IBD Goals and Objectives
Stony Brook
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OVERVIEW

Stony Brook University Medical Center has a dedicated IBD service comprised of several Gastroenterology faculty members with expertise and specialized training in IBD, as well as a multidisciplinary team of surgeons, other medical subspecialities (rheumatology, dermatology), nursing (infusion center and clinic), and radiologists (MR and CT enterography) with expertise in IBD. The IBD service provides inpatient, and outpatient services as well consultation for patients with IBD on other services, particularly pre and post op. It is expected that, upon graduation from the fellowship program, the fellow will have a good understanding of the pathophysiology and management of IBD. In their first year they will learn the basics of management and hone their skills during their second and third years.

Fellows on the IBD rotation will be expected to gain experience in the following areas:

**Inpatient:** They will take care of sick IBD patients together with the inpatient team. This is where they will learn to identify triggers of disease activity, and identify treatment goals and implement them. They will review lab work, radiology and schedule appropriate interventions. Long term maintenance regimens need to be identified, discussed with patients and implemented upon patient discharge.

**Outpatient:** Attend IBD clinics with faculty as well as the fellow's specialty IBD clinic. The fellow will learn outpatient management including dealing with less severe illness, maintenance strategies and psychosocial issues. They will learn the importance of medication compliance, and how to implement it. They will also gain a deeper understanding of the medications used, adverse effects and combination therapy strategies. Cancer screening and surveillance goals are also learned in this setting. They learn when to call on other specialties for extraintestinal manifestations and how to manage several different clinical problems with the available medications.

**Endoscopy:** The fellows are expected to participate in surveillance and disease assessment colonoscopies and endoscopies on IBD patients. They thus gain a deep understanding of how to perform surveillance, using light microscopy and chromo techniques. They also learn to read capsule endoscopies on Crohn's patients both on the inpatient and outpatient services.

**Education:** There is a monthly interdisciplinary IBD conference in which the fellow is expected to participate with case presentations and discussion. Fellows interested in IBD are also encouraged to attend and participate in national educational conferences.

**Research:** Fellows are expected to participate in at least one IBD related project during their 3 year fellowship in order to understand the literature and principles of management.
EDUCATIONAL GOALS

First Year Fellow (PGY4):
- Understand the current theories of causation
- Differentiate disease characteristics specific for ulcerative colitis and Crohn’s disease.
- Differentiate IBD from other disease entities such as infectious ileitis and colitis, ischemic colitis, radiation induced colitis and diverticulitis.
- Define disease extent, severity and complications.
- Understand the difference between first-line therapies and more advanced therapies and how and when to use them.
- Recognition and management of adverse effects of IBD medications.
- Understand how to use more advanced therapies for patients who fail first line therapy.
- Understand the role of measuring serum enzyme (thiopurine methyltransferase) and 6 mercaptopurine metabolites in conjunction with the use of immunomodulators.
- Learn the particular challenges of inpatient management of acute IBD patients.
- Learn the challenges of outpatient management of IBD patients.
- Understand the indications for radiographic studies in IBD patients.
- Understand the indications and interpretation of endoscopic and pathologic findings in IBD.
- Understand the surgical options for management of UC including ileal pouch anal anastomosis.
- Understand the surgical approaches to the treatment of Crohn: stenosis, abscess, fistula.
- Understand the psychosocial components related to disease on the patient and family.
- Learn to triage patients over the phone on call.
- Understand risk factors for neoplasia in IBD patients and implement cost effective surveillance methods.
- Understand colorectal cancer surveillance in patients with colitis.

Second and Third Year Fellow (PGY5 & 6)
- Learn the current genetics of IBD and theories of causation including epidemiology.
- Learn the classification of subtypes including different scoring systems for Crohn’s and UC.
- Learn to identify Crohn’s recurrence in the post-operative patient and management.
- Detailed knowledge of all medications used in IB including most common side effects, allergic reactions, and drug interactions.
- Detailed knowledge of biologic and immunomodulatory therapies including current thinking regarding neoplasia risk.
- Identify risk factors for neoplasia in IBD patients and institute appropriate screening both in GI and for extraintestinal malignancies.
- Appropriately manage a patient contemplating pregnancy, the pregnant patient, and the post-partum patient.
- Acquire knowledge on the safe use of IBD medications during pregnancy and breast feeding.
- Identify and manage the various extraintestinal manifestations of IBD.
- Be able to perform adequate surveillance protocols for colorectal cancer surveillance in patients with chronic colitis including chromoendoscopic techniques.
- Identify the indications for enteral and parenteral alimentation and be able to implement nutritional therapies.
- Be able to recognize and diagnose patients with intestinal malabsorption and treat them appropriately.
- Understand and medically manage problems with the pouch.

**Procedures and Skills:**

**Procedures:**
- Upper endoscopy
- Colonoscopy: white light, chromo, NBI
- Enteroscopy
- Ileoscopy/colonoscopy through stoma
- Pouchoscopy
- Therapeutic endoscopic dilations of strictures
- Capsule endoscopy

**Skills**
- Physical examination
- Interpretation of laboratory tests.
  - Including specialized IBD testing:
    - TPMT, 6TGN, 6MMP
    - ASCA, ANCA
    - Infliximab and HACA levels
- Interpretation of radiographic tests especially MR enterography and CT enterography
- Interpretation of endoscopic findings

**Teaching Methods**

Fellows will be exposed to a wide variety of teaching methods including didactic lectures, direct clinical presentations, hands on clinical care to patients.
(outpatient and inpatient), endoscopic evaluation, journal club, board review, interactions with clinical staff, clinical trial staff and support staff. Their IBD learning will be under the supervision of IBD faculty members.