

COMMUNITY-BASED TRAINING

Revised 7/07

Locations: St. Luke's Internal Medicine (Boise), Long Valley Clinic (McCall), Wood River Internal Medicine (Sun Valley), Twin Falls Clinic (Twin Falls)

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EDUCATIONAL GOALS

- Become familiar with the unique aspects of internal medicine practice in private settings (all).
- Learn about the business aspects of office-based practice (all).
- Learn the range of GIM practice and balance of responsibilities in a rural setting including emergency room, hospital, clinic, and nursing home (McCall, Sun Valley, Twin Falls)

Patient Care: History taking

Demonstrate the ability to obtain and document an accurate, complete and non-judgmental history from the patient and/or caretaker. Specific focus on:

- Identifies the "heart" of the visit (why they're really here)
- How sick are they?
- Identifies "can't miss" diagnoses

Patient Care: Physical examination

Demonstrates accurate and complete physical examination with occasional input from faculty. Reliably able to perform screening exams for:

- Prostate cancer
- Breast cancer
- Cervical cancer
- Skin cancer

Patient Care: Medical decisions

- Reliably recognizes critical illness requiring hospitalization
- Decision making based on H&P rather than laboratory testing
- Develop skills in timing and scope of follow-up

Patient Care: Procedures

Able to perform and/or interpret the results of the following:

- Pelvic examination

- Cryotherapy
- EKG for evidence of ischemia and heart block
- CXR in acute respiratory syndromes
- Exercise treadmill test
- Pulmonary function tests

Medical Knowledge Objectives: Apply relevant clinical and basic science knowledge in the following conditions:

- Anemia
- Arthritis
- COPD
- CAD
- CHF
- Diabetes
- Headache
- Hypertension
- Hyperlipidemia

Interpersonal and Communication Skills Objectives:

- Establish rapport with patients from a variety of backgrounds.
- Effectively and thoughtfully carry out difficult discussions about sensitive topics.
- Effectively communicate with consultants.

Practice-based Learning Objectives:

- Learns to be facile and efficient while providing care in multiple settings.
- Identifies information resources available in the office setting and uses them to provide evidence-based care.

Systems-based Practice Objectives:

- Coordinate care effectively in an office setting.
- Learns about business aspects of private practice such as malpractice coverage, vacation coverage, partnership, 'firing' patients, etc.

Professionalism Expectations:

- Understand and appropriately maintain patient confidentiality.
- Shows respect for the preceptor, colleagues, and office staff.
- Learns what they do and don't know, and seeks help when needed.

PRINCIPAL TEACHING METHODS

One-on-one discussion and review of direct patient care with the daily preceptor

Extended discussions with the office manager

EDUCATIONAL CONTENT

Mix of Diseases

Resident will see a wide range of illness including, but not limited to:

- Cardiac disease including angina, CHF, atrial fibrillation, ventricular arrhythmias
- Pulmonary disease including COPD and interstitial lung disease
- Gastrointestinal disease including Peptic ulcer disease, constipation/diarrhea, GI bleeding, inflammatory bowel disease
- Oncology disease including lung, prostate, colon and breast cancer
- Hematological disease including anemia, thrombocytopenia, and DVT
- Infectious disease including upper respiratory infections, cellulites and soft tissue infection
- Metabolic disease including diabetes mellitus and its complications, thyroid disease

Patient Characteristics

Office-based and representative of the community. Most practices are 60-70% women. A mix of private insurance, Medicare, and indigent patients. Many from rural setting.

Types of Clinical Encounters

The majority of the encounters will occur in the office setting, including scheduled and unscheduled visits. May see practice patients in the E.D. or follow patients into the inpatient and nursing home settings at some sites.

Services

A full complement of laboratory, radiological, social work, and pharmacy services are available at all sites. Internal medicine subspecialty consultation, surgery, and psychiatry resources are variably available.

Rotation Specific Schedule

Minimum of one-half day of continuity clinic at Boise VA
Up to eight half-days of rotation specific clinic each week
Call/weekend responsibilities
Up to six home call nights

PRINCIPAL EDUCATIONAL MATERIALS USED

Each site has a small medical textbook resource collection and on-line resources (such as UpToDate) available.

METHODS USED IN EVALUATING RESIDENT AND PROGRAM PERFORMANCE

At the end of the rotation, the resident is evaluated using a 9-point Likert-style instrument, and their performance is reviewed with them verbally. The instrument contains components for each element of clinical competence.

EXPLICIT LINES OF RESPONSIBILITY FOR THE CARE OF PATIENTS ON THIS SERVICE

Dr. Smith has oversight responsibility for this rotation. The site coordinators are responsible for scheduling, supervision, and evaluation at each of their sites.

The resident is responsible for maintaining/updating the medical record including initial database, problem list and progress notes.