**Educational Goals and Objectives:**
The Nephrology rotation is based on management of hospitalized patients at The University Medical Center, under close supervision of one of the faculty members of the Nephrology division, who is the designated “service attending” for the specific time period (usually two weeks). The educational purpose of this rotation is to provide residents with the knowledge and skill to diagnose and manage patients with a wide variety of renal disorders, electrolyte and acid base disturbances encountered by general internists.

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<tr>
<th></th>
<th>PGY 1</th>
<th>PGY 2 / PGY 3</th>
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<tbody>
<tr>
<td><strong>Patient Care</strong></td>
<td>• Resident will gather a detailed history with complete description of the symptoms.</td>
<td>• Prioritize patient’s problems</td>
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<td></td>
<td>• Resident presentation will include appropriate positive and negatives.</td>
<td>• Resident teaches junior residents/medical students the fundamentals of history taking.</td>
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<td></td>
<td>• Residents will use appropriate additional source of data if patient cannot give history</td>
<td>• Resident teaches junior residents/medical students the fundamentals of physical examination.</td>
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<td>• Resident will be able to perform a general physical examination.</td>
<td>• Resident will develop competence in the interpretation of kidney ultrasound and advanced radiographic imaging of urinary system.</td>
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<td>• Resident will be able to perform examination pertinent to patient complaints.</td>
<td>• Supervise and teach junior resident/medical students central line placement.</td>
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<td>• Resident will be able to perform relevant examinations to assess the volume status of the patient.</td>
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<td>• Perform a careful analysis of urine sediment and be able to interpret findings in context of the clinical problems.</td>
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<td>• Residents are expected to know the indication, contraindication, and complications of native kidney and transplanted kidney biopsy.</td>
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<td>• Observe, assist and subsequently insert central line and hemodialysis catheter under supervision of senior resident / fellow and faculty.</td>
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<td>• Perform in a satisfactory way a Mini CEX.</td>
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<tr>
<td><strong>Medical Knowledge</strong></td>
<td>• Residents understand the epidemiology, pathophysiology and</td>
<td>• Residents understand the epidemiology, pathophysiology and management of common</td>
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### Practice-Based Learning and Improvement

- Resident will use major textbooks, review articles, and current literature to facilitate patient care.
- Demonstrate self-motivation to acquire knowledge.

### Interpersonal and Communication Skills

- Resident communicates regularly with patient and his/her family.
- Resident provides feedback to team members.

### Professionalism

- Resident recognizes and takes steps to correct his/her deficiencies.
- Resident treats team members with respect, including nurses and other health care providers.
- Resident adheres to all ACGME mandated duty hour restrictions.
- Resident completes medical records on time.
- Residents will counsel junior team members on issues of professionalism including personal reaction to the morbidity and mortality associated with patients.
- Able to delegate responsibility to others.
- Identifies ethical issues and employs available resources to solve them.

### Systems-Based Practice

- Resident can effectively initiate the appropriate clinical pathways.
- Resident can effectively initiate the appropriate use of
- Resident serves as a consultant to other services with faculty input.
- Develop expertise in medical practice knowledge and
other consultants in the care of patients with renal diseases.

development systems.

**Teaching Methods:**
1. Direct patient care
2. Directly supervised procedures
3. Faculty supervision
4. Core curriculum
5. Observed clinical examination skills
6. Reading materials and literature search

**Assessment Methods – Competency Score Card:**

**Medical Knowledge**
1. Monthly test
2. New Innovation evaluations

**Patient Care**
1. Procedures
2. Mini-CEX
3. New Innovation evaluations

**Practice-Based Learning**
1. New Innovation evaluations
2. Consultation/Literature search (PGY 2/3)

**System-Based Learning**
1. New Innovation evaluations
2. Care coordinator meetings (PGY 2/3)

**Professionalism**
1. Medical record completion
2. New Innovation evaluations
3. Dictation completeness

**Communications**
1. 360 evaluations
2. New Innovation evaluations
3. Transition of care (hand-off)

**Suggested Reading:**
Harrison’s Principle of Internal Medicine 16th edition
Primer on Kidney Diseases, 4th edition, published by National Kidney foundation
Up to Date: Topics on Nephrology and Hypertension – available online on campus
Medical Knowledge Self – Assessment Program (MKSAP) 14th edition (Renal section)
Med Study Internal Medicine Core Curriculum 12th edition (Renal section)
Articles distributed by faculty members during the rotation.

Revised 7/2010