

Name of rotation: Hypertension

Division: Cardiology
Section: Hypertension

Course Directors: Elijah Saunders, M.D.
Wallace Johnson, M.D.

Site(s): FPO, UMMS, Community

Duration of rotation: one month only
 2 weeks possible

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

The rotation takes place in the ambulatory setting. The main goal is to expose residents to a large population of hypertensive individuals through ambulatory as well as inpatient consultations. The resident will become familiar with medications and their side effects as well as proper evaluation for secondary hypertension.

Resident responsibilities, including interns and residents:

Responsibilities include ambulatory evaluation through history and physical, deciding drug regimens, assessing control and adjusting as needed. In addition, the resident learns to evaluate laboratory data for end organ damage and to evaluate for secondary causes of hypertension.

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. Evaluate for secondary causes by requesting the appropriate tests.
2. Manage hypertension in cost-effective manner.

Medical Knowledge

1. List common antihypertensive agents, dosage and side effects and discuss the evidence for their efficacy in various patient groups.
2. Detail cardiovascular risk factors and their short and long term effects.

Practice-Based Learning

1. Discuss important hypertension clinical trials.

Interpersonal and Communication Skills – See Core Competencies

Professionalism – See Core Competencies

System-Based Practice – See Core Competencies

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

Patient Care

1. Describe understanding of pathophysiologic mechanisms by evaluating patients appropriately for secondary causes of hypertension.
2. Manage hypertension in cost-effective and independent manner.

Medical Knowledge

1. Expound on pathophysiologic mechanisms of common antihypertensive agents, dosage and side effects and discuss the evidence for their efficacy in various patient groups.
2. Discuss the diagnostic and therapeutic implications of cardiovascular risk factors.

Practice-Based Learning

1. Discuss important hypertension clinical trials.

Interpersonal and Communication Skills – See Core Competencies

Professionalism – See Core Competencies

System-Based Practice – See Core Competencies

Check all principle teaching methods used during this rotation:

- | | | | |
|-------------------------------------|---|-------------------------------------|--|
| <input checked="" type="checkbox"/> | Attending teaching rounds (amb setting) | <input type="checkbox"/> | Interdisciplinary rounds |
| <input checked="" type="checkbox"/> | Patient management discussions | <input checked="" type="checkbox"/> | Small group discussions |
| <input checked="" type="checkbox"/> | Conferences specific to rotation | <input type="checkbox"/> | Bedside clinical rounds |
| <input type="checkbox"/> | Individual instruction of procedures | <input checked="" type="checkbox"/> | Review of diagnostic studies, including radiology, nephrology and cardiology |
| <input checked="" type="checkbox"/> | Other: Application of the technique of ambulatory BP monitoring | | |
| <input checked="" type="checkbox"/> | Other: Participation in clinical drug trials | | |
| <input checked="" type="checkbox"/> | Other: In-hospital consultation on patients from the Section of Hypertension admitted to UMMC | | |

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

The resident will be exposed to various methods to evaluate and treat patients with hypertension, in addition to the complications of hypertension. Patients are seen in both the private and clinic setting, giving the resident the opportunity to see patients from many socioeconomic groups. Patient subtypes will include those with mild to severe hypertension and those with hypertension and concomitant diseases and many African-Americans.

Check the principal ancillary education materials used:

- | | | | |
|-------------------------------------|-----------------------------|-------------------------------------|------------------------------|
| <input checked="" type="checkbox"/> | Reading lists | <input type="checkbox"/> | Pathologic material |
| <input type="checkbox"/> | Radiologic studies | <input checked="" type="checkbox"/> | Other noninvasive studies |
| <input checked="" type="checkbox"/> | Handouts on relevant topics | <input checked="" type="checkbox"/> | Articles from the literature |
| <input type="checkbox"/> | Other: _____ | <input checked="" 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 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 include 1) intensity of work with patients whose pathophysiology is highly prevalent in the resident's medical experience, 2) close one-on-one preceptoring, 3) ambulatory emphasis. Limitations are minimal.

Clinics:

<u>Name</u>	<u>Location</u>	<u>Day</u>	<u>Time</u>
Hypertension	FPO	Monday-Friday	8:30 am - 5:00 pm

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.