations by attendings based upon the rotation goals and objectives
2. Direct observations by attendings, using a mini-clinical examination (CEX) tool
3. Multisource (360) evaluations by interprofessional team members (nurses, social workers, case managers)
4. Peer evaluations (PGY2/3 evaluations of PGY1 and PGY1 evaluations of PGY2/3)
5. Self-evaluations
6. Patient evaluations
7. In-Training Exam results (for medical knowledge only)

For each rotation, your attendings will grade your performance based upon the degree with which they trust you to attain/perform each objective at the conclusion of the rotation. In this context, each objective is an Entrustable Professional Activity (EPA).

The evaluation scale based on level of entrustment is:

0. You are unable to achieve the objective even with supervision
1. You can achieve the objective with direct supervision (supervising physician trusts you when he/she is physically present)
2. You can achieve the objective with indirect supervision (supervising physician trusts you when he/she is on-site or readily available by phone or electronic means and is available to provide direct supervision)
3. You can achieve the objective without supervision (independently)

4. You can achieve the objective at the level of an expert (aspirational)

The anticipated progression is for interns to move from level 1 entrustment to level 2 during the PGY1 year and for upper level residents to move from level 2 to 3 during the PGY2/3 years, so that by the conclusion of training you will be able to perform all entrustable activities without supervision and therefore be ready to practice internal medicine independently. We expect very few, if any, residents to attain level 4 entrustment in any activity.

All UAMS residency programs use New Innovations software for evaluations. The Program Director or his designee plots your individual progression as you move through training based on all of your evaluations. The Department's Clinical Competency Committee (CCC) meets biannually to review your progress. Data based on the performance of each resident are transmitted to the Accreditation Council for Graduate Medical Education (ACGME) biannually in the form of 22 Reporting Milestones (Appendix 1), which reflect your evaluations, which, in turn, reflect the degree with which your attendings and other evaluators trust you to perform the activities (i.e. attain the objectives) for every rotation.

Educational Resources

1. Numerous electronic resources available from the UAMS library both on and off campus at <http://www.library.uams.edu/resources/eresources.aspx>. This includes online access journals, books (including Harrison's Principles of Internal Medicine), and UpToDate.
2. MKSAP
3. Other recommended resources:
 - a. The Stanford 25- an initiative to revive the culture of bedside medicine at <http://stanfordmedicine25.stanford.edu/>
 - b. CDIM-APDIM Residents as Teachers Modules at <http://im.org/p/cm/ld/fid=401>
 - c. Society of Hospital Medicine Consultative and Perioperative Medicine Essentials for Hospitalists at <http://www.shmconsults.com/>
 - d. American College of Physicians High Value Care website, including curriculum and online cases at <http://hvc.acponline.org/>
4. UAMS GME video on how to manage fatigue effectively: http://libvideo.uams.edu/Resident/Rock_Star_Resident.mp4

ROTATION OBJECTIVES

Rotation: Abernathy Infectious Diseases (UAMS Team 6)

Purpose

The purpose of this inpatient ward rotation is to provide the resident experience in the diagnosis and management of a broad spectrum of infectious diseases that necessitate admission to the hospital from the Emergency Department, the Infectious Diseases Clinic, or outside hospital transfer. Common diagnoses include AIDS and its complications, infective endocarditis, osteomyelitis, pneumonia, tick-borne diseases, and central nervous system infections.

Content Objectives

- 1) Evaluate a patient with unexplained fever
- 2) Identify the appropriate prophylactic medications for the AIDS patient depending on CD4 count
- 3) Diagnose opportunistic infection in a patient with AIDS
- 4) Identify the common antiretroviral drugs used to treat HIV
- 5) Evaluate and treat a patient with pneumonia
- 6) Evaluate and treat a patient with infective endocarditis
- 7) Evaluate and treat a patient with osteomyelitis
- 8) Evaluate and treat a patient with meningitis
- 9) Evaluate and treat a patient skin and soft tissue infection
- 10) Recognize and treat tick-borne infections seen in Arkansas

Process Objectives

- 1) Work effectively within an interprofessional team
- 2) Recognize system error and advocate for system improvement
- 3) Identify forces that impact the cost of health care, and advocate for, and practice cost-effective care
- 4) Transition patients effectively within and across health care delivery systems
- 5) Learn and improve via feedback
- 6) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 7) Accept responsibility and follow through on tasks
- 8) Exhibit integrity and ethical behavior in professional conduct
- 9) Communicate effectively with patients and caregivers
- 10) Appropriately utilize and complete health records
- 11) Stabilize patients with urgent or emergent medical conditions and transfer to a higher level of care when necessary
- 12) Modify the differential diagnosis and care plan based on clinical course and data as appropriate

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
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Content-based	
1) Evaluate a patient with unexplained fever	1(PC1), 6(MK1)
2) Identify the appropriate prophylactic medications for the AIDS patient depending on CD4 count	2(PC2), 6(MK1)
3) Diagnose opportunistic infections in patients with AIDS	1(PC1), 5(PC5), 7(MK2)
4) Identify the common antiretroviral drugs used to treat HIV	6(MK1)
5) Evaluate and treat a patient with pneumonia	1(PC1), 2(PC2), 7(MK2)
6) Evaluate and treat a patient with infective endocarditis	1(PC1), 2(PC2), 7(MK2)
7) Evaluate and treat a patient with osteomyelitis	1(PC1), 2(PC2), 7(MK2)
8) Evaluate and treat a patient with meningitis	1(PC1), 2(PC2), 7(MK2)
9) Evaluate and treat a patient skin and soft tissue infection	1(PC1), 2(PC2), 6(MK1)
10) Recognize and treat tick-borne infections seen in Arkansas	2(PC2), 6(MK1)
Process-based	
1) Work effectively within an interprofessional team	8(SBP1)
2) Recognize system error and advocate for system improvement	9(SBP2)
3) Identify forces that impact the cost of health care, and advocate for, and practice cost-effective care	10(SBP3)
4) Transition patients effectively within and across health care delivery systems	11(SBP4)
5) Learn and improve via feedback	14(PBLI3)
6) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
7) Accept responsibility and follow through on tasks	17(PROF2)
8) Exhibit integrity and ethical behavior in professional conduct	19(PROF4)
9) Communicate effectively with patients and caregivers	20(ICS1)
10) Appropriately utilize and complete health records	22(ICS3)
11) Stabilize patients with urgent or emergent medical conditions and transfer to a higher level of care when necessary	2(PC2), 3(PC3), 11(SBP4)
12) Modify the differential diagnosis and care plan based on clinical course and data as appropriate	15(PBLI4)

Rotation: Allergy and Immunology

Purpose

The general internist commonly encounters patients with signs and symptoms caused by allergic and immunologic disorders. The purpose of this rotation is to provide the resident with an understanding of basic allergic and immunologic disease processes and skills necessary to evaluate and treat patients with these disorders.

Content Objectives

- 1) Assess asthma severity and control
- 2) Define the concepts/medications involved in the treatment of asthma
- 3) Recognize the differences between asthma and chronic obstructive pulmonary disease
- 4) Appreciate the complexities of the patient with rhinitis
- 5) Differentiate between true, IgE-mediated food allergy and other forms of adverse food reactions
- 6) Manage the food allergic patient
- 7) Diagnose urticaria and angioedema, appreciate the various causes, and develop an understanding of basic treatment algorithms
- 8) Identify the role of markers of mast cell activation in elucidating a cause for urticaria, angioedema, and anaphylaxis
- 9) Recognize the signs and symptoms of anaphylaxis and understand the importance of prompt treatment with epinephrine
- 10) Differentiate between types of drug hypersensitivity reactions
- 11) Appreciate the limitations of drug allergy testing
- 12) Explain the concept of drug desensitization and its utility
- 13) Diagnose and manage atopic dermatitis
- 14) Recognize the roles of T-cells, B-cells, neutrophils, the complement system, and the innate immune system in the immune response
- 15) Apply the basic laboratory modalities used to diagnose immune deficiencies

Process Objectives

- 1) Learn and improve via feedback
- 2) Learn and improve at point of care
- 3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 4) Accept responsibility and follow through on tasks
- 5) Communicate effectively with patients and caregivers
- 6) Communicate effectively in interprofessional teams

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Assess asthma severity and control	1(PC1)
2) Define the concepts/medications involved in the treatment of asthma	2(PC2), 6(MK1)

3) Recognize the differences between asthma and chronic obstructive pulmonary disease	1(PC1), 6(MK1), 7(MK2)
4) Appreciate the complexities of the patient with rhinitis	1(PC1), 6(MK1)
5) Differentiate between true, IgE-mediated food allergy and other forms of adverse food reactions	1(PC1), 6(MK1)
6) Manage the food allergic patient	2(PC2)
7) Diagnose urticaria and angioedema, appreciate the various causes, and develop an understanding of basic treatment algorithms	1(PC1), 6(MK1)
8) Identify the role of markers of mast cell activation in elucidating a cause for urticaria, angioedema, and anaphylaxis	6(MK1)
9) Recognize the signs and symptoms of anaphylaxis and understand the importance of prompt treatment with epinephrine	1(PC1), 2(PC2)
10) Differentiate between types of drug hypersensitivity reactions	1(PC1), 6(MK1)
11) Appreciate the limitations of drug allergy testing	6(MK1)
12) Explain the concept of drug desensitization and its utility	6(MK1)
13) Diagnose and manage atopic dermatitis	1(PC1), 2(PC2)
14) Recognize the roles of T-cells, B-cells, neutrophils, the complement system, and the innate immune system in the immune response	6(MK1)
15) Apply the basic laboratory modalities used to diagnose immune deficiencies	7(MK2)
Process-based	
1) Learn and improve via feedback	14(PBLI3)
2) Learn and improve at point of care	15(PBLI4)
3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
4) Accept responsibility and follow through on tasks	17(PROF2)
5) Communicate effectively with patients and caregivers	20(ICS1)
6) Communicate effectively in interprofessional teams	21(ICS2)

Rotations: Cardiology/CCU UAMS Team 1 Cardiology and Cardiology/CCU VA Team 7 Cardiology/CCU

Purpose

The purpose of these inpatient rotations is to provide the resident with experience in the diagnosis and management of a broad range of cardiovascular diseases encountered in the inpatient setting. UAMS and the VA constitute 2 separate rotations for Cardiology/CCU.

Content Objectives

- 1) Demonstrate basic ECG reading skills and apply them in management decisions
- 2) Risk stratify patients with chest pain and manage their work-up and treatment
- 3) Identify the basics of key cardiac testing modalities and use these for the management of patients
- 4) Manage patients with STEMI, non-STEMI, and unstable angina according to recommended guidelines
- 5) Manage patients with congestive heart failure according to recommended guidelines
- 6) Manage patients with atrial fibrillation according to recommended guidelines
- 7) Know the indications and contraindications for anti-thrombotic therapy and apply these in patient management
- 8) Know the current recommendations for the prevention of CV disease and utilize these in the care of patients
- 9) Interpret basic rhythm abnormalities and manage patients with these conditions

Process Objectives

- 1) Come to rounds prepared with knowledge of your patients, especially the events since the previous day’s rounds
- 2) Provide an organized, accurate oral summary of your patients
- 3) Utilize information technology to find and review any assigned topics or literature relevant to your patients
- 4) Prepare patient encounter information for each patient daily
- 5) Write notes daily on patients with a focus on creating a concise and accurate summary of the appropriate material
- 6) Participate in daily rounds to include presentation of a diagnostic and treatment plan for all patients under your care
- 7) Demonstrate concern for each of your patients, work to understand their goals for treatment, and commit yourself to work for their best-interest
- 8) View your work in the context of a multidisciplinary healthcare team and strive to keep others appropriately informed
- 9) Exercise concerned stewardship in the utilization of resources in the care of patients
- 10) Organize discharges and transfers to insure continuity of care
- 11) Consider ways to improve the delivery of healthcare

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Demonstrate basic ECG reading skills and apply them in management decisions	2(PC2), 7(MK2)
2) Risk stratify patients with chest pain and manage their work-up and treatment	2(PC2), 7(MK2)

3) Identify the basics of key cardiac testing modalities and use these for the management of patients	7(MK2)
4) Manage patients with STEMI, non-STEMI, and unstable angina according to recommended guidelines	2(PC2), 6(MK1)
5) Manage patients with congestive heart failure according to recommended guidelines	2(PC2), 6(MK1)
6) Manage patients with atrial fibrillation according to recommended guidelines	2(PC2), 6(MK1)
7) Know the indications and contraindications for anti-thrombotic therapy and apply these in patient management	2(PC2), 6(MK1), 18 (PROF3)
8) Know the current recommendations for the prevention of CV disease and utilize these in the care of patients	2(PC2), 6(MK1), 18(PROF3)
9) Interpret basic rhythm abnormalities and manage patients with these conditions	2(PC2), 7(MK2)
Process-based	
1) Come to rounds prepared with knowledge of your patients, especially the events since the previous day's rounds	1(PC1), 17(PROF2)
2) Provide an organized, accurate oral summary of your patients	21(ICS2)
3) Utilize information technology to find and review any assigned topics or literature relevant to your patients	12 (PBLI1), 13 (PBLI2), 15(PBL4), 17(PROF2)
4) Prepare patient encounter information for each patient daily	17 (PROF2)
5) Write notes daily on patients with a focus on creating a concise and accurate summary of the appropriate material	22(ICS3)
6) Participate in daily rounds to include presentation of a diagnostic and treatment plan for all patients under your care	16(PROF1), 21(ICS2)
7) Demonstrate concern for each of your patients, work to understand their goals for treatment, and commit yourself to work for their best-interest	18(PROF3), 19(PROF4), 20(ICS1)
8) View your work in the context of a multidisciplinary healthcare team and strive to keep others appropriately informed	8(SBP1), 21(ICS2)
9) Exercise concerned stewardship in the utilization of resources in the care of patients	10(SBP3)
10) Organize discharges and transfers to insure continuity of care	11(SBP4)

11) Consider ways to improve the delivery of healthcare	9(SBP2), 12(PBLI1), 13(PBLI2)
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Rotation: Cardiology Consult

Purpose

The purpose of this consult rotation is to provide the resident with experience in the diagnosis and management of a broad range of cardiovascular diseases encountered in the inpatient setting.

Content Objectives

- 1) Demonstrate basic ECG reading skills and apply them in management decisions
- 2) Risk stratify patients with chest pain and manage their work-up and treatment
- 3) Identify the basics of key cardiac testing modalities and use these for the management of patients
- 4) Manage patients with STEMI, non-STEMI, and unstable angina according to recommended guidelines
- 5) Manage patients with congestive heart failure according to recommended guidelines
- 6) Manage patients with atrial fibrillation according to recommended guidelines
- 7) Know the indications and contraindications for anti-thrombotic therapy and apply these in patient management
- 8) Know the current recommendations for the prevention of CV disease and utilize these in the care of patients
- 9) Interpret basic rhythm abnormalities and manage patients with these conditions
- 10) Risk stratify patients pre-operatively and identify high risk features/diagnoses for which elective procedures should be postponed

Process Objectives

- 1) Come to rounds prepared with knowledge of your patients, especially the events since the previous day's rounds
- 2) Provide an organized, accurate oral summary of your patients
- 3) Utilize information technology to find and review any assigned topics or literature relevant to your patients
- 4) Prepare patient encounter information for each patient daily
- 5) Write notes daily on patients with a focus on creating a concise and accurate summary of the appropriate material
- 6) Participate in daily rounds to include presentation of a diagnostic and treatment plan for all patients under your care
- 7) Demonstrate concern for each of your patients, work to understand their goals for treatment, and commit yourself to work for their best-interest
- 8) View your work in the context of a multidisciplinary healthcare team and strive to keep others appropriately informed
- 9) Exercise concerned stewardship in the utilization of resources in the care of patients
- 10) Identify the role of a consultant, focus on the key questions or requests being made of the consult team and ensure prompt responsiveness

11) Consider ways to improve the delivery of healthcare

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Demonstrate basic ECG reading skills and apply them in management decisions	2(PC2), 7(MK2)
2) Risk stratify patients with chest pain and manage their appropriate work-up and treatment	2(PC2), 7(MK2)
3) Identify the basics of key cardiac testing modalities and use these for the management of patients	7(MK2)
4) Manage patients with STEMI, non-STEMI, and unstable angina according to recommended guidelines	2(PC2), 6(MK1)
5) Manage patients with congestive heart failure according to recommended guidelines	2(PC2), 6(MK1)
6) Manage patients with atrial fibrillation according to recommended guidelines	2(PC2), 6(MK1)
7) Know the indications and contraindications for anti-thrombotic therapy and apply these in patient management	2(PC2), 6(MK1), 18 (PROF3)
8) Know the current recommendations for the prevention of CV disease and utilize these in the care of patients	2(PC2), 6(MK1), 18(PROF3)
9) Interpret basic rhythm abnormalities and manage patients with these conditions	2(PC2), 7(MK2)
10) Risk stratify patients pre-operatively and identify high risk features/diagnoses for which elective procedures should be postponed	1(PC1), 6(MK1), 18(PROF3)
Process-based	
1) Come to rounds prepared with knowledge of your patients, especially the events since the previous day's rounds	1(PC1), 17(PROF2)
2) Provide an organized, accurate oral summary of your patients	21(ICS2)
3) Utilize information technology to find and review any assigned topics or literature relevant to your patients	12 (PBLI1), 13 (PBLI2), 15(PBL4), 17(PROF2)
4) Prepare patient encounter information for each patient daily	17 (PROF2)

5) Write notes daily on patients with a focus on creating a concise and accurate summary of the appropriate material	22(ICS3)
6) Participate in daily rounds to include presentation of a diagnostic and treatment plan for all patients under your care	16(PROF1), 21(ICS2)
7) Demonstrate concern for each of your patients, work to understand their goals for treatment, and commit yourself to work for their best-interest	18(PROF3), 19(PROF4), 20(ICS1)
8) View your work in the context of a multidisciplinary healthcare team and strive to keep others appropriately informed	8(SBP1), 21(ICS2)
9) Exercise concerned stewardship in the utilization of resources in the care of patients	10(SBP3)
10) Identify the role of a consultant, focus on the key questions or requests being made of the consult team and ensure prompt responsiveness	5(PC5), 8(SBP1), 16(PROF1), 21(ICS2)
11) Consider ways to improve the delivery of healthcare	9(SBP2), 12(PBLI1), 13(PBLI2)

Rotation: Dermatology

Purpose

Because of the frequency and potential importance of skin disorders, internists should be able to recognize and initiate management of many common dermatologic conditions. The purpose of this elective is to familiarize the resident with the principles of dermatologic diagnosis and treatment. Residents will see common and some rare skin disorders, and have an opportunity to participate in learning skin biopsy techniques.

Content Objectives

- 1) Perform a systematic full skin examination and utilize terms of skin anatomy
- 2) Describe skin lesions using correct standard terminology
- 3) Educate patients on appropriate sun protection techniques
- 4) Educate patients on signs and symptoms of skin cancer
- 5) Recognize characteristic signs of the most common pre-malignant and malignant neoplasms including actinic keratosis, basal cell carcinomas, squamous cell carcinomas and melanomas
- 6) Recognize common benign skin lesions including seborrheic keratosis, angiomas, lentiginos and intradermal nevi
- 7) Recognize common skin conditions including psoriasis, seborrheic dermatitis, tinea corporis and atopic dermatitis
- 8) Identify first line treatments for these conditions including topical steroids and antifungals
- 9) Perform basic dermatologic procedures including cryotherapy, shave biopsies and punch biopsies

- 10) Obtain skin scraping for KOH and/or mineral oil prep and identify dermatophytes and scabies utilizing microscopy

Process Objectives

- 1) Learn and improve via feedback
- 2) Utilize information technology to find and review any assigned topics or literature relevant to your patients
- 3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 4) Accept responsibility and follow through on tasks
- 5) Communicate effectively with patients and caregivers
- 6) Communicate effectively in interprofessional teams

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Perform a systematic full skin examination and utilize terms of skin anatomy	1(PC1), 6(MK1)
2) Describe skin lesions using correct standard terminology	6(MK1), 21(ICS2)
3) Educate patients on appropriate sun protection techniques	6(MK1), 18(PROF3), 20(ICS1)
4) Educate patients on signs and symptoms of skin cancer	6(MK1), 18(PROF3), 20(ICS1)
5) Recognize characteristic signs of the most common pre-malignant and malignant neoplasms including actinic keratosis, basal cell carcinomas, squamous cell carcinomas and melanomas	1(PC1), 6(MK1)
6) Recognize common benign skin lesions including seborrheic keratosis, angiomas, lentigines and intradermal nevi	1(PC1), 6(MK1)
7) Recognize common skin conditions including psoriasis, seborrheic dermatitis, tinea corporis and atopic dermatitis	1(PC1), 6(MK1)
8) Identify first line treatments for these conditions including topical steroids and antifungals	2(PC2)
9) Perform basic dermatologic procedures including cryotherapy, shave biopsies and punch biopsies	4(PC4), 7(MK2)
10) Obtain skin scraping for KOH and/or mineral oil prep and identify dermatophytes and scabies utilizing microscopy	4(PC4), 7(MK2)
Process-based	
1) Learn and improve via feedback	14(PBLI3)

2) Utilize information technology to find and review any assigned topics or literature relevant to your patients	12(PBLI1), 13(PBLI2), 15(PBL4), 17(PROF2)
3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
4) Accept responsibility and follow through on tasks	17(PROF2)
5) Communicate effectively with patients and caregivers	20(ICS1)
6) Communicate effectively in interprofessional teams	21(ICS2)

Rotation: Electrophysiology (EP) Consult

Purpose

The purpose of this consult rotation is to provide the resident with experience in the diagnosis and management of a broad range of clinical electrophysiology diseases encountered in the inpatient setting. It is designed for those residents who seek a more in depth education in EP than what is achievable on the cardiology consult rotation. In any given academic year, a resident can be assigned to either the EP Consult service or the Cardiology Consult service, but not both.

Content Objectives

- 1) Demonstrate ECG reading skills and apply them in management decisions
- 2) Diagnose and manage patients with SVT including atrial fibrillation, atrial flutter, and AVNRT
- 3) Diagnose and manage patients with wide complex tachycardia
- 4) Demonstrate the ability to diagnose and manage basic cardiac device problems
- 5) Observe and assist in procedures such as elective DC cardioversion and tilt table testing

Process Objectives

- 1) Come to rounds prepared with knowledge of your patients, especially the events since the previous day's rounds
- 2) Provide an organized, accurate oral summary of your patients
- 3) Utilize information technology to find and review any assigned topics or literature relevant to your patients
- 4) Prepare patient encounter information for each patient daily
- 5) Write notes daily on patients with a focus on creating a concise and accurate summary of the appropriate material
- 6) Participate in daily rounds to include presentation of a diagnostic and treatment plan for all patients under your care
- 7) Demonstrate concern for each of your patients, work to understand their goals for treatment, and commit yourself to work for their best-interest
- 8) View your work in the context of a multidisciplinary healthcare team and strive to keep others appropriately informed

- 9) Exercise concerned stewardship in the utilization of resources in the care of patients
- 10) Identify the role of a consultant, focus on the key questions or requests being made of the consult team and ensure prompt responsiveness
- 11) Consider ways to improve the delivery of healthcare

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Demonstrate ECG reading skills and apply them in management decisions	2(PC2), 7(MK2)
2) Diagnose and manage patients with SVT including atrial fibrillation, atrial flutter, and AVNRT	2(PC2), 3(PC3), 6(MK1)
3) Diagnose and manage patients with wide complex tachycardia	2(PC2), 3(PC3), 6(MK1)
4) Demonstrate the ability to diagnose and manage basic cardiac device problems	2(PC2), 6(MK1)
5) Observe and assist in procedures such as elective DC cardioversion and tilt table testing	7(MK2)
Process-based	
1) Come to rounds prepared with knowledge of your patients, especially the events since the previous day's rounds	1(PC1), 17(PROF2)
2) Provide an organized, accurate oral summary of your patients	21(ICS2)
3) Utilize information technology to find and review any assigned topics or literature relevant to your patients	12 (PBLI1), 13 (PBLI2), 15(PBL4), 17(PROF2)
4) Prepare patient encounter information for each patient daily	17 (PROF2)
5) Write notes daily on patients with a focus on creating a concise and accurate summary of the appropriate material	22(ICS3)
6) Participate in daily rounds to include presentation of a diagnostic and treatment plan for all patients under your care	16(PROF1), 21(ICS2)
7) Demonstrate concern for each of your patients, work to understand their goals for treatment, and commit yourself to work for their best-interest	18(PROF3), 19(PROF4), 20(ICS1)
8) View your work in the context of a multidisciplinary healthcare team and strive to keep others appropriately informed	8(SBP1), 21(ICS2)
9) Exercise concerned stewardship in the utilization of resources in the care of patients	10(SBP3)

10) Identify the role of a consultant, focus on the key questions or requests being made of the consult team and ensure prompt responsiveness	5(PC5), 8(SBP1), 16(PROF1), 21(ICS2)
11) Consider ways to improve the delivery of healthcare	9(SBP2), 12(PBLI1), 13(PBLI2)

Rotation: Emergency Medicine

Purpose

Internists must possess the knowledge and skills necessary to manage common emergency conditions. Experience gained during this rotation is applicable to a variety of clinical settings, including both office and hospital practices. Familiarity with the approach of emergency medicine physicians to diseases that are within the usual scope of practice of internists will complement training on other rotations.

Content Objectives

- 1) Recognize and develop an initial management plan for patients with acute emergent conditions
- 2) Describe the pathophysiology and etiology of common emergencies
- 3) Participate in the care and management of the trauma patient
- 4) Manage toxicological and environmental emergencies
- 5) Utilize appropriate diagnostic tests for the evaluation of patients in the ED
- 6) Understand the indications for various procedures performed in the ED
- 7) Perform emergent procedures as indicated
- 8) Request consultative care when appropriate
- 9) Determine the appropriate disposition of the emergency patient

Process Objectives

- 1) Work effectively within the interprofessional team
- 2) Learn and improve via feedback
- 3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 4) Accept responsibility and follow through on tasks
- 5) Exhibit integrity and ethical behavior in professional conduct
- 6) Communicate effectively with patients and caregivers
- 7) Communicate effectively in interprofessional teams

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Recognize and develop an initial management plan for patients with acute emergent conditions	1(PC1), 2(PC2), 3(PC3)

2) Describe the pathophysiology and etiology of common emergencies	6(MK1)
3) Participate in the care and management of the trauma patient	1(PC1), 2(PC2), 4(PC4)
4) Manage toxicological and environmental emergencies	2(PC2), 6(MK1)
5) Utilize appropriate diagnostic tests for the evaluation of patients in the ED	7(MK2)
6) Understand the indications for various procedures performed in the ED	7(MK2)
7) Perform emergent procedures as indicated	4(PC4)
8) Request consultative care when appropriate	5(PC5)
9) Determine the appropriate disposition of the emergency patient	11(SBP4), 18(PROF3)
Process-based	
1) Work effectively within the interprofessional team	8(SBP1)
2) Learn and improve via feedback	14(PBLI3)
3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
4) Accept responsibility and follow through on tasks	17(PROF2)
5) Exhibit integrity and ethical behavior in professional conduct	19(PROF4)
6) Communicate effectively with patients and caregivers	20(ICS1)
7) Communicate effectively in interprofessional teams	21(ICS2)

Rotation: Endocrinology

Purpose

The purpose of this elective is to provide the resident experience in the diagnosis and management of a broad spectrum of endocrinologic diseases by consulting on hospitalized patients and by seeing patients in the Endocrinology Clinic.

Content Objectives

- 1) Diagnose and manage type 1 diabetes mellitus
- 2) Diagnose and manage type 2 diabetes mellitus
- 3) Interpret glucose readings for adjusting insulin regimen and diabetes care plan
- 4) Monitor microvascular and macrovascular complications in the patient with diabetes
- 5) Recognize, make the appropriate differential diagnosis and manage patients with various thyroid disorders
- 6) Interpret thyroid function tests and thyroid imaging studies
- 7) Diagnose adrenal insufficiency and interpret cosyntropin stimulation tests
- 8) Evaluate hypopituitarism and interpret pituitary function tests
- 9) Diagnose and manage osteoporosis
- 10) Recognize, make the appropriate differential diagnosis and manage patients with hypocalcemia and hypercalcemia
- 11) Diagnose and manage patients with male hypogonadism and female reproductive disorders

Process Objectives

- 1) Learn and improve via feedback
- 2) Utilize information technology to find and review any assigned topics or literature relevant to your patients
- 3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 4) Accept responsibility and follow through on tasks
- 5) Communicate effectively with patients and caregivers
- 6) Communicate effectively in interprofessional teams
- 7) Learn to identify the role of a consultant, focus on the key questions or requests being made of the consult team and ensure prompt responsiveness

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Diagnose and manage type 1 diabetes mellitus	2 (PC2), 6 (MK1), 7(MK2)
2) Diagnose and manage type 2 diabetes mellitus	1 (PC1), 2 (PC2), 6(MK1), 7(MK2)
3) Interpret glucose readings for adjusting insulin regimen and diabetes care plan	2(PC2)
4) Monitor microvascular and macrovascular complications in the patient with diabetes	2(PC2)
5) Recognize, make the appropriate differential diagnosis and manage patients with various thyroid disorders	1(PC1), 2(PC2), 6(MK1)
6) Interpret thyroid function tests and thyroid imaging studies	7(MK2)
7) Diagnose adrenal insufficiency and interpret cosyntropin stimulation test	1(PC1), 6(MK1), 7(MK2)
8) Evaluate hypopituitarism and interpret pituitary function tests	1(PC1), 6(MK1), 7(MK2)
9) Diagnose and manage osteoporosis	1(PC1), 2(PC2), 6(MK1), 7(MK2)
10) Recognize, make the appropriate differential diagnosis and manage patients with hypocalcemia and hypercalcemia	1 (PC1), 2 (PC2), 7(MK2)
11) Diagnose and manage patients with male hypogonadism and female reproductive disorders	1(PC1), 2(PC2), 7(MK2)
Process-based	
1) Learn and improve via feedback	14(PBLI3)
2) Utilize information technology to find and review any assigned topics or literature relevant to your patients	12(PBLI1), 13(PBLI2), 15(PBL4), 17(PROF2)

3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
4) Accept responsibility and follow through on tasks	17(PROF2)
5) Communicate effectively with patients and caregivers	20(ICS1)
6) Communicate effectively in interprofessional teams	21(ICS2)
7) Learn to identify the role of a consultant, focus on the key questions or requests being made of the consult team and ensure prompt responsiveness	5(PC5), 8(SBP1), 16(PROF1), 21(ICS2)

Rotation: Gastroenterology

Purpose

The purpose of this consult elective is to provide the resident experience in the diagnosis and management of a broad spectrum of gastrointestinal diseases, including upper and lower GI tract bleeding, inflammatory bowel disease, hepatic and biliary disorders, and pancreatitis.

Content Objectives

- 1) Develop a differential diagnosis for the etiology of acute upper GI bleeding based on history and physical exam
- 2) Choose studies to define the etiology of acute upper GI bleeding
- 3) Develop a differential diagnosis for the etiology of acute lower GI bleeding
- 4) Develop a plan for medical management of acute lower GI bleeding
- 5) Choose studies to define the etiology of acute lower GI bleeding
- 6) Request appropriate consultation from other services for the patient with GI bleeding when necessary
- 7) Define the etiology and pathophysiology of acute pancreatitis
- 8) Demonstrate knowledge of diagnostic testing and imaging related to acute pancreatitis
- 9) Develop a differential diagnosis for elevated liver enzymes based on history and physical exam
- 10) Choose studies to define the etiology of elevated liver enzymes, including imaging and invasive testing
- 11) Define the etiology and pathophysiology of cirrhosis and its complications
- 12) Manage the medical complications of portal hypertension
- 13) Demonstrate skill in performing paracentesis
- 14) Interpret ascitic fluid studies to diagnose ascites due to portal hypertension and to diagnose spontaneous bacterial peritonitis
- 15) Diagnose inflammatory bowel disease
- 16) Manage complications of inflammatory bowel disease

Process Objectives

- 1) Learn and improve via feedback

- 2) Utilize information technology to find and review any assigned topics or literature relevant to your patients
- 3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 4) Accept responsibility and follow through on tasks
- 5) Communicate effectively with patients and caregivers
- 6) Communicate effectively in interprofessional teams

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Develop a differential diagnosis for the etiology of acute upper GI bleeding based on history and physical exam	1(PC1), 6(MK1)
2) Choose studies to define the etiology of acute upper GI bleeding	7(MK2)
3) Develop a differential diagnosis for the etiology of acute lower GI bleeding	1(PC1), 6(MK1)
4) Develop a plan for medical management of acute lower GI bleeding	2(PC2), 6(MK1)
5) Choose studies to define the etiology of acute lower GI bleeding	7(MK2)
6) Request appropriate consultation from other services for the patient with GI bleeding when necessary	5(PC5)
7) Define the etiology and pathophysiology of acute pancreatitis	1(PC1), 6(MK1)
8) Demonstrate knowledge of diagnostic testing and imaging related to acute pancreatitis	7(MK2)
9) Develop a differential diagnosis for elevated liver enzymes based on history and physical exam	1(PC1), 6(MK1)
10) Choose studies to define the etiology of elevated liver enzymes, including imaging and invasive testing	7(MK2)
11) Define the etiology and pathophysiology of cirrhosis and its complications	1(PC1), 6(MK1)
12) Manage the medical complications of portal hypertension	2(PC2)
13) Demonstrate skill in performing paracentesis	4(PC4)
14) Interpret ascitic fluid studies to diagnose ascites due to portal hypertension and to diagnose spontaneous bacterial peritonitis	7(MK2)
15) Diagnose inflammatory bowel disease	1(PC1), 7(MK2)
16) Manage complications of inflammatory bowel disease	2(PC2), 6(MK1)

Process-based	
1) Learn and improve via feedback	14(PBLI3)
2) Utilize information technology to find and review any assigned topics or literature relevant to your patients	12 (PBLI1), 13 (PBLI2), 15(PBL4), 17(PROF2)
3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
4) Accept responsibility and follow through on tasks	17(PROF2)
5) Communicate effectively with patients and caregivers	20(ICS1)
6) Communicate effectively in interprofessional teams	21(ICS2)

**General Medicine Ambulatory (Continuity Clinic) UAMS and
General Medicine Ambulatory (Continuity Clinic) VA**

Purpose

The purpose of these longitudinal experiences is to provide training in the comprehensive primary care of a panel of general medicine patients in the outpatient setting. Focus is on the delivery of high-quality, evidence-based care for acute and chronic diseases and high-quality preventive health care. Each resident has continuity clinic at either UAMS or the VA for all years of training. The goals and objectives apply to both venues.

Content Objectives

PGY 1

- 1) Manage hypertension in an outpatient setting
- 2) Manage diabetes in an outpatient setting
- 3) Manage hyperlipidemia in an outpatient setting
- 4) Manage depression in an outpatient setting
- 5) Manage COPD in an outpatient setting
- 6) Manage anemia in an outpatient setting
- 7) Manage headache in an outpatient setting
- 8) Manage thyroid disease in an outpatient setting
- 9) Manage stable chronic liver disease
- 10) Manage acute respiratory infections in the outpatient setting
- 11) Manage acute urinary infections in the outpatient setting
- 12) Understand age-appropriate preventive care

PGY2

- 1) Manage atrial fib and other common [nonmalignant] arrhythmias in an outpatient setting
- 2) Manage osteoporosis in an outpatient setting
- 3) Manage acute and chronic pain syndromes
- 4) Assess the risk for diversion and abuse of controlled medications

- 5) Manage chronic kidney disease in an outpatient setting
- 6) Differentiate cardiac versus non-cardiac chest discomfort and order appropriate diagnostic imaging in an outpatient setting
- 7) Evaluate patients with undifferentiated urgent medical need in an outpatient setting
- 8) Manage back pain in an outpatient setting
- 9) Manage dermatologic issues in an outpatient setting
- 10) Appropriately determine acuity of illness and manage transfer of care when needed
- 11) Provide age-appropriate preventive care in accord with guidelines
- 12) Competently perform gynecologic and rectal examinations and know the indications and contraindications for same

PGY3

- 1) Assess and manage complicated outpatients with CNS/heart/lung/liver/kidney diseases
- 2) Recognize when to refer to specialist
- 3) Initiate workup of thyroid disease
- 4) Manage complicated diabetes patients
- 5) Assess, counsel, manage and/or refer patients with alcohol, tobacco and substance abuse problems
- 6) Evaluate, describe and develop differential diagnoses for skin lesions/findings/abnormalities
- 7) Manage chronic sinusitis
- 8) Demonstrate rehabilitation exercises for chronic low back pain
- 9) Describe resources available to hospice patients
- 10) Describe resources available to elderly patients

Process Objectives (all PGY levels)

- 1) Interact with and care for patients/families with respect for their many racial, cultural, language and religious diversities
- 2) Perform complete and accurate histories
- 3) Perform complete and accurate physical examinations
- 4) Develop prioritized differential diagnoses on a consistent basis
- 5) Assess the acuity of the patient's illness and manage their care in the appropriate clinical setting
- 6) Record patient information [from history, examination, prior records, testing and the medical literature] into the EMR in appropriate language and in a timely manner
- 7) Integrate clinical evidence into decision making at the point of care [e.g. develop evidence-based diagnostic and therapeutic plans]
- 8) Communicate and interact in a professional manner with medical professionals, patients and families
- 9) Minimize unnecessary care [including procedures, tests, and other resources]
- 10) Demonstrate empathy, compassion and commitment to patient care
- 11) Seek out and incorporate feedback and use this to improve your performance
- 12) Teach the other members of your care team and your patients/families
- 13) Recognize the need for and facilitate subspecialty consultation
- 14) Advocate for your patient[s] within the healthcare system [e.g. understand the

- healthcare system and aid your patient in navigating its challenges]
- 15) Assure test results are addressed appropriately within teams in order to provide effective patient care
- 16) Incorporate quality improvement/self-assessment into your care processes

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based PGY1	
1) Manage hypertension in an outpatient setting	2(PC2), 6(MK1)
2) Manage diabetes in an outpatient setting	2(PC2), 6(MK1)
3) Manage hyperlipidemia in an outpatient setting	2(PC2), 6(MK1)
4) Manage depression in an outpatient setting	2(PC2), 6(MK1)
5) Manage COPD in an outpatient setting	2(PC2), 6(MK1)
6) Manage anemia in an outpatient setting	2(PC2), 7(MK2)
7) Manage headache in an outpatient setting	2(PC2), 6(MK1)
8) Manage thyroid disease in an outpatient setting	2(PC2), 7(MK2)
9) Manage stable chronic liver disease	2(PC2), 6(MK1)
10) Manage acute respiratory infections in the outpatient setting	2(PC2), 6(MK1)
11) Manage acute urinary infections in the outpatient setting	2(PC2), 6(MK1)
12) Understand age-appropriate preventive care	6(MK1)
Content-based PGY2	
1) Manage atrial fib and other common [nonmalignant] arrhythmias in an outpatient setting	2(PC2), 6(MK1)
2) Manage osteoporosis in an outpatient setting	2(PC2), 6(MK1), 7(MK2)
3) Manage acute and chronic pain syndromes	2(PC2)
4) Assess the risk for diversion and abuse of controlled medications	1(PC1), 20(ICS1)
5) Manage chronic kidney disease in an outpatient setting	2(PC2), 6(MK1)
6) Differentiate cardiac versus non-cardiac chest discomfort and order appropriate diagnostic imaging in an outpatient setting	2(PC2), 3(PC3), 7(MK2)
7) Evaluate patients with undifferentiated urgent medical need in an outpatient setting	3(PC3)
8) Manage back pain in an outpatient setting	2(PC2), 6(MK1)
9) Manage dermatologic issues in an outpatient setting	2(PC2), 6(MK1)
10) Appropriately determine acuity of illness and manage transfer of care when needed	3(PC3), 11(SBP4)
11) Provide age-appropriate preventive care in accord with guidelines	2(PC2), 6(MK1)

12) Competently perform gynecologic and rectal examinations and know the indications and contraindications for same	1(PC1), 7(MK2)
Content-based PGY3	
1) Assess and manage complicated outpatients with CNS/heart/lung/liver/kidney diseases	2(PC2), 3(PC3), 6(MK1)
2) Recognize when to refer to specialist	5(PC5)
3) Initiate workup of thyroid disease	2(PC2), 7(MK2)
4) Manage complicated diabetes patients	2(PC2), 6(MK1)
5) Assess, counsel, manage and/or refer patients with alcohol, tobacco and substance abuse problems	2(PC2), 18(PROF3), 20(ICS1)
6) Evaluate, describe and develop differential diagnoses for skin lesions/findings/abnormalities	1(PC1), 6(MK1)
7) Manage chronic sinusitis	2(PC2), 6(MK1)
8) Demonstrate rehabilitation exercises for chronic low back pain	6(MK1), 20(ICS1)
9) Describe resources available to hospice patients	18(PROF3), 19(PROF4), 20(ICS1)
10) Describe resources available to elderly patients	18(PROF3), 20(ICS1)
Process-based (all PGY levels)	
1) Interact with and care for patients/families with respect for their many racial, cultural, language and religious diversities	16(PROF1), 18(PROF3), 20(ICS1)
2) Perform complete and accurate histories	1(PC1), 22(ICS3)
3) Perform complete and accurate physical examinations	1(PC1), 22(ICS3)
4) Develop prioritized differential diagnoses on a consistent basis	15(PBLI4)
5) Assess the acuity of the patient's illness and manage their care in the appropriate clinical setting	3(PC3), 11(SBP4)
6) Record patient information [from history, examination, prior records, testing and the medical literature] into the EMR in appropriate language and in a timely manner	22(ICS3)
7) Integrate clinical evidence into decision making at the point of care [e.g. develop evidence-based diagnostic and therapeutic plans]	12(PBLI1), 15(PBLI4)
8) Communicate and interact in a professional manner with medical professionals, patients and families	16(PROF1), 20(ICS1), 21(ICS2)
9) Minimize unnecessary care [including procedures, tests, and other resources]	10(SBP3)
10) Demonstrate empathy, compassion and commitment to patient care	16(PROF1)

11) Seek out and incorporate feedback and use this to improve your performance	12(PBLI1), 13(PBLI2), 14(PBLI3)
12) Teach the other members of your care team and your patients/families	18(PROF3), 20(ICS1), 21(ICS2)
13) Recognize the need for and facilitate subspecialty consultation	5(PC5), 21(ICS2)
14) Advocate for your patient[s] within the healthcare system [e.g. understand the healthcare system and aid your patient in navigating its challenges]	9 (SBP2), 10(SBP3), 18(PROF3)
15) Assure test results are addressed appropriately within teams in order to provide effective patient care	17(PROF2)
16) Incorporate quality improvement/self-assessment into your care processes	9(SBP2), 12(PBLI1), 13 (PBLI2)

Rotation: General Medicine Consult

Purpose

The purpose of this consult rotation, which is required for PGY1 residents, is to provide experience in the management of acute and chronic medical conditions among patients who are hospitalized on non-internal medicine teams and in the prevention and management of perioperative medical complications.

Content Objectives

- 1) Use appropriate tools resources to assess and stratify cardiovascular and pulmonary risks for surgery and to provide this information to the surgical team(s) (PC2/MK1)
- 2) Use evidence-based strategies to minimize the risk for perioperative cardiovascular and pulmonary complications (PC2/MK2)
- 3) Effectively co-manage acute and chronic medical conditions in perioperative patients and those under the primary inpatient care of other medical/surgical specialists (PC2/MK1)
- 4) Effectively assess and manage perioperative anticoagulation (including VTE prophylaxis, chronic anticoagulation +/- bridging, anticoagulation reversal, HIT evaluation/treatment) (PC2/MK1)
- 5) Effectively assess the risk for, implement strategies to prevent, and manage perioperative delirium (PC2/MK1)
- 6) Effectively assess and manage perioperative fever and infections with and/or without the assistance of additional subspecialty consultants (PC2/MK1)
- 7) Use evidence-based strategies to appropriately manage hyper- and hypo-glycemia in perioperative patients with and without diabetes (PC2/MK1)
- 8) Minimize the use of unnecessary and/or low-value care in the management of Consultative patients (SBP3)

Process Objectives

- 1) Communicate/interact with and care for patients/families with respect for differences in racial, cultural, language and other diversities (PROF1/PROF3/ICS1)
- 2) Perform appropriately complete and accurate history and physical examinations (PC1/PROF1/ICS3)
- 3) Develop an appropriately prioritized differential diagnosis and management plan for consultative patients with all levels of complexity (PC2/MK1/PBLI1)
- 4) Assess the acuity of the patient’s illness and facilitate their care being delivered in the appropriate clinical setting (MK1/PC3/SBP4)
- 5) Record appropriately complete and non-pejorative patient information [from Hx, PE, prior records, testing and the literature] in the EMR effectively and in a timely manner (ICS3)
- 6) Integrate clinical evidence into your medical decision making at the point of care and include this in your treatment plans (PBLI1/PBLI4)
- 7) Communicate/interact with Consulting/Primary team members to facilitate the most effective team based care for patients under your mutual care (PROF1/ICS1/ICS2)
- 8) When appropriate, effectively facilitate transfer patients with acute and chronic medical conditions to a medical service (PC5/SBP1/SBP4/ICS2)
- 9) Actively seek out feedback from your attending physician, nursing staff, and others about your performance and incorporate this input to help further develop your professional skills (PBLI1/PBLI2/PBLI3)
- 10) Understand how the health systems at UAMS/VA work and help your patients to navigate its complexities in the context of improving their health (SBP2/SBP3)
- 11) Actively manage your EMR ‘desktop’ to assure laboratory and test results are addressed in a timely manner by your team to provide effective care for your patients (PROF2/SBP2/SBP3)
- 12) Seek out opportunities to improve the patient care you deliver. Then use QI principles to evaluate processes, and work with teams to effect improvement (SBP2/PBLI1/PBLI2)

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Use appropriate tools resources to assess and stratify cardiovascular and pulmonary risks for surgery and to provide this information to the surgical team(s)	2(PC2), 6(MK1)
2) Use evidence-based strategies to minimize the risk for perioperative cardiovascular and pulmonary complications	2(PC2), 7(MK2)
3) Effectively co-manage acute and chronic medical conditions in perioperative patients and those	2(PC2), 6(MK1)

under the primary inpatient care of other medical/surgical specialists	
4) Effectively assess and manage perioperative anticoagulation (including VTE prophylaxis, chronic anticoagulation +/- bridging, anticoagulation reversal, HIT evaluation/treatment)	2(PC2), 6(MK1)
5) Effectively assess the risk for, implement strategies to prevent, and manage perioperative delirium	2(PC2), 6(MK1)
6) Effectively assess and manage perioperative fever and infections with and/or without the assistance of additional subspecialty consultants	2(PC2), 6(MK1)
7) Use evidence-based strategies to appropriately manage hyper- and hypo-glycemia in perioperative patients with and without diabetes	2(PC2), 6(MK1)
8) Minimize the use of unnecessary and/or low-value care in the management of Consultative patients	10(SBP3)
Process-based	
1) Communicate/interact with and care for patients/families with respect for differences in racial, cultural, language and other diversities	16(PROF1), 18(PROF3), 20(ICS1)
2) Perform appropriately complete and accurate history and physical examinations	1(PC1), 16(PROF1), 22(ICS3)
3) Develop an appropriately prioritized differential diagnosis and management plan for consultative patients with all levels of complexity	2(PC2), 6(MK1), 12(PBL11)
4) Assess the acuity of the patient's illness and facilitate their care being delivered in the appropriate clinical setting	3(PC3), 6(MK1), 11(SBP4)
5) Record appropriately complete and non-pejorative patient information [from Hx, PE, prior records, testing and the literature] in the EMR effectively and in a timely manner	22(ICS3)

6) Integrate clinical evidence into your medical decision making at the point of care and include this in your treatment plans (PBLI1/PBLI4)	12(PBLI1),15(PBLI4)
7) Communicate/interact with Consulting/Primary team members to facilitate the most effective team based care for patients under your mutual care (PROF1/ICS1/ICS2)	16(PROF1), 20(ICS1), 21(ICS2)
8) When appropriate, effectively facilitate transfer patients with acute and chronic medical conditions to a medical service	5(PC5), 8(SBP1), 11(SBP4), 21(ICS2)
9) Actively seek out feedback from your attending physician, nursing staff, and others about your performance and incorporate this input to help further develop your professional skills	12(PBLI1), 13(PBLI2), 14(PBLI3)
10) Understand how the health systems at UAMS/VA work and help your patients to navigate its complexities in the context of improving their health	9(SBP2), 10(SBP3)
11) Actively manage your EMR 'desktop' to assure laboratory and test results are addressed in a timely manner by your team to provide effective care for your patients	9(SBP2), 10(SBP3), 17(PROF2)
12) Seek out opportunities to improve the patient care you deliver. Then use QI principles to evaluate processes, and work with teams to effect improvement	9(SBP2), 12(PBLI1), 13(PBLI2)

**Rotations: General Medicine Wards UAMS Teams 3A and 3B
and General Medicine Wards VA Teams 1-3**

Purpose

The purpose of these inpatient ward rotations is to provide a core experience in the diagnosis and management of acute medical illnesses. This includes developing proficiency in the conduct of prompt and accurate diagnoses, initiation and completion of appropriate therapies, timely involvement of consultation services and comprehensive discharge planning. In addition to fostering competence in the areas of patient care and medical knowledge, the services provide critical experience in collaborating with other members of the health care team which supports interpersonal communication and professionalism skills. Exposure to the complexity, contexts and systems of daily hospital

care builds competence in systems-based practice. Opportunities to learn from mistakes, reflection on practice and application of new medical information facilitate practice-based learning.

Content Objectives

PGY1

- 1) Demonstrate effective assessment and management common cardiovascular disorders in the hospital (includes hypertension- chronic, severe, secondary; CAD/chest pain; CHF; arrhythmias)
- 2) Demonstrate effective patient assessment and management of diabetes, other common endocrinopathies and their complications in the hospital
- 3) Demonstrate effective assessment and management of common mental health issues (including anxiety, depression, delirium, agitation, withdrawal from ETOH/Benzos and interaction with Psychiatry consult liaison service) in the hospital
- 4) Demonstrate effective assessment and management of common pulmonary conditions (including OSA, interstitial lung disease, asthma with exacerbation, COPD exacerbations) in the hospital
- 5) Demonstrate effective assessment and management of common GI issues (GERD, PUD, GI bleeds, acute and acute on chronic liver disease) in the hospital
- 6) Demonstrate effective assessment and management of common infections in the hospital (This includes use of appropriate antibiotic stewardship principles)
- 7) Demonstrate effective assessment and management of VTE prophylaxis and treatment in medical inpatients
- 8) Minimize the use of unnecessary and/or low-value care in the management of hospitalized patients

PGY2, 3

- 1) Use appropriate resources to assess and manage pain in the context of medical hospitalization (includes treatment of uncontrolled pain, opioid conversion tables and titration, overdose, transitions of care)
- 2) Demonstrate effective assessment, counselling and management of care at the end of life (includes understanding and use of advance directives, DNR status, family conferences, appropriate interactions with Palliative care, hospice and comfort care)
- 3) Demonstrate effective assessment and management of common renal diseases and conditions in the hospital (includes acute and chronic renal failure, rhabdomyolysis, electrolyte abnormalities)
- 4) Appropriately evaluate patients who present to the hospital with acute and/or undiagnosed illness for severity, develop a differential diagnosis and facilitate their care in the appropriate setting
- 5) Demonstrate understanding of the sepsis syndrome and appropriately manages the complexities of this symptom complex in the appropriate inpatient setting

- 6) Demonstrate effective assessment and management of common mental health issues (including anxiety, depression, delirium, agitation, withdrawal from ETOH/Benzos and interaction with Psychiatry consult liaison service) in the hospital
- 7) Demonstrate effective assessment, differential diagnosis development and management of patients with rheumatologic and dermatologic conditions in the hospital
- 8) Minimize the use of unnecessary and/or low-value care in the management of patients in the hospital

Process Objectives

All PGYs

- 1) Communicate/interact with and care for patients/families with empathy and respect for differences in racial, cultural, language and other diversities
- 2) Perform complete and accurate history and physical examinations
- 3) Develop appropriately prioritized differential diagnoses and management plans for your hospitalized patients
- 4) Assess the acuity of each patient’s illness and facilitate their care being delivered in the appropriate clinical setting
- 5) Record appropriately complete and non-pejorative patient information [from Hx, PE, prior records, testing and the literature] in the EMR in a timely manner and in an effective format
- 6) Integrate clinical evidence into your medical decision making at the point of care and include this in your treatment plans
- 7) Communicate/interact with hospital staff, medical team members and consultants in a professional manner and recognize their roles in team-based inpatient care
- 8) Demonstrates effective patient assessment, management and escalation of care/transition of care in patients who are unstable and need higher level of care
- 9) Actively seek out feedback from your attending and other professionals regarding your performance and use this input to grow in your inpatient skills
- 10) Understand how our health systems work and help your patients to navigate its complexities and challenges in the context if improving their health
- 11) Actively manage your EMR ‘desktop’ to address laboratory and test results for patients on your team, assure that results are effectively managed and that your patients are informed in a timely manner
- 12) Seek out opportunities to improve patient care delivered in the hospital. Use QI principles to evaluate processes, and work with teams to effect improvement

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based PGY1	

1) Demonstrate effective assessment and management common cardiovascular disorders in the hospital (includes hypertension- chronic, severe, secondary; CAD/chest pain; CHF; arrhythmias)	2(PC2), 6(MK1)
2) Demonstrate effective patient assessment and management of diabetes, other common endocrinopathies and their complications in the hospital	2(PC2), 6(MK1)
3) Demonstrate effective assessment and management of common mental health issues (including anxiety, depression, delirium, agitation, withdrawal from ETOH/Benzos and interaction with Psychiatry consult liaison service) in the hospital	2(PC2), 6(MK1)
4) Demonstrate effective assessment and management of common pulmonary conditions (including OSA, interstitial lung disease, asthma with exacerbation, COPD exacerbations) in the hospital	2(PC2), 6(MK1)
5) Demonstrate effective assessment and management of common GI issues (GERD, PUD, GI bleeds, acute and acute on chronic liver disease) in the hospital	2(PC2), 6(MK1)
6) Demonstrate effective assessment and management of common infections in the hospital (This includes use of appropriate antibiotic stewardship principles)	2(PC2), 6(MK1)
7) Demonstrate effective assessment and management of VTE prophylaxis and treatment in medical inpatients	2(PC2), 6(MK1)
8) Minimize the use of unnecessary and/or low-value care in the management of hospitalized patients	10(SBP3)
Content-based PGY2, 3	
1) Use appropriate resources to assess and manage pain in the context of medical hospitalization (includes treatment of uncontrolled pain, opioid	2(PC2), 6(MK1)

conversion tables and titration, overdose, transitions of care)	
2) Demonstrate effective assessment, counselling and management of care at the end of life (includes understanding and use of advance directives, DNR status, family conferences, appropriate interactions with Palliative care, hospice and comfort care)	2(PC2), 6(MK1)
3) Demonstrate effective assessment and management of common renal diseases and conditions in the hospital (includes acute and chronic renal failure, rhabdomyolysis, electrolyte abnormalities)	2(PC2), 6(MK1)
4) Appropriately evaluate patients who present to the hospital with acute and/or undiagnosed illness for severity, develop a differential diagnosis and facilitate their care in the appropriate setting	3(PC3), 6(MK1), 11(SBP4)
5) Demonstrate understanding of the sepsis syndrome and appropriately manages the complexities of this symptom complex in the appropriate inpatient setting	2(PC2), 6(MK1), 18(PROF3), 20(ICS1)
6) Demonstrate effective assessment and management of common mental health issues (including anxiety, depression, delirium, agitation, withdrawal from ETOH/Benzos and interaction with Psychiatry consult liaison service) in the hospital	2(PC2), 6(MK1)
7) Demonstrate effective assessment, differential diagnosis development and management of patients with rheumatologic and dermatologic conditions in the hospital	2(PC2), 6(MK1)
8) Minimize the use of unnecessary and/or low-value care in the management of patients in the hospital.	10(SBP3)
Process-based All PGYs	
1) Communicate/interact with and care for patients/families with empathy and respect for differences in racial, cultural, language and other diversities	16(PROF1), 18(PROF3), 20(ICS1)

2) Perform complete and accurate histories and physical examinations	1(PC1), 16(PROF1), 22(ICS3)
3) Develop appropriately prioritized differential diagnoses and management plans for your hospitalized patients	2(PC2), 6(MK1), (PBLI1)
4) Assess the acuity of each patient's illness and facilitate their care being delivered in the appropriate clinical setting	6(MK1), 3(PC3), 11(SBP4)
5) Record appropriately complete and non-pejorative patient information [from Hx, PE, prior records, testing and the literature] in the EMR in a timely manner and in an effective format	22(ICS3)
6) Integrate clinical evidence into your medical decision making at the point of care and include this in your treatment plans	12(PBLI1), 15(PBLI4)
7) Communicate/interact with hospital staff, medical team members and consultants in a professional manner and recognize their roles in team-based inpatient care	16(PROF1), 20(ICS1), 21(ICS2)
8) Demonstrates effective patient assessment, management and escalation of care/transition of care in patients who are unstable and need higher level of care	3(PC3), 9(SBP2)
9) Actively seek out feedback from your attending and other professionals regarding your performance and use this input to grow in your inpatient skills	12(PBLI1), 13(PBLI2), 14(PBLI3)
10) Understand how our health systems work and help your patients to navigate its complexities and challenges in the context if improving their health	9(SBP2), 10(SBP3)
11) Actively manage your EMR 'desktop' to address laboratory and test results for patients on your team, assure that results are effectively managed and that your patients are informed in a timely manner	17(PROF2), 9(SBP2), 10(SBP3)
12) Seek out opportunities to improve patient care delivered in the hospital. Use QI principles to evaluate processes, and work with teams to effect improvement.	9(SBP2), 12(PBLI1), 13(PBLI2)

Rotation: Geriatrics

Purpose:

The purpose of this required PGY1 rotation is to provide resident experience with geriatric patients in diverse settings including ambulatory clinic, inpatient consultation, long-term care, home-based care, palliative care, and hospice care.

Content Objectives

- 1) Develop evidence-based treatment plans for common geriatric syndromes
- 2) Identify potential hazards of hospitalization
- 3) Diagnose and manage delirium and behavioral disorders in the geriatric patient
- 4) Identify the profile of the frail elder and how it impacts a patient’s ability to rehabilitate
- 5) Develop evidence-based pre-operative and post-operative recommendations
- 6) Adjust medications in the elderly patient to maximize efficacy and minimize toxicity
- 7) Recognize an atypical presentation of an acute disease in the elderly hospitalized patient
- 8) Adapt goals of care and care plans for elderly patients with medical diseases in long-term care
- 9) Identify and stage pressure wounds
- 10) Identify and assess a nonverbal patient for pain
- 11) Demonstrate familiarity with the regulation and standards of care regarding antipsychotic medications in long-term care
- 12) Diagnose and manage dementia
- 13) Assess etiology for falls and outpatient treatment programs that may mitigate falls
- 14) Diagnose and manage chronic pain in the elderly

Process Goals Objectives

- 1) Recognize system error and advocate for system improvement
- 2) Learn and improve via feedback
- 3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 4) Accept responsibility and follow through on tasks
- 5) Communicate effectively with patients and caregivers
- 6) Communicate effectively in interprofessional teams

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Develop evidence-based treatment plans for common geriatric syndromes	2(PC2), 6(MK1)
2) Identify potential hazards of hospitalization	6(MK1)
3) Diagnose and manage delirium and behavioral disorders in the geriatric patient	1(PC1), 2(PC2), 7(MK2)
4) Identify the profile of the frail elder and how it impacts a patient’s ability to rehabilitate	1(PC1), 18(PROF3)
5) Develop evidence-based pre-operative and post-operative recommendations	2(PC2), 5(PC5), 7(MK2)

6) Adjust medications in the elderly patient to maximize efficacy and minimize toxicity	2(PC2), 6(MK1)
7) Recognize an atypical presentation of an acute disease in the elderly hospitalized patient	1(PC1), 6(MK1)
8) Adapt goals of care and care plans for elderly patients with medical diseases in long-term care	2(PC2), 18(PROF3), 19(PROF4)
9) Identify and stage pressure wounds	1(PC1), 6(MK1)
10) Identify and assess a nonverbal patient for pain	1(PC1)
11) Demonstrate familiarity with the regulation and standards of care regarding antipsychotic medications in long-term care	6(MK1), 19(PROF4)
12) Diagnose and manage dementia	1(PC1), 2(PC2), 6(MK1), 7(MK2)
13) Assess etiology for falls and outpatient treatment programs that may mitigate falls	1(PC1), 2(PC2)
14) Diagnose and manage chronic pain in the elderly	1(PC1), 2(PC2), 7(MK2)
Process-based	
1) Recognize system error and advocate for system improvement	9(SBP2)
2) Learn and improve via feedback	14(PBLI3)
3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
4) Accept responsibility and follow through on tasks	17(PROF2)
5) Communicate effectively with patients and caregivers	20(ICS1)
6) Communicate effectively in interprofessional teams	21 (ICS2)

Rotation: Hematology-Oncology UAMS Team 2A/2B

Purpose

The purpose of these inpatient ward rotations is to provide the resident with experience in the diagnosis and management of a broad range of hematologic/oncologic diseases and complications encountered in the inpatient setting. The resident is an integral component of the primary team caring for these patients; the team includes advanced-practice nurses, hematology-oncology fellows and attendings.

Content Objectives

- 1) Initiate workup and management of fever
- 2) Choose appropriate antibiotic therapy for neutropenic fever
- 3) Formulate antibiotic discharge planning for neutropenic fever
- 4) Diagnose and manage venous thromboembolism in the cancer patient
- 5) Manage superior vena cava syndrome

- 6) Initiate appropriate steroid treatment and consult appropriate services for spinal cord compression
- 7) Manage the common complications of chemotherapy and other cancer treatments
- 8) Formulate discharge planning for subsequent oncology care
- 9) Manage hypercalcemia of malignancy
- 10) Manage end of life care family meeting
- 11) Refer appropriate patients for hospice and palliative care

Process Objectives

- 1) Manage the interdisciplinary team
- 2) Coordinate care and maintain communication between different members of the teams
- 3) Role model effective communication skills in challenging situations
- 4) Demonstrate shared decision-making with the patient
- 5) Guide and support bedside presentations that engage the patient and focus the discussion around the patient's central concerns
- 6) Gather subtle, sensitive, and complicated information that may not be volunteered by the patient
- 7) Recognize the scope of his/her abilities and ask for supervision and assistance appropriately
- 8) Modify the differential diagnosis and care plan based on clinical course and data as appropriate
- 9) Choose the appropriate consultative services for a given clinical condition
- 10) Minimize unnecessary care including tests
- 11) Teach physical findings for junior members of the health care team
- 12) Use feedback to improve performance
- 13) Stabilize patients with urgent or emergent medical conditions and transfer to a higher level of care when necessary
- 14) Demonstrate empathy, compassion, and a commitment to relieve pain and suffering

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Initiate workup and management of fever	1(PC1), 2(PC2), 7(MK2)
2) Choose appropriate antibiotic therapy for neutropenic fever	2(PC2), 3(PC3), 6(MK1)
3) Formulate antibiotic discharge planning for neutropenic fever	2(PC2), 11(SBP4)
4) Diagnose and manage venous thromboembolism in the cancer patient	2(PC2), 7(MK2)
5) Manage superior vena cava syndrome	2(PC2), 3(PC3)
6) Initiate appropriate steroid treatment and consults appropriate services for spinal cord compression	2(PC2), 3(PC3), 5(PC5)
7) Manage the common complications of chemotherapy and other cancer treatments	2(PC2), 6(MK1)

8) Formulate discharge planning for subsequent oncology care	2(PC2), 11(SBP4)
9) Manage hypercalcemia of malignancy	2(PC2), 3(PC3), 6(MK1)
10) Manage end of life care family meeting	19(PROF4), 20(ICS1)
11) Refer appropriate patients for hospice and palliative care	5(PC5), 11(SBP4)
Process-based	
1) Manage the interdisciplinary team	8(SBP1), 16 (PROF1), 21(ICS2)
2) Coordinate care and maintain communication between different members of the team	8(SBP1), 16(PROF1), 21(ICS2)
3) Role model effective communication skills in challenging situations	20(ICS1)
4) Demonstrate shared decision-making with the patient	16(PROF1), 18(PROF3), 20(ICS1)
5) Guide and support bedside presentations that engage the patient and focus the discussion around the patient's central concerns	16(PROF1), 18(PROF3), 20(ICS1)
6) Gather subtle, sensitive, and complicated information that may not be volunteered by the patient	1(PC1), 20(ICS1)
7) Recognize the scope of his/her abilities and ask for supervision and assistance appropriately	12(PBLI1), 15(PBLI4)
8) Modify the differential diagnosis and care plan based on clinical course and data as appropriate	15(PBLI4)
9) Choose the appropriate consultative services for a given clinical condition	5(PC5)
10) Minimize unnecessary care including tests	7(MK2), 10(SBP3)
11) Teach physical findings for junior members of the health care team	1(PC1), 8(SBP1)
12) Use feedback to improve performance	14(PBLI3)
13) Stabilize patients with urgent or emergent medical conditions and transfer to a higher level of care when necessary	1(PC1), 2(PC2), 3(PC3), 11(SBP4)
14) Demonstrate empathy, compassion, and a commitment to relieve pain and suffering	18(PROF3), 20(ICS1)

Rotation: Hematology-Oncology Clinic UAMS

Purpose

The purpose of this outpatient elective is to provide the resident with experience in the diagnosis and management of a broad range of hematology-oncology diseases encountered in the ambulatory setting.

Content Objectives

- 1) Evaluate and treat anemia
- 2) Evaluate disorders of hemostasis
- 3) Evaluate myeloproliferative disorders
- 4) Initiate staging work up using different imaging and tissue biopsies
- 5) Determine when chemotherapy and biologic therapy should be used for palliative treatment vs. curative treatment and adjuvant or neo-adjuvant treatment
- 6) Implement supportive care agents in cancer therapies
- 7) Manage the common complications of chemotherapy and other cancer treatments
- 8) Initiate end of life discussions with patients with incurable malignancies
- 9) Discuss clinical trial enrollment process with appropriate patients
- 10) Evaluate and treat specific cancer survivorship issues

Process Objectives

- 1) Gather subtle, sensitive, and complicated information that may not be volunteered by the patient
- 2) Perform an accurate physical exam
- 3) Develop prioritized differential diagnoses
- 4) Develop an evidence-based diagnostic and therapeutic plan
- 5) Integrate clinical evidence into decision making
- 6) Recognize the scope of his/her abilities and ask for supervision and assistance appropriately
- 7) Minimize unnecessary care including tests
- 8) Provide appropriate preventive care
- 9) Evaluate complex medical patient in a timely manner
- 10) Demonstrate empathy, compassion, and a commitment to relieve pain and suffering
- 11) Work effectively within an interprofessional team
- 12) Learn and improve via feedback
- 13) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 14) Communicate effectively with patients and caregivers

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Evaluate and treat anemia	2(PC2), 6(MK1), 7(MK2)
2) Evaluate disorders of hemostasis	6(MK1), 7(MK2)
3) Evaluate myeloproliferative disorders	6(MK1), 7(MK2)
4) Initiate staging work up using different imaging and tissue biopsies	2(PC2), 5(PC5), 7(MK2)
5) Determine when chemotherapy and biologic therapy should be used for palliative treatment vs. curative treatment and adjuvant or neo-adjuvant treatment	2(PC2), 6(MK1)
6) Implement supportive care agents in cancer therapies	2(PC2)

7) Manage the common complications of chemotherapy and other cancer treatments	2(PC2), 6(MK1)
8) Initiate end of life discussions with patients with incurable malignancies	18(PROF3), 20(ICS1)
9) Discuss clinical trial enrollment process with appropriate patients	19(PROF4), 20(ICS1)
10) Evaluate and treat specific cancer survivorship issues	1(PC1), 2(PC2), 5(PC5), 18(PROF3)
Process-based	
1) Gather subtle, sensitive, and complicated information that may not be volunteered by the patient	1(PC1), 20(ICS1)
2) Perform an accurate physical exam	1(PC1)
3) Develop prioritized differential diagnoses	6(MK1), 15(PBLI4)
4) Develop an evidence-based diagnostic and therapeutic plan	2(PC2), 12(PBLI1)
5) Integrate clinical evidence into decision making	12(PBLI1), 13(PBLI2)
6) Recognize the scope of his/her abilities and ask for supervision and assistance appropriately	12(PBLI1), 15(PBLI4)
7) Minimize unnecessary care including tests	7(MK2), 10(SBP3)
8) Provide appropriate preventive care	2(PC2)
9) Evaluate complex medical patient in a timely manner	3(PC3)
10) Demonstrate empathy, compassion, and a commitment to relieve pain and suffering	18(PROF3), 20(ICS1)
11) Work effectively within an interprofessional team	8(SBP1)
12) Learn and improve via feedback	14(PBLI3)
13) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
14) Communicates effectively with patients and caregivers	20(ICS1)

Rotation: Hematology-Oncology Elective VA

Purpose

The purpose of this consult elective is to provide the resident with experience in the diagnosis and management of a broad range of hematology-oncology diseases encountered in the inpatient setting.

Content Objectives

- 1) Identify the causes of leukocytosis
- 2) Identify the causes of anemia
- 3) Identify the causes of thrombocytopenia, including heparin-induced thrombocytopenia
- 4) Identify the causes of coagulopathy

- 5) Manage anticoagulation of venous thromboembolism in the cancer patient
- 6) Recognize the need for prompt plasmapheresis to treat thrombotic thrombocytopenia purpura
- 7) Differentiate between various types of hemolytic anemia and initiate work-up
- 8) Initiate staging work-up for newly diagnosed solid tumors
- 9) Determine when chemotherapy and biologic therapy should be used for palliative treatment vs. curative treatment and adjuvant or neo-adjuvant treatment
- 10) Initiate appropriate evaluation for acute chest syndrome in sickle cell anemia
- 11) Adjust long-acting and short-acting narcotics in cancer and sickle cell patients
- 12) Initiate appropriate steroid treatment and consult appropriate services for spinal cord compression
- 13) Initiate appropriate work up and management for superior vena cava syndrome

Process Objectives

- 1) Acquire accurate and relevant history
- 2) Gather subtle, sensitive, and complicated information that may not be volunteered by the patient
- 3) Perform an accurate physical exam
- 4) Develop prioritized differential diagnoses
- 5) Develop an evidence-based diagnostic and therapeutic plan
- 6) Provide accurate, complete, and timely documentation
- 7) Communicate effectively with the consulting team
- 8) Modify the differential diagnosis and care plan based on clinical course and data as appropriate
- 9) Minimize unnecessary care including tests
- 10) Integrate clinical evidence into decision making
- 11) Demonstrate empathy, compassion, and a commitment to relieve pain and suffering
- 12) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 13) Accept responsibility and follows through on tasks
- 14) Learn and improve via feedback

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Identify the causes of leukocytosis	6(MK1), 7(MK2)
2) Identify the causes of anemia	6(MK1), 7(MK2)
3) Identify the causes of thrombocytopenia, including heparin-induced thrombocytopenia	6(MK1), 7(MK2)
4) Identify the causes of coagulopathy	6(MK1), 7(MK2)
5) Manage anticoagulation of venous thromboembolism in the cancer patient	2(PC2)
6) Recognize the need for prompt plasmapheresis to treat thrombotic thrombocytopenia purpura	2(PC2), 6(MK1)

7) Differentiate between various types of hemolytic anemia and initiate work-up	2(PC2), 7(MK2)
8) Initiate staging work-up for newly diagnosed solid tumors	2(PC2), 7(MK2)
9) Determine when chemotherapy and biologic therapy should be used for palliative treatment vs. curative treatment and adjuvant or neo-adjuvant treatment	2(PC2), 6(MK1)
10) Initiate appropriate evaluation for acute chest syndrome in sickle cell anemia	2(PC2)
11) Adjust long-acting and short-acting narcotics in cancer and sickle cell patients	2(PC2), 6(MK1)
12) Initiate appropriate steroid treatment and consult appropriate services for spinal cord compression	2(PC2), 3(PC3), 5(PC5)
13) Initiate appropriate work up and management for superior vena cava syndrome	2(PC2), 3(PC3)
Process-based	
1) Acquire accurate and relevant history	1(PC1)
2) Gather subtle, sensitive, and complicated information that may not be volunteered by the patient	1(PC1), 20(ICS1)
3) Perform an accurate physical exam	1(PC1)
4) Develop prioritized differential diagnoses	2(PC2), 15(PBLI4)
5) Develop an evidence-based diagnostic and therapeutic plan	2(PC2), 15(PBLI4)
6) Provide accurate, complete, and timely documentation	22(ICS3)
7) Communicate effectively with the consulting team	5(PC5), 16(PROF1), 21(ICS2)
8) Modify the differential diagnosis and care plan based on clinical course and data as appropriate	15(PBLI4)
9) Minimize unnecessary care including tests	7(MK2), 10(SBP3)
10) Integrate clinical evidence into decision making	12(PBLI1), 13(PBLI2)
11) Demonstrate empathy, compassion, and a commitment to relieve pain and suffering	18(PROF3), 20(ICS1)
12) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
13) Accept responsibility and follows through on tasks	17(PROF2)
14) Learn and improve via feedback	14(PBLI3)

Rotation: Infectious Diseases Consult

Purpose

The purpose of this consult elective is to provide the resident experience in the diagnosis and management of a broad spectrum of infectious diseases that are acquired in the community, in the hospital, and in other healthcare environments. In addition to patients with routine infectious processes such as pneumonia and cellulitis, the patient mix includes more complex patients, those with AIDS, those with other forms of immunosuppression, and those with critical illness.

Content Objectives

- 1) Evaluate and treat a patient with sepsis
- 2) Evaluate a patient with unexplained fever
- 3) Evaluate and treat a patient with pneumonia
- 4) Diagnose opportunistic infections in patients with AIDS
- 5) Evaluate and treat a patient with infective endocarditis
- 6) Evaluate and treat a patient with osteomyelitis
- 7) Evaluate and treat a patient with meningitis
- 8) Evaluate and treat a patient skin and soft tissue infection
- 9) Recognize and treat tick-borne infections seen in Arkansas
- 10) Recognize and treat *C. difficile* infection
- 11) Recognize the importance of antibiotic misuse and the role of antibiotic stewardship

Process Objectives

- 1) Learn and improve via feedback
- 2) Utilize information technology to find and review any assigned topics or literature relevant to your patients
- 3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 4) Accept responsibility and follow through on tasks
- 5) Communicate effectively with patients and caregivers
- 6) Communicate effectively in interprofessional teams
- 7) Learn to identify the role of a consultant, focus on the key questions or requests being made of the consult team and ensure prompt responsiveness

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Evaluate and treat a patient with sepsis	1(PC1), 2(PC2), 7(MK2)
2) Evaluate a patient with unexplained fever	1(PC1), 6(MK1)
3) Evaluate and treat a patient with pneumonia	1(PC1), 2(PC2), 7(MK2)
4) Diagnose opportunistic infections in patients with AIDS	1(PC1), 6(MK1), 7(MK2)
5) Evaluate and treat a patient with infective endocarditis	1(PC1), 2(PC2), 7(MK2)
6) Evaluate and treat a patient with osteomyelitis	1(PC1), 2(PC2), 7(MK2)
7) Evaluate and treat a patient with meningitis	1(PC1), 2(PC2), 6(MK1)

8) Evaluate and treat a patient skin and soft tissue infection	1(PC1), 2(PC2), 6(MK1)
9) Recognize and treat tick-borne infections seen in Arkansas	2(PC2), 6(MK1)
10) Recognize and treat <i>C. difficile</i> infection	2(PC2), 6(MK1)
11) Recognize the importance of antibiotic misuse and the role of antibiotic stewardship	9(SBP2), 10(SBP3), 12(PBLI1), 13(PBLI2)
Process-based	
1) Learn and improve via feedback	14(PBLI3)
2) Utilize information technology to find and review any assigned topics or literature relevant to your patients	12(PBLI1), 13(PBLI2), 15(PBL4), 17(PROF2)
3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
4) Accept responsibility and follow through on tasks	17(PROF2)
5) Communicate effectively with patients and caregivers	20(ICS1)
6) Communicate effectively in interprofessional teams	21(ICS2)
7) Learn to identify the role of a consultant, focus on the key questions or requests being made of the consult team and ensure prompt responsiveness	5(PC5), 8(SBP1), 16(PROF1), 21(ICS2)

**Rotations: UAMS MICU, Acute Care Resident (ACR), Unit Night Float
VA MICU and Unit Night Float**

Purpose

The purpose of these inpatient rotations is to provide the resident experience caring for patients with a broad variety of unstable, life-threatening medical illnesses. The resident will learn the basic principles of initial resuscitation and subsequent management of critically ill patients, while working as part of an interdisciplinary team to provide care that is appropriate and individualized. The resident will perform procedures required for the management of these patients with supervision.

Content Objectives

- 1) Assess a patient with acute respiratory failure and identify who needs endotracheal intubation
- 2) Implement the initial mode of ventilatory assistance for acute respiratory failure
- 3) Manage subsequent ventilator changes for (uncomplicated) respiratory failure
- 4) Identify various sources and types of shock
- 5) Treat and stabilize a patient in hypovolemic and/or septic shock, using fluids, blood products and pressors appropriately
- 6) Choose initial antimicrobial regimens for patients with severe infections including pneumonia and urosepsis

- 7) Recognize critical laboratory values for arterial blood gasses, electrolytes, hematologic parameters and begin appropriate and timely management
- 8) Recognize hypertensive urgency, emergency and initiate appropriate management
- 9) Manage acute decompensated congestive heart failure
- 10) Evaluate and begin initial management of acute renal failure and recognize indications for urgent/emergent renal replacement therapy
- 11) Place central venous lines using ultrasound guidance

Process Objectives

- 1) Work effectively within an interprofessional team
- 2) Recognize system error and advocate for system improvement
- 3) Transition patients effectively within and across health care delivery systems
- 4) Learn and improve via feedback
- 5) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 6) Accept responsibility and follow through on tasks
- 7) Exhibit integrity and ethical behavior in professional conduct
- 8) Communicate effectively with patients and caregivers
- 9) Appropriately utilize and complete health records
- 10) Recognize the scope of his/her abilities and ask for supervision and assistance appropriately
- 11) Modify the differential diagnosis and care plan based on clinical course and data as appropriate
- 12) Demonstrate empathy, compassion, and a commitment to relieve pain and suffering

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Assess a patient with acute respiratory failure and identify who needs endotracheal intubation	1(PC1), 2(PC2), 3(PC3)
2) Implement the initial mode of ventilatory assistance for acute respiratory failure	2(PC2), 6(MK1)
3) Manage subsequent ventilator changes for (uncomplicated) respiratory failure	2(PC2), 6(MK1)
4) Identify various sources and types of shock	1(PC1), 6(MK1)
5) Treat and stabilize a patient in hypovolemic and /or septic shock, using fluids, blood products and pressors appropriately	2(PC2), 3(PC3), 10(SBP3)
6) Choose initial antimicrobial regimens for patients with severe infections including pneumonia and urosepsis	2(PC2), 6(MK1)
7) Recognize critical laboratory values for arterial blood gasses, electrolytes, hematologic parameters and begin appropriate and timely management	3(PC3), 7(MK2)

8) Recognize hypertensive urgency, emergency and initiate appropriate management	1(PC1), 2(PC2), 6(MK1)
9) Manage acute decompensated congestive heart failure	2(PC2)
10) Evaluate and begin initial management of acute renal failure and recognize indications for urgent/emergent renal replacement therapy	2(PC2), 6(MK1), 7(MK2)
11) Place central venous lines using ultrasound guidance	4(PC4)
Process-based	
1) Work effectively within an interprofessional team	8(SBP1)
2) Recognize system error and advocate for system improvement	9(SBP2)
3) Transition patients effectively within and across health care delivery systems	11(SBP4)
4) Learn and improve via feedback	14(PBLI3)
5) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
6) Accept responsibility and follow through on tasks	17(PROF2)
7) Exhibit integrity and ethical behavior in professional conduct	19(PROF4)
8) Communicate effectively with patients and caregivers	20(ICS1)
9) Appropriately utilize and complete health records	22(ICS3)
10) Recognize the scope of his/her abilities and ask for supervision and assistance appropriately	12(PBLI1), 15(PBLI4)
11) Modify the differential diagnosis and care plan based on clinical course and data as appropriate	15(PBLI4)
12) Demonstrate empathy, compassion, and a commitment to relieve pain and suffering	18(PROF3), 20(ICS1)

Rotation: Nephrology

Purpose

The purpose of this consult elective is to provide the resident experience in the diagnosis and management of a broad spectrum of renal diseases, electrolyte abnormalities, acid-base disturbances, and hypertension. The patient mix includes those with acute kidney injury, chronic kidney disease, glomerular disorders, and those who require renal replacement therapy.

Content Objectives

- 1) Evaluate and manage of acute kidney injury of various etiologies
- 2) Evaluate and manage a patient with hyperkalemia
- 3) Evaluate and manage a patient with hypokalemia

- 4) Identify and manage common acid-base disorders
- 5) Evaluate and manage a patient with hyponatremia
- 6) Evaluate and manage a patient with hypernatremia
- 7) Prepare and interpret urine sediments
- 8) Recognize basic glomerular syndromes (nephrotic and nephritic) and apply diagnostic strategies
- 9) Manage fluids in ICU and non-ICU patients
- 10) Identify the stages of chronic kidney disease and the various aspects of its management
- 11) Identify and apply different renal replacement therapies
- 12) Diagnose and manage essential hypertension

Process Objectives

- 1) Learn and improve via feedback
- 2) Utilize information technology to find and review any assigned topics or literature relevant to your patients
- 3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 4) Accept responsibility and follow through on tasks
- 5) Communicate effectively with patients and caregivers
- 6) Communicate effectively in interprofessional teams
- 7) Learn to identify the role of a consultant, focus on the key questions or requests being made of the consult team and ensure prompt responsiveness

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Evaluate and manage acute kidney injury of various etiologies	1(PC1), 2(PC2), 6(MK1), 7(MK2)
2) Evaluate and manage a patient with hyperkalemia	1(PC1), 2(PC2)
3) Evaluate and manage a patient with hypokalemia	1(PC1), 2(PC2)
4) Identify and manage common acid-base disorders	1(PC1), 2(PC2)
5) Evaluate and manage a patient with hyponatremia	1(PC1), 2(PC2)
6) Evaluate and manage a patient with hypernatremia	1(PC1), 2(PC2)
7) Prepare and interpret urine sediments	4(PC4), 6(MK1), 7(MK2)
8) Recognize basic glomerular syndromes (nephrotic and nephritic) and apply diagnostic strategies	1(PC1), 6(MK1), 7(MK2)
9) Manage fluids in ICU and non-ICU patients	2(PC2)
10) Identify the stages of chronic kidney disease and the various aspects of its management	2(PC2)
11) Identify and apply different renal replacement therapies	2(PC2), 7(MK2)
12) Diagnose and manage essential hypertension	1(PC1), 2(PC2), 6(MK1)
Process-based	
1) Learn and improve via feedback	14(PBLI3)

2) Utilize information technology to find and review any assigned topics or literature relevant to your patients	12(PBLI1), 13(PBLI2), 15(PBL4), 17(PROF2)
3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
4) Accept responsibility and follow through on tasks	17(PROF2)
5) Communicate effectively with patients and caregivers	20(ICS1)
6) Communicate effectively in interprofessional teams	21(ICS2)
7) Learn to identify the role of a consultant, focus on the key questions or requests being made of the consult team and ensure prompt responsiveness	5(PC5), 8(SBP1), 16(PROF1), 21(ICS2)

Rotation: Neurology Elective UAMS

Purpose

This is an elective rotation for upper level residents who desire more advanced training in Neurology. The goal of this one month rotation is to expose the resident to consultation for a broad range of acute and chronic neurological disorders and neurologic complications of medical and surgical disorders, similar to what they might experience as a hospitalist. Consultations may be for patients anywhere in University Hospital, including the ICUs and the Emergency Department.

Content Objectives

- 1) Gather essential and accurate information about hospitalized patients with acute neurological symptoms, including neurological emergencies
- 2) Gather essential and accurate information about hospitalized patients with chronic neurological conditions/neuro-degenerative disorders and common neurological problems, including headache, dizziness, movement disorders, epilepsy and spine pain
- 3) Perform an extensive and comprehensive general and neurological examination, and be able to summarize findings and localize the lesion in the central or peripheral nervous system
- 4) Formulate a differential diagnosis and management plan based upon neurological assessment
- 5) Identify and describe common abnormalities seen in common neurological disorders on radiographic testing
- 6) Demonstrate technical skills in performing lumbar punctures
- 7) Compare and contrast the medical and surgical approaches to treatment of ischemic stroke and intracerebral hemorrhage, and explain the conditions under which each would be most efficacious
- 8) Demonstrate the approach to assess acute change in mental status/coma and distinguish between different etiologies such as metabolic, toxic, infectious, and vascular
- 9) Describe the underlying pathophysiology, diagnostic criteria and common treatment protocols for migraine and other headache syndromes

- 10) Understand the etiology, and uses and risks of antiepileptic drugs in the treatment of acute and chronic epilepsy, and status epilepticus
- 11) Demonstrate an analytical thinking approach to a patient presenting with acute weakness, in order to distinguish whether the lesion can be attributed to the central nervous system or peripheral nervous system, based upon assessment of upper or lower motor neuron signs
- 12) Demonstrate knowledge of relevant neuroanatomy and underlying pathology found in multiple sclerosis, dementia, parkinsonian syndromes and cerebrovascular disease
- 13) Identify and perform appropriate preventive care measures for the adult patient

Process Objectives

- 1) Present cases verbally and in writing in a logical and coherent manner
- 2) Demonstrate the ability to obtain, interpret and evaluate consultations from other medical specialties, and to develop a diagnostic and management plan
- 3) Provide patients and their families with explanations of neurological disorders and treatment that is geared to their educational level, as well as respecting the patient's cultural, ethnic, religious and economic backgrounds
- 4) Work collaboratively in an effective manner with the multidisciplinary team involved in the inpatient care of neurological patients
- 5) Demonstrate effective communication within the team, with regards to patient's current or changing neurologic status, anticipated problems, therapeutic regimen and diagnostic tests to be reviewed
- 6) Critically review and record difficult and interesting cases
- 7) Adhere to utilization review criteria for necessity of level of care
- 8) Research clinical questions regarding the patient's health problems using information technology to access on-line medical information to support education and to improve patient care and education
- 9) Evaluate the clinical literature applying knowledge of epidemiology, biostatistics, and research study design
- 10) Facilitate the learning of medical students
- 11) Interact responsibly with patients, families and co-workers taking into consideration age, disability, culture and gender issues
- 12) Demonstrate appropriate use of the EMR in regards to patient respect and confidentiality
- 13) Describe the differences between withdrawal of care, termination of care, and non-initiation of care and assist patients and their families in choosing these options in the appropriate clinical setting
- 14) Complete accurate and timely H&Ps, progress notes and discharge summaries, in compliance with UAMS requirements
- 15) Maintain appropriate attire and professional comportment
- 16) Understand the impact of preventive medicine on societal health with regard to stroke risk factors, risk factor modification and initiation of antiplatelet and anticoagulation therapy in stroke prevention
- 17) Identify psychosocial factors associated with progressive and disabling neurodegenerative disorders such as multiple sclerosis, Parkinson's disease and Alzheimer's disease and other dementias

- 18) Refer patients to appropriate allied health and social services to assist in acute care rehabilitation, long term management or home care assistance
- 19) Develop an understanding of cost-effective health care that does not impact quality of care
- 20) Develop an understanding of various health care systems including Medicare, Medicaid, and private insurance

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Gather essential and accurate information about hospitalized patients with acute neurological symptoms, including neurological emergencies	1(PC1)
2) Gather essential and accurate information about hospitalized patients with chronic neurological conditions/neuro-degenerative disorders and common neurological problems, including headache, dizziness, movement disorders, epilepsy and spine pain	1(PC1)
3) Perform an extensive and comprehensive general and neurological examination, and be able to summarize findings and localize the lesion in the central or peripheral nervous system	1(PC1)
4) Formulate a differential diagnosis and management plan based upon neurological assessment	2(PC2)
5) Identify and describe common abnormalities seen in common neurological disorders on radiographic testing	7(MK2)
6) Demonstrate technical skills in performing lumbar punctures	4(PC4)
7) Compare and contrast the medical and surgical approaches to treatment of ischemic stroke and intracerebral hemorrhage, and explain the conditions under which each would be most efficacious	2(PC2), 6(MK1), 7(MK2)
8) Demonstrate the approach to assess acute change in mental status/coma and distinguish between different etiologies such as metabolic, toxic, infectious, and vascular	1(PC1), 6(MK1)
9) Describe the underlying pathophysiology, diagnostic criteria and common treatment protocols for migraine and other headache syndromes	2(PC2), 6(MK1)

10) Understand the etiology, and uses and risks of antiepileptic drugs in the treatment of acute and chronic epilepsy, and status epilepticus	2(PC2), 6(MK1)
11) Demonstrate an analytical thinking approach to a patient presenting with acute weakness, in order to distinguish whether the lesion can be attributed to the central nervous system or peripheral nervous system, based upon assessment of upper or lower motor neuron signs	1(PC1), 6(MK1)
12) Demonstrate knowledge of relevant neuroanatomy and underlying pathology found in multiple sclerosis, dementia, parkinsonian syndromes and cerebrovascular disease	6(MK1)
13) Identify and perform appropriate preventive care measures for the adult patient	2(PC2), 6(MK1)
Process-based	
1) Present cases verbally and in writing in a logical and coherent manner	21(ICS2), 22(ICS3)
2) Demonstrate the ability to obtain, interpret and evaluate consultations from other medical specialties, and to develop a diagnostic and management plan	5(PC5)
3) Provide patients and their families with explanations of neurological disorders and treatment that is geared to their educational level, as well as respecting the patient's cultural, ethnic, religious and economic backgrounds	16(PROF1), 18 (PROF3), 20(ICS1)
4) Work collaboratively in an effective manner with the multidisciplinary team involved in the inpatient care of neurological patients	8(SBP1), 16(PROF1), 21(ICS2)
5) Demonstrate effective communication within the team, with regards to patient's current or changing neurologic status, anticipated problems, therapeutic regimen and diagnostic tests to be reviewed	21(ICS2)
6) Critically review and record difficult and interesting cases	15(PBLI4)
7) Adhere to utilization review criteria for necessity of level of care	13(PBLI2)
8) Research clinical questions regarding the patient's health problems using information technology to access on-line medical information to support education and to improve patient care and education	12(PBLI1), 15(PBLI4)

9) Evaluate the clinical literature applying knowledge of epidemiology, biostatistics, and research study design	15(PBLI4)
10) Facilitate the learning of medical students	21(ICS2)
11) Interact responsibly with patients, families and co-workers taking into consideration age, disability, culture and gender issues	16(PROF1), 18(PROF3), 20(ICS1), 21(ICS2)
12) Demonstrate appropriate use of the EMR in regards to patient respect and confidentiality	19(PROF4), 22(ICS3)
13) Describe the differences between withdrawal of care, termination of care, and non-initiation of care and assist patients and their families in choosing these options in the appropriate clinical setting	18(PROF3), 19(PROF4), 20(ICS1)
14) Complete accurate and timely H&Ps, progress notes and discharge summaries, in compliance with UAMS requirements	22(ICS3)
15) Maintain appropriate attire and professional comportment	16(PROF1)
16) Understand the impact of preventive medicine on societal health with regard to stroke risk factors, risk factor modification and initiation of antiplatelet and anticoagulation therapy in stroke prevention	6(MK1), 12(PBLI1)
17) Identify psychosocial factors associated with progressive and disabling neurodegenerative disorders such as multiple sclerosis, Parkinson's disease and Alzheimer's disease and other dementias	18(PROF3), 19(PROF4), 20(ICS1)
18) Refer patients to appropriate allied health and social services to assist in acute care rehabilitation, long term management or home care assistance	8 (SBP1),11(SBP4)
19) Develop an understanding of cost-effective health care that does not impact quality of care	10(SBP3)
20) Develop an understanding of various health care systems including Medicare, Medicaid, and private insurance	10 (SBP3)

Rotation: Neurology Ward UAMS

Purpose

The purpose of this required PGY1 rotation is to expose the Internal Medicine resident to a broad range of acute and chronic neurologic disorders on the UAMS Neurology Inpatient Service. Residents will achieve basic competency in the assessment and management of

these patients. They will learn to perform a comprehensive neurologic exam and the indications for and interpretation of diagnostic tests applicable to the specialty.

Content Objectives

- 1) Obtain an accurate history from a patient with acute neurological symptoms
- 2) Obtain an accurate history from a patient with a chronic neurological condition
- 3) Perform and interpret a neurological examination, including localization of the lesion in the central or peripheral nervous system
- 4) Identify and describe common abnormalities seen in common neurological disorders on radiographic testing
- 5) Demonstrate technical skills in performing a lumbar puncture
- 6) Compare and contrast the medical and surgical approaches to treatment of ischemic stroke and intracerebral hemorrhage
- 7) Demonstrate the approach to assessing an acute change in mental status/coma
- 8) Describe the underlying pathophysiology, diagnostic criteria, and common treatment protocols for migraine and other headache syndromes
- 9) Understand the treatment of acute and chronic epilepsy and status epilepticus
- 10) Assess a patient with acute weakness to localize the lesion to the central nervous system, peripheral nervous system, or neuromuscular junction

Process Objectives

- 1) Work effectively within an interprofessional team
- 2) Recognize system error and advocate for system improvement
- 3) Identify forces that impact the cost of health care, and advocate for, and practice cost-effective care
- 4) Transition patients effectively within and across the health delivery systems
- 5) Learn and improve via feedback
- 6) Have professional and respectful interactions with patients, caregivers and members of the interprofessional team
- 7) Accept responsibility and follow through on tasks
- 8) Exhibit integrity and ethical behavior in professional conduct
- 9) Communicate effectively with patients and caregivers
- 10) Appropriately utilize and complete health records

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Obtain an accurate history from a patient with acute neurological symptoms	1(PC1)
2) Obtain an accurate history from a patient with a chronic neurological condition	1(PC1)
3) Perform and interpret a neurological examination, including localization of the lesion in the central or peripheral nervous system	1(PC1), 6(MK1)

4) Identify and describe common abnormalities seen in common neurological disorders on radiographic testing	7(MK2)
5) Demonstrate technical skills in performing a lumbar puncture	4(PC4)
6) Compare and contrast the medical and surgical approaches to treatment of ischemic stroke and intracerebral hemorrhage	2(PC2), 6(MK1), 7(MK2)
7) Demonstrate the approach to assessing an acute change in mental status/coma	1(PC1), 2(PC2)
8) Describe the underlying pathophysiology, diagnostic criteria, and common treatment protocols for migraine and other headache syndromes	2(PC2), 6(MK1), 7(MK2)
9) Understand the treatment of acute and chronic epilepsy and status epilepticus	2(PC2), 6(MK1)
10) Assess a patient with acute weakness to localize the lesion to the central nervous system, peripheral nervous system, or neuromuscular junction	1(PC1), 6(MK1)
Process-based	
1) Work effectively within an interprofessional team	8(SBP1)
2) Recognize system error and advocate for system improvement	9(SBP2)
3) Identify forces that impact the cost of health care, and advocate for, and practice cost-effective care	10(SBP3)
4) Transition patients effectively within and across the health delivery systems	11(SBP4)
5) Learn and improve via feedback	14(PBLI3)
6) Have professional and respectful interactions with patients, caregivers and members of the interprofessional team	16(PROF1)
7) Accept responsibility and follow through on tasks	17(PROF2)
8) Exhibit integrity and ethical behavior in professional conduct	19(PROF4)
9) Communicate effectively with patients and caregivers	20(ICS1)
10) Appropriately utilize and complete health records	22(ICS3)

Rotation: Palliative Care

Purpose

The purpose of this elective consult rotation is to expose the resident to the scope and practice of palliative care, including venues of care. They will apply this knowledge to

patient care in determining the best setting for a patient to receive palliative care or hospice.

Content Objectives

- 1) Recognize the signs and symptoms of impending death and care for the imminently dying patient while preparing and supporting the family
- 2) Evaluate and treat patients with acute and chronic pain
- 3) Evaluate and treat patients with dyspnea
- 4) Evaluate and treat patients with constipation
- 5) Evaluate and treat patients with diarrhea
- 6) Evaluate and treat patients with nausea and vomiting
- 7) Evaluate and treat patients with delirium and agitation, including terminal delirium
- 8) Evaluate and treat patients with anxiety and depression
- 9) Lead family meetings with attendings and effectively discuss transitions in goals of care from a curative and/or life-prolonging focus to palliative care
- 10) Demonstrate an understanding of basic ethical issues in end of life care (surrogate decision-making, withholding/withdrawing life-sustaining treatment, artificial hydration/nutrition)

Process Objectives

- 1) Demonstrate shared decision-making with the patient and caregivers
- 2) Use feedback to improve performance
- 3) Demonstrate empathy, compassion, and a commitment to relieve pain and suffering
- 4) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 5) Accept responsibility and follow through on tasks
- 6) Communicate effectively with patients and caregivers
- 7) Communicate effectively in interprofessional teams

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Recognize the signs and symptoms of impending death and care for the imminently dying patient while preparing and supporting the family	1(PC1), 18(PROF3), 20(ICS1)
2) Evaluate and treat patients with acute and chronic pain	1(PC1), 2(PC2)
3) Evaluate and treat patients with dyspnea	1(PC1), 2(PC2), 6(MK1)
4) Evaluate and treat patients with constipation	1(PC1), 2(PC2), 6(MK1)
5) Evaluate and treat patients with diarrhea	1(PC1), 2(PC2), 6(MK1)
6) Evaluate and treat patients with nausea and vomiting	1(PC1), 2(PC2), 6(MK1)
7) Evaluate and treat patients with delirium and agitation, including terminal delirium	1(PC1), 2(PC2), 6(MK1)

8) Evaluate and treat patients with anxiety and depression	1(PC1), 2(PC2), 6(MK1)
9) Lead family meetings with attendings and effectively discuss transitions in goals of care from a curative and/or life-prolonging focus to palliative care	16(PROF1), 18(PROF3), 20(ICS1)
10) Demonstrate an understanding of basic ethical issues in end of life care (surrogate decision-making, withholding/withdrawing life-sustaining treatment, artificial hydration/nutrition)	19(PROF4)
Process-based	
1) Demonstrate shared decision-making with the patient and caregivers	16(PROF1), 18(PROF3), 20(ICS1)
2) Use feedback to improve performance	14(PBLI3)
3) Demonstrate empathy, compassion, and a commitment to relieve pain and suffering	18(PROF3), 20(ICS1)
4) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
5) Accept responsibility and follow through on tasks	17(PROF2)
6) Communicate effectively with patients and caregivers	20(ICS1)
7) Communicate effectively in interprofessional teams	21(ICS2)

Rotation: Pulmonary Medicine

Purpose

The purpose of this consult elective is to provide the resident experience in the diagnosis and management of a broad spectrum of pulmonary diseases encountered in the hospital. Residents participate in the work-up of patients with lung masses, interstitial lung disease, and pleural effusions and with the procedures relevant in these cases. The patient mix also includes those with critical illness on non-MICU services, those with COPD and those with cystic fibrosis.

Content Objectives

- 1) Evaluate patients admitted with exacerbations of cystic fibrosis and begin appropriate initial management (UAMS only)
- 2) Develop a differential diagnosis for pleural effusions, distinguish a transudate from an exudate, and correctly apply further testing and treatment
- 3) Define the diagnostic workup for a lung nodule or mass
- 4) Identify the most common forms of lung cancer, basic stages and implications thereof, and general treatment options
- 5) Describe and recommend treatment of patients hospitalized with acute exacerbations of COPD

- 6) Utilize arterial blood gas and oximetry results to determine the need for supplemental oxygen therapy
- 7) Interpret pulmonary function tests and recognize normal, obstructive, and restrictive patterns
- 8) Recognize and describe common CXR abnormalities such as pleural effusion, lung mass, and consolidation/airspace disease
- 9) Describe and recommend evidence/guideline-based treatment for patients hospitalized with pneumonia (both community-acquired and healthcare-associated)
- 10) Initiate the diagnostic work-up of suspected interstitial lung disease

Process Objectives

- 1) Learn and improve via feedback
- 2) Utilize information technology to find and review any assigned topics or literature relevant to your patients
- 3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 4) Accept responsibility and follow through on tasks
- 5) Communicate effectively with patients and caregivers
- 6) Communicate effectively in interprofessional teams
- 7) Learn to identify the role of a consultant, focus on the key questions or requests being made of the consult team and ensure prompt responsiveness

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Evaluate patients admitted with exacerbations of cystic fibrosis and begin appropriate initial management (UAMS only)	1(PC1), 2(PC2), 3(PC3)
2) Develop a differential diagnosis for pleural effusions, distinguish a transudate from an exudate, and correctly apply further testing and treatment	6(MK1), 7(MK2)
3) Define the diagnostic workup for a lung nodule or mass	2(PC2), 7(MK2)
4) Identify the most common forms of lung cancer, basic stages and implications thereof, and general treatment options	2(PC2), 6(MK2)
5) Describe and recommend treatment of patients hospitalized with acute exacerbations of COPD	2(PC2)
6) Utilize arterial blood gas and oximetry results to determine the need for supplemental oxygen therapy	7(MK2)
7) Interpret pulmonary function tests and recognize normal, obstructive, and restrictive patterns	6(MK1), 7(MK2)

8) Recognize and describe common CXR abnormalities such as pleural effusion, lung mass, and consolidation/airspace disease	6(MK1), 7(MK2)
9) Describe and recommend evidence/guideline-based treatment for patients hospitalized with pneumonia (both community-acquired and healthcare-associated)	2(PC2), 6(MK2), 15(PBLI4)
10) Initiate the diagnostic work-up of suspected interstitial lung	2(PC2), 6(MK2), 7(MK2)
Process-based	
1) Learn and improve via feedback	14(PBLI3)
2) Utilize information technology to find and review any assigned topics or literature relevant to your patients	12(PBLI1), 13(PBLI2), 15(PBLI4), 17(PROF2)
3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
4) Accept responsibility and follow through on tasks	17(PROF2)
5) Communicate effectively with patients and caregivers	20(ICS1)
6) Communicate effectively in interprofessional teams	21(ICS2)
7) Learn to identify the role of a consultant, focus on the key questions or requests being made of the consult team and ensure prompt responsiveness	5(PC5), 8(SBP1), 16(PROF1), 21(ICS2)

Rotation: Research Elective

Purpose

Understanding how to ask and answer clinical questions forms the basis for life-long learning. This rotation, which is not offered at the PGY1 level, introduces the resident to the basic principles of medical research including study design, collection and interpretation of data, and presentation of results. The resident will work with a mentor who will guide him/her through this process. Identification of a suitable mentor is the responsibility of the resident with assistance from his/her advisor and program leadership.

Objectives

- 1) Develop a hypothesis-driven research question
- 2) Utilize available resources to access, review, and collect relevant medical literature
- 3) Critique relevant medical literature
- 4) Write a short research proposal
- 5) Design a research project
- 6) Interpret study results
- 7) Write a research abstract
- 8) Present your research project in an appropriate forum

- 9) Recognize potential ethical issues associated with medical research

Mapping to Reporting Milestones

Objectives	Reporting Milestone(s)
1) Develop a hypothesis-driven research question	6(MK1), 15(PBLI4)
2) Utilize available resources to access, review, and collect relevant medical literature	14(PBLI3), 15(PBLI4)
3) Critique relevant medical literature	6(MK1), 15(PBLI4)
4) Write a short research proposal	14(PBLI3), 17(PROF2)
5) Design a research project	14(PBLI3), 17(PROF2)
6) Interpret study results	14(PBLI3), 17(PROF2)
7) Write a research abstract	14(PBLI3), 17(PROF2)
8) Present your research project in an appropriate forum	17(PROF2), 21(ICS2)
9) Recognize potential ethical issues associated with medical research	19(PROF4)

Rotation: Rheumatology

Purpose

The purpose of this elective is to provide the resident experience in the diagnosis and management of a variety of rheumatologic diseases. In addition, procedures, including joint aspiration and injection, are performed with appropriate supervision. Clinical venues include both ambulatory and inpatient settings.

Content Objectives

- 1) Perform and interpret a musculoskeletal physical exam
- 2) Explain the basic approach to mono- and poly-arthritis
- 3) Explain the basic concepts of treatment for gout and calcium pyrophosphate deposition disease
- 4) Diagnose rheumatoid arthritis
- 5) Diagnose SLE
- 6) Diagnose spondyloarthritis
- 7) Recognize the major types of vasculitis
- 8) Diagnose and manage the patient with fibromyalgia
- 9) Perform knee arthrocentesis, using simulation if necessary
- 10) Apply serologic tests to assist in the diagnosis of rheumatic diseases

Process Objectives

- 1) Learn and improve via feedback
- 2) Utilize information technology to find and review any assigned topics or literature relevant to your patients

- 3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 4) Accept responsibility and follow through on tasks
- 5) Communicate effectively with patients and caregivers
- 6) Communicate effectively in interprofessional teams
- 7) Learn to identify the role of a consultant, focus on the key questions or requests being made of the consult team and ensure prompt responsiveness

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Perform and interpret a musculoskeletal physical exam	1(PC1)
2) Explain the basic approach to mono- and poly-arthritis	2(PC2), 7(MK2)
3) Explain the basic concepts of treatment for gout and calcium pyrophosphate deposition disease	2(PC2), 6(MK1)
4) Diagnose rheumatoid arthritis	1(PC1), 6(MK1), 7(MK2)
5) Diagnose SLE	1(PC1), 6(MK1), 7(MK2)
6) Diagnose spondyloarthritis	1(PC1), 6(MK1), 7(MK2)
7) Recognize the major types of vasculitis	1(PC1), 6(MK1)
8) Diagnose and manage the patient with fibromyalgia	1(PC1), 2(PC2)
9) Perform knee arthrocentesis, using simulation if necessary	4(PC4)
10) Apply serologic tests to assist in the diagnosis of rheumatic diseases	1(PC1), 7(MK2)
Process-based	
1) Learn and improve via feedback	14(PBLI3)
2) Utilize information technology to find and review any assigned topics or literature relevant to your patients	12(PBLI1), 13(PBLI2), 15(PBL4), 17(PROF2)
3) Have professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
4) Accept responsibility and follow through on tasks	17(PROF2)
5) Communicate effectively with patients and caregivers	20(ICS1)
6) Communicate effectively in interprofessional teams	21(ICS2)
7) Learn to identify the role of a consultant, focus on the key questions or requests being made of the consult team and ensure prompt responsiveness	5(PC5), 8(SBP1), 16(PROF1), 21(ICS2)

Rotations: Ward Night Float UAMS and Ward Night Float VA

Purpose

This rotation provides the resident with experience evaluating, stabilizing, and initiating work-up of patients who are newly admitted to non-ICU teams at night and managing acute problems of hospitalized non-ICU patients as nighttime cross-coverage. UAMS and the VA constitute 2 separate rotations for Ward Night Float.

Content Objectives

- 1) Manage a patient with hyperglycemia
- 2) Triage and manage a patient with elevated blood pressure
- 3) Stabilize patients with urgent or emergent medical conditions and transfer to a higher level of care when necessary
- 4) Diagnose and treat a patient with acute pneumonia
- 5) Diagnose and treat a patient with skin/soft tissue infection
- 6) Diagnose the cause of loss of consciousness and differentiate syncope from other etiologies
- 7) Recognize and manage alcohol/benzodiazepine withdrawal
- 8) Manage a patient with acute CHF exacerbation
- 9) Initiate work up for a patient with delirium
- 10) Manage derangements of electrolytes
- 11) Manage a patient with COPD exacerbation
- 12) Perform bedside procedures including paracentesis, lumbar puncture, and thoracentesis

Process Objectives

- 1) Minimize unnecessary care including tests
- 2) Transition patients effectively within and across health delivery systems
- 3) Accept responsibility and follow through on tasks
- 4) Respond to each patient's unique characteristics and needs
- 5) Exhibit integrity and ethical behavior in professional conduct
- 6) Communicate effectively in interprofessional teams
- 7) Appropriately utilize and complete health records, including documentation of cross-cover care
- 8) Utilize clinical reasoning to develop a differential diagnosis

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
Content-based	
1) Manage a patient with hyperglycemia	2(PC2), 6(MK1)
2) Triage and manage a patient with elevated blood pressure	1(PC1), 2(PC2), 6(MK1)

3) Stabilize patients with urgent or emergent medical conditions and transfer to a higher level of care when necessary	2(PC2), 3(PC3), 11(SBP4)
4) Diagnose and treat a patient with acute pneumonia	1(PC1), 2(PC2), 6(MK1), 7(MK2)
5) Diagnose and treat a patient with skin/soft tissue infection	1(PC1), 2(PC2), 6(MK1)
6) Diagnose the cause of loss of consciousness and differentiate syncope from other etiologies	1(PC1), 2(PC2), 7(MK2)
7) Recognize and manage alcohol/benzodiazepine withdrawal	1(PC1), 2(PC2)
8) Manage a patient with acute CHF exacerbation	2(PC2), 6(MK1)
9) Initiate work up for a patient with delirium	1(PC1), 2(PC2), 7(MK2)
10) Manage derangements of electrolytes	2(PC2), 6(MK1)
11) Manage a patient with COPD exacerbation	2(PC2), 6(MK1)
12) Perform bedside procedures including paracentesis, lumbar puncture, and thoracentesis and interpret the results	3(PC3), 4(PC4), 7(MK2)
Process-based	
1) Minimize unnecessary care including tests	7(MK2), 10(SBP3)
2) Transition patients effectively within and across health delivery systems	11(SBP4)
3) Accept responsibility and follow through on tasks	17(PROF2)
4) Respond to each patient's unique characteristics and needs	18(PROF3)
5) Exhibit integrity and ethical behavior in professional conduct	19(PROF4)
6) Communicate effectively in interprofessional teams	21(ICS2)
7) Appropriately utilize and complete health records, including documentation of cross-cover care	22(ICS3)
8) Utilize clinical reasoning to develop a differential diagnosis	3(PC3)

360MULTI-RATER EVALUATION

Instructions: Rate this resident using a scale of 0= never or hardly ever; 1= some of the time; 2= most of the time; 3= all of the time. This resident generally:

- 1) Is frank with patients and caregivers and provides truthful and upfront information as appropriate
- 2) Encourages patients and caregivers to ask questions
- 3) Answers questions asked by patients and caregivers
- 4) Communicates well with other physicians

- 5) Maintains confidentiality
- 6) Makes ethically sound judgments regarding patient care
- 7) Respects the roles of health care staff in patient care
- 8) Demonstrates altruism in putting patient care above personal issues or desires
- 9) Responds to requests, including pages, in a helpful and prompt manner
- 10) Places orders in the electronic medical record in an accurate and timely manner
- 11) Has professional and respectful interactions with patients, caregivers, and members of the interprofessional team
- 12) Accepts responsibility and follows through on tasks
- 13) Responds to each patient's unique characteristics and needs
- 14) Communicates effectively in interprofessional teams
- 15) During the past year, I have worked with this resident
 - a. Less than 1 month
 - b. 1-6 months
 - c. More than 6 months

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
1) Is frank with patients and caregivers and provides truthful and upfront information as appropriate	16(PROF1), 20(ICS1)
2) Encourages patients and caregivers to ask questions	16(PROF1), 20(ICS1)
3) Answers questions asked by patients and caregivers	16(PROF1), 20(ICS1)
4) Communicates well with other physicians	16(PROF1), 21(ICS2)
5) Maintains confidentiality	19(PROF4)
6) Makes ethically sound judgments regarding patient care	19(PROF4)
7) Respects the roles of health care staff in patient care	8(SBP1), 16(PROF1)
8) Demonstrates altruism in putting patient care above personal issues or desires	19(PROF4)
9) Responds to requests, including pages, in a helpful and prompt manner	8(SBP1), 21(ICS2)
10) Places orders in the electronic medical record in an accurate and timely manner	17(PROF2), 22(ICS3)
11) Has professional and respectful interactions with patients, caregivers, and members of the interprofessional team	16(PROF1)
12) Accepts responsibility and follows through on tasks	17(PROF2)

13) Responds to each patient's unique characteristics and needs	18(PROF3)
14) Communicates effectively in interprofessional teams	21(ICS2)

PGY2/3 EVALUATION OF PGY1

Instructions: Rate your intern using a scale of 0= never or hardly ever; 1= some of the time; 2= most of the time; 3= all of the time. This intern generally:

- 1) Recognizes situations requiring urgent/emergent care
- 2) Demonstrates sufficient knowledge to diagnose and treat common conditions requiring hospitalization
- 3) Displays skill in performing procedures
- 4) Prepares for rounds in a timely and efficient manner
- 5) Recognizes the scope of his/her abilities and asks for supervision and assistance as needed
- 6) Works effectively within an interprofessional team
- 7) Communicates with past and future care providers to ensure continuity of care during transitions of care (handoffs, discharges, and transfers)
- 8) Accepts feedback with a positive attitude
- 9) Strives to improve medical knowledge by reading about patients' diseases
- 10) Accepts responsibility and follows through on tasks
- 11) Treats patients and their families with empathy, compassion, dignity, and respect
- 12) Exhibits integrity and ethical behavior in professional conduct
- 13) Answers pages in a timely and professional manner
- 14) Communicates effectively with patients and their families
- 15) Enters notes and orders into the EMR with timeliness and accuracy

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
1) Recognizes situations requiring urgent/emergent care	1(PC1)
2) Demonstrates sufficient knowledge to diagnose and treat common conditions requiring hospitalization	2(PC2), 6(MK1)
3) Displays skill in performing procedures	4(PC4)
4) Prepares for rounds in a timely and efficient manner	1(PC1), 17(PROF2)
5) Recognizes the scope of his/her abilities and asks for supervision and assistance as needed	12(PBLI1), 13(PBLI2)
6) Works effectively within an interprofessional team	8(SBP1)

7) Communicates with past and future care providers to ensure continuity of care during transitions of care (handoffs, discharges, and transfers)	11(SBP4), 21(ICS2)
8) Accepts feedback with a positive attitude	14(PBLI3)
9) Strives to improve medical knowledge by reading about patients' diseases	15(PBLI4)
10) Accepts responsibility and follows through on tasks	17(PROF2)
11) Treats patients and their families with empathy, compassion, dignity, and respect	16(PROF1), 18(PROF3)
12) Exhibits integrity and ethical behavior in professional conduct	19(PROF4)
13) Answers pages in a timely and professional manner	8(SBP1), 19(PROF4), 21(ICS2)
14) Communicates effectively with patients and their families	20(ICS1)
15) Enters notes and orders into the EMR with timeliness and accuracy	17(PROF2), 22(ICS3)

PGY1 EVALUATION OF PGY2/3

Instructions: Rate your resident using a scale of 0= never or hardly ever; 1= some of the time, 2= most of the time; 3= all of the time. This resident generally:

- 1) Gathers subtle, sensitive, and complicated information that may not be volunteered by the patient
- 2) Demonstrates sufficient knowledge to diagnose and treat a broad spectrum of common and complex conditions requiring hospitalization
- 3) Stabilizes patients with urgent or emergent medical conditions and transfers to a higher level of care when necessary
- 4) Displays skill in teaching/supervising procedures
- 5) Minimizes unnecessary care including tests
- 6) Recognizes the scope of his/her abilities and asks for supervision and assistance as needed
- 7) Advocates for safe patient care and optimal patient care systems
- 8) Manages the interprofessional team
- 9) Actively seeks feedback from all members of the healthcare team
- 10) Integrates teaching, feedback, and evaluation with supervision of interns and students
- 11) Treats patients and their families with empathy, compassion, dignity, and respect
- 12) Exhibits integrity and ethical behavior in professional conduct
- 13) Modifies the differential diagnosis and care plan based on clinical course and data as appropriate
- 14) Role models effective communication skills in challenging situations

Mapping to Reporting Milestones

Objective	Reporting Milestone(s)
1) Gathers subtle, sensitive, and complicated information that may not be volunteered by the patient	1(PC1), 20(ICS1)
2) Demonstrates sufficient knowledge to diagnose and treat a broad spectrum of common and complex conditions requiring hospitalization	2(PC2), 6(MK1)
3) Stabilizes patients with urgent or emergent medical conditions and transfers to a higher level of care when necessary	1(PC1), 2(PC2), 3(PC3), 11(SBP4)
4) Displays skill in teaching/supervising procedures	4(PC4)
5) Minimizes unnecessary care including tests	7(MK2), 10(SBP3)
6) Recognizes the scope of his/her abilities and asks for supervision and assistance as needed	12(PBLI1), 13(PBLI2)
7) Advocates for safe patient care and optimal patient care systems	9(SBP2)
8) Manages the interprofessional team	8(SBP1), 16(PROF1)
9) Actively seeks feedback from all members of the healthcare team	14(PBLI3), 16(PROF1), 21(ICS2)
10) Integrates teaching, feedback, and evaluation with supervision of interns and students	8(SBP1), 15(PBLI4)
11) Treats patients and their families with empathy, compassion, dignity, and respect	16(PROF1), 18(PROF3)
12) Exhibits integrity and ethical behavior in professional conduct	19(PROF4)
13) Modifies the differential diagnosis and care plan based on clinical course and data as appropriate	15(PBLI4)
14) Role models effective communication skills in challenging situations	20(ICS1), 21(ICS2)

AMBULATORY DIDACTIC CURRICULUM

During the ambulatory block week, 2 half-day sessions are dedicated to didactic sessions under the direction and leadership of Dr. Alice Alexander. The curriculum consists of the following:

- 1) Team-Based Learning Sessions: incorporated pre-reading assignments (Annals “In the Clinic” articles, relevant clinical guidelines), MKSAP questions for individual readiness/group readiness assessment tests, and clinical cases designed to teach more advanced nuances of management of common outpatient conditions. The small group format allows for spirited discussion. Topics include:
 - a. Chronic Pain
 - b. Influenza and Pneumonia
 - c. Asthma and COPD
 - d. Hyper- and hypothyroidism, thyroid nodules
 - e. Rheumatoid arthritis and gout
 - f. GERD/dyspepsia/irritable bowel syndrome
 - g. Approach to “elevated liver function tests”
 - h. Dermatology for internists
- 2) Sessions in the Simulation Center: Chief Residents, in collaboration with subspecialty experts from within the Department of Internal Medicine as well as from other departments (Anesthesiology, ENT, Radiology, and Neurology), lead these sessions, which occupy some of the didactic time during the ambulatory week. The sessions involve 10-12 residents at a time, fostering a small group dynamic that emphasizes teamwork and communication. The curriculum has included the following titles: BLS/ACLS/Crash Cart, Ventilator Management, Intubation/Difficult Airway, Airway, Ultrasound, Procedures, Tracheostomy Management, and Cumulative Cases. The last in this list incorporates multiple sequential emergency clinical situations, during which residents work together to apply clinical reasoning and subsequent interventions to save the “patient”.
- 3) EBM Sessions: groups rotated between weekly assignments of 1) asking a clinical question in PICO format; 2) conducting a search of the medical literature for an article that best answered the question; and 3) performing a critical appraisal of the article using a standardized appraisal tool. Appraisal summaries were posted on the IM residency blog (www.uams-im.blogspot.com).
- 4) Quality Improvement and Patient Safety: four hour-long lectures (with an interactive discussion component) designed to teach the basics of QI and PS. Sessions include:
 - a. Introduction to Quality Improvement – stakeholders, types of quality measures, unintended consequences
 - b. Introduction to Patient Safety – “Swiss cheese” model, root cause analysis, grading interventions
 - c. Cognitive Error – approach to heuristics, how to avoid common cognitive “traps”
 - d. Understanding the Model for Improvement – explaining the PDSA cycle; how to write an aim statement and start a QI project
- 5) Self-directed learning: utilizes Johns Hopkins Ambulatory Internal Medicine modules (ilc.peaconline.org) for “fill-in” topics (if a resident missed one of the TBLs) and for the osteoporosis module. Interns are required to do six modules during the year.

- 6) High Value Care Curriculum: utilizes existing ACP curriculum on high-value, cost-conscious care (5 hour-long lectures); supplemented this with a discussion about practical issues surrounding the ACA implementation in Arkansas.
- 7) Miscellaneous
 - a. Workshop on agenda setting in the clinical visit – increasing resident efficiency and promoting good communication skills
 - b. Billing and coding in the outpatient setting – 2-part workshop with hour-long introductory talk and then “real-world experience” follow up with anonymized charts

APPENDIX: REPORTING MILESTONES

1. Gathers and synthesizes essential and accurate information to define each patient’s clinical problem(s) (PC1)
2. Develops and achieves comprehensive management plan for each patient (PC2)
3. Manages patients with progressive responsibility and independence (PC3)
4. Skill in performing procedures (PC4)
5. Requests and provides consultative care (PC5)
6. Clinical knowledge (MK1)
7. Knowledge of diagnostic testing and procedures (MK2)
8. Works effectively within an interprofessional team (e.g. peers, consultants, nursing, ancillary professionals and other support personnel) (SBP1)
9. Recognizes system error and advocates for system improvement (SBP2)
10. Identifies forces that impact the cost of health care, and advocates for, and practices cost-effective care (SBP3)
11. Transitions patients effectively within and across health delivery systems (SBP4)
12. Monitors practice with a goal for improvement (PBLI1)
13. Learns and improves via performance audit (PBLI2)
14. Learns and improves via feedback (PBLI3)
15. Learns and improves at the point of care (PBLI4)
16. Has professional and respectful interactions with patients, caregivers, and members of the interprofessional team (e.g. peers, consultants, nursing, ancillary professionals, and support personnel) (PROF1)
17. Accepts responsibility and follows through on tasks (PROF2)
18. Responds to each patient’s unique characteristics and needs (PROF3)
19. Exhibits integrity and ethical behavior in professional conduct (PROF3)
20. Communicates effectively with patients and caregivers (ICS1)
21. Communicates effectively in interprofessional teams (e.g. peers, consultants, nursing, ancillary professionals, and other support personnel) (ICS2)
22. Appropriately utilizes and completes health records (ICS3)