

GASTROENTEROLOGY AND HEPATOLOGY

Department of Medicine

SCOPE OF PRACTICE

PGY-4 – PGY-6

(or PGY-5 – PGY-7 if former Chief Resident)

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- Evaluate all patients on admission, develop differential diagnosis, initiate plan of evaluation and management, discuss with attending gastroenterologist.
- Documentation in patient's chart.
- Supervise PGY 1, 2 or 3 from the Department of Internal Medicine in the evaluation and management of patients.
- Round daily with medicine Housestaff and gastroenterology attending to discuss progress of patients and develop their subsequent evaluation and management plans.
- Review clinical, laboratory, pathologic, radiologic and endoscopic data with attending gastroenterologist on daily basis and translate this information into patient care.
- Attend all clinical conferences, research conferences, journal clubs and didactic lectures.
- Instruct residents and medical students on a daily basis at the bedside or in more formal "sitdown rounds".
- Provide gastroenterology consultation to other services and round with the assigned gastroenterology attending, medical resident and student(s).
- Obtain a core fund of knowledge in normal biology, normal physiology, and pathophysiology of the gastrointestinal system, liver, pancreas and biliary tree.
- Keep abreast of current information in major clinical topics in gastroenterology and hepatology.
- Develop skill in the evaluation and management of patients in the ambulatory care setting.

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- Develop competence in clinical or basic investigation working with a faculty mentor.
- Develop a clear understanding of the indications, pitfalls in performance and limitations of interpretation, as well as mastery of performance (appropriate to the level of training) for the following: esophageal manometry, esophageal pH studies, small bowel motility, anal sphincter manometry, anal sphincter biofeedback, diagnostic and therapeutic upper and lower gastrointestinal endoscopy (with control of bleeding, biopsy, brush cytology and polypectomy), dilation of benign and malignant gastrointestinal strictures, gastric secretory studies, percutaneous liver biopsy, retrograde cholangiopancreatography (with papillotomy, stone removal, stent placement and biliary manometry), and endoscopic ultrasound.
- Interpret radiologic studies of the gastrointestinal tract, including contrast gastrointestinal examination, ultrasonography, computer tomographic scans, magnetic resonance imaging, and radionucleotide imaging studies.
- Obtain a core knowledge base to reach goals for nutrition assessment and adequate nutrition requirements.

For details of duties and expectations of gastroenterology fellows, on specific rotations, see goals and objections and recommended readings posted on e-value.