

## Pain Medicine CA-3 Mini-Fellowship Goals and Objectives

### Description:

A three-month advanced clinical pathway intended for senior level anesthesia residents who are seriously considering pursuing a career in Pain Medicine. Residents will have showed their commitment to pursuing the field by presenting their personal statements and their current applications to Pain Medicine fellowship programs. In addition to obtaining valuable experience in our pain center, residents will be exposed to practitioners with expertise in treating patients suffering with chronic pain in other disciplines including neurology, radiology, physiatry, and psychology.

### Objective:

The primary objective of this mini-fellowship is to provide a foundation for which the resident will enrich and continue to build upon during their formal pain medicine fellowship training upon completion of this residency program. We also aim to provide our residents with the tools and resources in order to thrive during their fellowship year and start them on the path to becoming consultants in the field of pain medicine.

### Core Clinical Competencies

PC – Patient Care

MK – Medical Knowledge

PB – Problem Based Learning and Improvement

IC – Interpersonal and Communication Skills

P – Professionalism

SBP – Systems Based Practice

### **Center for Pain Management – Outpatient:**

The primary goal is for the resident to start to display the ability to manage acute and chronic pain pathology in the office setting under the supervision of attending pain physician. This includes but is not limited to the following learning objectives:

- Appropriately integrate history, physical examination and diagnostic testing data to formulate a potential working diagnosis (PC, MK)
- Begin to develop an appropriate management plan including additional diagnostic workup, interventional/medical/rehabilitative/and psychological therapeutic interventions (PC, MK, SB)
- Improve patient presentation ability for both comprehensive consultative visits and problem focused visits (PC, IC)

- Begin to develop medical record documentation skills and ability to dictate procedure/operative notes (MK, SBP)
- Function effectively as part of multi-disciplinary team and be able to communicate with other caregivers when needed (SBP, P)
- Effectively communicate with patients and provide adequate follow up care in the form of telephone communication and procedure callbacks (IC, P, PB)

### **Interventional Pain Medicine:**

The primary goal is to prepare residents to perform interventional pain medicine procedures and techniques for appropriate pathology. This includes but is not limited to the following learning objectives:

- Understand the selection criteria for a broad range of interventions used in pain management (PC, MK)
- Understand the risks and benefits of each of these interventional pain management techniques (PC, MK)
- Be able to provide explanations to patients and obtain proper informed consent for interventional procedures (PC, MK, IC, P)
- Demonstrate adequate technical knowledge and skill for common pain procedures including equipment and set up for procedures (PC, MK, SBP)
- Demonstrate understanding of appropriate post-procedure follow up care following interventional procedures (PC, MK, IC, PB)

### **Neurology:**

- Gain exposure in eliciting a directed neurological history (PC, MK)
- Observe detailed neurological examination to include at least cranial nerves, motor, sensory, reflex, cerebellar and gait examination (PC, MK)
- Understand the indications and basic understanding of electro-diagnostic studies (PC, MK)
- Basic understanding of most common headache syndromes (PC, MK)
- Observe the use of botulinum toxin for migraine headache and other applications (PC, MK, SBP)

### **Psychology:**

- Observe complete psychiatric history with special attention to pain co-morbidities (PC, MK)
- Begin to gain understanding of the principles and techniques of psychological therapies with special attention to cognitive behavioral therapies (PC, MK, SBP, PB)
- Understand the indications for and appropriately refer patients for psychiatric intervention (PC, SBP, MK)
- Recognize the impact of substance abuse and the other potential confounders to chronic pain states (PC, MK, SBP)

### **Physical Medicine and Rehabilitation:**

- Observe comprehensive musculoskeletal and neuromuscular physical examination with emphasis on spine and peripheral joint related disorders (PC, MK)
- Begin to understand the use of rehabilitative modalities for treatment of various acute and chronic pain problems (PC, MK, SBP)
- Understand the indications and basic understanding of electro-diagnostic studies (PC, MK)