OVERARCHING GOALS FOR STUDENTS ON THE SUBINTERNSHIP:

- Taking on primary responsibility for the patient.
- Focusing histories, physicals, and oral and written communication appropriately.
- Sharing information effectively with a patient and family.
- Prioritizing and organizing work effectively.
- Anticipating what a patient will need during the course of hospitalization (i.e. when they need to be re-examined, when a lab needs to be repeated, when additional therapy is necessary, when additional history needs to be obtained, discharge criteria) and communicating this information effectively in handovers.
- Re-evaluating a patient when you take on their care (i.e. the assessment and plan, as well as the clinical status) and looking further when the clinical picture does not fit.
- Continuing to think about and re-assess the patient during the course of the day.
- Coping with uncertainty in patient care issues (i.e. knowing what you know and what you don’t know, accessing best resources, and knowing when and how to get help).
- Functioning as a “team player” with residents, attendings, nurses, ancillary staff and all others involved in the care of the patient.
- Coordinating the care of your patient during hospitalization and in planning for discharge.

PATIENT-CENTERED MEDICAL CARE

Provide patient care that is compassionate, appropriate and effective with attention to the patients’ perspectives, needs, values and comfort

1. Independently collect both focused and comprehensive patient histories (DO, CPE) (PCMC-1)
2. Independently perform both focused and comprehensive physical examinations (DO, CPE) (PCMC-2)
3. Create independent, accurate and comprehensive written history & physicals (DO, CPE) (PCMC-3)
4. Identify and record the reason for the patient’s admission (HP, CC) (ECIS-2)
5. Synthesize clinical data into cohesive assessments and appropriately prioritize differential diagnoses (DO, HP, CC) (PCMC-3)
6. Independently propose daily management plans, incorporating patient preferences & values (DO, CC, CPE) (PCMC-3)
7. Create concise, accurate and up-to-date daily progress notes (DO, CPE) (ECIS-2, PCMC-3)
8. Interpret diagnostic test results in a clinical context (DO, HP, CC) (PCMC-3)
9. Demonstrate sound clinical judgment when patients have acute care needs (DO, CC) (PCMC-3)
10. Formulate appropriate orders and prescriptions for discharge and ongoing care (DO, CPE) (MKS-3b, SATBC-3)
11. Identify relevant clinical information necessary for hand-offs and participate in daily hand-off of care (DO, CPE) (SATBC-3)
12. Practice appropriate infection control measures while caring for patients (DO) (CLQI-5)

COMMUNICATION & INTERPERSONAL SKILLS

Demonstration of communication and interpersonal skills and strategies that result in respectful, compassionate and effective information exchange and decision making with patients, families, members of the healthcare team and other colleagues

1. Give succinct & accurate verbal presentations and be able to defend your assessments (DO, CPE) (ECIS-3, PCMC-3)
2. Gather patient information using active verbal and non-verbal listening skills, clarifying and summarizing statements, and open-ended and closed-ended questions within a structured format (DO) (ECIS-1, PCMC-1)
3. Communicate effectively with patients at the bedside, including counseling & education skills (CPE) (ECIS-3, PCMC-6)
4. Share information with the patient and family in a way that facilitates their understanding (DO, CPE) (ECIS-3)
5. Provide education and patient instructions to patients and families, using written or visual methods, taking into account their health literacy level (CPE) (PCMC-6)
6. Communicate effectively with primary care physicians regarding patient handoff’s (CPE) (SATBC-2b, SATBC-3)
7. Demonstrate the willingness to engage in difficult conversations (with adequate supervision) (DO, CPE) (ECIS-4)
8. Write well-organized, appropriately focused, and accurate patient notes, including admission, progress, cross-cover, and discharge notes and summaries (CPE, HP, DC) (ECIS-2, PCMC-3)

MEDICAL KNOWLEDGE & SCHOLARSHIP
Demonstrate sufficient knowledge to provide patient care with appropriate supervision

1. Demonstrate knowledge of core basic science concepts, pathophysiology, & pharmacology (DO, CPE, CC) (MKS-1a, MKS-1b, MKS-1e)
2. Describe the clinical findings of common conditions that require hospitalization (CPE, CC) (MKS-1d)
   a. Chest pain: evaluation and initial management
   b. Acute dyspnea: evaluation and initial management
   c. Diffuse abdominal pain: evaluation and initial management
   d. Delirium, altered mental status: evaluation and initial management
   e. Fever: evaluation and initial management
   f. Acute renal failure: evaluation and initial management
   g. Acute gastrointestinal bleeding: evaluation and initial management
   h. Electrolyte imbalance: evaluation and initial management
   i. Hypertensive urgency, elevated blood pressure: evaluation and initial management
   j. Pain management: evaluation and initial management
   k. Hyperglycemia: evaluation and initial management
   l. Management of the complex medical patient and prevention of complications
3. Apply core knowledge at the bedside, and demonstrate sound clinical reasoning skills (DO, CPE) (PCMC-3)
4. Independently assess available clinical evidence & apply it to direct patient care (DO, CPE, CC) (PCMC-3)
5. Give a concise & clinically relevant educational presentation to your team (DO) (PCMC-3)

PRACTICED BASED LEARNING AND IMPROVEMENT
Use evidence based medicine and self-directed learning in the care of patients and education of others.

1. Self-identify limitations & knowledge deficits and show a commitment to making improvements (ILP) (CLQI-2, PBMR-7)
   a. Identify strengths, deficiencies, and limits in one’s knowledge and clinical skills through self-evaluation
   b. Acknowledge own uncertainty
   c. Develop and record a plan for improvement
   d. Perform appropriate learning activities
2. Say "I don’t know" & ask for help (balancing autonomy & supervision) when appropriate (ILP) (CLQI-2)
3. Demonstration of intellectual curiosity & the skills required to be a life-long learner (CC, DO, ILP) (CLQI-2, PBMR-7)
4. Identify & report one patient safety or quality improvement issue which you encountered (CC) (CLQI-4, CLQI-5)
5. Participate in the education of patients, families, and the health care team (CPE) (PCMC-6, SATBC-2a, SATBC-2b)
6. Indicate how you used information technology to optimize learning (CLQI-3, PCMC-5)
SYSTEM AWARENESS & TEAM-BASED CARE
Strive to provide high-quality health care and advocate for patients within the context of the health care system.

1. Work efficiently & effectively as the acting intern on a busy academic medical service (CPE) (SATBC-2a)
2. Interact effectively with consultants, nurses, discharge planners and social workers (CPE) (SATBC-2b)
3. Create concise & accurate sign-out documents for the night float team (CPE, SS) (SATBC-3)
4. Create concise & accurate discharge summaries which promote safe transitions of care (DC, CPE, SS) (SATBC-3)
5. Coordinate transition from inpatient to home care (SATBC-3)
   a. Identify medical needs (e.g., medications, nutrition, activity, and equipment) (DC)

PROFESSIONAL BEHAVIOR & MORAL REASONING
Demonstrate a commitment to accountability, excellence in practice, adherence to ethical principles, humanism, altruism, and sensitivity to diversity

1. Interact with health-care team, patients and families in a professional manner at all times (DO) (PBMR-3)
2. Demonstrate integrity, compassion, respect, altruism, and empathy when interacting with all members of the health care team, patients and their families (CPE, DO) (PBMR-3)
3. Handle daily patient care responsibilities in a reliable and efficient manner (DO, CPE) (PBMR-5)
4. Actively participate in case discussions with classmates regarding ethical dilemmas (DO, CPE) (PBMR-1, PBMR-7)
5. Demonstrate a humanistic, family-centered approach to the care of the patient (CPE) (PBMR-3)
6. Adhere to institutional guidelines, including those regarding attire, language, documentation, and confidentiality (CPE) (PBMR-3, PBMR-6)
7. Maintain appropriate professional boundaries with patients, families, and staff (CPE) (PBMR-1, PBMR-3)

PERSONAL AWARENESS & SELF-CARE
Demonstrate a commitment to professional responsibilities and behavior as well as the ability to understand, reflect upon and integrate ethical and moral dimensions of healthcare.

1. Seek feedback on your performance & respond to feedback in a professional manner (CPE, DO) (CLQI-1a)
2. Give feedback to your team members & clerkship director in a professional manner (CLQI-1b)
3. Demonstrate the ability to manage stress and balance personal & professional demands for time (CPE, DO) (PASC-2)

COMMUNITY ENGAGEMENT AND SERVICE
Demonstrate knowledge of community factors that influence individual, community and public health and gain perspective and experience through service-learning activities within local or global community settings

1. Identify advocacy and equity issues as they arise during the course of your daily clinical care (DO, CC) (CES-1, CES-2)
2. Reflect thoughtfully on how we can advocate for our patients and improve delivery of care (DO, ILP) (CES-2)

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Methods of Assessment code:
DO - Direct Observation
CC - Case Conference
CPE - Clinical Performance Evaluation
HP - History and Physical Examination
DC - Discharge Summary
SS - Simulation Session/On-line learning exercise
ILP - Individual Learning Plan