GOALS & OBJECTIVES

Obstetrics and Gynecology Sub-Internship

OVERARCHING GOALS FOR STUDENTS ON THE SUBINTERNSHIP:

Students will:

- Take on primary responsibility for patients and share information effectively with patients and their families. (PBMR-7, ECIS-3)
- Prioritize and organize work efficiently; demonstrate time management skills to coordinate care at the level of an intern simultaneously for multiple patients. (PBMR-5,7)
- Function as a “team player” with residents, attendings, nurses, and ancillary staff. (SATBC-2a,2b)
- Coordinate care of patients through the continuum of their hospitalization, including:
  - Anticipate patient care needs and address changing priorities (PBMR-7, SATBC-2a,2b,3)
  - Coordinate care and communicate information effectively at the time of admission, in handovers, with consultants, and when planning discharges (SATBC-2a,2b,3)
- Cope with uncertainty in patient care issues and apply EBM principles. (CLQI-3, PCMC-3)

OB-GYN SUBINTERNSHIP—SPECIFIC OBJECTIVES

The following are the objectives for the rotation, mapped to the Feinberg School of Medicine Competencies and to the Association for American Medical Colleges Entrustable Professional Activities (AAMC EPA’s):

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

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 (DO, CPA) (ECIS-3, PCMC-3) & (EPA-6)
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) & (EPA-1)
3. Communicate effectively with patients at the bedside, especially counseling & education skills (CPA) (ECIS-3, PCMC-6)
4. Share information with the patient and family in a way that facilitates their understanding (DO, CPA) (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 (CPA) (SATBC-2b, SATBC-3) & (EPA-8)

7. Demonstrate the willingness to engage in difficult conversations (with adequate supervision) (DO, CPA) (ECIS-4)

8. Write well-organized, appropriately focused, and accurate patient notes, including admission, progress, cross-cover, and discharge notes and summaries (CPA, HP, DC) (ECIS-2, PCMC-3) & (EPA-5)

**MEDICAL KNOWLEDGE & SCHOLARSHIP**

Demonstrate sufficient knowledge to provide patient care with appropriate supervision

1. Describe the clinical findings of common antepartum conditions that require hospitalization (CPA, CC) (MKS-1d) & (EPA-2)
   a. Preterm labor
   b. Premature rupture of membranes
   c. Hypertensive disorders of pregnancy (preeclampsia, gestational HTN)
   d. Endocrine disorders (diabetes mellitus, thyroid disease)
   e. Back pain
   f. Urinary symptoms
   g. Decreased fetal movement
   h. Multiple gestation
   i. Intrauterine growth restriction
   j. HIV
   k. Autoimmune diseases (SLE, rheumatoid arthritis)

2. Apply core knowledge at the bedside, and demonstrate sound clinical reasoning skills (DO, CPA) (PCMC-3) & (EPA-2)

3. Independently assess available clinical evidence & apply it to direct patient care (DO, CPA, CC) (PCMC-3) & (EPA-7)

4. Give a concise & clinically relevant educational presentation to your team (DO) (PCMC-3) & (EPA-6)

**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) & (EPA-13)
   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-1a, CLQI-2) & (EPA-13)

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) & (EPA-13)

5. Participate in the education of patients, families, and the health care team (CPA) (PCMC-6, SATBC-2a, SATBC-2b)

6. Indicate how you used information technology to optimize learning (CLQI-3, PCMC-5) & (EPA-7)

**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 (CPA) (SATBC-2a) & (EPA-9)
2. Interact effectively with consultants, nurses, discharge planners and social workers (CPA) (SATBC-2b) & (EPA-9)
3. Create concise & accurate sign-out documents for the night float team (CPA, SS) (SATBC-3) & (EPA-8)
4. Coordinate transition from inpatient to home care (SATBC-3) & (EPA-8)
   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, humanity, 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 (CPA, DO) (PBMR-3)
3. Handle daily patient care responsibilities in a reliable and efficient manner (CPA, CPE) (PBMR-5)
4. Actively participate in case discussions with classmates regarding ethical dilemmas (DO, CPA) (PBMR-1, PBMR-7)
5. Demonstrate a humanistic, family-centered approach to the care of the patient (CPA) (PBMR-3)
6. Adhere to institutional guidelines, including those regarding attire, language, documentation, and confidentiality (CPA) (PBMR-3, PBMR-6)
7. Maintain appropriate professional boundaries with patients, families, and staff (CPA) (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 (CPA, DO) (CLQI-1a) & (EPA-13)
2. Give feedback to your team members & clerkship director in a professional manner (CLQI-1b) & (EPA-13)
3. Demonstrate the ability to manage stress and balance personal & professional demands for time (CPA, 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)
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