Division of Gastroenterology, Hepatology and Nutrition

Orientation 2014

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Academic and Clinical Chief, Division of Gastroenterology, Hepatology and Nutrition
Division of Gastroenterology, Hepatology and Nutrition Fellowship Program

**Mission Statement**

- Conduct *quality patient care*.
- Educate trainees and postgraduate physicians.
- Conduct good quality research and report the same in medical journals and scientific meetings.
- Participate in the academic goals in the Department of Medicine.
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Objectives

- Patient care
- Teaching
- Research
- Interaction with colleagues in the department and other schools in the university as well as national and international universities
Train physicians so that upon completion of the program, they demonstrate sufficient professional ability to practice Gastroenterology/Hepatology/Nutrition competently and independently (without faculty supervision).
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Overview

- 3 years
- Patient care, education, research
- Gastroenterology, hepatology, nutrition
- Endoscopy (General/Advanced)
- 3rd Year
  - Focused Training which is decided by year 2 and dependent upon interests, skill and performance
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Mentors
<table>
<thead>
<tr>
<th>Mentor Assignments</th>
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<tbody>
<tr>
<td>Dr. Abell</td>
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<tr>
<td>Dr. Barve</td>
</tr>
<tr>
<td>Dr. Cave</td>
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<tr>
<td>Dr. Dryden</td>
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<tr>
<td>Dr. Krueger</td>
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<tr>
<td>Dr. Marsano</td>
</tr>
<tr>
<td>Dr. McClain</td>
</tr>
<tr>
<td>Dr. McClave</td>
</tr>
<tr>
<td>Dr. Parajuli</td>
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<tr>
<td>Dr. Roberts</td>
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<tr>
<td>Dr. Stocker</td>
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</tbody>
</table>
Reaction to change

- Blood pressure elevation
- Appetite changes
- Sleep pattern changes
- Thinking pattern changes, abstract thinking decreases
- Back, neck pain
- Immune system changes
- Neuropeptide Y
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Defeating Stress

- Eat healthy
- Limit caffeine and alcohol
- Regular exercise
- Take charge - control your response to events
- Rest and recuperate (R&R)
- View change as opportunity
Balance!
• Quantity, quality, and timing
• Average- 8 hours per night (5 absolute limit)
• Sleep deficit is cumulative
• Quality- interrupted sleep- sleep apnea, periodic leg movements, phone calls!
• Sleep disruption- performance suffers
• Inattention- auto accidents, medication errors
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Countering Sleep Deprivation

• Know your limits- ask for help
• Minimize shift work
• Naps
• Caffeine
• Drugs- not proven effective
• Cab vouchers
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*Tips for successful fellowship*

- Communicate effectively
- On time
- Lead from the front
- Teamwork
Instead, follow the chain of command, discuss concerns with your mentor, the chief fellows, program director(s), division chief or any faculty you like.
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Outpatient Clinics

VA
Wed PM
AIM Clinic
Fri PM
HCOC Clinics
Variable

Please Be On Time!
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Conference Topics

Advanced Therapeutic Endoscopy
GI Grand Rounds
Medicine Grand Rounds
Motility
Pathology
Research
Radiology
M&M

Division Meetings
Journal Club
Med/Surg Conferences
Nutrition
Core Curriculum
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Educational Conferences

- Gut Club
- DDW Wrap-Up
- Liver Update
- KYSPEN
- KSGE (Ky Society for Gastrointestinal Endoscopy)
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Conferences

- Fellow Participation mandatory
- Evaluations mandatory
- Attendance Taken
  - 75% Fellows
  - 60% Clinical Faculty
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Night Call

- On call 5:00 PM – 7:00 AM Mon-Fri
  All Day Sat, Sun, Holidays
- All patients must been seen if consulted (not just phone consult)
- Attending must be called after seeing patient
- Admissions to Jewish service must be seen upon arrival
- Changes must be submitted in writing/e-mail to David Samwaru

No more than two days in a row on call, anytime! Backup weekend call fellow covers Saturday night
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Leave

• 20 days
  – 4 weeks, NOT 28 working days
  – Leave form authorized by Chief Fellow and Dr. Krueger
  – Do not finalize plans or make flight reservations until authorized

• Program Director’s Discretionary Educational Leave

• Attendance at conferences/meetings must be turned in as vacation

• If VAMC/AIM clinic is canceled, leave must be authorized at least 6 weeks in advance or coverage must be obtained

• Service must be covered
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Travel

• 1st Year
  – ASGE First Year Fellows’ Endoscopy Course

• 2nd and 3rd Year
  – One national meeting (DDW, ACG, AASLD)

• Vacation time must be used

• Reimbursement
  – Please discuss reimbursement allowance/procedure with Laura Hollifield prior to travel (we have a limited budget)
After Each Rotation, use New Innovations
At least meet semi-annually with mentor
  • Keep procedure logs up to date
Conference attendance expected 75%
Nurses evaluation
Please evaluate your teachers!
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80 Hour Work Week

- Averaged over 4 week rotation
- Home call not included unless called in
- 6 additional hours per week for education
- Includes moonlighting
- Work Hour Audits- New Innovations

- Suspension
- No clinical privileges = no training
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*Duty Hours*

- Minimum of 24 hours per week or four days off per month free of patient care responsibility and off call.
- Clinical service coverage 7:00 – 5:00 PM Mon-Fri.
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Moonlighting

- Not required.
- Prior written approval-Attending and Program director
- Must not interfere with Division’s activities (80 hour work week)
- Limited to no more than 36 hours/week.
- Total hours of moonlighting and hours required for the training program cannot total more than 80 hours/week with an extra 6 hrs/wk for educational activities.
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ACLS

- Maintain certification throughout training
- Suspension
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Log of Supervised Procedures

- Indications
- Complications
- Name of supervising physician
- Annual summary of numbers
- Maintain copies of reports
- Important for use in future credentialing
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**Minimum Number of Procedures Before Competency Can Be Assessed**

<table>
<thead>
<tr>
<th>Standard Procedure</th>
<th>Number of Required Cases</th>
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<tbody>
<tr>
<td>Flexible Sigmoidoscopy</td>
<td>30</td>
</tr>
<tr>
<td>Diagnostic EGD</td>
<td>130</td>
</tr>
<tr>
<td>Total Colonoscopy</td>
<td>140</td>
</tr>
<tr>
<td>Snare Polypectomy</td>
<td>30*</td>
</tr>
<tr>
<td>Nonvariceal Hemostasis (upper and lower; includes 10 active bleeders)</td>
<td>25*</td>
</tr>
<tr>
<td>Variceal Hemostasis (includes 5 active bleeders)</td>
<td>20</td>
</tr>
<tr>
<td>Esophageal Dilation with Guidewire</td>
<td>20</td>
</tr>
<tr>
<td>PEG</td>
<td>15</td>
</tr>
</tbody>
</table>

*Included in total number
• Current approach to accreditation
  - Long list of requirements (400)
  - Only objective outcome is ABIM pass rate
  - Periodic external audit

• New approach to accreditation
  = Next Accreditation System (NAS)
  - Continuous internal monitoring and improvement of trainee clinical competence
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Core Clinical Competencies

- Patient Care
- Medical Knowledge
- Practice Based Learning and Improvement
- Interpersonal and Communication Skills
- Professionalism
- Systems-Based Practice
Residents must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices.

- Use IT.
- Access online.
- Support their own education-teach others.
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 Systems-Based Practice

- Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.
- Affect you have on other providers, the health care system and society.
- Methods of controlling cost/allocation of resources.
- Practice cost-effective health care without compromising quality.
- Assist patients in dealing with the system.
- Know how to assess, coordinate, and improve health care.
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Code of Conduct (Evaluation of Professionalism)

• Meet with your Mentors
• Turn in time Audits/Moonlighting reports!
  (Do not work more than 80 h/week)
• Update CV
• Sign Charts/Keep ACLS current
• Teamwork
• Be respectful of Others
  Answer pages promptly
  Nurses are evaluating
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Research

• Research experience is a required component
  – Discovery - original research
  – Dissemination - review articles or book chapters
  – Application - case reports or series presented at regional or national meetings

Begin planning process early - 1st year!
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Leadership

Program Director: Dr. Parajuli
Assistant Program Director: Dr. McClain
Overall Chief Fellow: Dr. Beauerle

Co-Chief Fellows
Curriculum/Education: Dr. Omer
Scheduling/Personnel: Dr. Lam
Quality Improvement: Dr. Rodriguez
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Fellowship Program
Administrative Personnel

Ms. Laura Hollifield
  Fellowship Program Coordinator

Mr. David Samwaru (Sam)
  Assistant to most clinical faculty
  Schedules
  IT resource
Questions?