

Name of rotation: Western Maryland AHEC **Division:** General Internal Medicine

Course Director: Theresa M. Socha **Site(s):** Various practice sites

Duration of rotation: one month only
 2 weeks possible but not preferred

General description of the rotation including educational purpose, rationale or value:

The resident will see a wide range of patients in a rural general internal medicine practice. The resident will see and evaluate the patients alone then review the case with the faculty member and then see the patient together. The goal is to effectively and efficiently evaluate and manage patients being medically appropriate, cost-conscious and ethical. The majority of the work is on an outpatient basis. This general medicine rotation offers sites that range from the medium sized city of Hagerstown, to the small city of Cumberland to the small town of Oakland. No cost housing is available at all locations. Please contact the Western Maryland AHEC at 301-777-9150 extension 107 for more information or tmsocha@allconet.org. See the Western Maryland AHEC website at www.allconet.org/ahec.

Resident responsibilities, including interns and residents:

The primary responsibility is to see patients in a private office setting. Secondary responsibility is to make nursing home rounds, hospital admissions, consults and house calls.

Educational Objectives: An expanded version of the competencies is listed under Core Competencies in Internal Medicine. Those listed here are specific to this rotation. Since residents may choose this elective during any year of training, PGY-1 goals and objectives are distinct for those for upper level residents, and PGY-2 and 3 goals and objectives are similar.

During this rotation, the PGY-1 resident will:

Patient Care

1. Be exposed to a variety of patients in a rural underserved setting.
2. Become involved in all aspects of the patient's care, including meeting with consultants and observing procedures.
3. Learn the special needs of nursing home patients (some sites).

Medical Knowledge – See Core Competencies

Practice-Based Learning

1. Learn practice management in a private setting.

Interpersonal and Communication Skills – See Core Competencies

Professionalism – See Core Competencies

System-Based Practice – See Core Competencies

1. Develop a close working relationship with primary care practitioners and subspecialists in the AHEC system.
2. Become involved in hospital committees.

During this rotation, the PGY-2 or 3 resident will:

Patient Care

1. Be exposed to a variety of patients in a rural underserved setting.
2. Initiate evaluation and management of all aspects of the patient's care, including meeting with consultants and observing procedures.
3. Learn the special needs of nursing home patients (some sites).

Medical Knowledge – See Core Competencies

Practice-Based Learning

1. Learn practice management in a private setting, including billing, coding, telephone triage, and other business and quality assurance practices.

Interpersonal and Communication Skills – See Core Competencies

Professionalism – See Core Competencies

System-Based Practice – See Core Competencies

1. Develop a close working relationship with primary care practitioners and subspecialists in the AHEC system.
2. Attend hospital committee meetings and understand the dynamic role of the practitioner and the institution in this rural setting.

Check all principle teaching methods used during this rotation:

<input checked="" type="checkbox"/>	Attending teaching rounds	<input type="checkbox"/>	Interdisciplinary rounds
<input checked="" type="checkbox"/>	Patient management discussions	<input checked="" type="checkbox"/>	Small group discussions
<input type="checkbox"/>	Conferences specific to rotation	<input checked="" type="checkbox"/>	Beside clinical rounds
<input checked="" type="checkbox"/>	Individual instruction of procedures	<input checked="" type="checkbox"/>	Review of diagnostic studies, including radiology
<input type="checkbox"/>	Other: _____		

Describe the most important educational content, including the mix of diseases, patient characteristics, types of clinical encounters, procedures and services:

The resident will see a mix of teaching cases including:

1. Present for initial evaluation and follow-up care.
2. Have classic internal medicine problems, e.g., hypertension, obesity, diabetes and heart disease.
3. Require routine wellness and preventive health care.
4. Have particular problems related to office gynecology, geriatrics, endocrinology, hematology/oncology and rheumatology.
5. Reside in nursing homes.

Check the principal ancillary education materials used:

<input type="checkbox"/>	Reading lists	<input type="checkbox"/>	Pathologic material
<input type="checkbox"/>	Radiologic studies	<input type="checkbox"/>	Other noninvasive studies
<input type="checkbox"/>	Handouts on relevant topics	<input type="checkbox"/>	Articles from the literature
<input checked="" type="checkbox"/>	Other: Personal library, hospital computer, hands-on experience	<input type="checkbox"/>	Case studies

Methods used to evaluate the resident and the rotation:

<input checked="" type="checkbox"/>	Evaluation of residency performance and professionalism
<input checked="" type="checkbox"/>	Evaluation of attending teaching skills and other attributes
<input checked="" type="checkbox"/>	Rotation assessment by resident
<input checked="" type="checkbox"/>	Observation of resident's clinical competency
<input checked="" type="checkbox"/>	Observation of resident's leadership and teaching skills
<input checked="" type="checkbox"/>	Review of the resident's history/physical exam, progress notes and documentation of procedures in the chart
<input type="checkbox"/>	Resident's attendance of rounds and conferences monitored
<input type="checkbox"/>	Other: _____

Identify strengths and limitations specific to the resources of the sponsoring institution:

Strengths: Working with faculty who have years of experience teaching students and residents, beautiful rural setting, friendly and supportive office staff. A unique practice that is very busy and provides a multitude of learning experiences. Excellent four season recreational area.

Limitations: Practice is in internal medicine and geriatrics, therefore, appropriate only for internal medicine residents or family practice residents wanting an IM rotation.

The resident and faculty members of the Postgraduate Education Committee reviewed and edited the content of this curriculum at its meeting on 7/18/07.