

HOSPITAL MEDICINE TRACK

Hospitalists are quickly assuming the care of a large percentage of the hospitalized patients in the United States. Studies have shown that the use of hospitalists increases the quality of care as well as provide more efficient use of resources. The Hospital Medicine Track is configured to give the internal medicine resident increased exposure and instruction in a broad range of competencies that are unique to the care of high acuity inpatients. These include:

- The organization of hospital care
- Care of the critically ill patient
- Measuring and improving the quality of hospital care
- Patient safety
- Utilization and case management
- Medical management of surgical patients
- Hospital interfaces (ie, communication between hospital and outpatient settings)
- End of life care
- Pain management
- Medical education in the inpatient setting
- Basic outcomes research related to common hospital illnesses

METHODS OF TRAINING

- Emphasis on inpatient care with suggested elective choices
 - Third ICU rotation as R3
 - Palliative Medicine/Rehab Medicine elective
 - Hospital Medicine Elective as an R3
 - Ventilation management/Nursing Home care elective
- Active participation in standing committee which impacts hospital care, with quarterly up reports to the internal medicine residents
 - Pharmacy and Therapeutics
 - Medical Records and Procedures committee
 - Performance Improvement Committees
- Completion of faculty development courses through Academic Affairs on research and teaching
- Outcomes research project, to be complete during R2 & R3 year on common hospital illness (Community acquired pneumonia, Venous Thromboembolism, Congestive heart failure)
- Presentation of abstract of poster, at a regional or national meeting of the Society for Hospital Medicine
- Active mentorship by one of the current hospitalists within the Department of General Internal Medicine