Rheumatology
at Kapiolani Medical Center at Pali Momi
and Kuakini Medical Center, PGY-1

Description of Rotation
During the general surgery training year, Orthopedic Residents are provided an opportunity to investigate and experience the field of rheumatology and to glean from it principles which will assist them as orthopedic surgeons in practice. This one-month rotation will expose the Orthopedic PGY-1 Resident to the basic principles of rheumatology and common rheumatologic diseases (including diagnostic evaluation and management) as they apply to orthopedic surgery. During this one-block rotation, the Resident will have the opportunity to evaluate and treat patients with a variety of rheumatologic conditions.

A 4-week Rheumatology rotation is required for Categorical Orthopaedic residents during the first year of training.

Length: 4 weeks of PGY-1 year
Location: Kapiolani Medical Center at Pali Momi, Dr Oki’s Office
          Kuakini Medical Center, Dr Oki’s Office
Primary Supervisor: Alan Oki, M.D.
Contact Telephone: 484-2042 (Pali Momi)
                    532-2042 (Kuakini)

Goals of the Rotation

Upon completion of the Plastic Surgery rotation, the Resident will be able to:

1. Demonstrate knowledge of the nature and principles of correction and reconstruction of congenital and acquired defects of the head, neck, trunk, and extremities.
2. Manage the treatment of acute, chronic, and neoplastic defects not requiring complex reconstruction.

Patient Care
Competency
Residents must be able to provide patient care that is compassionate, appropriate, patient-centered and effective for the diagnosis treatment of orthopaedic problems and the promotion of health. Significant leadership in running a patient centered service is expected. Residents are expected to:

Objectives
1. Clinically evaluate and develop a differential diagnosis of monoarticular and polyarticular arthritis.
2. Evaluate radiographs to classify arthritis.
3. Recognize clinical signs and symptoms of systemic disease presenting with arthritis, and develop a differential diagnosis and order appropriate diagnostic tests to evaluate the patient.
4. Evaluate the long-term outcomes of orthopaedic procedures on patients in a Rheumatology practice.
Medical Knowledge

Competency
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 are expected to be able to:

Objectives
1. Understand the immunology of inflammatory arthritis, the basis of serologic testing, and medical treatment of arthritic conditions.
2. Demonstrate an understanding of the natural history and medical treatment of: rheumatoid arthritis, juvenile rheumatoid arthritis, systemic lupus erythematosus, crystal-induced arthritis, psoriatic arthritis, Reiter's syndrome, ankylosing spondylitis, arthritis related to infections, osteoporosis; and common soft tissue pain syndromes.

Practice-Based Learning and Improvement

Competency
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 develop skills and habits to be able to:

Objectives:
1. Evaluate one’s own knowledge, incorporating feedback from others.
2. Appropriately use hospital information technology systems to manage patient care and to access online medical information to effect high quality care.
3. Demonstrate the ability to use scientific studies to provide high quality rheumatologic care.
4. Effectively use information technology and other resources to support one’s own ongoing self-education (DVDs, CDs, Vumedi etc)
5. Appropriately utilize Hospital information technology systems to manage patient care, and to access on-line medical information to deliver high quality care.
6. Participate actively in activities of the Department of Surgery (including all teaching conferences)
7. Participate in the Department Morbidity & Mortality conference and utilize information to further improve patient care.
8. Facilitate and support the education of medical students, other residents and other healthcare team members that the Orthopaedic resident comes into contact with.

Systems Based Practice

Competency
Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as be able to effectively call on other resources in the system to provide optimal health care. Residents are expected to:
Objectives
1. Understand the multidisciplinary role of the Rheumatologist, Orthopedic Surgeon, Physical Therapists, Occupational Therapists, Rehabilitation Specialists, and Social Services personnel in the provision of safe and high quality care.
2. Serve as patient advocates for quality patient care.
3. Work effectively with other services, health care agencies, and case managers.

Professionalism
Competency
Residents must demonstrate commitment to carrying out professional responsibilities and an adherence to ethical principles. Residents are expected to:

Objectives
Interact with patients and their families in a respectful, sensitive, and ethical manner.
1. Interact with members of the faculty and ambulatory clinic personnel in a respectful, responsible, and professional manner.
2. Demonstrate sensitivity, respect, and adherence to ethical principles when interacting with patients and their families.
3. Demonstrate non-judgmental sensitivity and responsiveness to the age, culture, disability status, and gender of patients and colleagues.
4. Show ethical/professional leadership by example.
5. Be self-aware and have knowledge of professional limits by practicing on-going medical education and self-improvement.

Interpersonal and Communication Skills
Competency
Residents must demonstrate interpersonal and communication skills that result in the effective exchange of information and teaming with patients, their families, and professional associates. Residents are expected to:

Objectives
1. Demonstrate skill in effective and sensitive information exchange with patients, their families, and other members of the Multidisciplinary Trauma Team for trauma patients requiring plastic surgery consultation or reconstructive procedures; and for patients undergoing elective procedures (both Clinic-office-based and in the Hospital).
2. Demonstrate ability for accurate and timely information exchange between other members of the healthcare team, both verbally and in writing, with appropriate use of the medical record.

Implementation
Four 1-hour didactic lectures review the immunology, natural history, diagnostic criteria, and treatment of rheumatic diseases. Examples of radiographs are reviewed. Slides from the American College of Rheumatology clinical slide collection are used to review clinical features of early and late disease, histology, and radiology of rheumatic diseases. Case examples are reviewed.
A four week clinical rotation allows the Resident to evaluate patients presenting with rheumatic conditions. They will formulate a differential diagnosis, a diagnostic plan, and an initial treatment plan that will be reviewed and implemented by the Rheumatology Attending Physician. Residents will examine patients and evaluate radiographs and laboratory tests of patients with rheumatic diseases in early and late stages of treatment. Many of these patients have had orthopaedic procedures including arthroplasties, arthrodesis, and synovectomies. Residents will review operative notes, pre-and postoperative x-rays, and interview patients regarding their experience with orthopaedic procedures and the impact on their rheumatic disease and quality of life. Residents will perform preoperative evaluations on all patients who are scheduled to undergo orthopaedic procedures during the rotation.

The 4 week Rheumatology rotation will take place at Dr. Oki’s offices at Pali Momi and Kuakini. The Resident is to report to Dr. Oki on the first day of the rotation.

Required Readings
Reading materials and other rotation information will be provided by the surgery administrative staff prior to the rotation.

**Assessment Method (Residents)**
Resident performance will be subject to daily formative evaluation in the attending’s office and the clinic; the evaluation process (using faculty) will take place at the end of each rotation. Semiannual Program Director/Faculty/Resident evaluation meetings will provide summative evaluation.

**Assessment Method (Program Evaluation)**
Annual evaluations and assessment by the Program Director and faculty. Annual resident confidential evaluation of program, and its rotations.