Acting Internship (AI)
MED XXXX – Geriatric Medicine, VU

1. Course Administration

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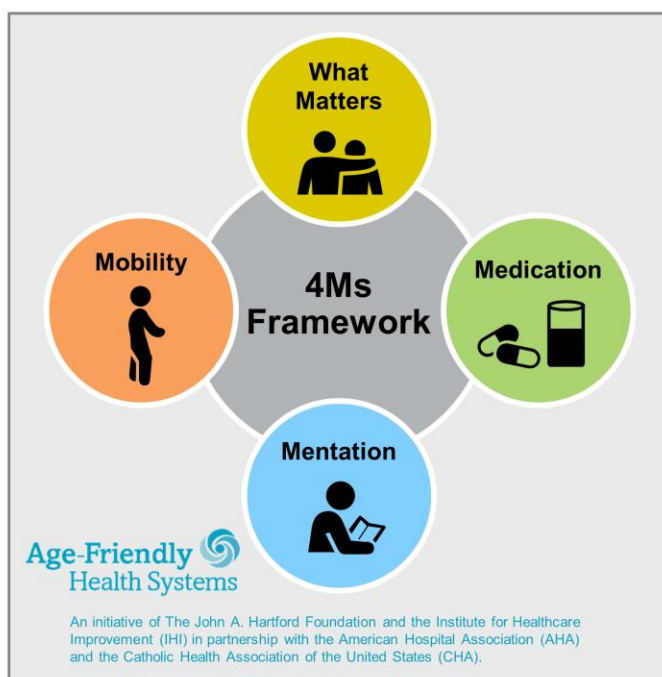Jazzmine Caldwell
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2. Schedule

Please refer to the online Course Catalog (Google document version) for information on where to go on day 1 of the course.

3. Course Overview
Course Description/Mission Statement

In 2018, 1 in 3 adults admitted to Vanderbilt University Hospital was $\geq$ 65 years-old. This AI immerses students on the Acute Care for the Elderly Unit on 7-round wing to learn how to provide age-friendly healthcare. Age friendly healthcare is guided by an essential set of evidence-based practices, causes no harms, and is consistent with what matters most to the older adult and their family.

What Matters
Know and align care with each older adult's specific health outcome goals and care preferences including, but not limited to, end-of-life care, and across settings of care.

Medication
If medication is necessary, use Age-Friendly medication that does not interfere with What Matters to the older adult, Mobility, or Mentation across settings of care.

Mentation
Prevent, identify, treat, and manage dementia, depression, and delirium across settings of care.

Mobility
Ensure that older adults move safely every day in order to maintain function and do What Matters.

Age-Friendly Health Systems

An initiative of The John A. Hartford Foundation and the Institute for Healthcare Improvement (IHI) in partnership with the American Hospital Association (AHA) and the Catholic Health Association of the United States (CHA).

For related work, this graphic may be used in its entirety without requesting permission. Graphic files and guidance at ihi.org/AgeFriendly

A student is eligible to serve as an acting intern on the Vanderbilt geriatric medicine service after completion of the ISC: Healthy Aging & Quality Dying. Acting interns are directly supervised by an attending and upper-level resident, and work closely with a geriatric pharmacist and the

interdisciplinary team. Students may carry up to 6 patients and may perform up to 2 admissions and 2 ICU transfers daily. Patients assigned will be selected for their teaching value, and the student will be expected to function as a member of the inter-disciplinary team at a supervised intern level for patient management and communication with other healthcare providers. This will include preparing the admission history and physical examination, entering orders, writing daily progress notes, presenting patients on daily work rounds, caring for a near intern-level patient census and coordinating discharge planning.

Course-Specific Learning Objectives
By the conclusion of this course, students should be able to:
1. Articulate an approach to assessing and acting on the 4Ms (What Matters, Medication, Mentation, and Mobility) for each patient.
2. Develop a prioritized differential diagnosis and select a working diagnosis following each patient encounter.
3. Perform and interpret screening tests for geriatric syndromes.
4. Generate comprehensive admission orders and daily orders on each patient admitted to the care of the acting intern.
5. Give and receive a written and oral patient handover to transition care responsibility to another health care provider.
6. Recognize a patient requiring urgent or emergent care, initiate evaluation, and seek treatment.
7. Obtain informed consent for tests and/or procedures under the supervision of an upper level resident or attending.
8. Generate a comprehensive discharge summary detailing functional status, cognitive status, medication changes, goals of care, code status for each patient.
9. Generate comprehensive discharge orders for a patient transitioning to home including generating any necessary prescriptions.
10. Generate comprehensive discharge orders for a patient transitioning to another facility.

Common AI Learning Objectives
By the conclusion of this course, students should be able to:
1. Perform situation-appropriate (problem-focused or complete) history and physical examinations, and interpret clinical information to formulate a prioritized differential diagnosis that guides the creation of a patient-specific management plan (PC7a, MK2b)
2. Demonstrate knowledge and understanding of the science for the AI specialty (MK2b) and exhibit clinical judgment that is safe and commensurate with an intern level of training (PC7a)
3. Provide patient care in setting more consistent with intern-level responsibility, specifically including (PC7a, SBP2a, SBP2b):
   a. Managing a larger patient care census more consistent with an intern-level group of patients including patient documentation
   b. Under appropriate supervision, demonstrating safe and effective cross-cover of patients not routinely cared for by the student
   c. Practicing evidence-based patient management that reflects individual patient, medical center, and overall health care system cost considerations
4. Communicate effectively with the health-care team, both verbally and in written form using efficient, safety-oriented practices during (IPCS7a.1):
   a. Care of the student's primary patients
   b. Cross-cover patients
   c. Handovers of care

       d. Discussing and entering patient orders
5. Model a commitment to continuous self-regulated learning as evidenced by the collection, analysis, interpretation, and implementation of newly acquired information (PBLI3a)
6. Display professional demeanor and duty while demonstrating compassion and respect for all persons, utilizing effective communication strategies (honesty and transparency) with patients, families, and healthcare colleagues, regardless of their cultural background (PR1a, PR5a, IPCS7a.1)
7. Function as an effective member of the patient care team (SBP2a, SPB2b)

4. Educational Activities

Course-specific AI Activities
The intent of the AI course is to allow the student to take responsibility for patient care "like an intern," which includes daily activities that would be required for the intern. Therefore, all course activities will be mandatory for this rotation. In addition, to be fully immersed into the team schedule, solitary holidays as designated by the School of Medicine such as Labor Day, MLK Jr Day, Memorial Day will not be considered excused from your clinical duties. Students are expected to take call (weekends, holidays, and nights) as part of the team schedule for an intern.

1. Students will write daily notes, perform H&Ps, discharge/transfer summaries where appropriate. (EPA 5)
2. Students will discuss and enter patient orders, under the oversight of residents where appropriate. (EPA 4)
3. Students will learn how to triage cross-cover concerns where appropriate.
4. Students will perform handovers under the supervision of a resident where appropriate. (EPA 8)
5. Students will assume ownership of a level of patient census closer to that of an intern. We recommend the student start the 4-week rotation with approx. 2-3 patients and end the rotation with approx. 5-6. The AI should perform an independent assessment and formulate a workup and treatment plan for each patient.
6. Students will respond to calls (such as through paging) for patient care needs under the supervision of a physician. (EPA 10)

Common AI Activities
1. Create and discuss a **student learning plan** with your clinical team. Utilize the form in VSTAR Portfolio. You will be asked to generate 2-5 learning goals for the course, save and print the form, and take it with you to your clinical rotation. Use the form to facilitate a conversation with the frontline clinical faculty who will provide you with learning experiences and potentially assess your progress.
2. Students will write daily notes, perform H&Ps, discharge/transfer summaries where appropriate. (EPA 5)
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5. Assessments, Expectations, and Policies

All students should receive formal mid-course feedback from the course director.

The final grade will be assigned on an honors/high pass/pass/fail basis. The grade will be comprised of performance in six separate, but equally important competency domains: Medical Knowledge, Patient Care, Interpersonal and Communication Skills, Practice-Based Learning and Improvement, Systems-Based Practice, and Professionalism, as well as through Entrustable Professional Activities (EPAs).

To obtain honors, a student should demonstrate excellent performance in *all* aspects of the course. Differentiation of Honors/High Pass/Pass will consider milestone-based assessment and clinical observations.

Competency-Based Assessment (Milestones)

- Competency milestone data about each student should be requested from multiple evaluators (attendings, residents, pharmacist, nurses, social worker, case manager) who are able to assess student performance in key competencies during the activities of the course.
- Students should request at least two assessments from different clinicians each week. By the end of the course, students should have at least two assessments of each the 12 milestones, filled out by at least 2 unique supervising clinicians; at least one of the assessors must be a faculty member.
  - Students should use Compass to send the milestone form to faculty and residents with whom they have worked. It is recommended that try to send out two per week.
- Course directors will synthesize input from others and make one final assessment for each competency.

Milestones

PATIENT CARE	
Self-knowledge of limits	PC7a
MEDICAL KNOWLEDGE	
Depth	MK2b
INTERPERSONAL COMMUNICATION	
Rapport with patients and families	IPCS7a.1
PRACTICE-BASED LEARNING & IMPROVEMENT	
Receptivity to feedback	PBLI3a
PROFESSIONALISM	
Professional demeanor	PR1a
Honesty/trustworthiness	PR5a
SYSTEMS-BASED PRACTICE	
Initiative and contribution (Conscientiousness)	SBP2a
Prioritization	SBP2b

EPAs

Entrustable Professional Activities (EPAs) will be directly observed in the clinical environment. The EPAs should be assessed at least once during the AI rotation using the levels of supervision scale. EPA assessment will feed into the student grade.

- Students will request feedback on their EPAs using Compass. This data is critical to helping both the medical school leadership and the students understand their progress towards readiness for internship. It is recommended that students sent out out two requests per EPA per week.

EPA 4: Enter and discuss orders and prescriptions
EPA 5: Document a clinical encounter in the patient record
EPA 8: Give or receive a patient handover to transition care responsibility
EPA 10: Recognize a patient requiring urgent or emergent care and initiate evaluation and management

For more information on the EPAs, please visit https://medschool.vanderbilt.edu/ume/core-entrustable-professional-activities.

Assigning a Final Grade
Students' final grades are determined in light of performance on competency domains. The final grade designation is at the discretion of the course director based on the accumulated milestone data and their professional expert judgement.

	Summative Competency Ratings *(6 domains assessed)*
Risk of Fail *(course director discretion)*	Any Sub-Threshold OR >2 Thresholds
Pass	No more than 2 Thresholds All others at Target or above
High Pass	At least 3 Reaches All others at Target
Honors	Nothing below Target 4 Reaches