

Orientation for Systems Based Practice (SBP) Rotation

Welcome to the SBP rotation. The rotation will cover many topics: evidence-based clinical practice (EBCP), general medicine consultation, the discharge process, patient communication, informed consent, and procedures.

EBCP

Over the next 3 years, you will experience a longitudinal curriculum in EBCP like no other in the country. Our goal is to give you enough background information and practical experiences that you will feel comfortable incorporating EBCP into your everyday clinical activities as either a fellow or attending physician. By virtue of using EBCP, you will stay up-to-date in your chosen field, allowing you to deliver the best and most cutting-edge care possible. The skills you will learn over the next 3 years are meant to last a lifetime. Each 2 week EBCP block in your first two years of residency will be the only time in the residency curriculum devoted solely to making sure you learn the skills needed to allow you to become a practitioner of EBCP without other clinical duties competing for your time and energy. Please make the most of this protected time.

During SBP, you will have several EBCP learning opportunities where you will learn the basics of EBCP. The workshops will utilize different teaching techniques including internet tutorials, a didactic session, and independent readings.

General Medicine Consultation

The consult service provides you with the opportunity to think about and deal with issues that do not frequently present themselves on the Firms. You will have the chance to learn how to be an effective consultant, perform pre-operative evaluations, recommend DVT prophylaxis, care for patients with anticoagulation needs, and answer a variety of questions from some very grateful departments. While on the consult service, you can begin to practice using your new or newly honed EBCP skills. The consultation service activities start around 9am (please discuss with the attending and fellow) daily at which time you will meet with the fellow to begin rounding on the “old” patients. After rounds, all the new consults will be divided by the fellow among the team members. The intern is then expected to attend noon conference followed by a 2PM (approximate) session with the consult attending to review a pertinent consultative medicine topic at least 3 times per week. The interns and fellow will then present to the attending all of the new patients. The day ends after all of the new consults for the day are seen by the team unless you are told otherwise by the consult attending or fellow. If you are unsure who the attending or fellow are, please call Lisa Williams at 7-3631. You can also reach the fellow through a text page on pager box by typing in “gen med consult”.

Internet Learning Center Modules (ILC)

SBP is a great time to get some reading done. Over the year, you are expected to finish 10 ILC modules. You MUST complete 5 modules in the next two weeks. If you complete a

module that is not on the ILC website, please let Steve Sisson know. Besides the ambulatory modules, there are 4 modules on the “Medical Consultation” portion of the ILC (<http://www.hopkinsilc.org>). You will have to register separately for ILC access under “Internal Medicine: Medical Consultation Curriculum”. Please consider completing the pre-op modules that will be attached to a future e-mail and the professionalism module found on the ambulatory curriculum portion of the ILC.

Communication Skills

On one Monday morning, each intern will participate in an assessment of interpersonal and communication skills. You will have many opportunities during this rotation to observe different styles and challenges in physician-patient communication, and the program feels this is an opportune time to reflect on your skill-building in this important competence. Please meet in the JHOC Sim Center at 8:30 am for a brief orientation to the exercise. The Sim Center is located on the 8th floor of JHOC; if you take the elevators by the coffee shop, it is immediately on your right as you exit the elevators. You should allow approximately 1.5 -2 hours for the exercise. There will be some down time, but you will have access to a workstation while there. Pat Thomas (pthomas@jhmi.edu) will e-mail you prior to the exercise with more information.

On the other Monday morning of the rotation, you will have a lecture by Mark Hughes on informed consent. Please contact Dr. Hughes via pagerbox or by e-mail (mthughes@jhmi.edu) if you do not know the exact date and time of the lecture. The lectures will generally be located on the 7th floor of JHOC.

Intern Systems-Based Practice Rotation 2008-2009

Date	IC Date	SP Date	Name	Email	
07/01-07/07	7/7	-	LATTIMER, LAKSHMI	llattim2@jhmi.edu	4
7/01-07/21	7/7	-	MCEVOY, JOHN NELSON, PRISCILLA	jmcevoy1@jhmi.edu pnelso13@jhmi.edu	4 4
7/08-07/21	7/14	-	TABIBIAN, JAMES	jtabibi1@jhmi.edu	4
07/22-08/04	8/4	7/28	REISS, KIM YOUSUF, OMAIR	kreiss1@jhmi.edu oyousuf1@jhmi.edu	4 4
08/05-08/18	NEED ALTERNATE DATE	8/11	ZEIDNER, JOSHUA ZOLLARS, ERIC	jzeidner@jhmi.edu ezollar1@jhmi.edu	4 4
08/19-09/01	NEED ALTERNATE	8/25	ORECKI, ZOE SURESH, KARTHIK	zorecki1@jhmi.edu ksuresh2@jhmi.edu	4 4

	DATE				
09/02-09/15	9/15	9/8	LAKE, MIKLAILIA YEHIA, RANA	mlake3@jhmi.edu ryehia1@jhmi.edu	4 4
09/16-09/29	9/22	9/29	NARLA, ANNIE ONUORAH, IFEOMA	vnarla1@jhmi.edu ionuora1@jhmi.edu	4 4
9/30-10/13	10/13	10/6	GIVENS, RAYMOND SUNG, ANTHONY	rgivens2@jhmi.edu asung7@jhmi.edu	4 4
10/14-10/27	10/27	10/20	WINDERS, BENJAMIN	bwinder2@jhmi.edu	4
10/28-11/10	11/3	11/10	QUAN, SUSAN	susie@jhmi.edu	4
11/11-11/24	11/24	11/17	BARNES, CLARISSA	cbarne19@jhmi.edu	3
11/25-12/08	12/8	12/1	HARRIS, KENDRA HAYES, MARGARET	kyoung29@jhmi.edu mhayes15@jhmi.edu	4 4
12/09-12/21	?	12/15	CAMPBELL, JOHN FONTAINE, NATASHA	jpc@jhmi.edu nfontai1@jhmi.edu	4 4
01/03-01/13	1/5	1/12	HERNANDEZ, ESTEBES PUGLIESE, STEVEN	ehernan7@jhmi.edu	4
01/14-01/26	1/19	1/26	SENN, TODD WAGLE, ROHAN	tsenn1@jhmi.edu rwagle1@jhmi.edu	4 4
01/27-02/09	2/9	2/2	SPEELMON, EMILY GREENBAUM, ADENA	speelmon@jhmi.edu kthakur1@jhmi.edu	4 4
02/10-02/23	NEED ALTERNATE DATE	2/23	MARSH, JULIA YOO CAMPBELL	jmarsh34@jhmi.edu jeanyoo@jhmi.edu	4 4
02/24-03/09	3/9	3/2	HOUSTON, BRIAN	bhousto2@jhmi.edu	4
3/10-03/23	3/23	3/16	HEIL, BARBARA KIM, SHARON	bheil1@jhmi.edu skim225@jhmi.edu	4 4
03/24-04/20					

04/21-05/04	5/4	4/27	BLOCK, LAUREN LYNCH, DONALD	lblock6@jhmi.edu dlynch5@jhmi.edu	4 4
05/05-05/18	5/18	5/11	BROOKS, GABRIEL	gbrooks12@jhmi.edu	4
05/19-06/01	6/1	5/25	AGGARWAL, NISHA ALEWINE, CHRISTINE	naggarw2@jhmi.edu calewin1@jhmi.edu	3 3
06/02-06/15	6/15	6/8	LATTIMER, LAKSHMI	llattim2@jhmi.edu	4
06/16-06/30	NEED ALTERNATE DATE	6/22	THAKUR, THAKAR	agreenbaum@jhmi.edu	4

Nurse “Share Time” (NST)

All too often we place the discharge order and just expect the patient to disappear. We would like you to spend an afternoon (4pm-7pm) with a nurse to experience what happens after you enter that order. This will give you a greater appreciation for the complexities of the discharge process. You will also develop a better understanding as to why discharge is a transfer of care fraught with patient safety issues. Contact your home floor nurse manager (Thayer- Osler 4, Janeway- Nelson 3, Barker- Halsted 8, Longcope- Osler 4) to schedule a time. The nurse manager will connect you with the appropriate floor nurse.

Procedures

Johns Hopkins is dedicated to patient safety. The procedure portion of this course will give you the opportunity to practice procedures under the watchful eye of our local physician assistant procedure expert, David Lichtman. David runs the procedure service for the hospitalist service. He will review the best practices for each procedure (central line placement, paracentesis, thoracentesis, lumbar puncture (if time permits). One of the consult interns will be “on-call” for procedures each day of the rotation. David will page you when a procedure is about to take place. As long as you are not presenting on rounds, attending a teaching session, or evaluating a consult patient, you are encouraged to perform the procedure under David’s supervision.

Consultation Medicine Component: Residents will...

Medical Knowledge:

1. understand how to assess a patient to determine DVT prophylaxis needs
2. learn the importance of preoperative risk assessment
3. evaluate glycemic control techniques in the hospitalized patient
4. contemplate blood pressure control in hospitalized patients

5. review common medical problems that can complicate the perioperative time period
6. learn the role of the medical consultant

Patient Care

1. make DVT prophylaxis recommendations
2. manage blood pressure and blood glucose of patients in the perioperative time period
3. evaluate and manage patients with medical perioperative complications
4. evaluate and manage patients with medical problems on non-surgical services
5. provide preoperative risk assessment to surgical services

Practice-Based Learning and Improvement

1. locate, appraise, and assimilate evidence from scientific studies related to the medical problems of patient's on non-medical services
2. utilize EBCP to care for patients on non-medical services
3. obtain and use information about patients on non-medical services and the larger population from which these patients are drawn
4. apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness as related to patient's on non-medical services
5. use information technology to manage information, access on-line medical information; and support their own education
6. facilitate the learning of students and other health care professionals

Interpersonal and Communication Skills

1. provide information using effective nonverbal, explanatory, questioning, and writing skills to patients, family members, and physicians on non-medical services
2. work effectively with others as a member of the comprehensive general medicine consult service

Professionalism

1. demonstrate a commitment to excellence and on-going professional development
2. demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities

Systems-based Practice

1. know how types of medical practice and delivery systems differ on non-medical service

2. practice cost-effective health care and resource allocation that does not compromise quality of care for patients on non-medical services
3. advocate for quality patient care and assist patients in dealing with system complexities

Learning Objectives for EBCP Year 1: Residents will...

Medical Knowledge:

1. be acquainted with the basic precepts of epidemiology and evidence-based medicine needed to practice EBCP
2. demonstrate an investigatory and analytic thinking approach to clinical situations

Patient Care

1. make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment
2. use information technology to support patient care decisions and patient education

Practice-Based Learning and Improvement

1. locate, appraise, and assimilate evidence from scientific studies related to patients' health
2. utilize EBCP to care for patients on non-medical services
3. apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness
4. use information technology to manage information, access on-line medical information; and support their own education
5. facilitate the learning of students and other health care professionals

Professionalism

1. demonstrate a commitment to excellence and on-going professional development

Systems-based Practice

1. know how types of medical practice and delivery systems differ from one another, including methods of controlling health care costs and allocating resources

Evaluation of Year 1 of the EBCP Curriculum and the Comprehensive Consult Service

Through the e-value system, you will have the chance to evaluate the contents and presenters of each of the workshops/lectures of the Year 1 EBCP curriculum. We urge you to critically think about the presentations so that we can continue to improve them.

We also want to know of any particular topics that you feel were underrepresented in the presentations. Please take the time to do this at the end of the two week rotation.

Again through the e-value system, you will have the opportunity to evaluate the GIM fellow, GIM attending, and types of consult experiences you were exposed to over the two week period. Please take the time to do this at the end of the two week rotation.

Readings and Resources

Although not required, you are encouraged to purchase: Fletcher, R. H. and S. W. Fletcher (2005). Clinical epidemiology: the essentials. Baltimore, Md., Lippincott Williams & Wilkins.

We will attempt to have copies of this book available for you to borrow during this rotation.

Other references:

1. Sackett, D. L. and D. L. Sackett (1991). Clinical epidemiology: a basic science for clinical medicine. Boston, Little, Brown.
2. Guyatt, G., D. Rennie, et al. (2002). Users' guides to the medical literature: a manual for evidence-based clinical practice. Chicago, IL, AMA Press.
3. Riegelman, R. K. (2005). Studying a study and testing a test: how to read the medical evidence. Philadelphia, Lippincott Williams & Wilkins

Year 1 EBCP/General Internal Medicine Consults EBM Tutorials **Schedule of Topics**

During the Year 1 EBCP rotation you will have eight tutorial sessions based on textbook readings. The purpose of these sessions is to cover topics in clinical epidemiology with which you are not familiar or for which you need review. Please look over the assigned chapters *before* the tutorial session, and make a list of any concepts that you would like to discuss. While it is probably not feasible to read all of the assigned chapters in the span of this rotation, you should scan the entire chapter and attempt to answer the questions at the end of the chapter to help you identify the areas that you need to review. The tutorial session will be based entirely on your requests, so advance preparation is essential.

You will be given a copy of the textbook for use during the rotation. Please return the textbook at the end of the rotation. Do not write in the textbook. The readings are as follows:

Textbook: Fletcher RW and Fletcher SW. Clinical Epidemiology, the Essentials, 4th ed.

- Session 1 Introduction to EBM. Accessing the medical literature.
Chapters 1 and 13
- Session 2 Biomedical measurement.
Chapters 2 and 4
- Session 3 Measurement of risk. Observational study designs.
Chapters 5 and 6
- Session 4 Cohort studies. Survival analysis. Confounding.
Chapter 7
- Session 5 Randomized controlled trials.
Chapter 8
- Session 6 Diagnosis. Test statistics. Screening.
Chapters 3 and 9
- Session 7 Basic statistics. Demonstrating causality.
Chapters 10 and 11
- Session 8 Systematic reviews and meta-analyses.
Chapter 12