VA Emergency Medicine Rotation

Goals & Objectives

Site Director/Faculty Supervisor: Dave Barry, MD

Description of Rotation & Educational Experience

The medical intensive care unit is a core rotation for internal medicine residency training. Residents on this rotation will learn the major aspects of understanding and managing patients with critical illness. Physiologic, psychosocial, diagnostic and management aspects of critical illness will be addressed. Residents on this rotation will gain the knowledge, procedural skills, interpersonal skills and practical hands-on experience needed to provide care for critically ill patients. Each resident will be supervised by faculty attendings and pulmonary/critical care fellows assigned to their service for the duration of the rotation.

Schedule

- Three week rotation, Monday- Sunday with minimum of one day off per week
- Call schedule as determined by residency program and site director

Rotation Curricular Goals

- Learn to assess and manage conditions associated with critical illness requiring hospitalization in the intensive care unit
- To understand and manage the continuum of care for adults with critical illness from initial presentation through transition to a lower level of care
- Understand the indications, limitations and interpretation of diagnostic testing for acute inpatient conditions
- To learn to provide care that is cost-effective and evidence-based
- To develop an understanding in transitions of care with patients transitioning out of the intensive care unit or to end-of life and comfort care
- Learn to function effectively as part of an inter-disciplinary team
- Learn to maintain accurate, timely and appropriate medical records in the critical care setting

Competency by PGY level

PGY1

Core Competency: Patient Care

Residents will be able to:

- Acquire accurate and relevant histories from patients
- Perform accurate and appropriate physical exams
- Synthesize data to define a patient's central clinical problem(s)
- Develop an appropriate care plan for common ICU conditions
- Recognize situations requiring emergent care
- Seek additional guidance or consultation when appropriate from sub-specialty providers with formulation of a clear clinical question
- Provide appropriate care for common ICU diagnosis in the critical care setting

Core Competency: Medical Knowledge

Residents will:

- Learn the scientific knowledge required to provide care for common ICU conditions
- Be able to interpret basic diagnostic tests accurately
- Understand the rationale and risks associated with common procedures ordered in the intensive care unit which may include: paracentesis, lumbar puncture, thoracentesis, central and peripheral line placement

Core Competency: Practice Based Learning & Improvement

Residents will:

- Learn to self-reflect upon one's practice
- Solicit feedback and be open to unsolicited feedback
- Be able to utilize information technology effectively
- Begin to utilize clinical trials, guidelines and studies in decision making

Core Competency: Systems Based Practice

Residents will:

- Be able to work effectively within an inter-professional team within the ICU setting
- Learn the roles and responsibilities of the health care team
- Learn key concepts of high value care and minimize unnecessary diagnostic and therapeutic tests

Core Competency: Interpersonal & Communication Skills

Residents will:

- Learn to engage patients and their families in shared decision making
- Be able to develop therapeutic relations

- Engage in collaborative communication with appropriate members of the team
- Learn key documentation skills and ensure health records are organized, accurate and complete for the critical care setting

Core Competency: Professionalism

Residents will:

- Demonstrate respect and be responsive to needs and concerns of patients, caregivers and members of the inter-professional team
- Complete tasks in a timely manner in the ICU setting
- Demonstrate sensitivity to each patient's unique characteristics and needs
- Show accountability for the care of patients and be honest in all clinical interactions

PGY 2 & PGY3

Core Competency: Patient Care

Residents will be able to:

- Take a history that is efficient, prioritized and hypothesis driven
- Perform accurate and targeted physical exams of the critically ill patient
- Synthesize all sources of data to generate a prioritized differential diagnosis
- Effectively use history and physical exam skills to minimize the need for further diagnostic testing
- Modify the care plan based on patient's clinical course and additional data throughout the patient's hospitalization
- Manage complex acute and chronic diseases
- Provide appropriate disease management in the critical care setting
- Appropriately weigh recommendations from consultants in order to effectively manage patient care

Core Competency: Medical Knowledge

Residents will:

- Possess the scientific knowledge required to provide care for complex medical conditions in the intensive care unit
- Be able to interpret common and complex diagnostic tests accurately
- Understand the concept of pre-test probability and test performance characteristics
- Understand the rational and risks associated with common procedures in the ICU and anticipate potential associated complications, and counsel patients/decision makers accordingly
- Demonstrate proficiency in key inpatient procedures as required by the ABIM and ACGME

Core Competency: Practice Based Learning & Improvement

Residents will:

- Identify opportunities for learning and consistently acts upon those reflections
- Solicit feedback from all members of the team and patients
- Consistently incorporate feedback and change behavior to improve their practice
- Learn to utilize guidelines, best practices and critically appraise clinical research studies and reports

Core Competency: Systems Based Practice

Residents will be able to:

- Work effectively within an inter-professional team
- Understand the roles and responsibilities of the team and seeks input from all members
- Advocate for safe patient care
- Reflect upon and learn from their own incidents that may lead to medical error
- Work to address patient specific barriers to cost-effective care
- Utilize resources to ensure safe care coordination with transition in patient care
- Incorporate cost-awareness principles into decision making for patients in the ICU setting

Core Competency: Interpersonal & Communication Skills

Residents will be able to:

- Identify and incorporate patient/caregiver preference in shared decision making
- Establish a therapeutic relationship with patients and caregivers including persons of different socioeconomic and cultural backgrounds
- Actively and consistently engage in collaborative communication with all members of the ICU care team
- Document succinct, relevant and patient specific information that effectively communicate clinical reasoning in their documentation

Core Competency: Professionalism

Residents will be able to:

- Demonstrate empathy, compassion and respect to patients and caregivers in all situations
- Incorporate input of members from the inter-professional team into the plan of care as appropriate

- Prioritize multiple competing demands and complete these tasks in a timely and effective manner
- Appropriately modify the care plan to account for a patient's unique characteristics and needs
- Demonstrate integrity, honesty and accountability to patients and the profession

Assessment Methods

PGY1:
Direct observation and feedback
Written evaluations- peers and faculty supervisor

PGY2 and 3:
Direct observation and feedback
Written evaluations- peers and faculty supervisor
Verbal feedback- social work and case management

Core procedures: residents must know indications, complications, contraindications, alternatives and interpretation for the following:

- Paracentesis, thoracentesis, lumbar puncture, central line placement, ABG, venipuncture, peripheral IV placement, evaluation & interpretation of an EKG, utilization of point of care bedside ultrasound [cardiac, pulmonary, IVC]

Key Topics

Acute Respiratory Distress Syndrome (ARDS)
Anaphylaxis
Airway management- NIPPV and Intubation
COPD/Asthma
DKA
Drug Overdose
Acute GI Bleeding (Upper & Lower)
Liver Failure
Severe electrolyte disturbances including Hyponatremia
Acute Hypoxic Respiratory Failure
Hypercapnic Respiratory Failure
Infectious Emergencies: Necrotizing Fasciitis, Acute Meningitis/Encephalitis
Multiple Organ Dysfunction
SIRS & Sepsis
Shock- all causes
Acute Renal Failure
Acute Stroke
Unstable arrythmias
Pericardial Tamponade
Ventilator Management
Use of Vasopressors