# GOALS AND OBJECTIVES FOR THE NEUROLOGY CLINICAL TEACHING UNITS

#### Goal

Through caring for patients with neurologic presentations (including stroke/TIA and general neurology conditions), residents learn the fundamentals of neurologic history-taking and the neurologic examination. Residents apply these skills to generate differential diagnoses and implement management plans appropriate for common neurologic presentations. Additionally, residents acquire competencies in coordinating care through multidisciplinary teams, responding to patient safety concerns, addressing complex ethical challenges, and caring for patients at the end of life.

# **Entrustable Professional Activities**

#### TRANSITION TO DISCIPLINE

- D1 Performing histories and physical exams, documenting and presenting findings, across clinical settings for initial and subsequent care
- D2 Identifying and assessing unstable patients, providing initial management, and obtaining help
- D3 Performing the basic procedures of internal medicine

#### FOUNDATIONS OF DISCIPLINE

- F1 Assessing, diagnosing, and initiating management for patients with common acute medical presentations in acute care settings
- F2 Managing patients admitted to acute care settings with common medical problems and advancing their care plans
- F3 Consulting specialists and other health professionals, synthesizing recommendations, and integrating these into the care plan
- F4 Formulating, communicating, and implementing discharge plans for patients with common medical conditions from acute care settings
- F5 Assessing and providing targeted treatment for unstable patients and consulting as needed
- F6 Discussing and establishing patients' goals of care
- F7 Identifying personal learning needs while caring for patients and addressing those needs
- F8 Providing and receiving handover in transitions of care

#### **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
- C4 Assessing, resuscitating, and managing unstable and critically ill patients
- C5 Performing the procedures of Internal Medicine
- 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
- 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
- P8 Identifying and analyzing system-level safety, quality or resource stewardship concerns in healthcare delivery

#### PRESENTATIONS TO COVER

Seizures

Neurodegenerative disease

Stroke

Sensory and/or motor deficit (non-

stroke)

Dizziness / vertigo

Tremor

Headache

CNS Infectious syndrome

#### **DIAGNOSES TO COVER**

CNS infections

Seizure disorder

Delirium

Stroke/TIA

Motor system disorder

Peripheral neuropathy

CNS structural lesion/mass

Migraine / headache disorder

# **Objectives (by Stage of Training)**

### **Transition to Discipline** (10 objectives)

#### **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. Elicit a history, perform a physical exam, select appropriate investigations, and interpret their results for the purpose of diagnosis and management, disease prevention, and health promotion (ME2.2)
- 4. Plan and perform procedures and therapies for the purpose of assessment and/or management (ME3)
- 5. 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)
- 2. Share health care information and plans with patients and their families (CM3)
- 3. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)
- 4. Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements (CM5.1)

#### Collaborator

1. 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 (CL 3.2)

# Foundations of Discipline (20 objectives)

#### **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. Implement a patient-centered care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation (ME4.1)
- 5. Adopt strategies that promote patient safety and address human and system factors (ME5.2)

#### Communicator

- 1. Establish professional therapeutic relationships with patients and their families (CM1)
- Elicit and synthesize accurate and relevant information, incorporating the perspectives of patients and their families (CM2)
- 3. Share health care information and plans with patients and their families (CM3)
- 4. Engage patients and their families in developing plans that reflect the patient's health care needs and goals (CM4)
- 5. Document and share written and electronic information about the medical encounter to optimize clinical decision-making, patient safety, confidentiality, and privacy (CM5)

#### Collaborator

- 1. Work effectively with physicians and other colleagues in the health care professions (CL 1)
- 2. Engage in respectful shared decision-making with physicians and other colleagues in the health care professions (CL 1.3)
- 3. 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 (CL 3.2)

#### **Health Advocate**

- Respond to an individual patient's health needs by advocating with the patient within and beyond the clinical environment (HA 1)
- 2. Incorporate disease prevention, health promotion, and health surveillance into interactions with individual patients (HA 1.3)

#### **Scholar**

- 1. Develop, implement, monitor, and revise a personal learning plan to enhance professional practice (SC 1.1)
- 2. Integrate best available evidence into practice (SC 3)

#### **Professional**

- 1. Demonstrate a commitment to patients by applying best practices and adhering to high ethical standards (PR 1)
- 2. Demonstrate a commitment to society by recognizing and responding to societal expectations in health care (PR 2)
- 3. Fulfill and adhere to the professional and ethical codes, standards of practice, and laws governing practice (PR 3.1)

# Core of Discipline (29 objectives)

#### **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. Recognize and respond to the complexity, uncertainty, and ambiguity inherent in medical practice (ME1.6)
- 4. Establish a patient-centred management plan (ME2.4)
- 5. Plan and perform procedures and therapies for the purpose of assessment and/or management (ME3)
- 6. Implement a patient-centred care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation (ME4.1)
- 7. Recognize and respond to harm from health care delivery, including patient safety incidents (ME5.1)
- 8. Adopt strategies that promote patient safety and address human and system factors (ME5.2)

#### **Communicator**

- 1. Recognize when the values, biases, or perspectives of patients, physicians, or other health care professionals may have an impact on the quality of care, and modify the approach to the patient accordingly (CM1.3)
- 2. Manage disagreements and emotionally charged conversations (CM1.5)
- 3. Elicit and synthesize accurate and relevant information, incorporating the perspectives of patients and their families (CM2)
- 4. Provide a clear structure for and manage the flow of an entire patient encounter (CM2.2)
- 5. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)
- 6. Disclose harmful patient safety incidents to patients and their families accurately and appropriately (CM3.2)
- 7. Engage patients and their families in developing plans that reflect the patient's health care needs and goals (CM 4)
- 8. Document and share written and electronic information about the medical encounter to optimize clinical decision-making, patient safety, confidentiality, and privacy (CM 5)

#### Collaborator

- 1. Engage in respectful shared decision-making with physicians and other colleagues in the health care professions (CL1.3)
- 2. Negotiate overlapping and shared responsibilities with physicians and other colleagues in the health care professions in episodic and ongoing care (CL1.2)
- 3. 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. Allocate health care resources for optimal patient care (LD2.1)
- 3. Demonstrate leadership in professional practice (LD3)
- 4. Set priorities and manage time to integrate practice and personal life (LD4.1)

#### **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. Demonstrate a commitment to patients by applying best practices and adhering to high ethical standards (PR1)
- 2. Fulfill and adhere to the professional and ethical codes, standards of practice, and laws governing practice (PR3.1)

# Transition to Practice (24 objectives)

#### **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. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)
- 2. Facilitate discussions with patients and their families in a way that is respectful, non-judgmental, and culturally safe (CM4.1)
- 3. 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. Negotiate overlapping and shared responsibilities with physicians and other colleagues in the health care professions in episodic and ongoing care (CL1.2)
- 3. Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports a collaborative culture (CL2.2)

#### 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 the profession by adhering to standards and participating in physician-led regulation (PR3)
- 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)