

# INTERNAL MEDICINE POLICIES & PROCEDURES

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Internal Medicine Policy for Creation and
Implementation
of The Internal Medicine Residency Curriculum

**PURPOSE** 

To define the policy by which the Internal Medicine Residency Curriculum is created and implemented.

**SCOPE** 

Applies to all interns and residents (hereafter all will be referred to as trainees) in the Internal Medicine training program on the Texas Health Presbyterian Hospital Dallas campus.

**PROVISIONS** 

1. The design and implementation of the curriculum for trainees in internal medicine is the responsibility of the program director, associate program director, core faculty, and the Subspecialty Education Coordinators. The curriculum will be updated on an ongoing basis periodically. The curriculum will be reviewed and amended to meet ACGME requirements and improve educational opportunities for the trainees. The curriculum will be posted on the resident web site at <a href="http://phdres.caregate.net">http://phdres.caregate.net</a> by the departmental web master. The curriculum is available to all faculty and trainees through the web site.

#### Design of Curriculum

- 2. Learning Centers: There are multiple avenues by which learning occurs. However, the most important teacher is the patient himself/herself. Therefore, all of our learning environments will be patient centered.
  - Morning Report
  - Teaching (Attending) Rounds
  - ICU Rounds
  - Interns' Conference
  - Didactic Conferences
  - Literature/Self Directed/Self Improvement
  - ID Rounds

Trainees are required to attend at least 75% of scheduled noon and coffee with cardiology conferences.

**3.** Subspecialty Didactic Curricula: Three year lecture series for each subspecialty designed by Subspecialty Education Coordinators to provide trainees with a base of knowledge upon which to build during their residency.

Requirements to Complete over 3 Years: Ambulatory Clinic (1); Cardiology (1); Emergency Medicine (1); Endocrinology (1); Gastroenterology (1); Geriatrics (1); Hematology/Oncology (1); ICU (3; 1 per year); Infectious Disease (1); Neurology; Day Float (1); Pulmonary (1); Rheumatology (1); Nephrology (1)

**4.** General Internal Medicine Competency Curricula: Competency based curricula designed for Internal Medicine Ward Rotations and Internal Medicine Clinic.

Requirements to Complete over 3 Years: 6 months on Wards as an intern; 5 months on Wards as a second year resident; 5 months on Wards as a third year resident.

**5.** Implementation of the Curricula:

Subspecialty didactic Curricula:

- M,T,Th conferences: Subspecialists will present topics according to the three year curriculum lecture series.
- Journal Club: areas not covered by the lecture series will be covered in bi-monthly journal club where current literature is presented by the trainees, with discussion led by faculty.
- Internal Medicine Clinical Update: Weekly conference for trainees and medical staff given by experts in the field of medicine, discussing current issues in their fields.
- Coffee with Cardiology: Weekly conference for trainees to discuss EKG's, echocardiograms and other cardiology related topics.

# Subspecialty Competency Curricula:

 Subspecialty Rotations: Competencies including patient care, medical knowledge, practice-based learning and improvement, interpersonal skills, professionalism, and system-based practiced are taught and assessed during each subspecialty rotation emphasizing patient care and knowledge base appropriate for their area of medicine. The educational experience occurs inpatient as well as outpatient settings.

Multidisciplinary Critical Care Rounds, daily M-F.

## Subspecialty Knowledge Curricula:

See Lecture series.

## General Internal Medicine Competency Curricula:

- For teaching teams A and B, the competencies will be taught and assessed on daily basis by teaching attendings and by the admitting attending. For teaching teams C, D and E, the competencies will be taught and assessed during attending rounds usually M-W-F and by the admitting attending. The educational experience occurs in the inpatient setting.
- Morning Report: Competencies are taught and assessed five days a week during morning report.
   Emphasis is on patient care, knowledge base and practice improvement as well as professionalism.
- Lecture series: Many areas are covered during the lecture series. These are noted under the specific discipline on the web site.
- Interns' Conference: Similar to morning report. Occurs once weekly.
- Journal Club: Twice a month, trainees review two current articles from peer-reviewed journals per session. This teaches medical knowledge, communication skills, and practice improvement in terms of the competencies.

#### Procedure Skills Curricula:

 Critical Care Rotation: Procedures are taught and a critical care specialist observes every procedure done by a trainee – CVP, arterial puncture, EKG interpretation, endotracheal intubation, and nasogastric intubation, chest tube insertion, ventilator management..

- Outpatient: Pelvic exam, and cervical culture are taught and observed in the Internal Medicine Clinic.
- History and Physical Exam: Taught during lecture series and assessed via mini-cex and chart review and daily interactions with hospitalists/teaching attendings.

MARK FELDMAN, M.D. Chairman, Internal Medicine Program Director, Internal

Medicine

AURORA ESTEVEZ, M.D.

Chief Medical Officer

Designated Institutional Official