University of Kentucky Department of Neurology

Epilepsy Rotation

Introduction

This rotation is designed to grant the house officer full exposure to in depth management of epilepsy patients. This will include outpatient evaluation and management through the UK epilepsy clinic, inpatient evaluation and management through the epilepsy monitoring unit and epilepsy consult service, training in the interpretation of electroencephalograms and evoked potentials, and involvement in the selection of patients for surgical procedures in the management of their epilepsy. Since few non-neurologists in our country care for individuals with epilepsy, this epilepsy rotation is a vital part of our neurology residency program.

PRINCIPLE EDUCATIONAL GOALS GROUPED BY COMPETENCY

I. PATIENT CARE

1. Interview patients and family members more skillfully.
2. Examine patients more skillfully.
3. Improve history taking of patients with "spells".
4. Accurately diagnose epileptic syndromes.
5. Improve skills in identifying patients with non-epileptic spells.
6. Learn how to effectively evaluate and manage patients with non-epileptic spells including syncope, psychogenic seizures, migraine and parasomnias.
7. Identify patients in need of admission for paroxysmal events.
8. Effectively manage the patient with epilepsy, including rational drug therapy and non-drug interventions to improve quality of life.
9. Define and prioritize patients' neurological and medical problems and how medical problems impact the patient's epilepsy.
10. Learn the principles of appropriate evaluation of the patient for potential surgical treatment of epilepsy.
11. Improve clinical ability to anticipate, prevent and treat complications of epilepsy and epilepsy medications.
12. Improve efficiency of care in the EMU.

II. MEDICAL KNOWLEDGE

1. Improve basic knowledge concerning epilepsy and neurophysiology.
2. Expand knowledge of epilepsy syndromes, drug therapy, and drug interactions.
3. Improve understanding of unique features of epilepsy across the lifespan, including pregnant women and women of child-bearing potential, children, and the elderly.
4. Improve understanding of the psychodynamics leading to non-epileptic events.

5. Improve understanding of basic neurophysiology of electroencephalography and evoked potentials.
6. Understand basics of the technical aspects of performing an EEG.
7. Improve EEG interpretation skills.
8. Develop beginning skills in interpretation of evoked potentials.
9. Understand the physiology and implementation/interpretation of the Wada test.
10. Access and critically evaluate current medical information and scientific evidence relevant to patient care.

III. PRACTICE-BASED LEARNING AND IMPROVEMENT

1. Identify and acknowledge gaps in personal knowledge and skills in the care of patients with epilepsy and other paroxysmal disorder and especially psychogenic seizures.
2. Develop and implement strategies for filling in gaps in knowledge and skills.

IV. INTERPERSONAL SKILLS AND COMMUNICATION

1. Communicate effectively with patients and families.
2. Improve communication skills and sensitivity to patients with psychiatric illness.
3. Communicate effectively with physician colleagues at all levels.
4. Communicate effectively with all non-physician members of the health care team to assure comprehensive and timely care of hospitalized patients.
5. Present patient information concisely and clearly, verbally and in writing.
6. Improve skills in crafting suitable reports of diagnostic tests.
7. Teach colleagues and medical students effectively.

V. PROFESSIONALISM

1. Demonstrate respect, compassion and integrity when dealing with patients and families.
2. Demonstrate sensitivity and respect for patients' age, culture, race, gender and religious beliefs.
3. Demonstrate a commitment to ethical principles of providing or withholding care, patient confidentiality and informed consent, and business practices.
4. Demonstrate a commitment to professional duties such as punctuality, reliability, chart maintenance and independent learning, and professional development.
5. Demonstrate professional respects for other physicians, students, and all members of the health care team.

VI. SYSTEMS-BASED PRACTICE

1. Understand and utilize the multidisciplinary resources necessary to care optimally for patients with epilepsy.
2. Understand the impact that having epilepsy has on a patient's ability to function in our society, especially regarding employment and driving privileges.
3. Collaborate with other members of the health care team to assure comprehensive patient care.
4. Use evidence-based, cost-conscious strategies in the care of hospitalized patients.

5. Understand the long-term consequences of patient care in relation to the individual's socioeconomic status.

Duties

1. The resident will see patients with the assigned faculty members in the UK epilepsy clinic and follow the usual responsibilities for those residents assigned to the UK clinic.

2. The house officer will be responsible for obtaining accurate history and physical examinations of the patients, assessing the information, and presenting the information to the designated faculty member.

3. The house officer will dictate appropriate notes and reports for the patient's medical record and for referring physicians.

4. The resident will develop appropriate knowledge about billing practices based on the work performed and the documented dictation for each patient.

5. The responsibilities for the EMU include working closely with the assigned faculty member, performing an admission history and physical on each new patient, complete an adequate discharge summary on each discharged patient, and participate in the epilepsy consult service as appropriate.

6. The resident should make daily patient rounds and meet with the faculty member for attending rounds. Typically, the house officer will not have responsibilities on weekends unless he is on call.

7. The resident will read EEG's each day. He should pre-read the EEG and make a preliminary interpretation and then read with the attending. The resident will dictate studies at the direction of the epilepsy attendings.