

**University of Washington  
Internal Medicine Residency**

***Rheumatology & Musculoskeletal Curriculum***

**Educational Goals: IM Residents will rotate through to:**

- Review and improve musculoskeletal history and exam skills and differentiate joint complaints as either articular, periarticular, or radiating pain
- Distinguish inflammatory from mechanical joint pain
- Recognize patterns of common forms of arthritis
- Have a working knowledge of rheumatology laboratory tests
- Acquire an approach to the diagnosis and treatment of common rheumatologic conditions, in particular regional conditions such as rotator cuff tendonitis and plantar faciitis
- Recognize potential serious rheumatologic illness such as vasculitis or lupus
- Review and improve arthrocentesis and injection skills

This chart details the minimum curricular goals for each year of residency.

**Patient Care: History Taking**

**Resident Competency Evaluation Form, Mini-CEX**

<b>PGY-1</b>	Demonstrates the ability to obtain and document an accurate and complete history from patient and/or caretaker. Specific focus on: <ul style="list-style-type: none"> <li>• Joint sx</li> <li>• Systemic sx suggestive of rheumatologic conditions</li> <li>• Previous workup and treatment</li> <li>• Sports injuries</li> </ul> Achieves these objectives with moderate faculty input
<b>PGY-2</b>	Demonstrates the ability to obtain and document an accurate complete and non-judgmental history . Specific focus on: <ul style="list-style-type: none"> <li>• Adherence to therapies</li> </ul> Achieves these objectives with occasional input from faculty.
<b>PGY-3</b>	Demonstrates the ability to obtain and document an accurate and complete history. Achieves these objectives independently.

**Patient Care: Physical Exam**

**Resident Competency Evaluation Form, Mini-CEX**

<b>PGY-1</b>	Performs accurate and complete physical exam with moderate faculty input. Can describe and document major abnormalities of: <ul style="list-style-type: none"> <li>• Small and large joints</li> <li>• back</li> </ul> Identifies and carries out diagnostic exams for common urgent problems: <ul style="list-style-type: none"> <li>• Back pain</li> <li>• Joint swelling and effusion</li> </ul>
<b>PGY-2</b>	Achieves the previous objectives with only occasional input from faculty.
<b>PGY-3</b>	Accurately describes and documents the objectives with rare faculty input.

**Pt care: Medical Decisions**

**Methods: Resident Competency Evaluation Form, Chart Review/documentation**

<b>PGY-1</b>	Writes progress notes that identify important data and demonstrate thoughtful <b>problem based</b> assessment and plan. Describes guideline management and treatment goals for conditions noted in medical knowledge. These objectives are met with regular faculty input.
<b>PGY-2</b>	Can independently initiate management strategies Recognizes clinical evidence of suboptimal response to the planned therapy. Can interpret serology markers. These objectives are met with occasional faculty input.
<b>PGY-3</b>	Reliably recognizes evidence of suboptimal clinical response. Can identify causes of failure to respond to appropriate therapy. Can independently initiate urgent and ongoing management strategies. These objectives are met independently with little faculty input.

**Patient Care: Procedural skills**

**Methods: Resident Competency Evaluation Form, Procedure Log**

<b>PGY-1</b>	Masters the cognitive, counseling and technical skills for: Joint fluid WAC, C&S, crystal exam Interprets report findings: Bone and joint x-rays
<b>PGY-2</b>	Interprets report findings of: MRI and CT scans Understands the indications for:
<b>PGY-3</b>	Masters the cognitive, counseling and technical skills for: <ul style="list-style-type: none"> <li>• Arthrocentesis and therapeutic joint injection</li> </ul> Teaches capably about other procedural skills.

**Patient Care: Consultation Process**

**Methods: Resident Competency Evaluation Form**

<b>PGY-1</b>	Clarify question to be answered. Thorough data gathering in providing consults.
<b>PGY-2</b>	Develops strategy for managing patient referrals and follow-up. Is an effective consultant.
<b>PGY-3</b>	Consultation provided with EBM literature review.

**Medical Knowledge**

**Methods: Resident Competency Evaluation Form, Attd Review of Written Documentation**

<b>PGY-1</b>	Applies relevant clinical and basic science knowledge in the following common medical conditions: <ul style="list-style-type: none"> <li>• Osteoarthritis</li> <li>• Rheumatoid arthritis</li> <li>• Gout</li> <li>• Fibromyalgia</li> <li>• Ankylosing spondylitis</li> <li>• Lupus</li> <li>• Scleroderma</li> <li>• Polymyositis</li> <li>• Systemic vasculitis</li> <li>• Compression neuropathies</li> <li>• Reflex sympathetic dystrophy</li> <li>• Bursitis</li> <li>• Septic arthritis</li> <li>• Sports injuries</li> </ul>
<b>PGY-2</b>	Demonstrates a progression in content knowledge and analytical thinking with well formulated differential diagnoses and management plans.
<b>PGY-3</b>	Understanding and application of medical literature related to common medical conditions.

**Interpersonal Skills and Communication**

**Methods: Resident Competency Evaluation Form, Mini-CEX**

<b>PGY-1</b>	Effectively establishes rapport with patients and families. Communicates well with primary referring team and other consultants. Presents on rounds in an organized and articulate fashion. Functions as an effective consult team member. Provides timely and thorough documentation of patient care.
<b>PGY-2</b>	Effectively carries out difficult discussions, such as sensitive topic discussions with moderate faculty input. Provides teaching and feedback to more junior team members on their communication styles. Functions as an effective team leader.
<b>PGY-3</b>	Able to deal with the most challenging patients and families with minimal direction. Coordinates team communication to optimize patient care. Functions as an effective team leader with decreasing reliance on attending. Functions as a consultant.

**Professionalism**

**Methods: Resident Competency Evaluation Form, Conference Attendance**

<b>PGY-1</b>	Strives for patient care and knowledge excellence. Reliably accomplishes assigned tasks Demonstrates integrity, respect for others, honesty and compassion. Demonstrates timely completion of administrative tasks and documentation.
<b>PGY-2</b>	Strives for patient care and knowledge excellence. Reliably identifies and accomplishes necessary tasks. Sets a tone of respect and collegiality for the team.
<b>PGY-3</b>	Acts as role model for patient care and professional behavior.

**Practice Based Learning and Improvement**

**Methods: Resident Competency Evaluation Form**

<b>PGY-1</b>	Seeks and accepts feedback from team about patient care, organization and presentations. Learns basic EBM principles, and article review. Understands limits of own knowledge, and seeks help.
<b>PGY-2</b>	Understands EBM principles, and begins to utilize relevant research to support decision-making and teaching of junior team members. Identifies knowledge deficiencies and seeks to correct them.
<b>PGY-3</b>	Appropriately integrates EBM with expert opinions and professional judgment. Ability to accurately self-assess skills and performance.