

Curriculum on Gastroenterology Danbury Hospital Internal Medicine Residency Program

Faculty Representatives: Mike Schiffman MD, Steve Goerelick MD
Faculty Editor: Dino Messina MD PhD
Resident Representative: A. Lungulescu, J. Periyapperuma
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A. Educational Purpose and Goals

The GI rotation is designed to provide the resident with a comprehensive overview of the subspecialty of gastroenterology.

The overall objectives are to provide the resident with a critical, in depth approach to the diagnosis and management of common gastroenterological and hepatobiliary diseases. Emphasis is placed on cost effective use of laboratory, radiological and endoscopic procedures, and the pharmacology and appropriate use of drugs for GI diseases. The resident has the opportunity to observe endoscopic procedures.

B. Teaching Methods

The consultative team consists typically of a faculty member and one resident. This team is responsible for providing GI consultations for inpatients at Danbury Hospital center. Primary teaching mechanism is daily consultation rounds which include didactic sessions and patient management rounds. In addition, instruction in ambulatory outpatient gastroenterology is provided at the DOPS private offices.

The multidisciplinary aspects of gastroenterology are emphasized in conferences with the radiology and pathology departments. The resident learns the use of in-depth literature surveys in the weekly patient management conference and one on one work with a gastroenterologist.

The first major responsibility of the resident is to evaluate inpatients for whom a GI consultation has been requested. There is usually 3 patients per resident per day. The case is discussed in detail and presented to the faculty attending. The resident is responsible for writing a consultation report, conveying management recommendations to the medical team, closely following the progress of the patient and making further recommendations to the medical team. The resident will be responsible for assembling and evaluating x-rays and biopsies on patients and carrying out appropriate literature searches. The resident will also be responsible for providing short didactic sessions on subjects of interest to the primary GI attending.

The second major responsibility of the resident is to evaluate new and follow-up patients in the outpatient clinics for a minimum of two half days each week. Here the resident will closely follow a Gastroenterologist in the DOPS organization and see patients with that Gastroenterologist. Patients are presented to the GI attending physician for decisions regarding ambulatory diagnosis and management plans. The resident is also expected to attend and participate in all GI conferences.

Principle teaching methods used during this rotation:

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|--|---|
| <input checked="" type="checkbox"/>] Attending teaching rounds | <input checked="" type="checkbox"/>] Interdisciplinary rounds |
| <input checked="" type="checkbox"/>] Patient management discussions | <input checked="" type="checkbox"/>] Small group discussions |
| <input checked="" type="checkbox"/>] Conferences specific to rotation | <input checked="" type="checkbox"/>] Bedside clinical rounds |
| <input type="checkbox"/>] Individual instruction of procedures | <input checked="" type="checkbox"/>] Review of diagnostic studies, |

C. Educational Content

Describe the most important educational content, including the **mix of diseases, patient characteristics, types of clinical encounters, procedures and services:**

Diseases that the resident will encounter include those of the **esophagus** such as esophageal reflux and esophageal carcinoma; **gastric diseases** such as peptic ulcer, carcinoma, gastritis, gastroparesis.

Duodenal diseases including duodenal ulcer; **small bowel diseases** including malabsorption and inflammatory bowel disease.

Colonic disease including polyps, diverticular disease, carcinomas and inflammatory bowel disease.

Hepatobiliary and Pancreatic diseases: including pancreatitis, pancreatic carcinoma, gallstones, biliary disease, and liver diseases.

Patient characteristics include inpatients and outpatients, private patients, nonprivate patients.

Types of encounters include inpatient consultations and outpatient clinics.

Services include consultations and management of outpatients and observing GI procedures.

Principal ancillary education materials used:

- Reading lists
- Pathologic material
- Radiologic studies
- Handouts on relevant topics
- Articles from the literature

Reading lists, other educational resources

The MKSAP XIV: GI/Hepatology syllabus and question/answer section should be read in its entirety. The Gastroenterology and Hepatology sections of any standard textbook of medicine such as Cecil's or Harrison's Textbooks of Medicine should be read during the rotation. Internet resources such as Up-To Date may be used for supplemental reading but not as a sole source. Recent articles from peer

review medical journals as well as Practice Guidelines from national GI organizations (AGA, ACG, ASLD, ASGE, etc.) should be sought out and read as appropriate in relation to each case and topic that is presented and discussed

D. Method of Evaluation of Resident and Faculty Competence

After each block rotation faculty provide a review of the resident's competency based performance on Evaluate. In turn the resident evaluates the faculty's performance as well as the rotational experience. These evaluations are reviewed during our biannual House staff evaluation committee meetings.

- Evaluation of residency performance and professionalism
- Evaluation of attending teaching skills and other attributes
- Rotation assessment by resident
- Observation of resident's clinical competency
- Observation of resident's leadership and teaching skills
- Review of the resident's history/physical exam, progress notes and documentation of procedures in the chart
- Resident's attendance of rounds and conferences monitored

E. Rotation Specific Competency Objectives

Please refer to the Core Curriculum for the expected General Medicine Curriculum core competency objectives. The rotation specific objectives are provided below.

1. Patient Care
 - Demonstrate approach to providing consultative opinions for common GI and hepatobiliary diseases.
 - Use laboratory, radiologic and endoscopic procedures in a cost-effective manner and discuss risk/benefit analysis of these studies.
 - Discuss appropriate diagnostic and management steps for common GI emergencies.
2. Medical Knowledge
 - Discuss approach to outpatient management of common GI and hepatobiliary diseases.
3. Interpersonal and Communication Skills
See the Core Competencies
4. Professionalism
See the core Competencies
5. Practice Based Learning
See the Core Competencies
6. Systems Based Practice
See the Core Competencies

