

Orientation- EBCP Year 1-Case 0.5/General Medicine Consult Service

Overview of EBCP

Welcome to the evidence-based clinical practice (EBCP) curriculum and the General Medicine Comprehensive Consult Service. 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, and it will hopefully help you to feel as if you are providing your patients with the best care 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.

EBCP Year 1-Case 0.5/General Medicine Consult Service

Case 0.5 provides the structure for your 2 week EBCP introduction. During Case 0.5, you will have seven workshops in which you will learn the basics of EBCP. The workshops will utilize different teaching techniques including small group work, internet tutorials, didactic sessions, independent readings, and independent projects. These sessions will occur at regularly scheduled times during the 2 week rotation, usually 8am-9am daily in JHOC 7163. Greg Prokopowicz delivers those lectures. Please page him before the rotation begins to verify the time and place of the lectures.

When you are not attending the EBCP teaching sessions, you will be expected to be a part of the comprehensive medical consultation service. 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 perform pre-operative consults, learn how to practice consult medicine, recommend DVT prophylaxis, and care for patients with anticoagulation needs. While on the consult service, you can begin to practice using your new or newly honed EBCP skills. The consultation service activities start at 9am (please refer to the accompanying schedule) 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 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 Loretta Hoepfner at 5-4027. You can also reach the fellow through a text page on pager box by typing in “gen med consult”.

You will continue to have your continuity clinic weekly. Please let the fellow know when you will be in clinic. If your clinic falls on a Wednesday or Thursday afternoon, you will spend the morning learning rheumatology and the MSK exam with Dr. Carol Ziminski at Good Sam. Please contact Dr. Ziminski through pagerbox or by e-mail, ziminski@jhmi.edu, at the beginning of the rotation to confirm the time and place of the clinic.

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-communication, and the program feels this is an opportune time to reflect on your skill-building in this important competence.

This exercise takes place in **the Blalock 4 Clinical Education Center**, which is located in between Halsted 4 and the Meyerhoff Endoscopy Unit on the following dates: 2/6, 2/20, 3/6, April to be determined, and 6/12. You should allow approximately 2 hours for the entire exercise. For more information, please contact Mark Hughes or Ruth Farrell.

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.

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| 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 |