

Hospitalist Rotation Curriculum

UCLA – Olive View Medicine Residency Program

Rotation Description and Structure

The training site for this rotation is the Olive View-UCLA Medical Center. The rotation is designed for a PGY-2 or PGY-3 resident, who will be integrated with the Hospitalist Service, which includes the attending and nurse practitioner. The resident will provide direct patient care to patients managed by the service as well as consultative care for other hospitalized patients. Duty hours are designed to be compliant with the RRC requirements. The resident will also be engaged in daily didactics and develop a presentation reviewing a clinically relevant topic in evidence-based medicine.

Rotation Objectives:

- Develop autonomy, efficiency and reliability in patient care by providing direct patient care in a high turnover setting.
- Develop skills in navigating systems-based practice, particularly regarding efficient patient throughput.
- Identify the evidence and guidelines for efficient evaluation of common acute conditions and consultative care.
- Describe the common issues and their management in peri-operative surgical patients.
- Appropriately triage patients from the ED to the inpatient services.
- Learn and apply the basics of appropriate medical documentation and billing.
- Review and present a recent journal article pertaining to inpatient medicine at morning report journal club.

Educational Objectives:

Become familiar with common diagnoses associated with shorter length of stay hospitalizations. Particular emphasis will be placed on the following diagnoses with specific goals listed in the curriculum addendum.

- Acute Coronary Syndrome
- Acute Renal Failure
- Asthma
- Blood Transfusions and Reactions
- Cellulitis
- Chronic Obstructive Pulmonary Disease
- Community Acquired Pneumonia

- Low Risk Chest Pain
- Pain Management
- Perioperative Medicine
- Syncope
- Urinary Tract Infection and Low Grade Pyelonephritis
- Venous Thromboembolism

Skills Objectives:

Procedures: Residents should gain experience in performing the common procedures at which hospitalists are expected to be proficient. Procedures are the responsibility of the hospitalist resident. If the supervising hospitalist is unavailable to assist in the procedure, the Procedure Service should be contacted for attending supervision. See addendum for goals of common procedures.

Electrocardiograms: Become proficient in interpreting and basing clinical decisions on EKG findings. See addendum for specific goals.

Chest Radiographs: Become proficient in reading and interpreting abnormal CXR findings. See addendum for specific goals.

Educational Materials:

- Online publications are available on the hospital campus and through UCLA.

Teaching Methods:

- **Direct patient care:** Learning is centered around patients, and residents are expected to supplement their learning with additional reading
- **Didactics:** Residents on this rotation are required to attend Noon Conference and Morning Report. The attending on service may add supplemental didactics.
- **Literature review and presentation:** The resident will be engaged in a review of the primary literature for specific clinical topic, which the resident will be responsible to present to peers on other inpatient rotations.

Method of Evaluation:

Residents will be evaluated in each of the six core ACGME competencies through the acquisition and application of the educational objectives and skills objectives.

1. Patient care
2. Medical Knowledge
3. Interpersonal and communication skills
4. Professionalism
5. Practice-based learning
6. Systems-based practice

Each resident will be evaluated by the Hospitalist group as a whole, and a composite evaluation will be submitted. Hospitalist attendings may provide immediate direct verbal feedback while working with the resident.

The written evaluations will be submitted electronically, and can then be reviewed by the resident at any time and by the Clinical Competency Committee.