

Name of rotation: **Psychiatry Consultation Liaison**

Department: **Psychiatry**

Course Director: **Mark Ehrenreich, M.D.**

Site(s): **UMH & VA**

Duration of rotation: **one month only**
 2 weeks possible

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

The Consultation-Liaison (CL) Psychiatry service provides psychiatric consultation to the medical-surgical inpatients at the University Hospital, the Baltimore VA, and Shock Trauma as well as outpatients in the Infectious Disease Clinic. The main goal of this rotation is to familiarize the resident with psychiatric problems of the medically ill. The resident will have the opportunity to : (1) learn when to obtain psychiatric consultations; (2) identify the psychiatric components of medical, surgical and traumatic illnesses; (3) learn to distinguish psychiatric illness which poses as organic disease, psychiatric illness which causes or complicates organic disease, and medical illnesses which present as psychiatric; (4) refine his or her skills in taking a psychiatric history, performing mental status exams and formulating cases; (5) treat patients psychopharmacologically and psychotherapeutically; and (6) work with the referring team to optimize patient care. The CL service consists of five R-2 or R-4 psychiatry residents and four psychiatry attendings. The service is subdivided into four separate teams consisting of one attending and one resident. Each team is assigned to particular referring services. The internal medicine resident will become an integral member of one of these teams.

Resident responsibilities, including interns and residents:

The resident's responsibilities will be to provide timely consultations to the patients that are assigned to them and to provide on-going psychiatric intervention as needed. The residents will be responsible for writing a complete psychiatric consultation and documenting all subsequent encounters with the patient in the medical record. Residents are expected to participate in all of the CL service's scheduled meetings and rounds. These include the following: daily attending rounds, weekly chief of service walk rounds, and a weekly case conference. During the months between July and January, residents attend a weekly didactic seminar.

Educational Objectives: An expanded version of the competencies is listed under Core Competencies in Internal Medicine. Those listed here are specific to this rotation and pertain to residents at all levels of training.

During this rotation, the resident will:

Patient Care

1. Identify and manage the common psychiatric problems found in the medically-ill, such as delirium, depression, anxiety, substance abuse, and somatoform disorders.
2. Become familiar with commonly used psychotropic medications for these conditions.
3. Evaluate patient's competency.

Medical Knowledge

1. Expand their psychiatric knowledge base.

Practice-Based Learning - See Core Competencies

Interpersonal and Communication Skills – See Core Competencies

Professionalism – See Core Competencies

System-Based Practice

1. Understand principles for referring to the Consultation Liaison Service or outpatient psychiatrist or therapist.

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 type="checkbox"/> | Small group discussions |
| <input checked="" type="checkbox"/> | Conferences specific to rotation | <input checked="" type="checkbox"/> | Bedside clinical rounds |
| <input checked="" type="checkbox"/> | Individual instruction of procedures | <input 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:

Residents will care for patients with a variety of psychiatric problems. The assigned attending will teach on all cases. Clinical encounters include daily attending rounds, chief of service rounds, and direct patient care by the resident. Prn supervision by one of the CL faculty is always available.

Check the principal ancillary education materials used:

- | | | | |
|-------------------------------------|-----------------------------|-------------------------------------|------------------------------|
| <input checked="" type="checkbox"/> | Reading lists | <input type="checkbox"/> | Pathologic material |
| <input type="checkbox"/> | Radiologic studies | <input 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 checked="" 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:

The University Hospital, Baltimore VA, and Shock Trauma strengthen this rotation by providing supportive ancillary services. No major limitations of the sponsoring institution have been noted.

Conferences or Attending/Patient Care Rounds: (Journal club, division rounds, etc.)

| <u>Name</u> | <u>Location</u> | <u>Day</u> | <u>Time</u> |
|-------------------------------------|--------------------|------------|---------------|
| Attending Rounds | Attending's office | Daily | Variable |
| Case Conference | STC | Monday | 12:00-1:00 pm |
| Chief of Service/Walkrounds | IPHB | Wednesday | 8:15-9:30 am |
| CL Lecture Series (July-January) | IPHB | Thursday | 2:30-3:30 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.