# Internal Medicine House Staff Ambulatory Rotation in Endocrinology, Diabetes and Metabolism

The Endocrinology, Diabetes and Metabolism Division team evaluates and manages patients with diabetes, osteoporosis, thyroid diseases and other endocrine disorders. The service provides outpatient consultative services at the Joslin Diabetes Center and inpatient consultations primarily at University Hospital and the VA Medical Center.

The faculty of the Division of Endocrinology, Diabetes and Metabolism includes the following individuals:

Ruth S. Weinstock, M.D, Ph.D.

SUNY Distinguished Service Professor, Division Chief, Medical Director, Clinical Research Unit and Joslin Diabetes Center

Runa Acharya, M.D. Assistant Professor of Medicine

Tuncay Delibasi, M.D. Assistant Professor of Medicine

Barbara L Feuerstein, M.D. Associate Professor of Medicine

George G. Holz, Ph.D.

Professor of Medicine and Pharmacology and Empire Scholar

Rachel L. Hopkins, M.D.

Associate Professor of Medicine, Director of Fellowship Program, and Pituitary and Transgender Programs

Roberto E. Izquierdo, M.D.

Professor of Medicine and Pediatrics, Director, Thyroid Center and Division Chief, Pediatric Endocrinology and Diabetes

Jason Sloane, M.D.

Assistant Professor of Medicine

# I. Educational Purpose

The resident in Internal Medicine should:

- Be competent to evaluate and treat common endocrine disorders including diabetes, osteoporosis, disorders of the thyroid, adrenal, and pituitary glands.
- Have appropriate understanding of when referral to an endocrinologist is indicated.
- Receive training in:
- 1. the care of patients with type 1 and 2 diabetes mellitus
- 2. the evaluation and management of osteoporosis and other metabolic bone diseases
- 3. the skills necessary for the diagnosis and management of other common endocrine disorders
- 4. the indications for and use of bone mineral densitometry (DXA), insulin pump therapy, continuous glucose monitoring devices (glucose sensors), thyroid ultrasonography and fine needle aspirations (FNAs) of thyroid nodules.

# II. Learning Venue

# A. Rotation Description:

The Endocrinology, Diabetes and Metabolism outpatient service provides outpatient consultation and continuity care for patients ages  $\geq 18$  years, with diabetes and other endocrine disorders at the Joslin Diabetes Center, 725 East Adams Street, 5<sup>th</sup> Floor. Referrals are received for patients from  $\geq 20$  counties of varying ethnicities and cultures.

Ambulatory patients are seen for both routine and urgent visits. The center uses a team approach. Team members include attendings, fellows, advance practice providers, diabetes nurse educators, dietitians, a physical therapist and a podiatrist. Internal medicine housestaff and medical students join the team when they rotate on the Endocrinology, Diabetes and Metabolism service.

At the Joslin Diabetes Center, house staff participate in the evaluation and management of ambulatory patients with diabetes, thyroid diseases, metabolic bone diseases and other endocrine conditions. A typical weekly schedule at the Joslin Center is as follows:

MONDAY	Evaluate patients with a variety of endocrine disorders	*8:00-11:30 am	PGY-1: Dr. Acharya/fellows
		*9:00-11:30 am	PGY-3: Education [pump, CGM, nutrition, general education]
TUESDAY	Evaluate patients with a variety of endocrine disorders		PGY-1: Not @ Joslin d/t didactics
		*8:00-11:30 am	PGY-3: Dr. Feuerstein /fellows
WEDNESDAY	Evaluate patients with a variety of endocrine	*9:00-11:30 am	PGY-1: Education (pump, CGM, nutrition, general)
	disorders	*8:45-11:30 am	PGY-3: Dr. Izquierdo
THURSDAY	Evaluate patients with a variety of endocrine disorders	*8:00-11:30 am	PGY-1: Dr. Sloane/fellows
		*8:30-11:30 am	PGY-3: Dr. Feuerstein
FRIDAY	Evaluate patients with a variety of endocrine disorders	*8:00-11:30 am	PGY-1: Dr. Delibasi/fellows
	disorders	*9:00-11:30 am	PGY-3: Education [pump, CGM, nutrition, general education]

<sup>\*</sup>Starting times are approximate. Please confirm with contact person.

# Expectations of PGY-1: The intern will:

- Complete detailed history and physical examinations of all assigned patients and complete progress notes on a daily basis. Patient evaluations at the Joslin Center will be under the direct supervision of a Joslin attending.
- Evaluate an average of two-three patients per clinic session.
- Be expected to recognize and treat the basic clinical and laboratory abnormalities of common endocrine disorders seen in ambulatory settings.
- Be expected to demonstrate intellectual curiosity and evidence-based patient care approaches, improve their own knowledge by reading and seeking evidence based solutions for clinical problems encountered.
- Be expected to further his/her own learning through the use of reading materials outlined below.
- Display professionalism and good communication skills with the team, nurses, patients and families.
- Work efficiently with nurses and educators, dietician, social worker and podiatrist to provide comprehensive and timely patient care.

## Expectations of the Senior Resident: In addition to the above, the senior resident will:

- Be expected to master the basic clinical evaluation and management of major endocrine diseases, and indications and interpretation of endocrine laboratory testing.
- Fulfill teaching responsibilities to the intern and medical students.
- Demonstrate leadership and model professionalism and good communication skills.
- Serve as a resource for team learning.
- Continue to expand their knowledge of endocrinology, diabetes and metabolism with the aid of the reading materials outlined below.
- Model systems-based practice competencies by working efficiently with nurses and educators, dietician, social worker and podiatrist to provide comprehensive and timely patient care.

## **B.** Teaching Methods:

1. Daily Patient Appointments: The resident will evaluate each assigned patient, and present and discuss their findings with the attending to formulate management plans. The resident will be expected to have collected all relevant data and to present in a concise, logical format.

## 2. Required Reading:

Standards of Medical Care in Diabetes at: http://professional.diabetes.org/content/clinical-practice-recommendations

#### 3. Recommended References:

- www.endotext.com (excellent free online reference).
- Williams Textbook of Endocrinology: ed. Shlomo Melmed, Kenneth S. Polonsky, P. Reed Larsen, Henry M. Kronenberg.
- Primer on the Metabolic Bone Diseases and Disorders of Mineral Metabolism: ed. Clifford J. Rosen, Roger Bouillon, Juliet E. Compston, Vicki Rosen
- Endocrinology (textbook) ed. DeGroot, Jameson
- Basic Medical Endocrinology: H Maurice Goodman
- Joslin Diabetes Mellitus (textbook): C. Ronald Kahn, Robert J. Smith, Gordon C. Weir, George L. King, Alan C. Moses
- The Washington Manual Endocrinology Subspecialty Consult: Katherine E.Henderson, Katherine Handerson
- Manual of Endocrinology and Metabolism: Norman Lavin
- Up-to-date online
- PIER at www.acponline.org for relevant peer reviewed discussions

# 4. Unique Learning Opportunities:

• Core curriculum and board review sessions (Wednesday 8-9 am) at Joslin Diabetes Center.

- Case Conferences (Thursday 12-1 pm) at Joslin Diabetes Center, which includes discussions on general endocrine disorders, diabetes and metabolism, thyroid disorders and disorders related to calcium/bone, adrenal and pituitary glands. (fellow presentation with group discussions)
- Advances in Endocrinology, Diabetes & Metabolism conference (Friday 12-1 pm) at Joslin Diabetes Center, presented by faculty and outside speakers.
- Thyroid Tumor Board (Multidisciplinary conference, with participation of endocrinologists, surgeons, pathologist, radiologist and radiation oncologists, every 3<sup>rd</sup> Wednesday of month 8-9 am) at UH, Pathology, 6th floor, 6017 or via Zoom link.
- Pituitary Tumor Board: Multidisciplinary meeting involving surgeons, radiation oncology, radiology and endocrinology is held on the 3rd Tuesday of each month at noon via Zoom.

#### C. Mix of Diseases and Patient Characteristics

# Common Clinical Presentations and Diseases:

Diabetes mellitus

Obesity

Thyroid disorders

Parathyroid disorders

Pituitary disorders

Hypothalamic disorders

Gonadal disorders

Metabolic bone diseases

Hyponatremia

Lipoprotein disorders

Adrenal disorders

Transgender hormone care

#### **Endocrine Emergencies:**

Diabetic ketoacidosis

Hypoglycemia

Hyponatremia

Hypernatremia

Hyperosmolar coma

Adrenal crisis

Thyroid storm

#### III. Educational Content

1. Endocrinology and Diabetes

Principles of Endocrinology

Diabetes Mellitus Type 1 and 2

Disorders of the Thyroid Gland including thyroid cancer

Disorders of the Pituitary Gland and Hypothalamus

Disorders of the Adrenal Gland

Pheochromocytoma

Hypoglycemia

Obesity and Metabolic Syndrome

Disorders of the Testes and Male Reproductive System

Disorders of the Ovary and Female Reproductive Tract

The Menopause Transition and Postmenopausal Hormone

Disorders of Sexual Differentiation

Endocrine Tumors of the Gastrointestinal Tract and

Pancreas Disorders Affecting Multiple Endocrine Systems

#### 2. Disorders of Bone and Mineral Metabolism

Bone and Mineral Metabolism in Health and Disease

Diseases of the Parathyroid Gland and Other Hyper- and Hypocalcemic

Disorders

Osteoporosis

Paget Disease and Other Dysplasias of Bone

#### 3. Disorders of Metabolism

Lipid Disorders

Inherited Disorders of Carbohydrate Metabolism

### IV. Method of Evaluation

Evaluations are based on internal medicine and subspecialty milestones. Interim evaluations will be provided to each member of the team. All team members are expected to complete formal evaluations at the end of each rotation using Medhub.

# V. Rotation Specific Competency Objectives

A. **Patient care** – This rotation offers residents the opportunity to participate in care of patients with endocrine disorders including diabetes, thyroid disorders, adrenal disease, pituitary disease and metabolic bone disease, who are being seen by the inpatient endocrine consult service.

- B. **Medical knowledge** This rotation offers training in skills necessary for the diagnosis and management of endocrine disorders including diabetes, thyroid diseases, osteoporosis and other metabolic bone diseases. Residents will also learn about the use of insulin pump therapy, continuous glucose monitoring devices, thyroid sonography, FNA of thyroid nodules, nutrition services, radiographic imaging of pituitary and adrenal glands, and podiatry. Residents also have the opportunity to attend various endocrine conferences to enhance their learning.
- C. **Professionalism** Residents should demonstrate the ability to interact professionally with patients, colleagues, and all members of the health care team demonstrating the ability to provide care as a member of an interdisciplinary team. They should demonstrate acceptance of professional responsibility as the physician for patients under his/her care at the clinic. Residents should demonstrate an understanding of the ethical concepts of confidentiality, consent, and autonomy.
- D. **Interpersonal and Communication skills** Residents will conduct themselves professionally and learn how to effectively elicit a comprehensive history. Evaluations will be based on clarity of written and verbal communications of consultative advice to patient and their families, referring physicians and other health team members.
- E. **Practice Based Learning** Resident should demonstrate the ability to identify and acknowledge gaps in personal knowledge and skills. Resident should demonstrate the ability to develop and implement strategies for filling gaps in knowledge and skills. Resident should demonstrate a commitment to professional scholarship, including systematic and critical review of literature, with emphasis on integration of basic science with clinical medicine and the principles of evidence-based medicine.
- F. **Systems Based Practice** Residents have the opportunity to learn about coordinating long term care for patients with diabetes and other endocrine disorders and coordination with primary care, other subspecialists as needed, and with the diabetes education team.