

## Acting Internship Description

**Campus:** Fargo (Southeast)

**Department:** Psychiatry & Behavioral Sciences

**Acting Internship Title:** Inpatient Eating Disorders

**Phase Available:** ONLY Phase 3

**Location of Acting Internship:** Sanford Health – Fargo, ND

**Preceptor(s):** Michelle Jorgenson MD, Advanced Resident

**Period(s) offered:** All

**Course Prerequisites:** Clerkship Completion

**Number of students per period:** 1

**Revised Curriculum Phase(s):** 3

**Purpose:** To provide a medical student with advanced training in the inpatient treatment of Anorexia Nervosa and Bulimia Nervosa as well as other eating disorder pathology.

**Objectives:** After completing the acting internship, the student will be able to

1. Obtain a history and perform a physical exam.  
*EPA #1; Competency 3.1*
2. Present the history and physical in a concise, well-organized format.  
*EPA #6; Competency 3.7*
3. Form and prioritize a differential diagnosis. Select a working diagnosis.  
*EPA #2; Competency 3.3*
4. Discuss orders and prescriptions and construct evidence-based management plans.  
*EPA #4; Competency 3.4, 3.8*
5. Select screening and diagnostic studies and labs and interpret the results of these tests.  
*EPA #3; Competency 3.2, 3.3*
6. Recognize patients who are critically ill or require emergent care and initiate the appropriate initial steps in that care. Reassess patients on an ongoing basis and adjust plan of care as appropriate.  
*EPA #10; Competency 3.5*
7. Document the clinical encounter in a timely fashion.  
*EPA #5; Competency 3.7, 5.7*
8. Communicate effectively with patients and their families regarding diagnoses and plans of care with respect for cultural and socioeconomic backgrounds.  
*Competency 3.9, 4.1*
9. Work effectively as a member of the interprofessional healthcare team including giving and accepting patient handoffs at transitions of care.  
*EPA #8, #9; Competency 3.5, 7.5*
10. Research a clinical question relating to patient care with appropriate evaluation of resources and use of evidence-based information.  
*EPA #7; Competency 1.6, 1.10, 2.7*
11. Formulate or update an accurate problem list for patients under his or her care.  
*EPA # 5; Competency 3.3, 3.7*

**Specialty Specific Objectives:** (These should be linked to EPAs and Year 4 Competencies which can be found at <https://med.und.edu/education-resources/phase3.html#Yr4O> under “Overview & Objectives”)

Please include any procedures the student will be expected to perform:

12. List the diagnostic criteria for anorexia nervosa, bulimia nervosa and avoidant/restrictive food intake disorder (ARFID).  
EPA #2, Year 4 LO #3
13. Discuss the psychotherapy of eating disorders.  
Year 4 LO #14.
14. Discuss the medical complications, pharmacotherapy, psychotherapy, psychobiology, and family issues of eating disorders.  
Year 4 LO #14; EPA #10, Year 4 LO #10; EPA #4, Year 4 LO #9; Year 4 LO #5
15. Complete diagnostic evaluations of patients with eating disorders.  
EPA #2, Year 4 LO #3

**Instructional Activities:** During this elective, **the student** will be involved in/experience:

1. The student will assume primary responsibility of his or her assigned patients under the supervision of an upper level resident or attending.
2. Admitting, caring for, and discharging hospitalized patients at Sanford Hospital Inpatient Eating Disorders Unit under the supervision of the attending psychiatrist or resident.
3. Participating in team meetings and programming on the Eating Disorders inpatient unit.
4. Participating in outpatient evaluations of eating disorder patients under the supervision of the attending psychiatrist or resident.
5. Communicating daily with patient, family, medical/psychiatric care team including nursing, psychology, social workers and case managers as appropriate.
6. Interpreting laboratory data and physical signs and symptoms of patients with severe anorexia nervosa and bulimia nervosa.

**Evaluation Methods:** The preceptor will:

1. By direct observation, evaluate the student’s ability to perform a complete history and mental status exam pertinent to eating disorder patients and present his or her findings. (objective #1,2)
2. By direct observation or review of written work, evaluate the student’s ability to form a complete differential diagnosis and select a working diagnosis. (objective #3)
3. By direct observation or verbal discussion, evaluate the student’s formulation of patient management plans including those for patients requiring emergent management. (objective #4, 6)
4. By direct observation, verbal discussion or review of written work, evaluate the student’s selection and interpretation of screening and diagnostic laboratory tests. (objective #5)
5. By direct observation, evaluate the student’s documentation of clinical encounters. (objective #7,11)
6. By direct observation and via feedback from the healthcare team, patients, and families, evaluate the student’s communication skills including patient handoffs. (objective #8,9)

7. By review of written or verbal presentation made by the student, evaluate the student's use of evidence-based information to research a patient care question. (objective #10)
8. By direct observation, evaluate the student's ability to list the diagnostic criteria for anorexia nervosa and bulimia nervosa. Objective # 11
9. By direct observation, evaluate the student's ability to discuss the psychotherapy of eating disorders. Objective # 12
10. By direct observation, evaluate the student's ability to discuss the medical complications, pharmacotherapy, psychotherapy, psychobiology, and family issues of eating disorders. Objective # 13
11. By direct observation, evaluate the student's ability to complete diagnostic evaluations of patients with eating disorders. Objective #14

## **Assessment:**

Evaluation methods #1-7 will be assessed using the Entrustability scale.

Level	Descriptor	Example
1	"I had to do"	Requires complete hands on guidance, did not do, or was not given the opportunity to do
2	"I had to talk them through"	Able to perform tasks but requires constant direction
3	"I had to prompt them from time to time"	Demonstrates some independence, but requires intermittent direction
4	"I need to be there in the room just in case"	Independence but unaware of risks and still requires supervision for safe practice
5	"I would not have needed to be there other than to fulfill regulatory requirements"	Complete independence, understand risks and performs safely, practice ready

*\*This scale was adapted from the Ottawa surgical competency operating room evaluation (O-SCORE): A tool to assess surgical competence. Acad Med. 2012; 87:1401-407.*

Psychiatry evaluation methods 8-11 will also be assessed using the Entrustability scale.

Please indicate who will be completing the assessment. If more than one preceptor, how will scores be compiled?

The attending psychiatrist, or the psychiatry resident if delegated by the attending, will complete the student assessments.

## **Grading Criteria:**

To receive honors, the student must:

- Achieve an average Entrustability score of at least 4.0
- Have no ratings of 2 or lower

To pass the AI, the student must:

- Achieve a mean rating of at least 3.0 on the Entrustability scale
- Have no ratings of 2 or lower

If a student fails an AI, the AI director and campus dean will work with the student to form a written remediation plan (signed by all 3) that specifically addresses the competencies that the student did not meet during the rotation. A copy of this plan will be sent to the Office of Student Affairs. The minimum remediation for this AI will be 2 additional weeks at the Sanford. In order to pass the AI, the student will be required to meet the original passing requirements. A student may not receive honors on an AI that was initially failed.

If the student does not pass, remediation will consist of:

- Spending two additional weeks on the inpatient unit with activity focused on the objectives that were not completed satisfactorily.