

Rotation Name: Rheumatology Consults

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Goal:

The purpose of this educational unit is to familiarize residents with the pathophysiology, diagnostic workup, and inpatient management of rheumatologic diseases, as well as to prepare the general internist to co-manage care for the patient with rheumatologic disease. Additional clinical learning will occur in the rheumatology outpatient clinics [see separate goals and objectives].

Objectives:

By the end of this inpatient rheumatology educational unit, learners in this rotation will be able to:

Patient Care

- Acquire an accurate and relevant, focused rheumatologic history
- Perform a review of systems germane to the field of rheumatology to investigate for both inflammatory and non-inflammatory conditions
- Perform an appropriate screening musculoskeletal exam, with more detailed exam of hands and knees (PC2)
- Order appropriate and tailored diagnostic workup (e.g. imaging, inflammatory markers, autoantibodies, muscle enzymes, etc.) for inpatients with confirmed or suspected rheumatologic diseases
- Co-manage patients with rheumatologic conditions with primary inpatient team and other consultant teams (PC5, MK1, MK2, SBP3, ICS 3)
- Integrate diagnostic results into differential diagnosis of common rheumatologic conditions (RA, osteoarthritis, osteoporosis, psoriatic arthritis, PMR, crystal arthropathies, fibromyalgia, SLE, vasculitis) (PC3, MK3)
- Recognize patients who need continued outpatient care by a rheumatologist following hospital discharge

Medical Knowledge

- Demonstrate knowledge of clinical presentation, natural history, and complications of inflammatory and non-inflammatory diseases (e.g. SLE, inflammatory and non-inflammatory arthritis, crystalline arthropathies, systemic vasculitis, CTD-ILD, etc.)
- Understand indications for arthrocentesis to aid in diagnostic workup

Interpersonal and Communication Skills

- Communicate recommendations of the consultant team to the primary inpatient team, and if necessary, with other consultant teams
- Establish a therapeutic and professional relationship with patients (PC5, SBP2, SBP3, ICS 2 ICS3)

Professionalism

- Create documentation that is timely (P1, ICS 3)
- Demonstrate professionalism during all interactions with colleagues, patients, and other health team members (P2)

Systems based practice

- Create documentation that is accurate and adequately addresses consult question(s) (SBP2)

Practice-based learning and improvement

- Apply published guidelines on the best practices for rheumatologic conditions
- Recognize the scope of their abilities and asks for assistance when necessary
- Accept diagnostic uncertainty as a constant companion in rheumatology

Educational Strategies:

Educational Strategy	Skills (taught and/or assessed)
Bed side rounds	Medical history Physical examination Rheumatologic ROS Presentation skills Differential diagnosis and clinical reasoning Patient interaction
Patient care conference	Medical knowledge re: challenging inpatient cases Presentation skills Differential diagnosis and clinical reasoning
Radiology conference	Medical knowledge (interpretation of radiologic data to aid in diagnosis)
Fellow conference	Medical knowledge and evidence-based medicine
Gout module	Medical knowledge

Required Reading:

Gout Module

Suggested Reading and/or Resources:

American College of Rheumatology Educational Resources

- [Rheum2Learn modules](#)
- [Medication Guides](#)
- [Virtual Rheumatology Fellow](#)
- [Rheumatology Image Library](#) [must be ACR member to access]

American College of Rheumatology Clinical Practice Guidelines

- [ANCA-associated vasculitis](#)
- [Axial spondyloarthritis](#)
- [Gout](#)
- [Osteoarthritis](#)
- [Psoriatic Arthritis](#)
- [Reproductive Health in Rheumatic Diseases](#)
- [Rheumatoid arthritis](#)

[American College of Rheumatology/European League Against Rheumatism classification criteria for SLE](#)

[Arthritis Research Canada MSK exam video](#)

[NEJM arthrocentesis instructional video](#)

Evaluation:

(Ideally, the evaluation items below resemble the learning objectives above)

Assessment Form:

1. Please identify 3 skills you observed the resident do well? (Text Box)
2. Please identify 3 skills the resident needs to improve or should do differently. How should they do it differently? (Text Box)

(Ideally, limit to 8-10 skills that you ask your faculty to assess)

For the remaining items, please rate 1-5 (or did not observe):

1 = cannot do this skill

2 = can do this skill only with direct supervision (some needs to be there to supervise)

3 = can do this skill with indirect supervision (an attending or fellow is close by or available by phone)

4 = can do this skill unsupervised (they are ready to graduate for this skill)

5 = has achieved mastery of this skill (They can teach others how to do this skill well)

3. Gather a relevant medical history for patients with rheumatologic disease
4. Perform an accurate physical exam with attention to features of rheumatologic disease
5. Perform a tailored and appropriate rheumatologic diagnostic workup
6. Construct a differential diagnosis and use clinical reasoning to order possible diagnoses in order of importance
7. Communicate diagnostic impressions and recommendations clearly with patient and primary team verbally
8. Create acute documentation that sufficiently addresses the consult question and succinctly enumerates recommendations of the rheumatology team