



Department of Internal Medicine  
**PULMONARY & CRITICAL CARE MEDICINE  
 FELLOWSHIP**

<b>ROTATION GUIDE</b>	<b>PULMONARY/IP ROTATION</b>
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	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	
Week 1	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures			<b>AM</b>
	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures			<b>PM</b>
Week 2	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures			<b>AM</b>
	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures			<b>PM</b>
Week 3	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures			<b>AM</b>
	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures			<b>PM</b>
Week 4	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures			<b>AM</b>
	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures	Consults/procedures			<b>PM</b>

**PVHMC Pulmonary Consult with PULMONARY/IP ROTATION**

**1. Structure for rotation:**

- a. Four-week rotation at PVHMC.
- b. Work with the Inpatient Pulmonary service.
- c. Work hours: Monday - Friday; NO overnight or weekend call (though fellow is encouraged to attend any 'off-hour' emergent cases).
- d. Candidacy: 2<sup>nd</sup> or 3<sup>rd</sup> year PCCM fellows.
- e. Availability: 12 months out of the year.

**2. Educational Objectives:**

- 1) Understand the evaluation and management of pulmonary nodule and other lung diseases.
- 2) Understand the principles of the initial diagnosis and staging of lung cancer.
- 3) Understand the role for standard and advanced Bronchoscopic techniques including Robotic bronch and EBUS in the evaluation of lung disease with particular emphasis on lung cancer.
- 4) Understand the principles of evaluation and management of pleural disease.

**3. Procedural objectives:**

- 1) Become adept at routine bronchoscopic techniques and deciding what bronchoscopic procedures would be the most optimal approach.
- 2) Gain experience with advanced diagnostic bronchoscopic techniques, including EBUS and Robotic bronch.
- 3) Gain exposure to pleural procedures such as pleurX catheter etc.

**4. Roles, responsibilities, expectations:**

- 1) Round with Pulmonary specialist on all PVHMC floor patients needing new evaluation and follow up. Daily census: 12-15 patients
- 2) Prepare and perform all inpatient and outpatient advanced diagnostic bronchoscopies. Monthly census: 12-15 cases
- 3) Prepare and perform all inpatient and outpatient pleural procedures. Monthly census: 2-5 cases
- 4) Present one hour of case review related to Pulmonary/Interventional Pulmonary cases.

**5. Supplemental didactic curriculum:**

- 1) A reading list of relevant literature.
- 2) Supplemental educational materials (slides, figures, tables, study questions) will be provided.

Arrowhead Regional Medical Center  
DEPARTMENT OF INTERNAL MEDICINE  
**PULMONARY & CRITICAL CARE MEDICINE (PCCM) FELLOWSHIP**

**ROTATION GUIDE**

**PULMONARY/IP ROTATION**

**GOALS**

Pulmonary diseases are seen commonly in the practice of internal medicine. The Pulmonary/Interventional Pulmonology rotation will provide the fellow with an opportunity to manage a number of common pulmonary symptoms and diseases, be exposed to more rare pulmonary conditions, and identify pulmonary manifestations of systemic disease. This rotation involves some inpatient consultation as well as an emphasis on the diagnosis, evaluation, and management of chronic disease in the outpatient setting. The goal is to familiarize fellow with basic mechanisms of disease, clinical manifestations, and evidence-based guidelines for care. Depth of exposure should be such that fellows can develop competence in the maintenance of pulmonary health, identification of both common and rare diseases, indications for procedures, interpretation of commonly ordered tests, management of acute flares of disease, and appropriate indications for referral.

- 1) Understand the evaluation and management of pulmonary nodule.
- 2) Understand the principles of the initial diagnosis and staging of lung cancer.
- 3) Understand the role for standard bronchoscopic techniques in the evaluation of thoracic disease.
- 4) Understand the role for EBUS bronchoscopy in the evaluation of thoracic disease.
- 5) Understand the role of therapeutic bronchoscopy in advanced thoracic disease, including benign and malignant airway obstruction.
- 6) Understand basic principles of evaluation and management of pleural disease.
- 7) Become adept at routine bronchoscopic techniques.
- 8) Gain experience with advanced diagnostic bronchoscopic techniques, including EBUS and electromagnetic navigation.
- 9) Gain exposure to advanced therapeutic bronchoscopy, including rigid bronchoscopy, stent placement and ablative techniques.

**OBJECTIVES**

**Patient Care**

1. Gathers and synthesizes essential and accurate information to define each patient's clinical problem(s),
  - a. Acquires accurate and relevant histories, conducts thorough physical exams.
  - b. Recognizes patient's central clinical problem or develops limited differential diagnoses.
  - c. Under guidance uses and synthesizes collected data to define a patient's central clinical problem(s) to generate a prioritized differential diagnosis and problem list.
2. Develops and achieves comprehensive management plan for each patient.
  - a. Develops an appropriate care plan.
  - b. Recognizes situations requiring urgent or emergency care, seeks additional guidance as appropriate.
3. Manages patients with progressive responsibility and independence.
4. Demonstrates skill in performing and interpreting invasive procedures, non-invasive procedures, and/or testing.
5. Requests and provides consultative care.

**Medical Knowledge**

1. Possess the scientific, socioeconomic, and behavioral knowledge required to provide care for common medical conditions and preventive care.
2. Possess knowledge of diagnostic testing and procedures, understand rationale and risks.
3. Identifies areas of scholarly investigation, formulates a plan, critically reads scientific literature.
4. Presents at appropriate meeting or conference, and effectively describes and discusses their own work.

**Practice-Based Learning & Improvement**

1. Monitors practice with a goal for improvement.
2. Self reflects upon practice or performance, acts upon those reflections.
  - a. Participates in focused education and performance improvement.
  - b. Understands common principles and techniques of quality improvement and uses these to improve care for a panel of patients.
3. Learns and improves via performance audit and feedback.
4. Learns and improves at the point of care.
  - a. Utilizes information technology without sophistication.
  - b. Appraises clinical research reports based on accepted criteria.

### **Professionalism**

1. Has professional and respectful interactions with patients, caregivers, and members of the interprofessional team.
  2. Consistently aware of physician and colleague self-care and wellness.
  3. Accepts responsibility and follows through on tasks.
  4. Exhibits integrity and ethical behavior in professional conduct.
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### **Systems-Based Practice**

1. Works effectively within an interprofessional team, e.g., peers, nursing, ancillary professionals, and other support personnel.
  2. Recognizes system error and advocates for system improvement, willing to receive feedback about decisions.
  3. Identifies forces that impact the cost of health care, and advocates for and practices cost-effective care.
  4. Transitions patients effectively within and across health delivery systems, recognizes importance of communication during times of transition.
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### **Interpersonal and Communication Skills**

1. Communicates effectively with patients and caregivers.
2. Communicates effectively in interprofessional teams.
3. Appropriate utilization and completion of health records.
  - a. Health records are organized and accurate.
  - b. Consistently enters medical information and test results into health records.