

Name of rotation: University Hospital Ambulatory Gastroenterology Subspecialty Clinics
University Hospital

Course Director: Bruce Greenwald, MD

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

The subspecialty clinics include outpatient clinics in Hepatology, Inflammatory Bowel Disease, and Motility-related disorders. These clinics provide a longitudinal experience in gastroenterology for one half day per week. The fellows should achieve an appreciation for the natural history of disease and familiarity with common problems encountered in the practice of gastroenterology and hepatology and how to interact with referring physicians. Residents and students rotating through the GI service may also participate in the clinic experience. The GI fellows serve in an educator role for these residents and students. The fellow presents all patients to the attending for discussion of evaluation and management. Method of teaching is specific clinical interaction and clinical presentation with a discussion of a differential diagnosis and development of an ambulatory treatment plan. The curriculum of this rotation specifically integrates medical problems and their management with health promotion and preventative care services. Opportunities are available for the management of post surgical problems as well as the evaluation and referral to surgery for appropriate indications. Cultural, ethical, and socioeconomic factors are integrated into a discussion of the care of each patient and what is appropriate for them.

Fellow responsibilities:

The fellows are expected to serve as outpatient consultants for ambulatory patients referred from internal medicine, surgery, neurology and other services as well as from community physicians. On initial visits, the fellow is responsible for performing a complete history and physical examination and documenting the encounter appropriately. The fellow also helps to determine appropriate diagnostic tests including laboratory testing, imaging and appropriate endoscopic evaluation. Once the fellow evaluates a patient, they assume care for that patient whenever they are present in the clinic. All patient phone calls are referred by the staff to the fellow providing longitudinal care to that patient. Fellows are encouraged to see their patients when they are hospitalized and provide input regarding their care. When possible, the fellow caring for a specific patient is encouraged to perform the endoscopic procedures on their patient.

Educational objectives: An expanded version of the competencies is listed under Core Competencies in Gastroenterology. Those listed here are specific to this rotation.

During this rotation, the F-1 fellow will:

Patient Care

1. Gather essential and accurate information about the patient.
2. Evaluate not fewer than 3 or greater than 7 new patients per scheduled 1/2-day session when averaged over the year.

3. Make informed diagnostic and therapeutic decisions based on patient information, current scientific evidence, clinical judgment, and patient preference.
4. Carry out patient management plans, including appropriate follow up of all diagnostic tests ordered.
5. Accurately document information gathered from as well as given to each patient.
6. Provide effective health maintenance and anticipatory guidance.

Medical Knowledge

1. Discuss the diagnosis and treatment of common problems encountered in an outpatient GI clinic for this subspecialty area
2. Demonstrate an investigatory and analytic approach to clinical problem solving and knowledge acquisition.

Practice-based Learning

1. Locate, appraise, and assimilate evidence from scientific studies related to their patients' health problems.
2. Develop and maintain a willingness to learn from errors.

Interpersonal and Communication Skills

1. Demonstrate the ability to create and maintain a therapeutic relationship with patients and families.
2. Communicate effectively and respectfully with other members of the health care team.

Professionalism – see master list for these competencies

System-Based Practice

1. Practice cost-effective health care and resource allocation that does not compromise quality of care
2. Advocate for quality patient care and assist patients in dealing with system complexities.
3. Partner with health care managers and health care providers to assess, coordinate, and improve health care through discussions and conferences as needed.
4. Facilitate the learning of students, residents, and other health care professionals.

During this rotation, the F-2 fellow will:

Patient Care

1. Gather essential and accurate information about the patient independently.
2. Evaluate not fewer than 3 or greater than 7 new patients per scheduled 1/2-day session when averaged over the year.
3. Make informed diagnostic and therapeutic decisions based on patient information, current scientific evidence, clinical judgment, and patient preference.
4. Carry out patient management plans, including appropriate follow up of all diagnostic tests ordered with intermittent attending consultation.
5. Accurately document information gathered from as well as given to each patient.
6. Provide effective health maintenance and anticipatory guidance for all patients.

Medical Knowledge

1. Continue to expand expertise regarding problems encountered in this subspecialty area in the outpatient clinic
2. Demonstrate an investigatory and analytic approach to clinical problem solving and knowledge acquisition.

Practice-based Learning

1. Locate, appraise, and assimilate evidence from scientific studies related to their patients' health problems.
2. Develop and maintain a willingness to learn from errors.

Interpersonal and Communication Skills

1. Demonstrate the ability to create and maintain a therapeutic relationship with patients and families.
2. Communicate effectively and respectfully with other members of the health care team.

Professionalism – see master list for these competencies

System-Based Practice

1. Practice cost-effective health care and resource allocation that does not compromise quality of care
2. Advocate for quality patient care and assist patients in dealing with system complexities.
3. Partner with health care managers and health care providers to assess, coordinate, and improve health care through discussions and conferences as needed.
4. Facilitate the learning of students, residents, and other health care professionals.

During this rotation, the F-3 fellow will:

Patient Care

1. Gather essential and accurate information about the patient efficiently and with minimal attending assistance.
2. Evaluate not fewer than 4 new patients per scheduled 1/2-day session when averaged over the year.
3. Make informed diagnostic and therapeutic decisions based on patient information, current scientific evidence, clinical judgment, and patient preference.
4. Carry out patient management plans, including appropriate follow up of all diagnostic tests ordered independently.
5. Accurately document information gathered from as well as given to each patient.
6. Provide effective health maintenance and anticipatory guidance for all patients.

Medical Knowledge

1. Identify deficiencies and expand expertise in problems encountered in this subspecialty area in the outpatient setting
2. Demonstrate an investigatory and analytic approach to clinical problem solving and knowledge acquisition.

Practice-based Learning

1. Locate, appraise, and assimilate evidence from scientific studies related to their patients' health problems.
2. Develop and maintain a willingness to learn from errors.

Interpersonal and Communication Skills

1. Demonstrate the ability to create and maintain a therapeutic relationship with patients and families.
2. Communicate effectively and respectfully with other members of the health care team.

Professionalism – see master list for these competencies

System-Based Practice

1. Practice cost-effective health care and resource allocation that does not compromise quality of care
2. Advocate for quality patient care and assist patients in dealing with system complexities.

3. Partner with health care managers and health care providers to assess, coordinate, and improve health care through discussions and conferences as needed.
4. Facilitate the learning of students, residents, and other health care professionals.

Check all principal teaching methods used during this rotation:

	Attending teaching rounds		Interdisciplinary rounds
X	Patient management discussions	X	Small group discussions
X	Conferences	X	Bedside clinical rounds
	Individual instruction of procedures	X	Review of diagnostic studies, including radiology
	Other:		

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

Fellows care for patients with a broad mix of gastrointestinal illnesses. The attending gastroenterologist is responsible for reviewing all patients. Clinical encounters include outpatient visits and attending discussions. Procedures are done by fellows under the direct guidance and supervision of attending physicians.

Check the principal ancillary educational materials used:

	Reading lists		Pathologic material
X	Radiologic studies		Other noninvasive studies
	Handouts on relevant topics	X	Articles from the literature
	Other:		Case studies

Methods used to evaluate the fellow and the rotation:

X	Evaluation of fellow performance and professionalism
X	Evaluation of attending teaching skills and other attributes
X	Rotation assessment by fellow
X	Observation of fellow's clinical competency
X	Observation of fellow's leadership and teaching skills
X	Review of the fellow's history/physical exam and progress notes.
X	Fellow's attendance of rounds and conferences monitored
	Other:

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

The hospital strengthens these rotations by providing supportive ancillary services including phlebotomy, augmented unit clerk activities, and staff scheduling of procedures. The computer system facilitates access to clinical laboratory and radiological data, medications, and nutrition. Radiology and laboratory services are available.

Updated: June 2008