LSUHSC-Shreveport
Family Medicine Residency in Alexandria
RESIDENT LEVELS OF CARE

Resident Level: PGY-1 (Intern)

Core Competencies:

1. Medical Knowledge
2. Patient Care Skills
3. Practice-based learning
4. Interpersonal and communication skills
5. Systems-based practice
6. Professionalism
### Direct Supervision:
- The supervising physician is physically present with the resident and patient during the key portions of the procedure.
- Code R: Procedures are performed under supervision of an upper level resident or a faculty physician
- Code F: Procedures are performed under supervision of a faculty physician

### Indirect Supervision:
- The supervising physician may not be physically present within the hospital or other site of patient care, but is immediately available by means of telephonic and/or electronic modalities, and is available to provide direct supervision.

### Oversight:
- The supervising physician is available to provide review of procedures/encounters with feedback provided after care is delivered.

The PGY1 Resident may perform the following procedures under appropriate supervision:
- Endotracheal and nasotracheal intubation (R) [2]
- Excise or Biopsy Superficial Skin Lesions (R) [2]
- Central venous access (R) [2]
- Place Pediatric Bladder Catheters (R) [2]
- Foreign Body Removal (eye, ear, nose) (R) [2]
- Cryosurgery (R) [2]
- Lumbar Puncture (R) [2]
- Evacuate thrombosed hemorrhoid (R) [2]
- Place, Maintain, and Remove Thoracostomy Tubes (R) [2]
- Thoracentesis (R) [2]
- Abdominal Paracentesis (R) [2]
- Place Arterial Lines (R) [2]
- Regional Block Anesthesia (R) [2]
- Pediatric Bladder Tap (R) [2]
- Application and Removal of Orthopedic Casts for Simple Fractures (R) [2]
- Joint Aspiration and Injection (R) [2]
- Reduction of Simple Dislocations (R) [2]
- Spontaneous vaginal deliveries (R) [2]
- Episiotomy and Repair (R) [2]
- Endometrial Biopsy (R) [2]
- Toenail Removal (R) [2]
- Excision of Subcutaneous Cysts (R) [2]
- Neonatal circumcision (F) [2]
- Flexible Endoscopy of Upper / Lower Gastrointestinal Tract (F) [2]
- Vasectomy (F) [2]
- Bone Marrow Biopsy and Aspiration (F)

The PGY1 Resident should:
- Manage patients of low complexity. [2,3,5,6]
- Successfully complete the following structured courses: ACLS, PALS, NRP. [1,2,3,4,6]
- Present M&M conference for FM rotation. [1,2,3,4,6]
- Perform and Document Accurate Histories and Physical Examinations [1,2,3,4,6]
- Order & Interpret Results of Diagnostic Tests (Radiology, Electrocardiographic, and Laboratory) [1,2,3,4,5]
- Order and Document Fluid & Electrolyte Therapy [1,2,3,4,5]
- Monitor Vital Signs and Intake / Output [1,2,3,4,5]
- Request and Review Consultations [1,2,3,4,5,6]
- Obtain & Document Informed Consent [1,2,3,4,6]
- Order Transfusions of Blood & Blood Products [1,2,3,4,5]
- Order Pain Management Therapy [1,2,3,4,5]
- Order Oral and Intravenous Medications and Monitor for their Effects and for Possible Adverse Reactions [1,2,3,4,5]
- Develop and Document Pre- and Postoperative Care Plan [1,2,3,4,5]
- Understand and Practice Sterile Technique and Scrub, Gown, Glove, and Drape Properly [1,2]
- Understand and Practice Universal Infection Control / Safety Precautions

The PGY1 Resident should:
- Score > 390 on the ABFM In-Training Examination, or complete remediation approved by the Program Director. [1,2,3,4,6]
- Admit, Diagnose, Evaluate & Treat patients on the Adult Medical, Pediatric, Surgical, Obstetric, and Gynecologic Services [1,2,3,4,5]
- Document Patient Status by Clear and Legible Progress Notes [1,2,3,4,5]
- Dictate History and Physical Examinations [1,2,3,4,5,6]
- Dictate Discharge Summaries [1,2,3,4,5,6]
- Dictate Operative Notes [1,2,3,4,5,6]
- Evaluate & Treat Patients in the Outpatient Setting, Including the Emergency Room [1,2,3,4,5,6]
- Learn & Apply Appropriate ICD / CPT Codes & Understand Required Supporting Documentation [1,2,3,4,5,6]
- Collect Specimens (Urine, Sputum, Drainage, etc.) for Submission to Laboratory or for Examination [1,2,5]
- Maintain Accurate & Complete Medical Record [1,2,4,5,6]
- Use & Understand Nursing Notes & Patient Data [1,2,4,5]
- Utilize the Institutional Resources & Case Management Services for Discharge Planning [4,5,6]
- Understand the Methods of Outcomes Assessment [3]
- Be Aware of the Principles of Peer Review & Cooperate with Quality
### PGY1 Residents may perform the following procedures:

- Venipuncture [2]
- Start Peripheral IV Lines [2]
- Draw Blood Cultures [2]
- Place Adult Foley Catheters [2]
- Oral / Nasal – Gastric Intubation [2]
- Perform Wound Dressing & Daily Wound Care [2]
- Basic and Advanced Life Support [1,2]
- Obtain Oropharyngeal Control of the Airway and Provide Ambu Ventilation [2]
- Administer Local Anesthetics [2]
- Repair Simple Lacerations [2]
- Wound Closure (suture and skin staples) [2]
- Serve as Operative Assistant [2]
- Foreign Body Removal (vagina, rectum) [2]
- Simple Debridement of Burns [2]
- EKG Interpretation [2]
- Incision and Drainage of Superficial Fluid Collections and/or Abscesses [2]
- Draw Arterial Blood Samples [2]
- Gastric Lavage [2]
- Application of Orthopedic Splints [2]
- Fecal Occult Blood Testing [2]
- Urine Dipstick Testing [2]
- Administer Immunizations [2]
- Nitrazine Testing [2]

### Improvement Processes & Activities [3,5]

- Understand the Concept of Risk Management & the Necessary Documentation in the Medical Record [3,5]
- Understand the Principles of Clinical Research & Clinical Trials, & be Able to Perform Basic Statistical Analysis of Data & Interpretation of Published Results [1,4,5]
- Develop Computer Skills & Use Available Computer and On-Line Resources [4,5]
- Participate in Basic (BLS) and Advanced (ACLS) Life Support Training [1,2,5]

Additionally, PGY1 Residents Should Begin to Acquire Knowledge of the Six Core Clinical Competencies and the Evaluation Process Used to Monitor Their Progress Toward Achieving Success in the Following Domains:

- **Patient Care** - Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. [1]
- **Medical Knowledge** - Residents must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioral sciences, as well as the application of this knowledge to patient care. Residents will take the annual American Board of Family Medicine (ABFM) In-Training Examination. [2]
- **Practice-based Learning and Improvement** - Residents must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning. Residents are expected to progressively
<table>
<thead>
<tr>
<th>Microscopic Fern Testing [2]</th>
<th>develop skills and habits to be able to meet the following goals: [3]</th>
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<tbody>
<tr>
<td>Obtain and Interpret Vaginal Wet Preps [2]</td>
<td>➢ identify strengths, deficiencies, and limits in one’s own knowledge and expertise; [3]</td>
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<td>➢ set learning and improvement goals; [3]</td>
<td>➢ systematically analyze practice using quality improvement methods, and implement changes with the goal of practice improvement; [3]</td>
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<td>➢ identify and perform appropriate learning activities; [3]</td>
<td>➢ incorporate formative evaluation feedback into daily practice; [3]</td>
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<td>➢ locate, appraise, and assimilate evidence from scientific studies related to their patients’ health problems; [3,5]</td>
<td>➢ use information technology to optimize learning; and, [3,5]</td>
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<td>➢ participate in the education of patients, families, students, residents and other health professionals. [3,4]</td>
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leader of a health care team or other professional group; [4]

- act in a consultative role to other physicians and health professionals;[4] and,
- maintain comprehensive, timely, and legible medical records.[4]

**Systems-based Practice** - Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care. Residents are expected to progressively learn to:

- work effectively in various health care delivery settings and systems relevant to their clinical specialty; [5]
- coordinate patient care within the health care system relevant to their clinical specialty; [5]
- incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population-based care as appropriate; [5]
- advocate for quality patient care and optimal patient care systems; [5]
- work in inter-professional teams to enhance patient safety and improve patient care quality;[5] and
- participate in identifying system errors and implementing potential systems solutions. [5]

**Professionalism** - Residents must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Residents are expected to demonstrate progressive:

- compassion, integrity, and respect for others; [6]
- responsiveness to patient needs that
supersede self-interest; [6]
- respect for patient privacy and autonomy; [6]
- accountability to patients, society and the profession;[6] and,
- sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.[6]