Complementary & Alternative Medicine
GOALS AND OBJECTIVES

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Psychology
Stephanie Donnelly, PhD

Philosophy, Ethics & Research
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CALL FREQUENCY
None

VACATION: Allowed per Electives time policy

SCHEDULE/LOCATIONS
Done at the Family Medicine Residency Clinic.

METHODOLOGY
Educational experience in IM will be provided by both a block and longitudinal basis:

1. Rotation: 4 to 8 week Elective rotation in PGY-2 or 3 year. The Resident will be at the FMC site to work through the online modules created by the University of Arizona. They will also serve as back up resident for the FMC and will therefore be expected to be at the FMC site, during their elective session.

2. FMC: Wellness Clinic for patients with Chronic Disease – once a month.

3. Didactics:
   a. Family medicine residency Tuesday afternoon conference series. (All residents)
   b. University of Arizona IM Curriculum. (Select Residents – with the expectation they will complete all the modules) – 200 hours
   c. Journal Club (All residents)
   d. Monthly small discussion group meeting for select residents.
   e. Observational sessions with CAM providers or other appropriate experience (being developed) for select residents.

4. Shorter duration elective experience (i.e. 2 weeks) can be done but designed on a case by case bases.
INTRODUCTION

Studies over the past few decades have shown that 1/3 or more Adults in the US routinely use Complementary and alternative medicine (CAM). Majority of these patients use more than one modality of CAM and simultaneously also seek treatment from conventional medicine providers. Conventional Medical Systems are recognizing this interest and demand and slowly we are seeing research being done and more interest being taken by conventional medicine in this area. It is therefore of little surprise that there is a growing interest in learning more about CAM while training at conventional medicine residency programs. Primary care in rightful taking the lead on this. This curriculum has been developed to help foster this interest and provide a basic understanding of the various CAM modalities popular in the USA. We will learn to incorporate some of these principles and knowledge in to our own practice habits, learn to critically appraise the growing literature in this field and provide evidence based guidance to our patients as they partake of CAM in their own care.

EDUCATIONAL GOALS

At the end of the rotation the resident should be able to:
**Types of goals and objectives noted for each competency noted: attitudes (A), knowledge (K) and skills (S)**

**PATIENT CARE:** COMPASSIONATE, APPROPRIATE, AND EFFECTIVE FOR THE TREATMENT OF HEALTH PROBLEMS AND THE PROMOTION OF HEALTH.

**Residents are expected to:**

1. Demonstrate patient-centered history-taking, using a biopsychosocial approach that includes an accurate nutritional history, spiritual history, and inquiry into use of conventional and complementary treatments. (S)
2. Facilitate health behavior changes in patients, using techniques such as motivational interviewing or appreciative inquiry. (S)
3. Collaborate with patients in developing and carrying out a health screening and management plan for disease prevention, and treatment using conventional and complementary therapies when indicated. (S)

**MEDICAL KNOWLEDGE:** ESTABLISHED AND EVOLVING BIOMEDICAL, CLINICAL, EPIDEMIOLOGICAL, SOCIAL-BEHAVIORAL SCIENCE, APPLICATION TO PATIENT CARE.

**Residents are expected to:**

4. Explain the evidence base for the relationships between health and disease and the following factors: emotion, stress, nutrition, physical activity, social support, spirituality, sleep, and environment. (K)
5. Evaluate the strength and limitations of Evidence Based Medicine (EBM) as it applies to conventional and complementary approaches and its translation into patient care. (K)
6. Describe common* complementary medicine therapies, including their history, theory, proposed mechanisms, safety/efficacy profile, contraindications, prevalence and patterns of use. (K)

**INTERPERSONAL AND COMMUNICATION SKILLS:** EFFECTIVE EXCHANGE OF INFORMATION AND COLLABORATION WITH PATIENTS, FAMILIES, AND HEALTH PROFESSIONALS.

**Residents are expected to:**

7. Recognize the value of relationship-centered care as a method to facilitate healing. (A, K)
8. Demonstrate respect and understanding for patients’ interpretations of health, disease and illness that are based upon their cultural beliefs and practices. (K, S, A)
9. Demonstrate respect for peers, staff, consultants and Complementary and Alternative Medicine (CAM) practitioners who share in the care of patients. (S, A)

**PRACTICE-BASED LEARNING AND IMPROVEMENT:** INVESTIGATE/EVALUATE CARE OF PATIENTS, TO APPRAISE AND ASSIMILATE SCIENTIFIC EVIDENCE, AND TO CONTINUOUSLY IMPROVE PATIENT CARE BASED ON CONSTANT SELF-EVALUATION AND LIFE-LONG LEARNING.

**Residents are expected to:**

10. Identify personal learning needs related to conventional and complementary medicine. (K, A)
11. Use EBM resources for all types of interventions, as needed, at the point of care. (S)
12. Identify reputable print and online resources on conventional and complementary medicine to support professional learning. (K, S)

**PROFESSIONALISM:** A COMMITMENT TO CARRYING OUT PROFESSIONAL RESPONSIBILITIES AND AN ADHERENCE TO ETHICAL PRINCIPLES.

**Residents are expected to:**

13. Demonstrate ability to reflect on elements of patient encounters, including personal bias and belief, to facilitate a better understanding of relationship-centered care. (S, A)
14. Explain importance of self-care practices to improve personal health, maintain work equilibrium and serve as a role model for patients, staff, and colleagues. (A, K)
15. Work together with staff and consultants to improve patient care, decrease cost, promote wellness, provide patient education, and prevent disease.

16. Practice ethical, reasonable medical care for all.

17. Be free of substance abuse addiction

18. Follow all the policies of the program at Parkland Hospital and respect the policies of UTSW and CMC.

**SYSTEMS-BASED PRACTICE: AWARENESS OF, AND RESPONSIVENESS TO, LARGER CONTEXT AND SYSTEM AND ABILITY TO CALL EFFECTIVELY ON RESOURCES TO PROVIDE OPTIMAL HEALTH CARE.**

**Residents are expected to:**

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<th>19. Describe different reimbursement systems and their impact on patient access to both conventional and complementary interventions. (K)</th>
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<td>20. Describe national and state standards related to training, licensing, credentialing, and reimbursement of community CAM practitioners. (K)</td>
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<td>21. Collaborate with community CAM practitioners and other health care specialists in the care of patients, taking into account legal implications and appropriate documentation issues. (S, K)</td>
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<td>22. Identify strategies for facilitating access to integrative medicine services for their patients, including low income populations. (K)</td>
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<td>23. Describe the principles of designing a health care setting that reflects a healing environment. ** (K,S)</td>
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* Common modalities will vary by region but residents would be expected to identify at least one modality from each of the five National Center for Complementary and Alternative Medicine (NCCAM) domains:
  - Alternative medicine systems
  - Mind-Body
  - Biologically based systems
  - Manipulative body based methods
  - Energy therapies

**as defined by the Samueli Institute (www.siib.org)**

Skills that support the above competencies: These will be practiced and demonstrated during the monthly Wellness Clinic sessions.

Residents will develop the following abilities:

1. Efficiently elicit a patient’s typical daily food and drink intake.
2. Demonstrate an understanding of Motivational interviewing.
3. Gather relevant information regarding safety, efficacy, and cost of a complementary therapy intervention and communicate this information clearly to a patient.
4. Develop a treatment plan using conventional and complementary therapies in concert with a patient for maximum benefit.
5. Give examples of common herbs and supplements and explain available research regarding use, safety and efficacy or where to find that information.

6. Identify three conditions where patients may benefit from mind/body techniques.

7. Describe at least two relaxation techniques in sufficient detail and demonstrate efficiently in the patient care setting.

8. Teach the principles of sleep hygiene to a patient.

9. Prescribe nutrition and lifestyle recommendations based on current research specific to individual patient needs.

10. Describe 3 dietary interventions that have been proven to decrease morbidity or mortality in patients presenting with:
   a. Diabetes
   b. Coronary Artery Disease
   c. Pregnancy
   d. Osteoarthritis
   e. Hypertension

11. Be able to explain what aspects the FDA regulates with respect to botanical products and dietary supplements.

12. Assess one’s own health habits and design an achievable plan for self care.

**Topics to be covered by the Arizona IM for Residents program:** (This list is fluid and subject to change)

- **Introduction to Integrative Medicine**
- **Prevention and Wellness**: US Preventive Services, Nutrition and Diet, Supplements for Prevention, Physical Activity, Sleep, Stress and Mind-Body Medicine, Spirituality
- **Self-care and preventing burn out.**
- **Tools in Integrative Medicine**: Motivational Interviewing for Behavioral Change.
- **Pediatric Topics**: ADD/ADHD, Chronic Pain Syndrome, Asthma and Allergies
- **Women’s Health Topics**: Menopause, Fibromyalgia, Osteoporosis, Depression, Eating Disorders, PMS, prenatal care and lactation
- **Acute Care Topics**: Back Pain, Urinary Tract Infection, Gastroenteritis, Otitis media, Vaginitis, Chest Pain/GERD, Upper Respiratory Infection
- **Chronic Illness**: Cardiovascular Disease (hypertension, hyperlipidemia, coronary artery disease), Diabetes Mellitus II, Osteoarthritis, Rheumatoid Arthritis, Obesity, Irritable Bowel Syndrome, Chronic Back Pain
- **Special Topics**: HIV, Cancer Survivorship
- **Tools in Integrative Medicine**: Integrative Medicine Care Plan Process, Manual Medicine, Energy Medicine, Whole Systems, Practice Management

**EVALUATION PROCESS**

The resident will be evaluated by the rotation preceptor using the standard precepting form. Satisfactory completion of the rotation will be determined by the Program Director of the Family medicine Residency Program in consultation with the preceptors.
Departmental Distinction:

Residents wishing to be recognized with a departmental distinction in Integrative Medicine must meet the following minimal requirements.

1. Successfully complete of the on line modules from the University of Arizona.
2. Spend at least 2 elective rotations on IM/CAM.
3. Do their Grand Rounds on a topic pertaining to IM/CAM.
4. Do their research project in an area related to IM/CAM.

READING LIST & REFERENCES:

NCCAM is the Federal Government's lead agency for scientific research on CAM. *Herbs at a Glance*, a series of 42 patient information sheets, are listed at [http://nccam.nih.gov/health/herbsataglance.htm](http://nccam.nih.gov/health/herbsataglance.htm)

Provides overview of vitamins, minerals, and dietary supplements with two levels of information – Health Professional and QuickFacts.

Dietary Supplements Labels Database offers information about label ingredients, enabling users to compare label ingredients in different brands. Each dietary supplement has additional links to other government created HDS resources such as Medline, Clinical Trials.gov, and NCCAM.

This consumer health database from the National Library of Medicine offers extensive information on dietary supplements. [http://www.nlm.nih.gov/medlineplus/druginformation.html](http://www.nlm.nih.gov/medlineplus/druginformation.html) (Free)

University of Wisconsin Family Medicine Integrative Medicine Website [www.fammed.wisc.edu/integrative](http://www.fammed.wisc.edu/integrative)
An excellent resource for clinician learning modules and patient information handouts.

Im4us.org [http://www.im4us.org/](http://www.im4us.org/)
Toolkit for clinicians and residents working in and teaching in communities with underserved populations.

Textbooks (In the precepting area)

Integrative Medicine David Rakel.

Integrative medicine: principles for practice (Benjamin Kligler, Roberta A. Lee)

Other resources to consider:
Subscription Services (Some may be available through UTSW library)

Reference tool powered by Ebscohost with summaries for more than 3,200 topics. There is a mobile application available as well. ($395/year for physician subscription).
Through the end of February you, your residents and faculty can access DynaMed for free at www.ebscohost.com/dynamed by clicking Login, then click the orange button for Institutional users, then enter the User ID updated and Password daily. For more information and to extend free access until the end of May, contact ASaltzman@ebscohost.com

MDConsult  http://www.mdconsult.com/php/29979892-1761/homepage
MDConsult includes access to full-text articles from over 80 medical journals and Clinics, 50 leading medical references across a wide range of specialties, clinically relevant drug information, and over 13,000 patient handouts. (Subscription $395/year – can get specialty topics added for an additional fee)

Natural Medicines Comprehensive Database  www.naturaldatabase.com
Gives practical evidence-based information and ratings on over 85,000 supplements, herbs, and integrative therapies. You can also use clinical tools to check for interactions and adverse reactions, nutrient depletion, report adverse events, get CME, and more. (Individual subscriber full database $92.00/year, Hand-held version $59.00/year, Web and hand-held version combined $132.00/year.) Go to www.NaturalDatabase.com/familymedicine and click “Continue” to get started. If you would like to request an extension of complementary access, please email us at getmore@naturaldatabase.com.

Natural Standard  www.naturalstandard.com
This extensive database can be searched by subject or by medical condition. (Mobile and desktop version is $199.00/year for an individual subscriber, discounts available for institutional subscriptions) Free trial for residency directors: username: buresident  password: director

Journals and Newsletters  (Check the UTSW library web site)

Alternative and Complementary Therapies (Green cover)  www.liebertpub.com/ACT

Alternative Therapies In Medicine and Health  www.alternative-therapies.com

BMC Complementary and Alternative Medicine Journal  http://www.biomedcentral.com/bmccomplementalternmed

Evidence-Based Complementary and Alternative Medicine (eCAM)  http://www.ecam.oupjournals.org

Integrative Medicine - A Clinician's Journal  www.imjournal.com

Journal of Alternative and Complementary Medicine (blue journal)  www.liebertpub.com/acm

Journal of Nutrition  www.jn.nutrition.org

Topics in Integrative Health Care, an International Journal  http://www.tihcij.com