

Neurology Elective for Internal Medicine Residents

Department Chairman:	Luis Mejico, MD
Course Director:	Jenny Meyer, MD
Duration:	2 weeks
Hours of Participation:	Full time days
# Residents per rotation:	1
Location:	University Hospital
Time of the Year Available:	Year-round
Prerequisites:	One or two years of Internal Medicine

This rotation is offered to senior residents as part of the Department of Neurology's effort to provide neurological training to physicians in fields where neurological problems are frequently encountered. The rotation offers the resident an opportunity to refine her/his neurological history-taking and examination skills under the direct supervision of an attending neurologist. In addition, it offers clinical experience with neurological disorders commonly encountered on the consult service, including delirium, seizures, anoxic brain injury, movement disorders and neurological complications of medical illness. The resident is exposed to the basics of electroencephalography and its application in the diagnosis of seizures and confusional states. Experience is also provided with interpretation of neuroradiological studies of brain and spinal cord disorders.

Patient Care:

- Evaluate new consults as assigned by senior neurology resident.
- Write or dictate consultation note.
- Attend consult team work and attending rounds.
- Present consults to the neurology consult attending.
- Monitor daily test results of assigned patients, including laboratory tests, EEGs and neuroradiologic studies.
- Notify neurology resident and attending of significant test results and changes in clinical status.
- Write daily progress notes.
- Assist primary team with arranging appropriate post-discharge neurology follow-up care.

Medical knowledge:

- Refine neurological history-taking and examination skills
- Refine mental status examination skills
- Refine coma examination skills
- Become familiar with the diagnosis, etiology and management of delirium.
- Learn the prognostic indicators in post-arrest anoxic encephalopathy
- Develop knowledge of diagnosis, classification and treatment of seizure disorders
- Learn basics of brain and spine CT and MRI interpretation

- Recognize acute and chronic cerebral infarctions, intracranial hemorrhage, tumors, multiple sclerosis, meningeal inflammation & spinal stenosis.
- Become familiar with the basics of EEG including
 - Elements of the normal EEG, including the standard nomenclature for electrode naming, the alpha rhythm, the significance of slowing, spikes, sharp waves and triphasic waves.

Practice-based Learning

- Seek and utilize practice parameters and other evidence-based medicine guidelines for patient care.
- Use information technology to locate, review, critique and apply results of scientific studies to care of patients on service.
- Share knowledge with other team members, including other residents and medical students, through teaching and role modeling positive behaviors.
- Remain open to suggestions for improvement by consulting services, by nursing staff, allied health professionals and other team members, including medical students, junior residents and faculty.

Interpersonal and communication skills

- Present histories and physicals in succinct & articulate manner.
- Respond to pages promptly and courteously
- Write consultation notes that are accurate and timely without utilizing copy/paste functions
- Use active listening skills in interactions with patients, junior residents, and health care team members
- Communicate with consulting physicians and all health care team members in a prompt and courteous manner. Notify primary team of Neurology recommendations face to face.
- Display courtesy & empathy while interacting with patients and family; be available to answer patient and family questions.

Professionalism

- Model professionalism for medical students on the service, always demonstrating respect, compassion and integrity in interactions with patients, family, staff and team members.
- Place the interest of the patient above self- interest at all times.
- Demonstrate knowledge of and commitment to ethical principles pertaining to provision or withholding of care, confidentiality, and informed consent. Seek knowledge about these principles when necessary.
- Demonstrate sensitivity and responsiveness to patients' culture, age, gender and disabilities.

Systems-Based Practice

- Advocate for patient access to hospital and community based support services
- Seek information about and advocate for cost-effective patient care practices
- Work closely with primary team in discharge planning and arrange for appropriate neurological follow-up.
- Identify ways in which the consult service can improve patient safety and care and communicate these to the neurology senior or consult attending.

Reviewed and Revised by:
 Corey McGraw, MD
 Date Revised: 6/1/2023

Internal Medicine Neurology Rotation Orientation.

Please read in full and comply with

As you are about to start your rotations with the department of Neurology, we would like to take the time to outline the expectations of the rotation.

You will split your 2 weeks between the Stroke and General Neurology services. While we will attempt to keep you on inpatient services, there are times that we may ask you to help with the consult service as the numbers can fluctuate and our goal is to have you see interesting neurological cases.

Stroke service:

The goal of this rotation is to be able to identify acute stroke, understand the treatment options available and the workup of secondary prevention. To do this you need to be certified for the NIH Stroke Scale (NIHSS). This is free for anyone at <http://nihstrokescale.org/>. Our hope is that this will allow you to observe and, if comfortable, participate in stroke codes to better understand the decision-making process. **Please send the completed certification to Neurology Chief Resident before the start of your stroke week and to EPOStaff@upstate.edu and either Paula or Shanna will upload your Stroke certification to your MedHub account under Forms/Files.** While on stroke you may be asked to carry 1-2 patients, but we encourage you to go to all stroke codes. To facilitate this in the morning you will be assigned to the Stroke Junior Resident who has one of our code pagers, in the afternoon you will be with the NARs. In the afternoons you are welcome to stay in our lounge on 7B room 7128 to study or finish notes until a stroke code occurs. As IM residents you may choose a practice location after residency without readily available neurology services, so a good stroke assessment is the cornerstone of getting a patient the treatment they need.

General Service:

This is where you can really hone your neurology skills. Our hope is that you will have the opportunity to learn more in depth examination and differential diagnosis for cognitive issues, weakness, sensation and coordination. We are also taking Neuro-Oncology patients more often, so we will be learning together how to better take care of this patient population. The patients vary greatly and because of that this is the rotation that you are more likely to be asked to see consults. You may be asked to carry 1-2 patients depending on how busy the service is. The goal of this service is to better understand various neurological disorders.

Schedule:

Morning Signout is at 7am and afternoon signout is at 5pm. Leaving early is at the discretion of the resident on service. If you must be absent for medical appointments, due to illness or you're pulled to cover a service in IM, **you must notify the Internal Medicine chief residents** first and also contact the Neurology resident on service to let him/her know. **Please do this as soon as you are aware there will be a change in your schedule.**