INPATIENT CONSULT SERVICE

OBJECTIVES – BEGINNER

Patient Care

Residents are expected to:

- Obtain essential and accurate information and present it in a concise but thorough format
- Perform a rehabilitation medicine focused consultation history and physical which reflects the patients’ abilities and inabilities
- Generate a comprehensive problem list
- Determine appropriate rehabilitation services for patients and assist in placement to inpatient rehabilitation, skilled nursing facilities, long-term acute care centers, home health care, or hospice care
- Expeditiously facilitate patient transfers from acute hospitalizations to other settings
- Prevent long-term complications from immobility and improve recovery in acutely hospitalized patients
- Accurately define short and long term goals for their patients
- Incorporate pertinent medical issues in your therapy orders in order to precisely define patient precautions
- Select appropriate orthotics, prosthetics, and durable medical equipment for acutely hospitalized patients

Medical Knowledge

Residents are expected to:

- Follow the acute management and rehabilitation needs of patients with spinal cord injury, cancer, organ transplant, amputations, stroke, multitrauma, brain injury, and general disability from acute medical illnesses
- Outline prognosis for right vs. left CVA, hemorrhagic vs. embolic stroke, and include various factors such as age and comorbidities that may effect outcome
- Discuss the physiologic changes associated with acute traumatic brain injury and spinal cord injury
- Discuss the diagnosis and prognosis of traumatic brain injury using variables such as extent of injury, Glasgow coma scale, trauma scores, age, premorbid function, and somatosensory evoked potentials
- Classify brain injured patients according to the Rancho Los Amigos Medical Center Levels of Cognitive functioning
• Design a treatment plan to assist the primary team in managing the agitated brain injured patient
• Discuss the diagnosis, prognosis, and treatment of pain in the acute spinal cord injured patient
• Perform a comprehensive neuromuscular and ASIA exam on selected patients
• Design a plan for the neurogenic bladder and bowel in the acute care setting
• Discuss standard amputation indications and post operative management including transfemoral, transtibial, and Symes
• Distinguish between dementia and delirium, describe the reversible causes of delirium
• Identify five common comorbid diagnosis of geriatric patients and describe their impact on rehabilitation
• Demonstrate understanding of the mechanisms of the following complications of immobility in a patient in the acute hospital setting and outcome strategies for prevention and management:
  o Pressure ulcers
  o Deep venous thrombosis
  o Contracture
  o Malnutrition
  o Constipation
  o Pneumonia/Atelectasis
  o Heterotopic Ossification
  o Urinary tract infection
  o Hypercalcemia

• Understand the estimation of burn depth and body surface area
• Describe the common contractures that develop after burns and the appropriate techniques to avoid these
• Discuss types of hip fractures, possible complications, fixation, and arthroplasty alternatives and mortality
• Assess cardiovascular and pulmonary systems for effects on impairment and disability
• Identify contraindications or precautions for exercise in patients with cardiac or pulmonary conditions
• Formulate a rehabilitation plan for patients with poor endurance
• Identify risk factors for aspiration

Practice-Based Learning and Improvement
Residents are expected to:
• Assess appropriateness of diagnostic testing and how it affects patient treatment, outcomes, and overall patient management in today’s health care environment
• Use information technology to access and manage patient information and support their own education and treatment decisions
• Evaluate and improve patient care practices using information technology, practical clinical experience, and evidence-based medicine
• Coordinate rehabilitation with the needs and concerns of the primary physician
• Facilitate learning by students, fellows, allied health professionals and the rehabilitation team

**Interpersonal and Communication Skills**

Residents are expected to:

• Communicate effectively with the patient, the patient’s family, and other health care services regarding rehabilitation diagnosis, treatment plans, prognosis, and patient management issues
• Demonstrate sound clinical judgment in patient management and respond to patients and their families in a compassionate and respectful way
• Counsel patients and their families on the goals of inpatient rehabilitation. Know when to ask for formal psychological support
• Participate in rounds and discussions
• Utilize effective listening skills

**Professionalism**

Residents are expected to:

• Maintain a strong personal integrity and responsibility to the patient and other disciplines with whom you are involved
• Be sensitive to the cultural differences of their patients and the health care team.
• Be a strong patient advocate and assist them with their interactions with other health care systems in order to yield maximum patient and health care benefit
• Be on time to lectures and rounds
• Accept responsibility for their actions and decisions
• Apply sound ethical principles in practice including patient confidentiality, informed consent, and provisions of withholding care
• Follow the institutional policies such as clinical industry interactions, conflict of interest, and infection control
Systems – Based Practice

Residents are expected to:

- Understand how complex social issues and limited resources can affect the patient’s rehabilitation and outcome
- Assess benefit, risk, and resource allocation when making prescription and test recommendations
- Learn about the 75% Centers for Medicare and Medicaid rule and identify the 13 diagnosis that fall under the 75%

OBJECTIVES – ADVANCED

Patient Care

Residents are expected to:

- Obtain essential and accurate information and present it in a concise but thorough format
- Perform a rehabilitation medicine focused consultation history and physical which reflects the patients abilities and inabilities
- Generate a focused problem list
- Determine appropriate rehabilitation services for patients and assist in placement to inpatient rehabilitation, skilled nursing facilities, long term acute care centers, home health care, or hospice care
- Expeditiously facilitate patient transfers from acute hospitalizations to other settings
- Prevent long-term complications from immobility and improve recovery in acutely hospitalized patients
- Accurately define short and long term goals for their patients
- Incorporate pertinent medical issues in their therapy orders in order to precisely define patient precautions
- Select appropriate orthotics, prosthetics, and durable medical equipment for acutely hospitalized patients
- Identify which acutely ill hospitalized patients should not participate in therapy
- Recognize how pain may limit participation in therapy and provide recommendations to the primary team on how to control pain during therapies
- Understand when therapies are not medically necessary for a patient

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Practice-Based Learning and Improvement

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• Accept responsibility for their actions and decisions
• Apply sound ethical principles in practice including patient confidentiality, informed consent, and provisions of withholding care
• Follow the institutional policies such as clinical industry interactions, conflict of interest, and infection control
• Assist with the administrative functions of the rotation and monitor work flow
• Function as a team leader for more junior residents
• Assist with coverage for resident vacations

Systems – Based Practice

Residents are expected to:

• Understand how complex social issues and limited resources can affect the patient’s rehabilitation and outcome
• Assess benefit, risk, and resource allocation when making prescription and test recommendations
• Advocate for patients who need tests and treatments that might be inappropriately denied
• Learn Medicare/Medicaid requirements for documentation (elements of the history, review of systems, physical exam, billing, and procedure codes)
• Learn how Medicare/Medicaid determines physician reimbursement for inpatient consults
• Understand the role of an Inpatient medical director
• Describe the contraindications set by various hospitals to exclude patients from acute inpatient rehabilitation
• Understand the difference between for-profit and not-for-profit Rehabilitation facilities