

LACGH HOSPITALIST RESIDENT “CLINICAL PEARLS ROUNDS”

WHEN: Refer to Resident Rounds Presentation Schedule (assigned by Dr. Gonu)

TIME: **12:15 START - Aim for approx. 20-30min presentation** (room will be booked from 12:15 to 1:15pm (Lunch will NOT be provided during COVID))

WHERE: **LACGH Room 213**

- Please remember pick up/sign out the room key at switchboard
- Note due to COVID-19 restrictions, food will not be ordered. In-person attendance will be limited (please review latest public health restrictions and follow recommendations for masks/eye protection and appropriate physical distancing).

For IT help (Service Desk) Phone (613)354-3301 ext. 491 Email Service.Desk@lacgh.napanee.on.ca

WHO:

- Family Medicine Resident will present in-person (if a room is available) + via ZOOM.
- ****Please familiarize yourself with ZOOM, in particular the “CAST” feature so you can share your presentation virtually.**
- Staff working in the hospital may attend rounds in-person abiding by COVID restrictions
- Virtual audience will access rounds via **ZOOM LINK (see calendar invitation)**

WHAT – RESIDENT ROUNDS FORMAT:

- Residents can select a TOPIC RELEVANT TO ACUTE CARE/HOSPITALIST MEDICINE.
 - If you are unsure, you can use the list below as a GUIDE. You do not need to do a full review of each topic, but can focus on key learning point for you.
- Presentation may be Powerpoint or a Guided Discussion on a topic.
- FOCUS of presentation:
 - Brief Succinct Case presentation is good to set the stage – avoid a prolonged description of H&P.
 - Key Clinical Pearls and practical take-away points should be highlighted
 - What did you/hospitalist team do WELL that we should all learn?
 - What could you/hospitalist team have done better?
 - Avoid prolonged presentation on basic science / Theory
- You do not have to have seen a patient with a particular diagnosis to present a topic. You may present an interesting case that the hospitalist team has recently managed.
- Please review your presentation with the **staff hospitalist** beforehand (not community preceptor)

RESIDENT ROUNDS TOPICS:

****These serve as a guide only and you can select any topic that is relevant to hospitalist medicine. You do not need to do an entire presentation on an entire topic, but can focus on a specific aspect of the topic**

- **Ie. for COPD, you can specifically look at acute treatment of COPD**
- **Ie. For Polypharmacy, you could focus on appropriate use of antipsychotics for inpatients.**

See a list of possible topics below.

<ul style="list-style-type: none"> - Hypercalcemia/Hyperparathyroidism - Hyper/Hypokalemia causes/mgmt. - Hyper/hyponatremia causes/mgmt. - AKI - Approach to Bacteremia - Complications of pneumonia/Hospital-Acquired Pneumonia - UTI - Deep soft-tissue infection /cellulitis - Encephalitis/Meningitis - Osteomyelitis - Approach to SOB - Pulmonary Hypertension - Pulmonary Fibrosis - COPD Management - Approach Anemia and Myelodysplastic syndrome - Acute Stroke - BIPAP/CPAP 	<ul style="list-style-type: none"> - Afib - Acute CHF - Chronic CHF - Acute Coronary Syndromes - How to manage transfusion reactions - Bowel obstructions - Common post-operative complications on the Inpatient Unit - Pancreatitis - DKA/HHS - Syncope - Alcohol Withdrawal - C Diff Infections - Inflammatory BowelDisease - Acute hepatitis - Approach to Altered LOC 	<ul style="list-style-type: none"> - Pain management and Suboxone - Incontinence - Approach to Dizziness - Approach to Reducing Falls in Hospital - Polypharmacy in the elderly - MAID – consideration, criteria and consultation - Behavioral challenges in Dementia and Delirium Management - Parkinson’s Disease and Parkinsonism - Dementia - Hip Fractures - Insomnia - Use of Critical Care medications (eg. Pressors, arrhythmia medications, ACLS meds)
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