

SPALDING INTERNAL MEDICINE RESIDENCY CURRICULUM OUTLINE

Updated August 12, 2024

Rotations

PGY-1

- Inpatient wards (5 mos.)
- Ambulatory medicine and geriatrics (2 mos.)
- ICU (2 mos.)
- Night float (1 mo.)
- Hospice and palliative care (2 to 4 wks.)
- Vacation (3 wks.)

PGY-2

- Inpatient wards (3 mos.)
- Ambulatory medicine and geriatrics (2 mos.)
- ICU (1 mo.)
- Night float (1 mo.)
- Neurology (2 to 4 wks.)
- Emergency medicine (2 to 4 wks.)
- Individual educational experience (3 mos.)
- Vacation (3 wks.)

PGY-3

- Inpatient wards (3 mos.)
- Ambulatory medicine and geriatrics (2 mos.)
- ICU (1 mo.)
- Night float (2 to 4 wks.)
- Individual educational experience (3 mos.)
- Vacation (3 wks.)

Didactics

Our didactic curriculum provides opportunities for residents to augment their clinical experience and improve their public speaking skills. These are considered protected times to maximize education. Conferences are broadcast on Microsoft Teams so that residents working outside the hospital may participate. We also maintain recordings of didactic sessions so that residents unable to attend the session can watch them asynchronously.

Weekly:

Inpatient wards and ICU, 7 AM to 5 PM; on call every fourth day, 7 AM to 9 PM, minimum one day per week. Night float, 9 PM to 7 AM.

- Monday, Tuesday, Wednesday, 12 to 1 PM: Noon conferences
- Friday, 12 to 1 PM: Inpatient report and resident report
- Wednesday, 8 AM: Ambulatory morning report
- Thursday, 12 to 1 PM: Grand rounds

Monthly:

- Case of the month
- Journal club
- Mortality and morbidity and improvement conference
- Point of Care US (POCUS)
- Quality improvement/patient safety conference
- Wellness committee sessions
- Diversity, equity and inclusion conferences
- Medical jeopardy

Board Review:

- Med study videos
- MKSAP-19
- ACP board prep curriculum
- Board review sessions by faculty
- REA funds can be used toward educational reimbursement for board prep of choice with pre-approval

Other Educational Sources:

- UpToDate
- Dynamed
- ACP subscription with resources on high-value care, social determinants of health, pain modules
- Wellstar Medical Library

AMA GME Curriculum:

- Medical knowledge
- Communication and interpersonal skills
- Patient care
- System-based practice
- Practice-based learning and improvement
- Professionalism

Ambulatory:

Ambulatory care medicine is an integral part of the internal medicine residency experience. During this rotation, residents will gain experience in primary care and specialties such as ENT, ophthalmology, orthopaedics and wound care. This rotation enhances their knowledge of common issues frequently encountered by primary care providers. Each year, all residents will complete an ambulatory care rotation for eight weeks (two blocks). The overall goal is to immerse residents in ambulatory care experiences, allowing them to appreciate the diverse aspects of ambulatory medicine in various outpatient settings. This time will be divided into several areas, with residents working in different specialty clinics depending on their year of training. Additionally, community outreach, quality improvement and patient safety curriculums are integrated into this rotation.

- Ambulatory morning report
- IHI quality improvement modules
- Physician Education and Assessment Center (PEAC), Johns Hopkins ambulatory modules
- ACP social determinants of health modules
- ACP pain modules

Emergency Medicine:

The ability to promptly and efficiently evaluate patients under emergency situations is a critical skill for internists. The goals of this rotation are to equip the resident to be able to triage, diagnose and treat common medical problems in need of urgent and emergency response and to provide an environment where the resident can learn to provide appropriate physical and emotional care in a cost-effective manner to patients who present to the emergency department.

ICU:

The Intensive Care Unit rotation is a rigorous clinical training experience focusing on the diagnosis and management of patients with critical medical illness and in emergent medical situations. Residents will be responsible for the direct care of patients assigned to them in the ICU from admission to discharge/transfer, under the supervision of intensivist. Residents will admit or transfer patients to the ICU as well as respond to emergency medical codes throughout the hospital during this rotation.

The inpatient medicine service is a longitudinal, educational program with a primary focus on managing hospitalized patients by providing evidence-based, high-quality and cost-conscious care. This rotation is intended to allow residents to refine their history taking and physical exam skills, as well as develop skills in selecting diagnostic tests, assessment and management plans based on evidence-based guidelines and critical review and implementation of current literature. The rotation is an opportunity to work with subspecialty consultants and learn to work with a care coordination team.

Night Float:

The night float rotation is designed to provide residents with a structured and supportive experience in managing acute patient care during nighttime hours. This rotation involves working overnight shifts (9 PM to 7 AM), during which residents are responsible for admitting new patients, addressing emergent issues and providing continuity of care through cross-coverage for existing inpatients. Under the supervision of senior residents and attending physicians, night float residents develop critical decision-making skills, enhance their proficiency in diagnostic evaluations and gain valuable experience in managing a wide range of medical conditions.

Core Subspecialties:

- Cardiology
- Nephrology
- Pulmonology
- Gastroenterology
- Infectious disease
- Hematology/oncology
- Endocrinology
- Rheumatology