

Hospital Medicine

Description

The goal of the Internal Medicine rotation is to provide learning opportunities that will enable residents to develop skills required for the care the hospitalized adult patient.

Objectives

While on this rotation, residents will develop the following competencies:

Family Medicine Expert

- Recognizes and respond appropriately to urgent and emergent conditions in adults (ADU3)
 - Examples May include but not limited to: GI Bleed, Respiratory Distress, Undifferentiated Shock, Acute Coronary Syndromes, Cardiac Arrest
- Performs patient-centered clinical assessment and manages adults presenting with common (key) conditions (ADU4)
 - Common Examples Include: Heart Failure, COPD, Respiratory Infections, Anemia, Kidney Disease, Delirium, Electrolyte Abnormalities, Decompensated Cirrhosis, Stroke
- Demonstrates an effective approach to advance care planning (PAL2)
- Performs family medicine specialty-appropriate procedures to meet the needs of individual patients (ME5)
 - Examples Include: Endotracheal Intubation, Paracentesis, Thoracocentesis, Lumbar Puncture, Joint Aspirations, Point-of-care Ultrasound (POCUS)

Communication

- Elicits and synthesizes accurate and relevant information from, and perspectives of, patients and their families (CM2)
- Shares health care information and plans with patients and their families (CM3)
- Documents and shares written and electronic information about the medical encounter to optimize clinical decision-making, patient safety, confidentiality, and privacy (CM5)

Collaborator

- Works effectively with others in a collaborative team model (CL1)
 - Examples to demonstrate this could include attendance in multi-disciplinary rounds, regular communication with nursing and allied health professionals, supporting co-residents and staff.
- Cultivates and maintains positive working environments through promoting understanding, managing differences, minimizing misunderstandings and mitigating conflicts (CL2)

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- Recognizes and facilitates the necessary transitions in care with other colleagues in the health professions, including but not limited to shared care, and/or hand over care to enable continuity and safety (CL3)
 - Examples could include safe handover to colleagues on-call or to individuals who will be involved in the care of a patient in the community.

Leader/Manager

- Engages in the stewardship of health care resources (LD2)
 - Examples include carefully considering the tests and investigations ordered for patients (e.g. not ordering daily laboratory investigations on patients who are medically stable), considering Choosing Wisely Canada recommendations.

Health Advocate

- Respond to an individual patient's health needs by advocating with the patient within and beyond the clinical environment (HA1)
 - Examples could include liaising with allied health or community resources to ensure that the patient's health needs are met

Scholar

- Integrates best available evidence into practice with consideration given to context, epidemiology of disease, multi-morbidity, and complexity of patients (SC2)
 - Examples to demonstrate this could include presentation at teaching rounds, use of evidence-based tools, consideration of patient context with best available evidence.

Professional

- Demonstrates a commitment to patients through clinical excellence and high ethical standards (PR1)
 - Examples include clear communication with staff regarding absences and non-clinical commitments, timely attendance with regards to clinical duties, responsiveness while on-call
- Demonstrates a commitment to society by recognizing and responding to societal expectations in health care (PR2)
- Demonstrates a commitment to reflective practice (PR5)
 - Examples could include demonstrating self-directed reading around clinical cases, presentations during team rounds, use of feedback provided by the clinical team

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Entrustable Professional Activities

- F3: Facilitate and manage care transitions
- C1: Assess, manage, and follow up adults presenting with undifferentiated symptoms and common (key) conditions
- C2: Manage and follow up adults with common chronic conditions and multiple comorbidities
- C6: Provide palliative and end-of-life care
- C7: Perform common family medicine procedures
- C8: Provide expert advice and obtains consultation for patients
- C10: Determine when a patient requires admission and in-patient hospital care
- C11: Assess and appropriately manage medical patients in hospital
- C12: Recognize and provide initial management of medically unstable patients in the hospital setting

Assessments:

- Field notes
- In-training Assessment Report (ITAR)