



# Rheumatology GOALS AND OBJECTIVES

## **Rotation Goals**

Through the care of patients presenting with acute, chronic, and systemic rheumatologic conditions, residents will develop the skills required to evaluate, diagnose, and manage a wide spectrum of musculoskeletal and autoimmune diseases. This rotation emphasizes the role of Rheumatology consultation in both inpatient and outpatient settings, providing residents with experience in conditions ranging from common presentations such as monoarthritis and gout to complex systemic disorders such as lupus and vasculitis. Residents will also gain exposure to disease-modifying therapies, their monitoring, and complications, as well as the importance of multidisciplinary collaboration in managing chronic and multisystem disease. By the end of the rotation, residents will be able to competently assess and manage common rheumatologic conditions, recognize when subspecialty input is required, and apply evidence-informed strategies to optimize patient outcomes.

## **Entrustable Professional Activities**

## TRANSITION TO DISCIPLINE

D1 Performing histories and physical exams, documenting and presenting findings, across clinical settings for initial and subsequent care

## **FOUNDATIONS OF DISCIPLINE**

- F1 Assessing, diagnosing, and initiating management for patients with common acute medical presentations in acute care settings
- F4 Formulating, communicating, and implementing discharge plans for patients with common medical conditions from acute care settings
- F6 Discussing and establishing patients' goals of care
- F7 Identifying personal learning needs while caring for patients and addressing those needs

## **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
- C5 Performing the procedures of Internal Medicine
- 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)
- C10 Implementing health promotion strategies in patients with or at risk for disease
- C11 Teaching and assessing junior learners through supervised delivery of clinical care





## 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
- 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

# **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 <u>patient presentations</u> during this rotation with the goal of competently assessing and managing the following:

- Monoarthritis
- Polyarthritis
- Muscle weakness/pain
- Raynaud's phenomenon
- Systemic rheumatologic syndrome
- DMARD complication

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

- Lupus
- Rheumatoid arthritis
- Vasculitis
- Raynaud's phenomenon
- Gout
- Septic arthritis
- Osteoarthritis
- Sero-negative arthropathy
- Temporal arteritis/PMR
- Fibromyalgia
- Paget's disease of bone
- Ankylosing spondylitis and related spondyloarthropathies
- Scleroderma





# 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

## **Medical Expert**

- 1. Perform appropriately timed clinical assessments with recommendations that are presented in an organized manner (ME1.4)
- 2. Implement a patient-centered care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation (ME4.1)

## Communicator

- 1. Communicate using a patient-centred approach that encourages patient trust and autonomy and is characterized by empathy, respect, and compassion (CM1.1)
- 2. Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements (CM5.1)

## Foundations of Discipline

## Medical Expert

- 1. Perform appropriately timed clinical assessments with recommendations that are presented in an organized manner (ME1.4)
- 2. Recognize and respond to the complexity, uncertainty, and ambiguity inherent in medical practice (ME1.6)
- 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. Establish a patient-centered management plan (ME2.4)

## Communicator

- 1. Establish professional therapeutic relationships with patients and their families (CM1)
- 2. Adapt to the unique needs and preferences of each patient and to his or her clinical condition and circumstances (CM1.6)
- 3. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)
- 4. Use communication skills and strategies that help patients and their families make informed decisions regarding their health (CM4.3)
- 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)

## Scholar

- 1. Develop, implement, monitor, and revise a personal learning plan to enhance professional practice (SC1.1)
- 2. Identify, select, and navigate pre-appraised resources (SC3.2)

## Professional

- 1. Exhibit appropriate professional behaviours 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. Fulfill and adhere to the professional and ethical codes, standards of practice, and laws governing practice (PR3.1)

## Core of Discipline

## **Medical Expert**

- 1. Perform appropriately timed clinical assessments with recommendations that are presented in an organized manner (ME1.4)
- 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. 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)
- 5. Plan and perform procedures and therapies for the purpose of assessment and/or management (ME3)
- 6. Perform a procedure in a skilful and safe manner, adapting to unanticipated findings or changing clinical circumstances (ME3.4)
- 7. Establish plans for ongoing care and, when appropriate, timely consultation (ME4)
- 8. Implement a patient-centred care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation (ME4.1)

#### Communicator

- 1. Establish professional therapeutic relationships with patients and their families (CM1)
- Provide a clear structure for and manage the flow of an entire patient encounter (CM2.2)
- 3. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)
- 4. Facilitate discussions with patients and their families in a way that is respectful, non-judgmental, and culturally safe (CM4.1)
- 5. Use communication skills and strategies that help patients and their families make informed decisions regarding their health (CM4.3)





6. Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements (CM5.1)

## Collaborator

- 1. Work effectively with physicians and other colleagues in the health care professions (CL1)
- 2. Negotiate overlapping and shared responsibilities with physicians and other colleagues in the health care professions in episodic and ongoing care (CL1.2)

#### Leader

1. 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 best available evidence into practice (SC3)

## 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 appropriately timed clinical assessments with recommendations that are presented in an organized manner (ME1.4)
- 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. Plan and perform procedures and therapies for the purpose of assessment and/or management (ME3)
- 5. Implement a patient-centered care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation (ME4.1)
- 6. Adopt strategies that promote patient safety and address human and system factors (ME5.2)

## Communicator

- 1. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)
- 2. Engage patients and their families in developing plans that reflect the patient's health care needs and goals (CM4)





- 3. Facilitate discussions with patients and their families in a way that is respectful, non-judgmental, and culturally safe (CM4.1)
- 4. 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. Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports a collaborative culture (CL2.2)

## Leader

- 1. Engage in the stewardship of health care resources (LD2)
- 2. Set priorities and manage time to integrate practice and personal life (LD4.1)
- 3. 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

- 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 accountability to patients, society, and the profession by responding to societal expectations of physicians (PR2.1)
- 3. Fulfill and adhere to the professional and ethical codes, standards of practice, and laws governing practice (PR3.1)