

Name of Rotation: SFGH Junior Resident

Supervisor: Richard W. Price, MD

Rotation Description: The Junior Resident serves as the principal neurologist interfacing with the patient (family, associates, etc.). S/he provides documentation of patient illness, manages and schedules tests, and deals with logistics of care with the assistance of the intern (when available). The Junior Resident is expected to:

- round daily on all patients on the service on weekdays, sharing responsibility for weekend rounds with the Senior Resident;
- write full admission note emphasizing neurologic aspects of diagnosis, formulation, planned evaluations, and therapies;
- write daily progress notes summarizing the patient status, analysis, and formulation of diagnosis and plan;
- present patients to the Ward Attending on floor patients and the neurocritical care Attending and fellow on ICU patients, if the students are not available for this duty;
- present and demonstrate the salient neurological findings and discusses diagnosis and rationale of plan at biweekly Professor's Rounds;
- participate in weekly multidisciplinary Social Work rounds;
- attend Morning Report;
- share night coverage of the Neurology Services and participates in the Outpatient Clinic;
- teach medical students, with an emphasis on practical aspects of daily patient care.

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, manage, and serve as primary contact for inpatients and outpatients, primarily from a medically underserved population, with common neurological problems such as stroke, seizures, cognitive impairment, headache, spine pain, multiple sclerosis, and peripheral nerve disorders. (Competencies Addressed: Patient Care, Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, Systems-Based Practice)
- Know and understand the neurological complications of HIV/AIDS and substance abuse and work 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)
- Gain exposure to end-of-life care issues in patients with neurocritical care patients. (Competencies Addressed: Patient Care, Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, Systems-Based Practice)
- Provide quality patient care as part of a multidisciplinary team. (Competencies Addressed: Patient Care, Interpersonal and Communication Skills, Professionalism, Systems-Based Practice)
- Educate medical students, with an emphasis on skills relevant to daily patient care. (Competencies Addressed: Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism)

Rotation Objectives: (list 3 – 10 training objectives)

- Develop neurologic assessment skills for medically underserved patients, making appropriate use of hospital translation services. (Competencies Addressed: Patient

- Care, Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, Systems-Based Practice)
- Develop the ability to include 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)
 - Attend goals-of-care conferences on neurocritical care patients with the Attending, Fellow, and Senior Resident. (Competencies Addressed: Patient Care, Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, Systems-Based Practice)
 - Participate in weekly inpatient social work rounds with nursing and rehabilitation services and in weekly neuroimaging conference with neuroradiology and neurosurgery. (Competencies Addressed: Patient Care, Medical Knowledge, Interpersonal and Communication Skills, Professionalism, Systems-Based Practice)
 - Provide medical student feedback on progress notes, writing orders, and daily assessment and management of inpatients. (Competencies Addressed: Medical Knowledge, 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.)

Bradley WG, Daroff RB, Fenichel G, Jankovic J, Neurology in Clinical Practice, 5th edition
 Brust JCM, Neurological Aspects of Substance Abuse, 2nd edition
 Hemphill JC. Critical care neurology. In: Harrison's Principles of Internal Medicine, 16th ed.
 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/>