

Family Medicine Teaching Service PGY-1 Goals and Objectives

Medical Knowledge

The resident should be able to:

1. Describe appropriate inpatient care for the following common illnesses:
 - a. Chest Pain
 - b. Asthma/COPD
 - c. Pyelonephritis
 - d. GI Bleed
 - e. PE
 - f. Stroke
 - g. Renal Failure
 - h. Pneumonia
 - i. CHF
 - j. Cellulitis
 - k. Diabetes Mellitus
 - l. Hypertension
 - m. Abdominal Pain
2. Demonstrate ability to competently perform the following procedures:
 - a. NG Intubation
 - b. Paracentesis
 - c. Thoracentesis

Patient Care

The resident should be able to:

1. Give oral and written presentations to attendings in an organized, concise, accurate manner that include differential diagnoses and management plans.
2. Demonstrate principles of patient autonomy, confidentiality, and informed consent.
3. Develop and demonstrate ability to work in an organized, efficient manner in assessing and triaging patients according to urgency.
4. List common and effective preventative strategies in:
 - a. Asthma
 - b. CAD
 - c. DM
 - d. Obesity
5. List current screening recommendations for:
 - a. Colon Cancer
 - b. Breast Cancer
 - c. Testicular Cancer
 - d. Prostate Cancer
6. Demonstrate skills in obtaining history and performing physical exam.
7. Use laboratory tests appropriately in delivering patient care.
8. The resident must care for at least of 15 critically ill patients that they manage during their residency. They must log these patients in their Procedure Logs.
9. Perform all of the duties as delineated in the Intern Call Responsibilities document.

Interpersonal Communication Skills

The resident should be able to:

1. Effectively communicate with attendings and other healthcare members as a team in coordinating comprehensive healthcare.
2. Effectively communicate medical decisions and recommendations to colleagues and patients.
3. Discuss and demonstrate strategies to discuss sensitive subjects with patients.

Systems-based Practice

The resident should be able to:

1. Demonstrate effective, compassionate and empathetic communication with patients and families while considering psychosocial, economic, and cultural issues of care.
2. Utilize ancillary services in hospital to provide cost-effective and economically appropriate medical treatments.

Practice-based Learning and Improvement

The resident should be able to:

1. Appraise and assimilate scientific evidence to guide improvement in patient care.
2. Incorporate formative evaluation feedback into daily practice.
3. Use information technology to optimize learning.

Professionalism

The resident should be able to:

1. Present themselves professionally in regards to dress, punctuality, and interactions with patients, families, and all medical care providers.
2. Demonstrate compassion, integrity, and respect for others.
3. Demonstrate respect for patient privacy and autonomy.
4. Apply the principles of medical ethics to decision making.

Resident

Faculty

Date

INTERN RESPONSIBILITIES

1. Duty shifts are from 6:00 a.m. to 8:00 p.m. for the Day Intern and from 7:00 p.m. to 9:00 a.m. for the Night Intern. The Intern will round on patients as directed by the Senior resident and present them at morning AMTS rounds.
2. Interns are expected to, under the direction of the Senior resident, or attending, utilize every opportunity to gain experience in the Emergency Room and the Inpatient ward.
3. As directed by the Senior resident, Interns will be responsible for admitting patients to the Adult Medicine Teaching Service (AMTS), performing daily rounds on AMTS patients, and finding patient information among other duties as necessary for patient care.
4. The Senior resident is expected to give the Intern requested guidance and teaching regarding patient care, so ask for help.
5. Interns are responsible for call days during vacations, CME time, illness, or other time away from the program. Therefore, it will be necessary for individuals to arrange, in advance, call coverage by another resident.
6. Follow guidelines of Conference Attendance Policy – please see policy for details.
7. Enter the required information into the Rounds List app for all patients on the AMTS.

Rounds List notes:

- 1) CC: (fill in for every patient)
- 2) Admission note
 - HPI: (include events and referral source)
 - Code status:
 - Allergies:
 - Signif. PMH/PSH:
 - Pertinent VS/Exam:
 - Pertinent labs:
 - Dx/Plan:
 - Consults:
- 3) Daily note
 - Active problems:
 - Pertinent VS/Exam:
 - Pertinent labs:
 - New plans:

8. When a continuity patient of another resident is admitted to the AMTS, the admitting resident is to call the patient's continuity resident and give hand-off information the morning after admission. The continuity resident is expected to follow their own patients in the hospital whenever possible. If they will be unavailable during the day or on vacation, the continuity resident should provide the AMTS resident with hand-off information either by phone, in-person, or using the Rounds List app.

I acknowledge that I have read and understand the above responsibilities.

Name

Date