

Name of Rotation: SFGH Consult Resident

Supervisor: Richard W. Price, MD

Rotation Description:

This individual serves as the focus of the Consult Service, triaging all consultations and evaluating all patients seen during weekdays as well as following up on all patients evaluated by the covering residents on nights and weekends. This resident is the primary interface of the Neurology Service with other hospital services. S/he is therefore expected to provide courteous, friendly, and willing service at all times. Patient evaluation should address the broad spectrum of patient needs conveyed by the individuals caring for these patients. The resident will be responsible for carrying the consultation pager (443-COMA) on weekdays and passing it on to the night or weekend call resident. Among the specific responsibilities are the following:

- evaluation of consultations in the various venues (inpatient wards, ED, and outpatient clinics);
- writing an initial note at the time of the initial evaluation (designated "will present to the Service Attending" or the like before evaluation by the attending) in the chart, and providing follow-up notes as indicated (usually at least every other day, depending on the patient's condition and the availability of results of diagnostic studies and the effects of therapeutic intervention);
- communicating with primary services, including explicitly signing off patients no longer being followed by the Service;
- supervising student subinterns on the Service and directly evaluating any patients seen by these individuals before they are presented to the Attending Neurologist;
- triaging urgent referrals to neurology clinic from other SFGH services, affiliated community clinics, and other providers
- attending Morning Report;
- providing shared night coverage of the Neurology Services and participating in the Outpatient Clinic.

Core Competencies:

Patient Care-Resident is able to provide compassionate, appropriate and effective patient care for the treatment of health problems and promotion of health. Resident understands how to appropriately prioritize patient problems and develop an appropriate diagnostic plan, prescribes medications appropriately, shows an appropriate balance between attention to the details of patient care and the overall context of treating the patient's illness. Resident obtains consultations appropriately, and is able to perform technical procedures adequately, when appropriate.

Medical Knowledge-Resident demonstrates knowledge of established and evolving biomedical, clinical, epidemiological, and social/behavioral sciences as well as the application of this knowledge to patient care. Resident is able to assess diagnostic information critically and constructively, and recognizes the psychosocial aspects of illness. Resident is able to critically evaluate the medical literature and apply new knowledge to the delivery of safe and effective patient care.

Practice-Based Learning and Improvement- Resident is able to critically evaluate the care of their patients, appraise and assimilate scientific evidence, and continuously improve patient care delivered on the basis of ongoing self-evaluation and learning. The resident uses knowledge to educate patient families, medical students, allied health personnel, peers, and other health professionals as appropriate. Resident is capable of

self-identifying strengths, deficiencies, and the limits of their knowledge and expertise. The Resident is receptive to constructive criticism (formative evaluation feedback) regarding the care of patients and physician performance. Resident is able to set learning and improvement goals, and identify and perform activities appropriate to meeting those goals.

Interpersonal and Communication Skills-The Resident demonstrates interpersonal and communication skills that result in effective information exchange and collaboration with patients, families and other health professionals.

These skills include the ability to communicate across a broad range of socio-economic and cultural backgrounds and ability to communicate with physicians, health professionals, and health related agencies effectively. Resident is able to maintain comprehensive, timely and readable medical records. Resident can work effectively as a member or leader of a healthcare team and serve appropriately as a consultant to other physicians and health professionals. Resident is able to clearly lead daily work rounds, when appropriate.

Professionalism- Committed to carrying out professional responsibilities and adhering to ethical principles. Resident demonstrates respect for patient privacy and autonomy and is accountable to patient, society and the medical profession for actions. Resident demonstrates compassion, integrity and respect for others as well as responsiveness to patient needs that supersede self-interest. The Resident demonstrates sensitivity and responsiveness to a broad patient population including diversity in gender, age, culture, race, religion, disability, and sexual orientation. Resident demonstrates the ability to manage personal stress effectively. Answer pages or messages in a timely fashion. Resident understands how to maintain appropriate professional boundaries, and demonstrates integrity, honesty and compassion. Resident completes assigned tasks in a timely fashion.

Systems-Based Practice-Resident understands and is capable to interact effectively with different systems of care. Demonstrates the ability to provide high-quality care in a cost-effective manner. Resident incorporates consideration of cost-awareness and risk-benefit analysis in patient care decisions. Resident advocates for high quality care for all patients.

Rotation Goals: (list 3 – 6 goals)

- Assess and manage, in conjunction with the patient's primary team, inpatients and outpatients, primarily from a medically underserved population, with stroke, seizure, altered mental status, gait disorders, and other common neurologic problems. (Competencies Addressed: Patient Care, Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, Systems-Based Practice)
- Know the neurological complications of HIV/AIDS and substance abuse and work effectively with primary care and appropriate specialists to manage these comorbidities in the context of neurologic disease. (Competencies Addressed: Patient Care, Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, Systems-Based Practice)
- Communicate effectively with referring practitioners. (Competencies Addressed: Patient Care, Medical Knowledge, Interpersonal and Communication Skills, Professionalism)
- Provide quality patient care as part of a multidisciplinary team. (Competencies Addressed: Patient Care, Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, Systems-Based Practice)

- Educate and supervise non-neurologists (fourth-year medical students and internal medicine residents) rotating on the Consultation Service. (Competencies Addressed: Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism)

Rotation Objectives: (list 3 – 10 training objectives)

- Serve as the first-call “point person” for the SFGH Stroke Team, providing rapid evaluation, in consultation with the neurocritical care Attending and Fellow, for all patients who are potential thrombolysis candidates. (Competencies Addressed: Patient Care, Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, Systems-Based Practice)
- Include the additional diagnostic considerations related to substance abuse and HIV/AIDS in hospitalized and clinic patients known or suspected to have these conditions presenting with neurologic symptoms. (Competencies Addressed: Patient Care, Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, Systems-Based Practice)
- Communicate clearly in the chart with referring providers and assisting them as needed with obtaining urgently-needed neuroradiologic procedures or difficult lumbar punctures. (Competencies Addressed: Patient Care, Medical Knowledge, Interpersonal and Communication Skills, Professionalism, Systems-Based Practice)
- Assist Neurology Clinic nursing staff with problems requiring rapid attention, such as medication refills and expedited referrals. (Competencies Addressed: Patient Care, Medical Knowledge, Interpersonal and Communication Skills, Professionalism)
- Participate in weekly neuroimaging conference with neuroradiology and neurosurgery. (Competencies Addressed: Patient Care, Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism)
- Independently evaluate patients seen by rotating non-neurologists on the team, including confirming examination findings and reviewing relevant studies. (Competencies Addressed: Patient Care, Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism)

Bibliography/Study List: (list 3 – 10 references). Electronic learning resources can be listed also. These references should reflect general educational materials within your field that is appropriate for a resident in training. High impact individual papers may comprise up to 3 references on the list.)

Aminoff MJ, Neurology and General Medicine, 4th edition

Bradley WG, Daroff RB, Fenichel G, Jankovic J, Neurology in Clinical Practice, 5th edition

Brust JCM, Neurological Aspects of Substance Abuse, 2nd edition

King TE, Wheeler M, Medical management of vulnerable and underserved patients : principles, practice, and populations

Patten JP, Neurologic Differential Diagnosis, 2nd edition

Spudich S, Price RW, Neurologic Disease, in Dolin R, Masur H, Saag MS (eds) AIDS Therapy, 3rd edition

Stewart JD, Focal Peripheral Neuropathies, 2nd edition

HIV Insite Gateway to HIV and AIDS Knowledge <http://hivinsite.ucsf.edu/>