

## **Hospitalist Training Program Curriculum Objectives**

### **Patient Safety**

- Culture of Patient Safety
  - Systems approach
    - Reversing the blame, shame and train culture
  - Teamwork/Communication
    - Multi-disciplinary (Shadow experience)
    - Handoffs
  - Accountability
- Systems approach
  - The Wrong Patient—Wachter and Shojania (with appendix 1)
  - CPOE
  - Bar coding of medications
- Communication
  - Handoffs
  - Abbreviations
  - Sound alike-look alike (Wachter's book—Plendil)
  - Discharge summaries—timely, accurate, delivered, f/u needs
  - Transitions of care
- Medication safety
  - Defining ADE—potential vs. achieved, preventable
  - Abbreviations
  - Poor handwriting Internal bleeding—Plendil, use examples you find.
  - Look alike/sound alike medications
  - CPOE and bar coding of medications
  - Monitoring and reporting ADEs
- Medical Error
  - Error vs. adverse events
  - Framework of thinking about errors
    - Cognitive psychology of errors
    - Types of errors
    - Response to errors
    - Error analysis
      - RCA
      - Evidence-based protocols

### **Quality Improvement**

- Error reporting
- Root cause analysis
- Failures mode effect analysis
- Rapid cycle improvement
- Practice Guidelines and clinical pathways
- Patient satisfaction/customer satisfaction

### **Consequences of poor quality**

Medicolegal issues  
Accountability

### **Healthcare Finance**

Economics of hospital medicine/Practice management  
Hospital finance/insurance coverage—how do hospitals make money?  
Hospital CEO as your stakeholder—Why its important to cater to CEO.  
DRGs—define and how to improve them.  
Making money in hospital medicine—how does the hospitalist make money?  
Nationalized healthcare—Single payer system  
Pharmaceutical influence  
Billing and coding

### **Resource utilization**

Decision analysis (HM-7)  
Evidence based medicine (HM-8)  
Cost effectiveness (HM-9)

### **Hospital as a dangerous place**

Nosocomial infections  
HAP/VAP  
UTI  
CRBI  
*C. difficile*  
Surgical site infections  
Antibiotic resistance  
Deconditioning/ADLs  
Pressure ulcers  
VTE  
Renal insufficiency  
Delirium  
Gastric stress related bleeding  
Adverse drug events/medical errors  
Transitions of care  
Falls  
Nutrition

### **Disaster Medicine**

Infectious disease outbreaks (awareness and control)  
Influenza (the coming pandemic)  
SARS  
Bioterrorism  
Natural disasters (use Dr. Dweitelzeig's perspective)

### **Palliative Care**

Retreat

- Palliative care assessment
- Ethical and legal principles
- Advanced directives and code status
- Hospice
- Breaking bad news
- Pain management
- Symptom control
- End of life decision making
- Establishing goals of care

### **Consultative and Perioperative Medicine**

- Preop Evaluation
- Preop Cardiac evaluation
- Preop Pulmonary evaluation
- Postop Fever
- Perioperative adrenal insufficiency
- Perioperative anemia
- Perioperative delirium
- Perioperative VTE prophylaxis
- Perioperative hypertension
- Perioperative diabetes management
- Perioperative pain control

### **Neurology**

- Stroke
- HTN emergency
- Syncope

### **Geriatrics**

- Approach to the hospitalized geriatric patient
- Delirium
- Polypharmacy
- Functional decline
- PEG tubes

### **Preceptorship**

- Hospitalist efficiency
- Early discharge
- Models of hospital care—hospitalist care vs. primary care (HM-chapter 1)

### **Mentorship**

### **Career Development**

- Job opportunities
- Contract negotiating