

INTERNAL MEDICINE ROTATION PLAN

NAME OF ROTATION: **IM Ambulatory Medicine**

FOCUS OF THIS ROTATION

- This rotation provides PGY 2-3 Internal Medicine residents with experience in providing Internal Medicine consultation for patients with more complex clinical problems in the Ambulatory clinics.
- Completion of all goals is expected by the end of the PGY 3 year and will be accomplished through ongoing clinical exposure, participation in the formal academic curriculum and personal learning strategies. Residents are encouraged to prioritize goals during their initial focused clinical exposure to this discipline.

CBD stage(s) for this rotation:

- COD

Length of this rotation:

- 1 block

PGY Level(s) for this rotation:

- PGY2
- PGY3

Locations for rotation:

- SHSC
- SMH
- SHS (MSH)
- UHN-TGH
- UHN-TWH
- WCH

Required clinical training experiences included in this rotation (Core stage):

- COD 1.2. Ambulatory care: clinic and/or day hospital. This must include experience with a broad spectrum of conditions as well as patients with complex disorders
- COD 1.4. Providing preoperative assessment and care plan for patients scheduled for surgery.

Optional clinical training experiences included in this rotation (Core stage):

- COD 4.2. Internal Medicine for specific populations
 - COD 4.2.1 Care for vulnerable/marginalized populations
- COD 4.4. Methods of delivery of internal medicine care
 - COD 4.4.1. Telehealth
 - COD 4.4.2. Interprofessional ambulatory care.
- COD 4.5 Other specialty areas relevant to Internal Medicine

Other training experiences included in this rotation (Core stage):

- COD 5.1. Training in point-of-care ultrasound

EPAs Mapped to this rotation:	Total # of EPAs 4+ per block
COD 1 Assessing, diagnosing, and managing patients with complex or atypical acute medical presentations	1
COD 2A Assessing and managing patients with complex chronic conditions: Part A: Assessment, Diagnosis, and Management.	1
COD 2B Assessing and managing patients with complex chronic conditions: Part B: Assessment, Diagnosis,	1
COD 3A Providing internal medicine consultation to other clinical services: Part A: Patient Assessment and Decision-Making	1
COD 3B Providing internal medicine consultation to other clinical services: Part B: Written Communication:	0-1
COD 3C Providing internal medicine consultation to other clinical services: Part C: Oral Communication	0-1
COD 5 Performing the procedures of Internal Medicine	Do whenever possible
COD 7 Discussing serious and/or complex aspects of care with patients, families, and caregivers	0-1 (can do)
COD 8 Caring for patients who have experienced a patient SAFETY INCIDENT	Do whenever possible
COD 10 Implementing health promotion strategies in patients with or at risk for disease	0-1 (can do)

	Other assessments during this rotation:	Tool Location / Platform (e.g. POWER, Entrada):
1.	ITAR	POWER

	Key Objectives for this Rotation:	CanMEDS Role(s):
	Provide a robust differential diagnosis for a wide variety of complex and/or undifferentiated medical conditions in an efficient, prioritized, and hypothesis driven fashion.	Medical Expert
	Demonstrate consultancy skills in the assessment and management of patients with acute and/or chronic presentations of complex general internal medical problems in the ambulatory setting.	Medical Expert
	Complete, independently, technical procedures commonly required in the management of patients on an internal medicine ambulatory service.	Medical Expert
	Demonstrate skills in writing/dictating patient consultation and follow-up letters and specific oral or written communication with other providers as required which meet the needs of the relevant health care providers.	Communicator Collaborator
	Demonstrate time management skills to effectively provide patient care in a timely and sustainable fashion.	Leader
9.	Follow up investigations ordered and counsel patients about the results, as well as manages any communication from patients between visits.	Leader
7.	Identify socioeconomic and psychosocial barriers to equitable patient care and develops plans to overcome them (including for patients with no health care coverage and/or no drug coverage).	Health Advocate
8.	Identify opportunities for health promotion and counsel patients effectively on these (e.g. smoking, alcohol cessation).	Health Advocate
9	Use self-reflection to promote stewardship in their practice.	Professional

Royal College Internal Medicine Competencies emphasized on the Ambulatory Medicine rotation.
Numbers refer to items identified in the Royal College Competencies document

Symptoms

- Abdominal pain
- Chest pain
- Dyspnea
- Falls
- Fatigue and weakness
- Fever
- Gastrointestinal bleeding
- Peripheral arterial disease and edema
- Syncope/loss of consciousness
- Weight loss

Disorders

Demonstrates a prioritized differential diagnosis and evidence based approach to the investigation and management of a wide variety of clinical problems including:

- Acute and chronic renal failure and electrolyte disorders
- Anemia and cytopenias
- Cellulitis
- CHF
- Cirrhosis
- COPD
- Diabetes (and its complications)
- Gout
- Hypertension (and its complications)
- Pneumonia
- Renal failure (acute and chronic)
- Thromboembolic disease
- Thyroid disease
- Urinary tract infections/urosepsis
- Peri-operative medicine Peri-operative management of hypertension, heart, lung, metabolic, diabetes mellitus, adrenal insufficiency and kidney diseases 1.4.13.2.1.

Investigations

Be able to perform in a safe and effective manner, with support and supervision as needed and be able to interpret the results of:

- Arterial puncture for blood gas
- Knee aspiration
- Lumbar puncture
- Paracentesis
- Thoracentesis

Be able to order and interpret each of the following:

- Pre-operative medical risk evaluation including comparing and contrasting peri-operative risk indices
- Peri-operative diagnostic tests

Demonstrates accurate interpretation of: EKGs; Chest radiographs; Blood Gas Results

Therapies

Integrate knowledge of the indications/contraindications, side-effects and pharmacokinetics of the following therapies in the care of patients in an ambulatory setting:

- Use of antibiotics
- Use of analgesics and other medications for symptom management
- Use of anticoagulants and anti-platelet agents 1.4.13.2.2.
- Use of antihypertensive medications
- Use of diuretics and other heart failure therapies
- Use of antihyperglycemic medications

Integrate knowledge of the indications/contraindications, side-effects and pharmacokinetics of the following therapies in the care of patients perioperatively:

- Use of anticoagulants and anti-platelet agents 1.4.13.2.2.
- Prophylaxis for infection, including endocarditis prophylaxis 1.4.13.2.3.
- Prophylaxis for venous thromboembolism 1.4.13.2.4.