Educational Goals and Objectives:
The goal of Neurology for rotating residents is to provide a clinical experience in which residents will become familiar with how to take the medical history, perform a general and neurological examination, and discuss his/her findings and assessment with the senior Neurology resident and/or the Neurology attending. During their month-long rotation in Neurology, residents are assigned a combination of inpatient rounds and outpatient clinics. While on the inpatient service, consult rounds with the attending will take place on a daily basis. Residents will attend Morning Report, 7 Neurology student lectures or scheduled Emergency lectures for the month when there is no student lecture, Neurology Grand Rounds and Neuropath CPC when scheduled. The resident will be evaluated on clinical performance, attendance, one written history and physical and their ability to perform a complete neurological examination.

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| **Patient Care** | • Take a competent history from a patient with a neurological problem  
• Perform a competent neurological examination and transcribe the findings in a meaningful fashion |
| **Medical Knowledge** | • Interpret information from the history and examination to localize a lesion and form a differential diagnosis  
• Assesses acuity and prognosis of a neurological problem as it relates to needing immediate management |
| **Practice-Based Learning and Improvement** | • Become familiar with the anatomic, pathophysiologic mechanisms of common neurologic diseases (e.g. stroke, seizures, neuromuscular disease, neuro-ophthalmologic disease, Parkinson’s Disease), and neurologic symptoms (e.g. headache, dementia, encephalopathy, dizziness, syncope) and formulates a rational plan of investigation and management |
| **Interpersonal and Communication Skills** | • Develop increased skill in dealing with patients, families and ancillary staff when caring for patients |
| **Professionalism** | • Interacts responsibly with patients, families and co-workers taking into consideration age, disability, culture and gender issues |
| **Systems-Based Practice** | • Describes the indications, contraindications, risks and technique of diagnostic testing (LP, EEG, EPs, EMG/NCS, muscle and nerve biopsy, CT, MRI/MRA, Angiography, Myelography, neurovascular ultrasound) |

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

Assessment Methods – Competency Score Card:
Medical Knowledge  
1. Monthly test  
2. New Innovation evaluations
Patient Care  
1. New Innovation evaluations
Practice-Based Learning  
1. New Innovation evaluations  
2. Consultation/Literature search
System-Based Learning
   1. New Innovation evaluations

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

Communications
   1. New Innovation evaluations

Educational Resources:
Harrison’s Principle of Internal Medicine

Revised 7/2010