FAMILY MEDICINE SUBINTERNSHIP - FPM 441

Location: UCSD Hillcrest

Course Director: Esmat Hatamy, MD

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Welcome to the Family Medicine Sub-Internship!

The goal of this four week rotation is to educate students about the unique approach to care of family medicine patients in the hospital setting on a Family Medicine Inpatient Service. In addition to caring for medical patients, students will have the opportunity to follow patients in labor, and to participate in deliveries and the postpartum care of mothers and their newborns. Thus, we hope to provide an experience that illustrates the breadth of practice provided in the hospital by family physicians and emphasizes the importance of the continuity relationship while caring for patients within the context of their families and community. The emphasis of the clerkship will be on learning a process of caring for the whole patient despite the disruption of hospitalization.

Clinical Experiences:

Students will be expected to assume primary responsibility for patient care, acting at a sub intern level with direct supervision by Family Medicine faculty and senior residents. The student will not share patients with a PGY-1 resident. Each ward team consists of a faculty attending physician, a third year Family Medicine resident, 1-2 Family Medicine interns and a 2nd or 3rd year night float. The student is expected to work up 1-2 patients per day and follow a total of up to 5 patients at a time. We estimate that during this four week rotation, the student will be responsible for the complete admission history and physical, progress notes and discharge summaries on a minimum of 12 patients. Call is overnight, occurs approximately every 4-5 days (total of 6 call nights) and is taken with the night float or covering resident. This may include weekend call though the student is guaranteed one day off per week as well as one full weekend during the month. The student should not be more than 30 continuous hours; on-site duty, including inhouse call, not to exceed 24 consecutive hours (may remain on duty up to 6 additional hours for didactics, patient's transfer care and to maintain continuity of med/surg care); there should be 10-hour rest period between shifts.

This course is offered in UCSD family medicine residency training site at UCSD Medical Center in Hillcrest

The experiences include morning teaching rounds, lunch time teaching and didactic sessions in addition to direct patient care.

Orientation to the site:

UCSD MEDICAL CENTER, HILLCREST

200 W Arbor Dr, San Diego, CA 92103-1911

<u>UCSD students:</u> The student will meet with the inpatient team for morning rounds at 7:30 am on the first day of the clerkship. Page the Family Medicine on call pager at (619) 290-5767 to find out where the team is meeting.

<u>Visiting students:</u> You should have already received information about parking and signed the electronic security agreement.

When you arrive:

- 1. Call the computer Help desk to set up your computer access (37474)
- 2. Go to the Hillcrest Security office to get your badge.
- 3. Complete the EPIC training sessions (in previous e mail)

An orientation will be scheduled with course director (this is for all students) before (of at the beginning of) the rotation.

In addition to the Family Medicine Sub-Internship Learning Objectives, Orientation Materials and evaluation forms contained in this packet, the following materials will be provided to you on the first day of the clerkship:

- 1. Family Medicine Inpatient Service Guidelines
- 2. Family Medicine Protocol for Direct Hospital Admissions
- 3. Departments of Internal Medicine and Family Medicine Unassigned Admissions Policy
- 4. Pager
- 5. Call room key and directions to call room

On the first morning, the senior resident on the service will assign patients to the student and work out a call schedule for the month.

Note: Nearly Similar course is offered in UCSD Family Medicine residency at: **SCRIPPS MEMORIAL HOSPITAL, CHULA VISTA**

Additional orientation guidelines will be provided to students choosing this site. Please call Pat Myers the week before the rotation to receive further instructions.

Learning Objectives:

Participant Learning:

After your four-week rotation on the inpatient family medicine wards, you should be able to demonstrate competence in the following:

Knowledge:

- 1. Knowledge related to diagnosis and management of the common presenting concerns in inpatient family medicine including formulating a reasonable and therapeutic management plan for the patient.
- 2. Knowledge related to normal labor and delivery and management of the most common obstetric problems of a low-risk pregnant patient presenting to labor and delivery.
- 3. Knowledge related to caring for the postpartum mother-infant couplet including supporting and encouraging breastfeeding, managing the most common postpartum problems, performing normal newborn exam and managing the most common newborn problems.

Patient Care/Clinical Skills:

- 1. Ability to conduct a focused history and physical exam pertinent to the patient's presenting concerns.
- 2. Present new admissions and follow up care of existing inpatients on morning rounds in an organized manner.
- 3. Provide appropriate preventive medicine and screening to patients.
- 4. Apply bio-psychosocial model to care of family medicine inpatients.
- 5. Engage in the care of at least one family medicine obstetrical patient and delivery as well as postpartum care of the maternal-infant couplet.
- 6. Be thoughtful about situations when consultation and referral are indicated and talk to senior resident or ward attending.
- 7. Document a thorough inpatient notes that include differential diagnosis and treatment plans.

Interpersonal and Communication Skills:

- 1. Collaborate well with other members of the family medicine team and also others such as case manager, consulting teams, nurses, physical therapist, dietician, social worker, and other health care professionals.
- 2. Effective listening, questioning and explanatory skills in gathering information from patients and in providing information to patients, families and other health care providers.

Professionalism:

- 1. Sensitivity and responsiveness of the problems of patients at all stages of life.
- 2. Consistent respect, compassion, honesty and integrity in all professional activities.

Practice-based Learning and Improvement

1. Improvement and maintenance of his/her knowledge base and competence through on-line literature searches.

System-Based Practice:

1. Utilize available information and computer technology to care for family medicine inpatients.

Subject Matter to be covered During the Clerkship:

1. Management of Common Adult Medical Problems including: (student may or may not see all these cases)

Pneumonia

Asthma/COPD Exacerbation

Pyelo-nephritis/Urosepsis

Acute and Chronic Renal Failure

Congestive Heart Failure

End Stage Liver Disease

Gastrointestinal Bleeding

Cellulitis/diabetic foot and decubitus ulcer.

Altered Mental Status/Delirium

Alcohol withdrawal syndrome

Electrolyte Imbalances, including Hyponatremia

Pre- op evaluation.

Anti-coagulation management

Management of Sepsis

2. Management of Common Obstetric Problems including:

Normal Labor and Delivery

Abnormal Labor Patterns

Vaginal Bleeding

Decreased Fetal Movement

Rule Out Labor

Premature Rupture of Membranes

Pregnancy Induced Hypertension/Preeclampsia

Postdates Pregnancy

Induction of Labor

Group B Strep Positive State

Chorioamnionitis

3. Management of Common Postpartum Problems including:

Routine Postpartum Care

Postoperative Care after C-section Vaginal Bleeding Fever/Postpartum Endometritis Lactation Issues

4. Management of Common Newborn Problems including:

Routine Newborn Care
Tachypnea
Congenital Hip Dysplasia
Hyperbilirubinemia
Problems with Breastfeeding
Newborn Circumcision
Evaluation of Suspected Sepsis
Common new born skin rashes.

For learning material please check the UCSD residency/inpatient web site at:

http://familymedresidency.ucsd.edu/elective.html

https://ishare.ucsd.edu/sites/cwfs/FamMedClinics/Forms/AllItems.aspx

http://annals.org/

http://www.aafp.org/online/en/home/publications/journals/afp.html

Student Responsibilities:

Students will be responsible for a complete history and physical examination on each of his/her patients as well as all of the daily follow-up care and progress notes. The sub-intern will present all of their patients on morning rounds and is responsible for any follow-up action required. The student is responsible for signing out their patients and any outstanding tests to the night float on a daily basis unless the student remains in the hospital for call. Any orders must be reviewed and approved by the senior resident prior to being implemented. The senior resident will also confirm the history and physical exams that the student obtains. Notes will similarly be reviewed and signed off by the senior resident and faculty attending physician. As much as possible, the sub intern will assume a similar level of responsibility for patient care as the interns on the service.

Educational Requirements:

Students will participate in teaching sessions during morning rounds on a daily basis. During the four week block, the student will be expected to give one 30 minute presentation on a topic pertinent to inpatient Family Medicine during attending rounds. In addition, students are encouraged to give more focused presentations at least weekly on a topic pertinent to the care of a patient on the service as well as demonstrate ongoing self-directed learning with respect to the patients under their care. Students are to attend the weekly Wednesday afternoon

Family Medicine Residency didactic sessions as well as Family Medicine Grand Rounds and Morbidity Mortality conferences.

Evaluation:

Students will be evaluated by the supervising senior resident, night float and attending on the service. Additional informal input may be requested from interns on the service. A copy of the evaluation form will be given to the student at orientation. Honors will be given to the students performing in the top 10-15% of their peer group. Usually, students need to perform at the outstanding level on the composite evaluation to receive an honors grade. Students must perform at or above the median level in order to pass the rotation. Students and supervising residents and faculty are encouraged to meet on a weekly basis to review expectations and to give feedback about the rotation and the student's performance.

For unethical or unprofessional discretions that could result in "failure," please see the Policy on the Evaluation of Professionalism in the Advisor and Student Handbook."

Medical students must complete course and faculty (attending and residents) evaluations of this and all School of Medicine courses in order to receive a grade. The identity of individual students will not be shared with the course instructors.

The input will be used to modify the clerkship in order to improve the educational experience.

Students are encouraged to contact the course director halfway through the rotation and on the final Friday of the clerkship in order to review the student's experience. You should also contact the course director with any concerns or needs that should arise during the course of the month.

Please address any additional questions to Dr. Hatamy and Ms. Melissa Wahl