

Name of rotation: ABR - Neurology

Divisions: Neurology/Gen Int Med

Course Director: Susan D. Wolfsthal, M.D.  
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Site(s): UMMC Faculty Practice, VA

Duration of rotation:  one month only  
 2 weeks possible

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

This rotation is a portion of the ABR which has required participation during a 4 week neurology/geriatrics/rehabilitation medicine component. The goals of this rotation are to provide the residents with an outpatient experience in neurology which equips them with the knowledge, skills, and attitudes necessary to care for GIM patients with neurologic problems and recognize when referral to a neurologist may be necessary. Residents have the option of rotating at the University Neurology Faculty Practice or the VA Neurology clinic.

**Resident responsibilities, including interns and residents:**

The residents are expected to actively participate in patient care and engage in self directed/problem-based learning. Their attendance is expected to be 100%.

**Educational objectives:** All competency-based objectives apply to the PGY-2, 3 and above levels. PGY-1 residents do not complete this rotation.

**PGY-2 or 3 resident will:**

**Patient Care**

1. Obtain a history pertinent to a neurologic disorder with special attention to trauma, infections, history of cerebrovascular or cardiovascular problems, family history, seizure history, ADL's.
2. Perform a physical exam including cranial nerves, motor system, reflexes, coordination, gait, sensory function, mental status, ADL's and work-related capabilities.

**Medical Knowledge**

1. Identify common neurologic problems (e.g. headaches, seizure disorders, neuropathies and cerebrovascular disease) and describe their further evaluation and treatment.
2. Identify dose, mechanism of action, effects, side effects, adverse reactions, interactions and efficacy of commonly used neurologic medications.
3. List the indications and utility of common neurologic tests.
4. Recite problems for which referral to a neurologist may be necessary.

**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 checked="" type="checkbox"/>	Conferences specific to rotation	<input checked="" type="checkbox"/>	Bedside 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 residents are provided with the opportunity to refine their skills in the neurologic history and physical under the direct supervision of a neurologist. There is exposure to many diseases commonly seen in a GIM practice such as seizure disorders, cerebrovascular disease, dementia, headache, syncope, and back pain.

**Check the principal ancillary education materials used:**

<input checked="" type="checkbox"/>	Reading lists	<input type="checkbox"/>	Pathologic material
<input checked="" type="checkbox"/>	Radiologic studies	<input checked="" type="checkbox"/>	Other noninvasive studies
<input type="checkbox"/>	Handouts on relevant topics	<input checked="" type="checkbox"/>	Articles from the literature
<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	Case studies

**Methods used to evaluate the resident and the rotation:**

- Evaluation of residency performance and professionalism
- Evaluation of attending teaching skills and other attributes
- Rotation assessment by resident
- Observation of resident's clinical competency
- Observation of resident's leadership and teaching skills
- Review of the resident's history/physical exam, progress notes and documentation of procedures in the chart
- Resident's attendance of rounds and conferences monitored
- Other: \_\_\_\_\_

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

The strength of this rotation lies in the multidisciplinary approach to patient care which is demonstrated through the cooperative patient care efforts of neurologists, psychiatrists, and physical and occupational therapists.

*9/18/07: Reviewed with residents / faculty at Postgraduate Education Committee*