

Course: Nephrology

Department: Internal Medicine
Faculty Coordinator: Tapan Patel, M.D.
Hospital: Texas Health Presbyterian Hospital Dallas
Periods offered: All
Length: one month
Max no. of residents: 1 (two if approved prior to assigning)
First Day Contact: Assigned attending.
First Day Time: as per attending
First Day Place: Hospital floor as per attending
Requirements: Hours – 7am -5 p.m. Monday thru Friday
Weekends: None
Vacation- Allowed

I. Course Description

Residents will be working one-on-one with a Nephrologist with a busy inpatient and outpatient practice. The residents will be exposed to a wide variety of renal diseases. They will participate in seeing patients in consultation, caring for patients in the dialysis unit and seeing outpatients in the nephrologist's clinic.

II. Course Goals and Objectives: (Based on ACGME competencies for resident education)

Patient Care:

Residents, together with supervising faculty, must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.

Objectives:

Residents are expected to:

- Gather essential and accurate information from their patients. *Examples:* History (including record review), physical examination and results of pertinent tests for patients with renal disease.
- Make informed recommendations about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgements. *Examples:* Patients with diabetes and proteinuria, patients with hypertension and proteinuria, patients with new onset renal failure.

- Counsel and educate patients and their families. *Examples:* Educate patients on the importance of medical and dietary compliance, blood pressure control and sign and symptom management for fluid overload.
- Provide health care services aimed at preventing health problems or maintaining health. *Examples:* Educate patients regarding the need for the high risk of vascular disease in the patient with renal disease and the need to modify risk factors.
- Work with health care professionals, including those from other disciplines, to provide patient-focused care, develop and carry out patient management plans. *Examples:* Use dietary consults, social services consults, pharmacy teaching.
- Use of information technology to support patient care decisions and patient education. *Example:* Provide patients access to National Kidney Foundation web site for patients.

Medical Knowledge:

Residents must demonstrate knowledge about established biomedical and clinical sciences and the application of this knowledge to patient care.

Objectives:

Residents are expected to:

- Locate and assimilate evidence from scientific studies related to their patients' health problems. *Examples:* Randomized controlled trials for the prevention of bone disease in dialysis patients, for prevention of vascular disease in dialysis patients.
- Use information technology to manage information, access on-line medical information; and support their own education. *Examples:* Using Pub Med, NEJM, AJKD, and CareGate.

Practice-Based Learning and Improvement:

Residents are expected to be able to use scientific evidence and methods to investigate, evaluate, and improve patient care practices:

Objectives:

- Identify areas for improvement and implement strategies to enhance knowledge, skills, attitudes, and processes of care.
- Analyze and evaluate practice experiences and implement strategies to continually improve the quality of patient practice.

- Develop and maintain a willingness to learn from errors and use errors to improve the system or processes of care.
- Use information technology or other available methodologies to access and manage information, support patient care decisions, and enhance both patient and physician education.

Interpersonal and Communication Skills:

Residents must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients and their families.

Objectives:

Residents are expected to:

- Use effective listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills. *Examples:* Educate patient regarding the importance of dietary compliance; educate the patient regarding their disease state and the prognosis.
- Work effectively with patients, making them members of their own health care team.

Professionalism:

Residents must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

Objectives:

Residents are expected to:

- Demonstrate respect, compassion, and integrity; responsiveness to the needs of patients that supercedes self-interest; accountability to patients and the profession; commitment to excellence and on-going professional development. *Examples:* Willingness to seek additional patients for evaluation; willingness to stay late to make sure a patient is stable.
- Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, and confidentiality of patient information.
- Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities.

Systems-Based Practice:

Residents are expected to demonstrate both an understanding of the contexts and systems in which health care is provided, and the ability to apply this knowledge to improve and optimize health care.

Objectives:

- Understand, access, and utilize the resources, providers and systems necessary to provide optimal care.
- Understand the limitations and opportunities inherent in various practice types and delivery systems and develop strategies to optimize care for the individual patient.
- Apply evidence-based, cost-conscious strategies to prevention, diagnosis, and disease management.
- Collaborate with other members of the health care team to assist patients in dealing effectively with complex systems and to improve systematic processes of care.

III. Methods of Instruction:

A) Didactic (schedule, topic, faculty)

Daily residents conference 12:00-1:00 p.m. – IM Training Room

Wednesday afternoons 12:15-1:00 p.m. – Grand Rounds – Haggar Hall

One-on-one topical discussion with attending. *Examples:* Fluid and electrolytes, management of hypertension and renal failure, and the glomerulonephritides.

B) Clinical

Residents are assigned to a Nephrologist. The residents are expected to work with the Nephrologist seeing both his inpatients and outpatients. **Residents are expected to round in the outpatient dialysis unit with the nephrologist at least one time during their Nephrology elective rotation.** Residents are expected to attend every noon conference during their elective rotation.