Family Medicine Inpatient Rotation Goals and Objectives

Family medicine is three one-month rotations involving responsibility for hospitalized patients from Park Nicollet-Creekside, Park Nicollet-Hopkins, and Morningside Family Physicians. The G-3 senior resident and faculty make up the remainder of the rounding team.

- Informal didactic sessions and topical medical literature articles are reviewed with residents
- During this rotation on call nights, the first year resident also manages "unassigned" patients needing hospital admission along with the on-call faculty physician
- This rotation typifies a busy family medicine hospital practice

Family Medicine Inpatient Rotation Teaching Module

Rotational Goal
Residents will gain an understanding of the broad range of medical conditions which present in a general family medicine practice and are managed in the hospital by family physicians.

Rotational Objectives
By the end of their rotations on the family medicine service, residents will be able to demonstrate mastery in the diagnosis and treatment of common inpatient conditions as follows:

(A) Patient Care
Through patient care experience gained as part of the family medicine inpatient rotation, when further presented with patients in the inpatient setting, residents will be able to:

- Accurately obtain a complete medical history to include assessment of exposures, living situation, baseline functional level, and history of current illness, along with co-morbidities
- Perform an appropriate physical exam to guide decisions regarding patient management, especially with regards to fluid management, cardiac and respiratory status, and mental status
- Formulate appropriate management plans for patients, with complete but cost-effective use of laboratory and radiologic testing and consultants
- Effectively arrange for patient disposition and coordination of care after discharge
- Facilitate discussions, when appropriate, about end of life decisions
- Perform newborn circumcisions

(B) Medical Knowledge
At the completion of the family medicine rotations, residents will be able to demonstrate medical knowledge of common inpatient conditions and "best practice treatment plans" suitable for the family physician to include being able to:

- Describe the pathophysiology, presentation, differential diagnoses, and management of common inpatient conditions relating to cardiac, pulmonary, GI, neurologic, infectious, and post-surgical etiologies
- List the steps to take in holding an effective family conference
- Identify the common in-patient diagnoses for children and describe their management
- Describe appropriate post-partum and newborn management, including information to give parents regarding circumcisions

(C) Practice-based Learning and Improvement
At the completion of the family medicine rotations, and subsequently in the inpatient setting, residents will be able to:
• Critically evaluate evidence basis for diagnosis and treatment of acute medical conditions requiring hospitalization
• Interpret and apply treatment guidelines; see www.guideline.gov
• Modify patient treatment plans on an ongoing basis based on patient response to therapy.

(D) Interpersonal and Communication Skills
At the completion of the family medicine rotations, and subsequently in the inpatient setting, residents will be able to:

• Obtain a full medical history using effective communication skills with hospitalized patients and their families/care takers
• Provide appropriate patient education and information on diagnosis, treatment, and prognosis to patients and their families/care takers
• Coordinate care with patient and other team members; consult specialists as needed, providing clear information about the reason for the consultation request and the urgency of the need

(E) Professionalism
During the family medicine rotations, residents will exhibit characteristics of a professional health care provider by:

• Dressing appropriately based upon standards present for attending physicians in the clinic and/or inpatient setting associated with the family medicine rotation
• Demonstrate sensitivity and responsiveness to hospitalized patients’ perception of illness, and include these perceptions and patient preferences in formulation of management plan
• Substantively contributing to the learning community in the clinic/hospital, by attending and actively participating in presentations associated with the rotation

(F) Systems-based Practice
At the completion of the family medicine rotations, residents will be able to:

• Coordinate care for hospitalized patients, with specialists, rehab services, social workers, chaplains, and other care team members as needed
• Understand the available resources for care of the patient in the hospital and after discharge
• Will understand cost significance of selection of medication and care plans for the patient, based upon insurance coverage (or lack of coverage)