



DEPARTMENT OF FAMILY MEDICINE AND COMMUNITY HEALTH
Physician Assistant Program
UNIVERSITY OF WISCONSIN
SCHOOL OF MEDICINE AND PUBLIC HEALTH

PA 749 Internal Medicine Syllabus

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COURSE OVERVIEW:

The Internal Medicine clinical rotation is a required, 8-credit module that occurs over a two-month period. The student will predominantly learn in either a community-based outpatient setting, inpatient setting, or a combination of both.

INTERNAL MEDICINE PRECEPTORSHIP COURSE GOALS:

1. Provide the student with the opportunity and access to a diverse population of patients and a variety of diseases and injuries commonly encountered in an inpatient or outpatient internal medicine setting.
2. Support ongoing development and mastery of the student's ability and skill in obtaining a patient centered medical history, conducting a physical examination, recommending diagnostic studies and discussing and recommending treatment plans with the guidance of a preceptor.
3. Provide ongoing interactive opportunities for the student to deepen their knowledge regarding various diagnostic studies used in the evaluation of disease and injury and disease prevention.
4. Provide supervised patient care based opportunities, which foster the development of the student's ability to recommend, select and interpret (where applicable) appropriate diagnostic methods in the evaluation of a patient.
5. Provide clinical based opportunities to continue to develop the student's ability to generate differential diagnoses.

INTERNAL MEDICINE PRECEPTORSHIP LEARNING OUTCOMES:

At the end of this eight-week experience students will be able to:

1. Recognize and accurately assess common medical and behavioral diseases and conditions through the application and integration of core medical knowledge (etiology, risk factors, pathophysiology, prevalence, clinical presentation, diagnostic evaluation and interpretation) and the use of evidence based decision making toward the diagnosis, management and treatment of patients encountered in the primary care setting.
2. Recognize and approach the evaluation and initial management of acute presentations commonly seen in the office or hospital setting.
3. Recognize and teach the approach to the management of chronic illnesses that are commonly seen in the office or hospital setting.
4. Elicit a focused history and perform a focused physical examination.
5. Conduct a wellness visit for an adult patient.
6. Recognize and/or provide evidence-based health promotion and disease prevention guidance as well as patient education and counseling.

7. Perform concise, articulate and effective oral case presentations.
8. Recognize and engage in effective on-going (continuity) patient care in an empathetic fashion that demonstrates awareness and sensitivity to diverse religious, cultural, ethnic, gender and sexual orientation patient populations over the course of preceptorship.
9. Recognize, apply and demonstrate effective communication skills.
10. Perform common procedures often utilized in an internal medicine setting.
11. Effectively and professionally navigate the role and responsibilities as a physician assistant (within the confines of the student role) practicing in an internal medicine setting along with communicate appropriately with other health professionals (e.g. physical therapists, nutritionists, etc.)
12. Educate a patient about an aspect of his/her disease respectfully, using language that the patient can understand and explain any new understanding gained during the discussion.

INTERNAL MEDICINE ROTATION -SPECIFIC OBJECTIVES:

These objectives are to guide the student in preparing for the Post Rotation examination by defining areas of content to be emphasized and studied as well as the clinical skills and professional behavior required and expected during this practicum.

Outline to this information is as follows:

- Alignment to the PA Core Competencies
- Organ system based conditions

Alignment to the PA Core Competencies

<p>Medical Knowledge</p>	<ul style="list-style-type: none"> • Interpret the clinical features, differential diagnosis, and management of common acute and chronic medical conditions seen in the ambulatory medical setting. • Recognize the impact of disease on individuals and societal levels • Compare preventive strategies for common acute and chronic medical conditions seen in the ambulatory setting, in the clinic, and at the population level
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Patient Care	<ul style="list-style-type: none"> • Perform focused histories and physical exams relevant to common acute and chronic medical conditions. • Perform comprehensive wellness exams relevant to patient's age and comorbidities. • Formulate treatment plans for common acute and chronic ambulatory medical problems. • Use test characteristics, predictive values, and likelihood ratios to enhance clinical decision making. • Distinguish preventive screening tests for individual patients, acknowledging prevalence, risk factors, and outcomes. • Formulate answerable clinical questions from patient interactions
Practice-Based Learning and Improvement	<ul style="list-style-type: none"> • Practice life-long learning skills, including the use of evidence based medicine at point of care. • Differentiate and appraise preventive service guidelines and recommendations from various organizations. • Identify individual learning goals, and self-assess knowledge and behaviors
Interpersonal and Communication Skills	<ul style="list-style-type: none"> • Present cases to preceptor in a patient-centered manner, integrating further testing recommendations, diagnostic probabilities, and evidence-based treatment recommendations

	<ul style="list-style-type: none">• Document clinical encounter in written SOAP note.• Establish effective relationships with patients and families.• Ascertain patient and family beliefs regarding common acute and chronic medical conditions.• Educate patients and families regarding common acute and chronic medical conditions.• Demonstrate the process of negotiating management plans with patients, incorporating patient needs and preferences into care.• Check for patient's understanding of follow-up plan, including treatments, testing, referrals, and continuity of care.
System Based Practice	<ul style="list-style-type: none">• Identify community assets and system resources to improve the health of individuals and populations.• Demonstrate a clinical perspective that recognizes the impact of multiple systems on patient health.
Professionalism	<ul style="list-style-type: none">• Recognize and address self-care and personal issues that affect one's ability to fulfill the professional responsibilities of being a physician.• Assume responsibility, behave honestly, and perform duties in a timely, organized, respectful, and dependable manner.• Seek, accept, and apply constructive feedback

Learning Objectives for Organ based Conditions:

- Know etiology, prevention, risk factors, signs and symptoms, diagnostic workup, treatment plan and patient education of the following (Table 2)

Table 2. Organ System Based Conditions

Organ	Symptoms	Conditions	Additional Skills/Procedures
Cardiovascular	Chest pain, SOB, palpitations, syncope, fever, claudication, dyspnea on exertion	Congestive heart failure, Hypertension, Valvular heart disease, Myocardial infarction, Cardiac arrhythmias/conduction disorders, Myocarditis, Endocarditis, Pericarditis, Cardiomyopathy, Hyperlipidemia, disease, Coronary vascular disease, Rheumatic fever, Rheumatic heart disease, Vascular disease, Angina pectoris	Take an accurate manual blood pressure Interpret EKGs Become familiar with stress tests and echos
Pulmonary	SOB, chest pain, hemoptysis, fever, weight loss, cough	Acute/chronic bronchitis, pulmonary disease, Pneumonia (viral, bacterial, fungal, human immunodeficiency virus-related), Pulmonary neoplasm, Carcinoid tumor, Bronchiectasis, Scleroderma, Sarcoidosis, nodule, Sarcoidosis, syndrome, Pulmonary hypertension, Idiopathic pulmonary fibrosis, Pneumoconiosis, cancer, Tuberculosis, Scleroderma, Hypertension, Cor	Interpret CXR Interpret PFTs Teach how to use a peak flow meter/asthma education
Gastrointestinal Nutritional	Abdominal pain, diarrhea, constipation,	Ulcerative colitis, Crohn disease, Acute/chronic pancreatitis, Hiatal hernia, Diverticular disease	Interpret Abdominal films Interpret stool

	<p>melena, hematemesis, hematochezia, nausea/vomiting, jaundice, heartburn, anorexia, change in bowel habits</p>	<p>hernia, Peptic ulcer disease, Gastritis, Mallory-Weiss tear, strictures,</p> <p>Cancer of rectum, colon, esophagus, stomach, Acute and chronic hepatitis, Cirrhosis, Cholecystitis, disease, fissure/fistula, Hemorrhoid</p>	<p>Guaiac</p> <p>Become familiar with abdominal US and abdominal CTs</p>
Urology/Renal	<p>Hematuria, dysuria, abdominal pain, enlarged prostate, testicular mass, edema</p>	<p>Benign prostatic hypertrophy, Prostate cancer, Prostatitis, disturbances, Acute and chronic renal failure, Nephritis, Nephrotic syndrome, infection, Pyelonephritis</p> <p>Renal calculi, Glomerulonephritis, interstitial nephritis, Polycystic kidney disease, Hydronephrosis,</p> <p>Erectile dysfunction, Hydrocele, torsion, Testicular cancer, Epididymitis, carcinoma, Renal vascular disease,</p> <p>Hypovolemia, Hypervolemia</p>	<p>Interpret UA and urine dipstick</p> <p>Perform digital rectal exam</p>
Hematology	<p>Fever, fatigue, easy bruising, pain, bleeding, arthralgias, pallor, petechial, blood clot</p>	<p>Iron deficiency anemia, Sickle cell anemia, Thalassemia,</p> <p>Vitamin B12 and folic acid deficiency anemia, G6PD deficiency anemia, Acute/chronic leukemia, Lymphoma</p> <p>Multiple myeloma, disorders, Hypercoagulable</p>	<p>Anemia</p> <p>Clotting</p>

		state, Idiopathic thrombocytopenic purpura, Thrombotic thrombocytopenic purpura	
Neurology	Headache, numbness, parathesias, weakness, facial droop, vertigo, balance issues, fever, pain, confusion, tremor, motor or sensory loss, change in vision/speech	Seizure disorder, headaches, Tension headaches, Cluster headaches Transient ischemic attacks, Cerebral vascular accident, Intracranial tumors, Essential tremor, Parkinson disease, Multiple sclerosis Meningitis, Encephalitis, Com a, M Giant cell a gravis, -Baritain syndrome, palsy, Huntington disease, Cerebral aneurysm, Concussion Delirium, Dem entia neuropathies, Complex regional pain syndrome, Substance abuse disorders	Become familiar with EEGs Interpret Head CTs CSF analysis/perform lumbar puncture
Endocrinology	Fatigue, palpitations, weight loss, weight gain, polydipsia, polyuria, polyphagia, heat/cold intolerance	Hyperthyroidism/thyroiditis, Hypothyroidism, I & type II), Diabetes insipidus, DKA Addison disease, Cush ing Pheochromocytoma, Hypoparathyroidism, Hyperparathyroidism, Acromegaly, Hypocalcemia, Hypercalcemia, Hyponatremia, Hyponatremia Paget disease of the bone, Thyroid cancer, Pituitary adenoma	Teach blood glucose Monitoring Check blood sugars
Infectious Disease	Fever, chills, rash (sxs can be numerous depending on location of	Human immunodeficiency virus infection, Pneumocystis, Candidiasis, Histoplasmosis Botulism,	Interpret CBCs, gram stains, cultures.

	infection)	a, Gonococcal infections, Salmonellosis , Tetanus, Pertus Parasitic infections, Toxoplasmosis, disease, Ro Syphilis Cytomegalovirus, Epstein-Barr infection, Herpes simplex infection, Influenza, Rab ies Shigellosis	
Orthopedics/ Rheumatology	Arthralgias, pain, fatigue, fever	Fibromyalgia, Gout/pseudogout, Rheumatoid arthritis, Polyarteritis nodosa, Osteoporosis, Polymyositis, Pol System Reactive arthritis, erythematosus, Systemic sclerosis (scleroderma), Sjögren syndrome	Joint aspiration Be familiar with bone density scans
Critical Care	Chest pain, shortness of breath, confusion, pallor, unresponsive ness, abdominal pain, headache	Acute adrenal insufficiency, storm, hypoglycemia, Acute glaucoma, respiratory distress/failure, Pneumothorax, Angina pectoris, arrest, Cardiac a blocks, Car crisis, Acute gastro bleed, Ac Coma, Cardiac tamponade, Pericardial effusion, Status epilepticus	ABG interpretation
Psychiatry	Depressive symptoms, fatigue, anxious, grief, hallucinations	Mood disorders, General anxiety disorders, Panic disorder, Schizophrenia, Personality disorders, Substance abuse disorders, Suicide	Counsel on smoking cessation. Counsel on alcohol or opioid use.

Learning Objectives for Prevention and Health Promotion

- Define primary, secondary and tertiary prevention
- Identify risks for specific illnesses that affect screening and treatment strategies
- Provide counseling related to health promotion and disease prevention
- Discuss an evidence-based, stepwise approach to counseling for tobacco cessation
- Find and apply the current guidelines for adult immunizations.
- For each core health promotion condition listed in table 3, discuss who should be screened, risk factors and the methods of screening along with developing a health promotion plan for a patient of any age of either gender.

Table 3. Core Health Promotion Conditions for Adults

Cervical Cancer
Colon Cancer
CAD
Depression
Breast Cancer
Depression
Fall risk in elderly patients
Intimate partner violence
Obesity
Osteoporosis
Prostate Cancer
STIs
Substance abuse
Type 2 DM

Recommended Resources

1. Fauci A. Harrison’s Principles of Internal Medicine. McGraw Hill.
2. Goldman L. Goldman’s Cecil Medicine. Saunders/Elsevier.
3. Hamilton RJ. Tarascon Pharmacopoeia. (Pocket or PDA version)
4. Gilbert DN, Chambers HF, Eliopoulos GM. Sanford Guide to Antimicrobial Therapy 2016. (Pocket or PDA version)
5. Papadakis, MA, McPee S, Rabow MW. Current Medical Diagnosis & Treatment. McGraw Hill.

Recommended Websites	Address
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UpToDate	www.uptodate.com
Guide to Clinical Preventive Services	http://www.ncbi.nlm.nih.gov/books/NBK16363/
American College of Physicians	www.acponline.org
American Medical Association (AMA)	www.ama-assn.org/ama
American Academy of Physician Assistants (AAPA)	www.aapa.org
The Journal of General Internal Medicine	www.jgim.org