General Internal Medicine Consults/Clinics

GOALS AND OBJECTIVES

Rotation Goals

Residents gain experience in the comprehensive pre- and peri-operative assessment and management of surgical patients, including optimization of medical comorbidities and perioperative risk stratification. In addition, residents provide consultative care to patients referred to General Internal Medicine from a wide range of other disciplines, in both inpatient and ambulatory settings. Through these experiences, residents acquire core competencies in the evaluation and management of diverse medical conditions central to General Internal Medicine practice, while developing the consultative skills required to support collaborative, multidisciplinary patient care.

Entrustable Professional Activities

CORE OF DISCIPLINE

C1 Assessing, diagnosing and managing patients with complex or atypical acute medical presentations
C2 Assessing, diagnosing, and managing patients with complex chronic diseases
C3 Providing medical consultation to other clinical services
C4 Assessing, resuscitating, and managing unstable and critically ill patients
C6 Assessing capacity for medical decision-making
C7 Discussing serious and/or complex aspects of care with patients, families, and caregivers
C8 Caring for patients who have experienced a patient safety incident (adverse event)
C9 Caring for patients at the end of life
C10 Implementing health promotion strategies in patients with or at risk for disease

TRANSITION TO PRACTICE

P1 Managing an inpatient medical service
P2 Managing a medical clinic
P3 Assessing and managing patients in whom there is uncertainty in diagnosis and/or treatment
P4 Providing consultations to off-site health care providers
P5 Initiating and facilitating transfers of care through the health care system
P6 Working with other physicians and healthcare professionals to develop collaborative patient care plans
P7 Identifying learning needs in clinical practice, and addressing them with a personal learning plan

P8 Identifying and analyzing system-level safety, quality or resource stewardship concerns in healthcare delivery

Clinical Presentations and Diagnoses

In alignment with the *Royal College Internal Medicine Competencies*, residents are expected to encounter and manage the following Medical Expert topics on this rotation:

Residents will be expected to cover the following patient presentations during this rotation with the goal of competently assessing and managing the following:

- Pre- & Peri-operative assessment
- Electrolyte abnormalities
- Troponin elevations
- Chest pain
- Tachycardia
- Fever/leukocytosis
- Hypotension/hypertension
- Acute kidney injury
- Obstetric medicine presentations
- Dyspnea and volume overload
- Altered mental status

Residents will be expected to cover the following diagnoses during this rotation with the goal of competently assessing and managing the following:

- Chronic diseases requiring perioperative management
- Obstetric medicine conditions
- Hypertension
- Diabetes
- Atrial fibrillation
- Weakness/fatigue
- Anemia/cytopenias
- COPD
- CHF
- Asthma
- Coronary artery disease
- DVT/PE
- MINS
- Acute kidney injury
- Electrolyte abnormalities
- Anemia of chronic disease

Objectives (by Stage of Training)

The specific objectives for this rotation align with the CanMEDS Competencies and Milestones as outlined in the *Royal College 2023 Entrustable Professional Activities for Internal Medicine document (Version 3.0, 2023)* and the *Royal College Internal Medicine Competencies (Version 1.0, 2018)*. Objectives are structured to ensure progressive acquisition of competence across stages.

Transition to Discipline

N/A – residents in TTD do not participate in this rotation.

Foundations of Discipline

N/A – residents in FOD do not participate in this rotation.

Core of Discipline

Medical Expert

1. Perform appropriately timed clinical assessments with recommendations that are presented in an organized manner (ME1.4)
2. Prioritize issues to be addressed in a patient encounter (ME2.1)
3. Establish goals of care in collaboration with patients and their families, which may include slowing disease progression, treating symptoms, achieving cure, improving function, and palliation (ME2.3)
4. Implement a patient-centred care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation (ME4.1)
5. Carry out professional duties in the face of multiple, competing demands (ME1.5)
6. Recognize and respond to harm from health care delivery, including patient safety incidents (ME5.1)
7. Adopt strategies that promote patient safety and address human and system factors (ME5.2)

Communicator

1. Elicit and synthesize accurate and relevant information, incorporating the perspectives of patients and their families (CM2)
2. Provide a clear structure for and manage the flow of an entire patient encounter (CM2.2)
3. Manage disagreements and emotionally charged conversations (CM1.5)

4. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)
5. Disclose harmful patient safety incidents to patients and their families accurately and appropriately (CM3.2)
6. Facilitate discussions with patients and their families in a way that is respectful, non-judgmental, and culturally safe (CM4.1)
7. Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements (CM5.1)

Collaborator

1. Negotiate overlapping and shared responsibilities with physicians and other colleagues in the health care professions in episodic and ongoing care (CL1.2)
2. Work with physicians and other colleagues in the health care professions to promote understanding, manage differences, and resolve conflicts (CL2)

Leader

1. Analyze patient safety incidents to enhance systems of care (LD1.3)
2. Engage in the stewardship of health care resources (LD2)

Health Advocate

1. Work with patients to address determinants of health that affect them and their access to needed health services or resources (HA1.1)
2. Work with patients and their families to increase opportunities to adopt healthy behaviors (HA1.2)
3. Incorporate disease prevention, health promotion, and health surveillance into interactions with individual patients (HA1.3)

Scholar

1. Integrate evidence into decision-making in their practice (SC3.4)

Professional

1. Exhibit appropriate professional behaviors and relationships in all aspects of practice, demonstrating honesty, integrity, humility, commitment, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality (PR1.1)

Transition to Practice

Medical Expert

1. Perform a patient-centered clinical assessment and establish a management plan (ME2)
2. Carry out professional duties in the face of multiple, competing demands (ME1.5)
3. Prioritize issues to be addressed in a patient encounter (ME2.1)
4. Implement a patient-centered care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation (ME4.1)
5. Recognize and respond to harm from health care delivery, including patient safety incidents (ME5.1)
6. Adopt strategies that promote patient safety and address human and system factors (ME5.2)

Communicator

1. Elicit and synthesize accurate and relevant information, incorporating the perspectives of patients and their families (CM2)
2. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)
3. Engage patients and their families in developing plans that reflect the patient's health care needs and goals (CM4)
4. Facilitate discussions with patients and their families in a way that is respectful, non-judgmental, and culturally safe (CM4.1)
5. Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements (CM5.1)

Collaborator

1. Establish and maintain positive relationships with physicians and other colleagues in the health care professions to support relationship-centered collaborative care (CL1.1)
2. Engage in respectful shared decision-making with physicians and other colleagues in the health care professions (CL1.3)
3. Work with physicians and other colleagues in the health care professions to promote understanding, manage differences, and resolve conflicts (CL2)
4. Determine when care should be transferred to another physician or health care professional (CL3.1)
5. Demonstrate safe handover of care, using both verbal and written communication, during a patient transition to a different health care professional, setting, or stage of care (CL3.2)

Leader

1. Analyze patient safety incidents to enhance systems of care (LD1.3)
2. Engage in the stewardship of health care resources (LD2)
3. Set priorities and manage time to integrate practice and personal life (LD4.1)

4. Implement processes to ensure personal practice improvement (LD4.3)

Health Advocate

1. Work with patients to address determinants of health that affect them and their access to needed health services or resources (HA1.1)

Scholar

1. Develop, implement, monitor, and revise a personal learning plan to enhance professional practice (SC1.1)
2. Recognize practice uncertainty and knowledge gaps in clinical and other professional encounters and generate focused questions that address them (SC3.1)
3. Integrate evidence into decision-making in their practice (SC3.4)

Professional

1. Exhibit appropriate professional behaviors and relationships in all aspects of practice, demonstrating honesty, integrity, humility, commitment, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality (PR1.1)
2. Demonstrate a commitment to society by recognizing and responding to societal expectations in health care (PR2)
3. Fulfill and adhere to the professional and ethical codes, standards of practice, and laws governing practice (PR3.1)
4. Promote a culture that recognizes, supports, and responds effectively to colleagues in need (PR4.3)