Texas Health
Presbyterian Hospital
DALLAS

INTERNAL MEDICINE

POLICIES
AND PROCEDURES

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Internal Medicine Policy for
Competencies to be Achieved by the PGY 2 Prior to Promotion

PURPOSE: To provide PGY 2 with competencies to be achieved prior to promotion.

SCOPE: Applies to all PGY 2 residents (hereafter all will be referred to as trainees) in the Internal Medicine training program on the Texas Health Presbyterian Hospital Dallas campus.

PROVISIONS: The second year of residency is the year of maturation and enrichment of clinical skills and experience. It is a demanding year with marked increases in responsibility. It is a transition year – one is still very much a student, but now a teacher also. The skills of organization, leadership and teaching will be perfected during this year. An inquiring mind, the pursuit of knowledge and the desire to provide excellence in patient care are the underpinnings of a successful year.

Patient Care Duties:
- In-patient
  - All competencies required of a PGY 1.
  - Leadership:
    - Organizing and prioritizing patient care
    - Working closely with the PGY 1 to provide efficient, effective care for the patients.
    - Developing the skill of over-seeing patient care, ensuring patient safety, while allowing the PGY 1 to learn to assume the primary care for each patient.
    - Demonstrate evidence effective leadership in an emergency situation: assess the situation, make appropriate and needed emergency interventions to stabilize the patient, and delegate responsibility to other team members.
  - Teaching:
    - Demonstration of effective history taking, including open-ended questions, patient directed interviews, active listening.

- Demonstration of a complete and thorough physical exam.
- Working with the PGY 1 to develop a complete differential diagnosis.
- Working with the PGY 1 to develop a plan for evaluation and treatment of the patient.
- Reviewing the PGY 1 and medical student's History and Physical for organization and completeness.
- Working with the PGY 1 on daily rounds, reviewing his/her findings, discussing the organization and completeness of the progress note, developing plans for the patient's evaluation, treatment and disposition.
- Use evidence-based literature to direct patient care. Provide the team with relevant references pertinent to the patient care issues.

- Outpatient
  - All competencies required of a PGY 1.
  - Developing "phone medicine" skills: i.e. knowing when to give advice over the phone, provide prescriptive medicine, tell the patient to come to the ER, tell the patient to be seen that day or the following day in the clinic.
  - Developing the skill of determining the need for hospitalization for one's patient.
  - Develop the skills of seeing patients in an organized, timely fashion so as not to keep patients and staff waiting.
  - Begin understanding the skill of self identified quality improvement for patient care: e.g., compliance with the guidelines for CHF, Type II Diabetes Mellitus, CAD.

- Consult Services
  While on subspecialty rotations, the resident's role is that of consultant. Patient Care competencies that a PGY 2 should learn as a consultant include:
  - The ability to discern the questions being asked of the consultant.
  - A thorough review of the medical chart and studies, a thorough history and physical as it pertains to the questions being asked and complete documentation of such.
  - The skill of gathering the data and using such data to form an accurate assessment of the problem.
  - The skill of developing a plan to further evaluate and treat as required.

- Communication with the consulting physician one's assessment and recommendations.
- The skill of appropriate follow-up in role as consultant.

Medical Knowledge:
- Inpatient/Outpatient/Subspecialty rotations:
  - All competencies required of a PGY 1.
  - The resident is expected to build upon the knowledge obtained during internship. He or she should stay current with the literature, reading the current issues of NEJM and Annals of Internal Medicine on a regular basis.
  - The resident should continue to develop the skill of practicing evidence –based medicine, learning to ask patient centered questions, and choosing articles that represent well-designed studies when answering those questions. He/she should recognize the characteristics of a poorly designed study vs. a well-designed study. He/she should begin to develop an understanding of medical statistics.
  - The PGY 2 should be working in his/her area of research with a mentor, to build a strong, in-depth, expert level of knowledge in this area. He/she should develop the knowledge of research design and conduct.
  - The resident should develop the ability to write and present conferences. Publishing cases and clinical research in peer-reviewed journals is strongly encouraged.
  - The resident should develop a knowledge base in the following areas: Ethics, End of Life, Gender health, Quality Improvement, Patient Safety, Addiction Medicine, Pain Management, Nutrition, Medical /Legal, Bioterroism.

Interpersonal and Communications Skills: All competencies required of a PGY 1. In addition, developing the skill of communicating with and caring for the "difficult patient," as well as giving "bad news.'

Practice Based Learning: All competencies required of a PGY 1. Continued work to develop self-improvement strategies.

Professionalism: All competencies required of a PGY 1. Involvement in local and national professional organizations.

System-Based Practice: All competencies required of a PGY 1.

Duties and Responsibilities of the PGY 2: Please refer to Policies 7 and 9 on Duties and Responsibilities. This policy outlines in detail the clinical and didactic experiences provided for the PGY 2. It defines lines of authority. It defines work hours.

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