Abstract

Introduction

Materials & Methods

Results

Conclusion

A Novel Resident-Centered Elective for Aspiring Hospitalists

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Project Summary

We modified the curriculum of the Hospital Medicine Elective for Internal Medicine residents to better address their individual educational goals. We balanced trainee preferences with our rotation objectives and the need to fill educational gaps in the training program. We collected preliminary qualitative feedback on the restructured curriculum in order to guide future efforts.

Meet the Authors



MD, MPH

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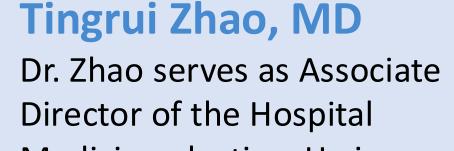
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Abstract

The field of Hospital Medicine (HM) has evolved to address a growing interest among trainees. Many academic institutions offer dedicated elective rotations in HM. However, while new clinical and non-clinical opportunities continue to emerge within the field, a paucity of guidance exists on how to address the disparate goals and preferences of aspiring hospitalists. We modified our existing Academic HM elective rotation in order to incorporate residents' unique preferences while simultaneously addressing educational gaps in the Internal Medicine (IM) residency training. We innovated to fill these gaps and personalize the elective based on interests. In order to guide future efforts, we collected qualitative post-rotation feedback from participating residents. We later invited graduates to share additional reflections on the elective. We will continue to modify our rotation based on advances in HM and individual preferences of trainees, while balancing the feasibility and sustainability of the project.

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Introduction

- In recent years, an increasing number of IM residency programs have begun to offer elective experiences to address the growing interest in HM as a specialty.
- Rotations typically include non-clinical activities such as teaching, research, and quality improvement (QI) alongside the traditional rounding role^{1,2}.
- In 2017, we launched a two-week elective to IM residents who are interested in HM.
- Participating residents expressed significant variability in individual educational goals and preferences, prompting us to restructure the curriculum.

	Monday	Tuesday	Wednesday	Thursday	Friday	
Week 1: Clinical		Traditional Rou	ınding – Academ	ic Hospital		
Week 2: Beyond the Basics + Non- Clinical	Medicine Consult + OSH Transfer Triage Shift	Medicine Consult + OSH Transfer Triage Shift	Leadership Shadowing/QI	Leadership Shadowing/QI	Academic Half-Day	
	Admission Shift	Admission Shift	Admission Shift	Leadership Shadowing/QI	Continuity	
Sample Schedule: Traditional Elective Model						

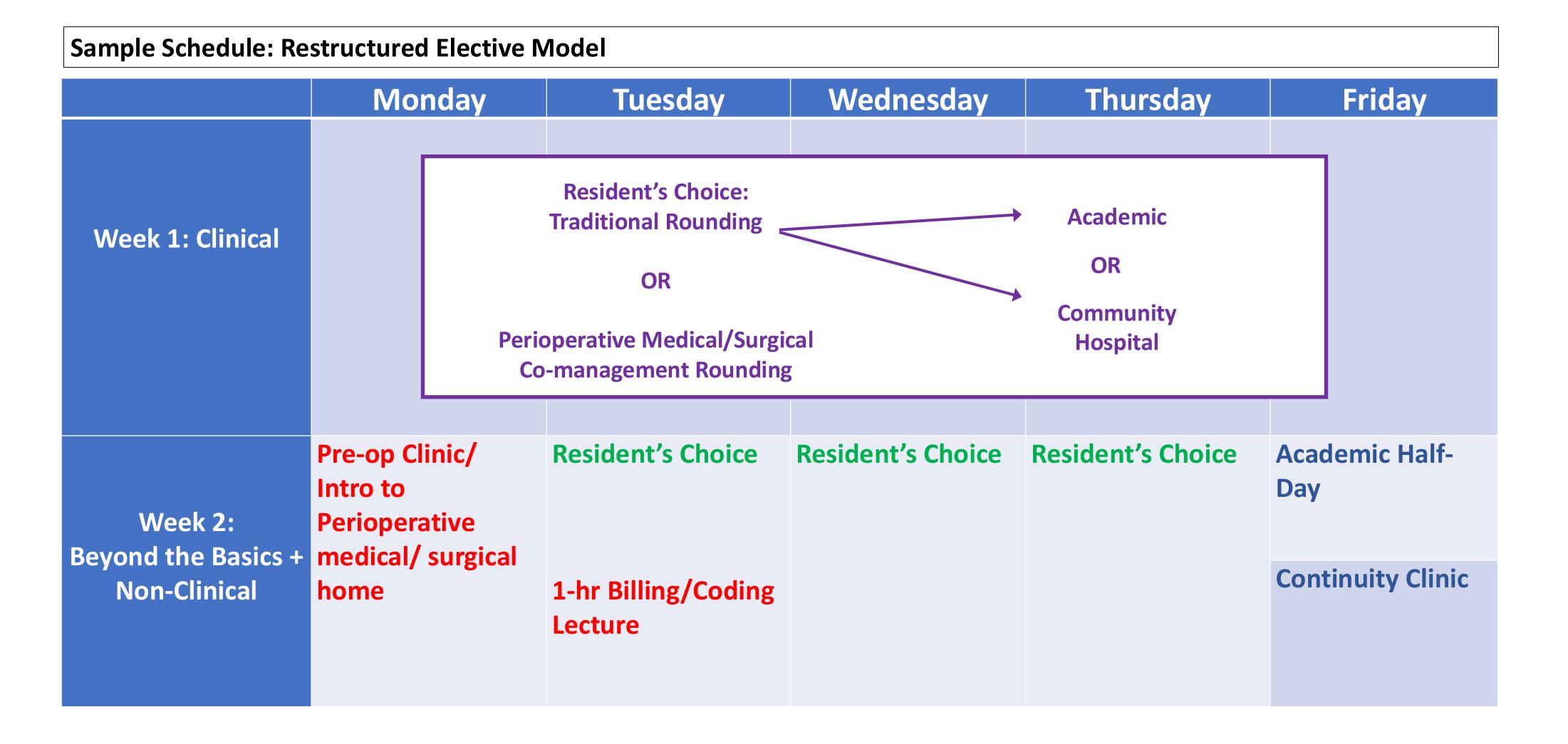
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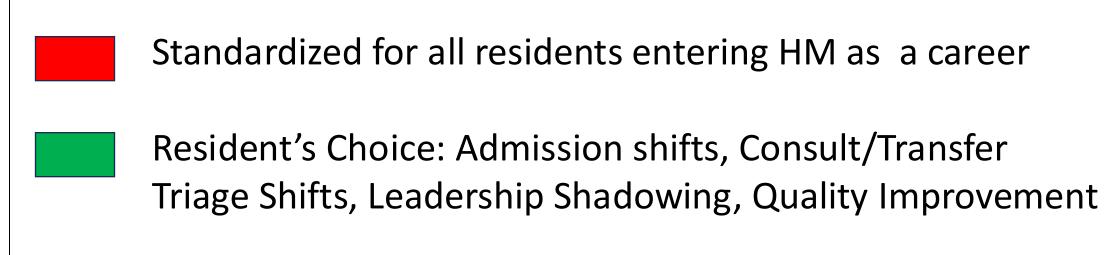
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Materials and Methods







Additional Options:

- Hospitalist as Leaders: More intensive Leadership and QI experiences for Resident's Choice week
- Direct Care Intensive: One week academic rounding, one week Community Rounding

Home

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Results

Post-Rotation Surveys

Theme	Illustrative Quote			
Breadth of	"I enjoyed the breadth of learning on this elective and exposure to various aspects of hospital medicine			
Experiences	"Seeing the breadth and impact of hospital medicine was the best experience."			
Schedule	"I appreciated [the rotation directors] crafting an experience for me based on my interests."			
personalization	"I specifically requested the more unique aspects of HM.			
Exposure to new HM	"[I] learned a ton about hospital administration, QI, population health, patient safety!"			
roles and activities	"I was exposed to all of the cool things hospitalists gets to dothat you aren't really exposed to as a resident on gen med."			
Direct faculty	"Every attending I worked with was passionate about hospital medicine and it was a pleasure working with them."			
interaction and mentorship	"Everyone I worked with was very friendly and welcomingeven at the meetings I sat in on, most people introduced themselves and were totally open to my participation in the discussions."			

Post-Graduation Reflections from Practicing Hospitalists

"It gave me a leg up while applying for jobs."

"The HM elective was one of the first times that I had the opportunity to truly independently work on caring for patients...the patients recognized me as being their sole provider." "Participating in the preoperative clinic was a novel experience for me. I was able to turn my experiences into a Senior resident presentation and additionally have been working on a smartphrase with my colleagues to standardize the preoperative medicine evaluation process in the hospital setting."

"Employers were impressed with the perioperative rotation"

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Conclusion

A personalized HM elective experience tailored to residents' individual goals and preferences can be invaluable to their growth as aspiring hospitalist physicians. Our preliminary data support our decision to continue a resident-driven approach to designing HM elective schedules.

Limitations:

- Potentially time-consuming and laborious nature of scheduling
- Difficulty standardizing non-clinical experiences due to variability in scheduling of meetings and availability of faculty members
- Elective structure may not be appropriate for smaller or more resource-limited hospital-based settings

Future Directions & Goals:

- Create a standing list of recurring leadership and quality improvement activities and meetings readily available
- Work with IM residency leadership for assistance and collaboration with scheduling and maintaining educational goals
- © Continue to assess the impact of our rotation beyond residency by seeking feedback from graduates who participated in the elective.

References

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