

# INTERNAL MEDICINE TEACHING ROUND

## I. PURPOSE:

Teaching round is an opportunity for medical students and residents to practice oral case presentation with faculty members. Direct patient visits may sometime be required by faculty for bedside teaching. Teaching round also helps medical students and residents improve their history taking skills, physical examination, clinical reasoning, and patient care.

## II. SCHEDULE:

Schedule is organized and **sent to all medical students and residents on Friday of the week before**. Medical students or residents who are required to present will be listed.

- During the weeks with teaching residents (PGY4): Teaching resident will be responsible for scheduling with chief resident's supervision.
- During the weeks without teaching residents: Chief resident (CR) will be responsible for scheduling.

**All scheduled events that can interfere with teaching rounds need to be reported to Chief Resident by Saturday 12:00 PM. Other unexpected events need to be reported as soon as they occur.**

## III. RESPONSIBILITIES:

### 1. Senior resident:

- Notify other members (including the attending of the service) of the rounding schedule.
- Assign cases to medical students and junior residents.
- **Send a one-liner for each case to faculty-in-charge (via email or text message) by 5PM the previous day.**
- Provide applicable clinical pearls, teaching points.
- Be prepared to answer questions regarding plans for treatment, discharge, and follow-up.
- Follow-up on any assigned work from faculty.

## 2. Junior resident/Intern:

- Prepare case to present (one case each assigned person) focusing on diagnosis, lab tests and imaging interpretation, and treatment plan.
- Provide case information and a one-liner to senior resident the day before rounding.
- Update senior resident on new lab tests, imaging, or event on the day of teaching round.
- Present the prepared case to faculty (preferably in SOAP format).

## 3. Medical student:

- Prepare case to present (one case each assigned person) focusing on history taking, physical exam, diagnosis, and treatment plan principles.
- Provide case information and a one-liner to senior resident the day before rounding.
- Update senior resident on new lab tests, imaging, or event on the day of teaching round.
- Present the prepared case to faculty (preferably in SOAP format).

## IV. ROUND STRUCTURE:

- 2:00 PM: Round starts. Senior resident provides direction guidance to the ward to faculty (if needed) and ensures the team is prepared.
- 2:00 PM – 4:00 PM: Rounding time. **Each case presentation should last 30 minutes – 1 hour including the time for questions, discussion, and teaching pearls.**
- 4:00 PM: Round ends. The team should get back to service and prepare for handover/night shift.

### Faculty role:

- Each faculty will be assigned to specific departments.
- **Faculty can request residents at the assigned departments to do Mini-CEX.**
- Faculty leads the round, provides teaching points, and assigns work (reading and learning about certain topics regarding the cases) if applicable. Senior resident can provide their own teaching points, guide medical students/junior residents during rounds, and **follow up on the assigned work.**