

Hospital Based Careers Pathway

Thank you for your interest in the Hospital Based Careers Pathway. This guide will help you focus on learning goals and educational activities to advance your competence and confidence in the important elements of hospital-based care.

In order to participate in the pathway, please:

- ◇ Email the Chiefs to schedule a brief pathway orientation.
- ◇ If you're interested in career mentoring or earning a certificate, schedule a meeting with Dr. Aisha Barber (Davis).
- ◇ Review the Learning Plan Development Guide and begin to develop a plan for how you will use this pathway.
- ◇ Review certificate requirements.
- ◇ Contact the Chiefs or Aisha with any questions.

Hospital-Based Careers Pathway: Mentor Meeting Guide

Resident:

Mentor:

Date:

1. **Current career interests** Career planning is a process. What are your current thoughts about your post-residency goals? If an area appeals to you, why? What additional information do you need to decide on a career or move forward with planning?

2. **Pathway Learning Objectives** Review the learning objectives below and reflect on your experience, evaluation, and comfort level. Which pathway objectives have you already addressed? Which would you like to address in the next 6 months?

√	HBC Pathway Potential Learning Objectives
	1. Perform evidence-based management of pediatric conditions commonly requiring hospital-based management. [key topics list]
	2. Coordinate care for medically complex and technology dependent patients presenting for management of acute and emergency care.
	3. Organize an interprofessional team to deliver safe and effective care.
	4. Prescribe and perform procedures commonly used in acute and emergency care settings, interpret results and manage potential complications. [Procedures List]
	5. Manage a deteriorating patient within an interprofessional team.
	6. Recognize opportunities for performance and quality improvement.
	7. Provide safe transitions of care between settings, including triaging admissions and transitioning to discharge.
	8. Identify threats to patient safety and determine strategies to mitigate them.
	9. Recognize the impact of clinical decisions on the cost of patient care.

3. **Individualized Curriculum Worksheet** Which educational methods will you include in your individualized curriculum worksheet to help you achieve the learning objectives? Use the learning plan development guide and your mentor's suggestions to help you.

4. **Quality Improvement** A solid understanding of QI methodology is important to all hospital-based careers . Have you acquired a basic understanding of QI? Have you considered doing the IHI modules (see information on Resident Book). Are there additional opportunities to be involved in/ learn more about QI in your area of interest.

5. **REACH Project** If you haven't already started a REACH project, consider one with a hospital-based focus. If you have, discuss opportunities for a scholarly product of your work. Are there other opportunities to participate in research in your area of interest?

Hospital Based Careers Pathway: Learning Plan Development Guide

HOW TO USE THIS GUIDE

#1 Review the list of learning objectives

Reflect on your recent experiences and evaluations. Which areas would you like to focus on in the next 6 months?

√	Learning Objectives
	1. Perform evidence-based management of pediatric conditions commonly requiring hospital-based management. [key topics list]
	2. Coordinate care for medically complex and technology dependent patients presenting for management of acute and emergency care.
	3. Organize an interprofessional team to deliver safe and effective care.
	4. Prescribe and perform procedures commonly used in acute and emergency care settings, interpret results and manage potential complications. [Procedures List]
	5. Manage a deteriorating patient within an interprofessional team.
	6. Recognize opportunities for performance and quality improvement.
	7. Provide safe transitions of care between settings, including triaging admissions and transitioning to discharge.
	8. Identify threats to patient safety and determine strategies to mitigate them.
	9. Recognize the impact of clinical decisions on the cost of patient care.

#2 Review the details and educational methods provided in this document for the learning objective(s) you're interested in.

#3 If you choose electives/ selectives, look for more information on Resident Book → Research, Advocacy & Electives → Electives & Selectives. If you can't find the information you need, contact the Chief Residents or Aisha Barber.

#4 If you choose other experiences and need more information, contact Aisha Barber for additional information.

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Learning Objective #1 Perform evidence-based management of pediatric conditions commonly requiring hospital-based management.

Key Topics

based on Pediatric Hospital Medicine Core Competencies

Acute abdominal pain and the acute abdomen	Neonatal fever
Apparent-life threatening event	Neonatal jaundice
Asthma	Pneumonia
Bone and joint infections	Respiratory failure
Bronchiolitis	Seizures
Central nervous system infections	Shock
Diabetes mellitus	Sickle cell disease
Failure to thrive	Skin and soft tissue infections
Fever of unknown origin	Toxic ingestion
Gastroenteritis	Upper airway infections
Kawasaki Disease	Urinary tract infections

Opportunities to Learn


Required Rotations

- Inpatient Senior
- Holy Cross PL 2
- Emergency Department
- PICU
- NICU

Selective Options

- Child and Adolescent Protection (CAPC)
- Infectious Diseases
- Subspecialty selectives (refer to elective and selective page of ResidentBook for options).

Elective Options

 Hospitalist Elective – Refer to information on Resident Book. Contact Anu Dayal and Aisha Davis to plan. Consider focusing on PHAST, mentored Bed Czar shifts, and incorporating Academic Team rounds observation.


Other Experiences

- Core reading – see Resident Book → [Hospitalist Academic Teams](#) → Key Topics & Core Reading
- Coordinate patient follow up session for HBC Pathway peers – Contact Aisha Davis to coordinate. Ideally occurs after an inpatient rotation or hospitalist elective. This would be an important addition to your CV.
- Present or organize an HBC Pathway talk or Journal Club related to a key topic – Contact Aisha Davis for more information. This would be an important addition to your CV. Hospitalists and Hospitalist Fellows will mentor you in preparing/ presenting these sessions.
- Metabolism online module – Coming soon to ResidentBook → Academic Teams → Key Topics & Core Readings

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Learning Objective #2 Coordinate care for medically complex and technology dependent patients presenting for acute and emergency care.

Key Topics	
Tracheostomy	Autonomic dysreflexia
Feeding tubes	Palliative Care
Ventricular shunts	Pressure Ulcers
GERD in medically complex patients	Spasticity
Dysautonomia	Care coordination
Central venous catheters	Rehab basics: PT/ OT/ speech therapy
Post-NICU care	Equipment & Assistive technology
TPN management	Traumatic Brain Injury
	Spinal Cord Injury

Opportunities to Learn	
Required Rotations	
<ul style="list-style-type: none">• Inpatient senior• Emergency Department• PICU• NICU	
Selective Options (See selective options on ResidentBook for more details.)	
<ul style="list-style-type: none">• Genetics/ Metabolism• Rheumatology• Pulmonology• ENT• Neurodevelopmental disabilities• Palliative Care	
Elective Options	
 <u>HELP (Hospitalist Evaluation and Perioperative) Consult Service</u> – Can be scheduled alone (contact Miriam Bloom) or as part of a Hospitalist Elective (contact Anu Dayal and Aisha Davis). Be sure to spend time with the HELP case manager and social worker to learn more about cost of care and resources available to this special population.	
<ul style="list-style-type: none">• <u>Palliative Care</u> – Can be scheduled alone (contact Melanie Anspacher and Conrad Williams) or as part of a Hospitalist Elective (contact Anu Dayal and Aisha Davis).• <u>Perioperative Care Clinic (POCC)</u> – POCC is an outpatient clinic staffed by both anesthesiologists and hospitalists. Although most pre-op patients see the anesthesiologist in POCC, the hospitalist only sees the medically complex patients, patients likely to be admitted to a hospitalist team, or those likely to be co-managed by a hospitalist on a surgical service post-op. The goal is to create pre- and post-op plans of care which minimize peri-operative risks. The clinic is in the afternoons on Mon, Wed, and Thurs. During the other times of day, the hospitalist is co-managing medically complex Orthopedics patients on the floors. This can be scheduled alone (contact Anjna Melwani) or during a Hospitalist elective (contact Anu Dayal and Aisha Davis).• <u>Outpatient Complex Care</u> – Contact Karen Fratantoni and Cara Biddle to be guided to the right person for this opportunity.• <u>Physical Medicine and Rehabilitation</u> – Contact Justin Burton. Be sure to attend specialty and	

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equipment clinics.

Other Experiences



Hospitalist Children with Medical Complexity Modules – Available via link on ResidentBook.

Complex Care Emergencies Simulation – Look out for this on the schedule of HBC Pathway events. It's was created by CNHS Hospitalists and has been presented at national meetings for attendings around the country several times. Don't miss this opportunity!

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Learning Objective #3 Organize an interprofessional team to deliver safe and effective clinical care.

Opportunities to Learn

Required Rotations

- Inpatient senior
- Emergency Department
- CHC – senior block

Selective Options

- Palliative care – See information on ResidentBook under electives/ selectives. Contact Melanie Anspacher and Conrad Williams for details.

Elective Options



Hospitalist Elective – Refer to information on Resident Book. Contact Anu Dayal and Aisha Davis to plan. Consider focusing on PHAST, mentored Bed Czar shifts, and incorporating Academic Team rounds observation.



Transport elective – This is an outstanding opportunity and required in some residency programs! Contact Jen Schuette for planning. See Resident Book for additional information.



Critical Care Elective – This is not just another PICU rotation. Contact Amanda Levin to discuss how you could focus on team dynamics and spend time with the CAT and Code Blue Teams as a first responder.

Other Experiences

- Peer or faculty observation during rounds – This can be done as a part of a Hospitalist elective or separately. The 7E Discharge huddle would be useful. Contact Aisha Davis for help with planning.
- RN/ RT shadowing – Contact Heather Walsh or Jen Duval for details.
- Unit-based late rescues collaborative – Contact Dr. Sade Ogunlesi to discuss joining the 7E late rescues collaborative or select another floor. These teams meet monthly to discuss late rescues and barriers to escalation of care often focusing on team dynamics and system based issues.

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Learning Objective #4 Prescribe and perform procedures commonly used in acute and emergency care settings, interpret results, and manage potential complications.

Learning Objective #5 Manage a deteriorating patient within an interprofessional team.

Procedures	
<p>Per the ACGME, all pediatric residents should be proficient in the left column. Procedures in the right column should be required “if pertinent to future career”. If you’re considering a hospital-based career, many of these will be important for you.</p>	
All pediatric residents	If pertinent to your future career
<ul style="list-style-type: none"> <input type="checkbox"/> Bag-mask ventilation <input type="checkbox"/> Bladder catheterization <input type="checkbox"/> Giving immunizations <input type="checkbox"/> Incision and drainage of abscess <input type="checkbox"/> Lumbar puncture <input type="checkbox"/> Neonatal endotracheal intubation <input type="checkbox"/> Peripheral intravenous catheter placement <input type="checkbox"/> Reduction of simple dislocation <input type="checkbox"/> Simple laceration repair <input type="checkbox"/> Simple removal of foreign body <input type="checkbox"/> Temporary splinting of fracture <input type="checkbox"/> Umbilical catheter placement <input type="checkbox"/> Venipuncture <input type="checkbox"/> Pediatric Advanced Life Support certification (including simulated placement of IO line) <input type="checkbox"/> Neonatal resuscitation certification 	<ul style="list-style-type: none"> <input type="checkbox"/> Arterial line placement <input type="checkbox"/> Arterial puncture <input type="checkbox"/> Chest tube placement <input type="checkbox"/> Endotracheal intubation of non-neonates <input type="checkbox"/> Thoracentesis • <i>Circumcision</i>

Opportunities to Learn
<p>Required Rotations</p> <ul style="list-style-type: none"> • Inpatient Senior • Holy Cross PL 2 • Emergency Department • PICU • NICU • Neurology • Well Baby Nursery <p>Selective Options</p> <ul style="list-style-type: none"> • Pediatric Anesthesia • ENT

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Elective Options



Sedation elective (Georgetown) – See elective information on ResidentBook for details and contact information.



Transport elective – This is an outstanding opportunity and required in some residency programs! See Resident Book for additional information.

- Critical Care Elective – This is not just another PICU rotation. Contact Amanda Levin to discuss how you could focus on team dynamics and spend time with the CAT and Code Blue Teams as a first responder.

- ED Procedures



Holy Cross Deliveries – Contact Sandra Cuzzi regarding this opportunity to augment your delivery/ resuscitation skills and learn neonatal procedures.



Virginia Hospital Center Elective – Contact Dr. Allison Markowsky well in advance to schedule. You will need a Virginia training license.

Other Experiences

- Resuscitation Day (required)



Complex Care Curriculum – Please see learncomplexcare.org if you're not already enrolled.



Complex Care Emergencies Simulation – Look out for this on the schedule of HBC Pathway events. It's was created by CNHS Hospitalists and has been presented at national meetings for attendings around the country several times. Don't miss this opportunity!

- PALS
- NRP
- BLS
- STABLE program for pre-transport care of newborns – Very useful if you may be practicing in a community hospital. Contact Allison Markowsky for details.



HBC Pathway Code Review Contact Dr. Kevin Creamer directly to inquire about sessions with 1-2 residents reviewing nuances of codes.

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Learning Objective #6 Recognize opportunities for performance and quality improvement.

Opportunities to Learn

Residency Requirements

- Quality improvement curriculum & project

Elective Options



Hospitalist Elective – Refer to information on Resident Book. Contact Anu Dayal and Aisha Davis to plan.

- Quality Improvement & Improvement Science Elective - Contact Dr. Amina Khan who will help you design your elective in conjunction with the Quality Improvement Department and Dr. Rahul Shah.

Other Experiences



IHI Open School – Take this outstanding opportunity to take a \$2000 online course for free!! See instructions on ResidentBook → Pathways & Tracks → HBC Pathway → Pathway rotations

- Divisional M&M – Contact Aisha Davis to be invited to Hospitalist M&Ms. If interested in other department's M&Ms, then contact the division chief or resident rotation director.
- Medical Unit Care Delivery Team Meeting – Consider asking Padma Pavuluri and/ or Sade Ogunlesi (co-directors of 7East) whether you can join the care delivery team for that unit, or just one meeting. Inquire about unit initiatives, what their aims are, and how they're tracking them.



Join a quality improvement committee – Membership on a quality improvement committee can count for a significant portion of your QI requirement for residency. It is also an outstanding way to understand better how hospitals work.

- Consider a REACH project with an improvement science mentor.

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Learning Objective #7 Provide safe transitions of care between settings, including triaging admissions and transitioning to discharge.

Opportunities to Learn

Required Rotations

- Inpatient senior
- Emergency Department
- Primary Care

Elective Options

 Hospitalist Elective – Refer to information on Resident Book. Contact Anu Dayal and Aisha Davis to plan. Consider focusing on Bear Direct and Bed Czar shifts.

Other Experiences

- 7E Discharge Huddle – Attend the discharge huddles on 7E during an elective to observe how
- Follow up rounds – Arrange a time to discuss with your mentor, Aisha Davis, or coordinate a session for other HBC Pathway residents to discuss follow up on your most recent HAR, ED, PICU, or inpatient experience. Be sure to answer the following questions:
 - What was your clinical picture of them when you saw them?
 - Did their ultimate diagnosis differ from what you originally thought?
 - In hindsight, could you have done anything when you saw them to improve the quality, cost, or process of their care?
 - Select a subset of patients to call after discharge. Did their care go as planned after discharge? In hindsight, is there anything you could have done differently to facilitate this?
- REACH or QI project opportunity – Consider a REACH or QI project focused on transitions of care (outpatient/ ED → inpatient, between inpatient services, or inpatient → outpatient)
- IPASS module – Available on Resident Book.
- Reading – Consider compiling a literature review on the topic and sharing with the other HBC Pathway residents via the ResidentBook forum.


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Learning Objective #8 Identify threats to patient safety in daily practice and incorporate strategies to mitigate them.

Opportunities to Learn

Required Rotations Reflection during all clinical rotations.

Elective Options

 Hospitalist Elective – Refer to information on Resident Book. Contact Anu Dayal and Aisha Davis to plan. Consider focusing on PHAST, Bear Direct, mentored Bed Czar shifts, and incorporating Academic Team rounds observation. Discuss this goal in particular with your mentor daily.

Other Experiences

- Patient safety & Risk management – Consider contacting Lisa Scafidi to discuss opportunities to shadow.
- Improvement science – Consider contacting May-Brit Sten to discuss opportunities to shadow.
- Medical care unit care delivery team – Contact MUD for unit of interest.
- Incident report review with Chief Residents – Contact Chief Residents
- M&M committee – Contact Amina Khan. This also counts toward your QI project requirement.
- Divisional M&Ms – Contact division chief or education director for division of interest for schedule.
- Consider a REACH project which addresses patient safety.


Hospital-Based Careers Pathway: Certificate Requirements

Learning Objective #9 Recognize the impact of clinical decisions on the cost of patient care.


Opportunities to Learn

Required Rotations Communication with case management during all clinical rotations.

Elective Options

 Hospitalist Elective – Refer to information on Resident Book. Contact Anu Dayal and Aisha Davis to plan. Consider focusing on PHAST, mentored Bed Czar shifts, and incorporating Academic Team rounds then subsequent discussion with CM or utilization review regarding cost of care for patients on that team.

Other Experiences

-  Follow up rounds/ case review – Follow up on cost of care for cases of interest with your case managers. Consider organizing a session for your peers on this topic.
- Utilization review and case management review of cases during clinical rotations
 - Web-based billing course – More information coming soon.
 - REACH project opportunity

Hospital-Based Careers Pathway: Certificate Requirements

You must notify Aisha Barber of your interest in a certificate beforehand and complete **at least 4** of the following to earn a certificate.

- **3 educational units** focused on meeting HBC Pathway learning objectives and documented in your individualized curriculum worksheet (ICW).
 - 1 unit = 4 weeks or a longitudinal experience of equivalent duration.
 - Each year of REACH = 1 educational unit
 - All required, elective, and selective rotations count if you proactively focused on an HBC pathway goal during your time there. For required rotations this must be discussed with your HBC pathway mentor prior to starting the rotation in order to be counted.

- Completion of **online QI or safety modules**
 - [IHI Open School](#) Modules: PS 100-106, L101, QI 101-106, PFC 101-102
 - See document on ResidentBook for details regarding how to gain access.
 - Modules completed during intern AT rotation count towards certificate.

- **QI project** with hospital-based focus which **meets the following criteria**:
 - **SMART aims** Specific, Measurable, Achievable, Realistic, Time-based
 - Incorporation of **process, outcome, and/ or balancing metrics**
 - **QI tools** utilized
 - Discuss with your HBC pathway mentor/ Aisha Barber if you're not sure whether your project meets these criteria.

- **REACH project** with hospital-based focus.
Upload project proposal and any scholarly products to your MedHub portfolio.

- Attend a **national conference** for any areas of interest related to hospital-based careers.

Residents are responsible for keeping track of their participation and returning this checklist with evidence of achievement to Aisha Barber at least 4 weeks prior to graduation.