

**University of Florida College of Medicine - Jacksonville**  
**Rheumatology Fellowship Program**  
**Rheumatology Consults**

## **Overview**

Inpatient consults are designed to provide the fellow with a comprehensive clinical experience as a Rheumatology consultant with the opportunity to diagnose and treat a broad spectrum of inpatient clinical problems under the supervision of the attending faculty. Rheumatology consults will be the responsibility of the first year fellow.

Mix of diseases: Patients present with a variety of musculoskeletal, autoimmune and rheumatologic problems, including systemic lupus erythematosus, vasculitis, polymyalgia rheumatic, rheumatoid arthritis, psoriatic arthritis, ankylosing spondylitis, and osteoarthritis.

Patient Characteristics: the patient population is diverse, male and female, of all ages from adolescent to geriatric, representing most ethnic and racial backgrounds, from all social and economic statuses.

Types of clinical encounters: patient encounters will occur in the hospital as initial consultations or ongoing care of patients with rheumatologic disorders.

Procedures:

- Palpation Guided and ultrasound guided intra-articular aspirations and injections.
- Palpation Guided and ultrasound guided tendon injections.

## **Goals**

- To develop a focused approach to the diagnosis and therapy of inpatient rheumatic diseases.
- To understand the proper indications, contraindications, interpretations, and complications of all rheumatic procedures.
- To understand the role of the Rheumatology consultant in the interaction between the referring physician, other consultants, and all ancillary services necessary for the evaluation and therapy of patients under care of the fellow.

## **Objectives**

### **PGY4**

#### **Patient Care**

- Interview and examine patients, in an effective and efficient manner to identify specific signs and their possible disease associations.
- Obtain all necessary medical information by chart review, discussion with the requesting service and through contact with the patient's primary care physician as necessary and appropriate.
- Recognize the need for additional subspecialty consultation by another specialist.

#### **Practice-Based Learning and Improvement**

- Practice continuous self-evaluation and reflection to engage in habitual Plan-Do-Study-Act cycles for quality improvement at the individual practice level:
  - Identify and improve deficiencies in one's knowledge, skills and attitudes in the care of the patient with rheumatic disease.
  - Demonstrate strategies for correcting deficiencies in one's knowledge, skills and attitudes in the care of the patient with rheumatic disease.

- Access and critically evaluate current medical information and scientific evidence relevant to patients' medical illnesses.

### **Interpersonal and Communication Skills**

- **Communication skills**
  - Effectively obtain a history, obtain informed consent, and perform telephone triage.
  - Demonstrate efficiency when presenting cases to faculty or peers by communicating the patient's history, physical exam, laboratory findings, diagnosis and treatment plan in a clear, concise manner.
  - Complete a concise consultation note with clear, detailed recommendations.
  - Ensure that patients are well informed of the diagnosis and therapeutic plan
- **Interpersonal skills**
  - Establish trusting relationships with faculty, peers and clinical staff by displaying teamwork and taking ownership and initiatives (relevant to patient care, internal medicine resident teaching) without prompting.
  - Communicate with the nursing staff and other members of the patients' health care team to ensure that the plan of care is understood and implemented.

### **Professionalism**

- Demonstrate commitment to excellence by engaging in activities that foster personal and professional growth as a physician such as coordinating case conferences or other educational activities between fellows from rheumatology and other subspecialties.
- Demonstrate adherence to ethical principles by accepting responsibility for continuity of care; by practicing patient-centered care that encompasses confidentiality; by respecting for privacy and autonomy through appropriate informed consent and shared decision-making.
- Show sensitivity - by demonstrating appropriate recognition, acceptance of differences and response - to cultural, age, gender and disability issues of patients.

### **Systems-Based Practice**

- Educate residents on effective use of the resources available to increase patient care quality and reduce error including
  - How national and local structures, systems, rules and regulations contribute to the experience of a specific patient
  - Who pays for care and why it matters to both patient and physician
  - Factors within the culture, organization, management, and financing of the local care system that impact care of individuals and populations.
- Use evidence-based, cost conscious strategies in the medical care of patients.

### **Medical Knowledge** (see also below)

- Explain the pathophysiology of all rheumatic syndromes.
- List the radiographic findings of all rheumatic disorders and when to use all modes of imaging techniques.
- Demonstrate ability to interpret laboratory, radiographic and pathology results and integrate this information to form a complete and accurate evaluation and treatment plan for a specific rheumatologic case.
- Demonstrate up-to-date knowledge of treatment guidelines for the rheumatologic diseases and major complications associated with rheumatologic medications by

presenting recent, relevant literature and referencing national and international guidelines as the basis for clinical decision-making.

### KNOWLEDGE TO BE ASSESSED

The fellow should have knowledge and understanding of the following medical illnesses/states (though not exclusively):

<p><u>Disease states</u></p> <ul style="list-style-type: none"> <li>a. Rheumatoid arthritis</li> <li>b. Systemic lupus erythematosus</li> <li>c. Scleroderma/systemic sclerosis</li> <li>d. Polymyositis</li> <li>e. Spondyloarthropathies</li> <li>f. Vasculitis</li> <li>g. Crystal-induced synovitis</li> <li>h. Osteoarthritis</li> <li>i. Regional musculoskeletal pain syndromes</li> <li>j. Acute and chronic musculoskeletal pain syndromes</li> <li>k. Nonarticular rheumatic diseases, including fibromyalgia</li> <li>l. Nonsurgical, exercise-related (sports) injury</li> <li>m. Systemic diseases with rheumatic manifestations</li> <li>n. Metabolic diseases of bone osteoporosis</li> <li>o. Infection of joints and soft tissues</li> <li>p. Sjögren's Syndrome</li> </ul>	<p><u>Diagnostic and therapeutic skills</u></p> <ul style="list-style-type: none"> <li>a. Examination of structure and function of all joints</li> <li>b. Diagnostic aspiration and analysis of synovial fluid</li> <li>c. Injection of diarthrodial joints, bursae, tenosynovial structures, and enthuses</li> <li>d. Use of nonsteroidal anti-inflammatory drugs</li> <li>e. Disease-modifying drugs</li> <li>f. Biologic response modifiers</li> <li>g. Glucocorticoids</li> <li>h. Cytotoxic drugs</li> <li>i. Antihyperuricemic drugs</li> <li>j. Antibiotic therapy for septic joints</li> <li>k. Basic Musculoskeletal Ultrasound</li> </ul> <p><u>Interpretation of:</u></p> <ul style="list-style-type: none"> <li>a. Biopsies of tissues relevant to the diagnosis of rheumatic diseases</li> <li>b. Bone and joint imaging techniques</li> <li>c. Bone density measurements</li> <li>d. Controlled clinical trials in rheumatic diseases</li> <li>e. Indications for arthroscopy electromyograms, nerve conduction studies, and muscle/nerve biopsy</li> </ul>
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### PGY5

#### Patient Care

- Master the PGY 4 fellow objectives. The PGY5 fellow is expected to demonstrate a “near attending” ability to provide care to his patients. At the end of the encounter with the patient he will be expected to have formed and discussed the differential diagnosis, evaluation, treatment plan and medication side effects with the patient, before presenting the case to the faculty.
- Demonstrate patient care skills with non-routine, complicated patients.
- Demonstrate proficiency in handling unexpected complications.

#### Practice-Based Learning and Improvement

- Demonstrate mastery of PGY 4 fellow skills.
- Continue PDSA cycles for individual improvement

- Demonstrate leadership and lead quality improvement initiatives at the divisional level.
- Analyze outcomes of patients cared for by the Rheumatology consult service and identify areas of practice strength and improvement through systematic methodology.
- Review, analyze and utilize scientific evidence from the rheumatologic literature for the management of rheumatologic patients, taking a leadership role in guiding PGY4 Year and sharing relevant literature reviews with them.

### **Interpersonal and Communication Skills**

- Provide superior counseling to his patients and families as demonstrated by elucidating the thought process that led to the diagnosis, providing the reasoning for laboratory testing and treatment that is suggested and finally overall by forming well educated patients about their own disease and involving these patients in making decisions regarding their treatment.
- Supervise PGY4 Fellows' work related to planning patient/family conferences and patient communications/counseling
- Present cases succinctly.
- Assume the role of the teacher of rheumatology to junior trainees, medical students and other healthcare professionals.

### **Systems-Based Practice**

- Assist other trainees in the utilization of appropriate healthcare resources for the best care of the Rheumatology Consult service's patients.
- Model appropriate interactions in multidisciplinary planning, including quality improvement initiatives.
- Demonstrate abilities in using a variety of tools and teamwork skills to identify, analyze, implement, evaluate and report improvement initiatives as well as identify system errors.

### **Professionalism**

- Begin to mentor PGY 4 fellows in professional conduct.
- Provide quarterly literature results regarding medical ethics relevant to rheumatology practice.
- Interact collegially with his/her peer group and other healthcare professionals, including active responsibly in the larger context of pursuing divisional successes.

### **Medical Knowledge**

In addition to mastering medical knowledge on the topics mentioned on PGY4 section, the PGY5 fellows are expected to show proficiency in knowledge of:

- Immunogenetics of rheumatic diseases.
- Tolerance and autoimmunity.
- Radiographic and imaging modalities of musculoskeletal system.

### **Methods of achieving objectives**

- Direct patient care under the supervising attending
- Didactic (teaching) sessions with the attending physician
- Self-study using any one of several recommended basic textbooks of clinical Rheumatology
- Select handouts and journal articles on pertinent topics

- Core conference series
- Electronic databases and computerized resources (UF databases, Up To Date)
- Initiate and participate in quality and performance improvement activities

#### **Assessment tools**

- Global assessment
- Multisource assessment
- In-training examination
- Direct observation
- Rheumatology MKSAP questions
- Interpersonal Skills Checklist
- Injection Performance Assessment
- ACR questions

#### **Evaluation process**

- Goals and Objectives will be reviewed with the fellow at the beginning of each rotation.
- Verbal feedback throughout and at the completion of the rotation from the attending.
- Evaluation form completed by the attending at the conclusion of the rotation, and reviewed with the fellow.
- 360-degree evaluation.
- Evaluation submitted to the Administrative Office for review by the PD.