4th Year Medical Student Emergency Medicine Information Sheet

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Welcome to your Emergency Medicine rotation. You will be rotating at either one of our affiliates. Loma Linda University Medical Center's emergency department is a Level 1 Trauma Center, STEMI Center (heart attack), and Stroke Center with a dedicated pediatric emergency department. Riverside Community Hospital's emergency department is a Level 2 Trauma Center, STEMI Center (heart attack), and Stroke Center but also see a wide range of pediatric patients. Emergency Medicine is a specialty requiring 3-4 years of additional training beyond medical school. You will not learn all of the intricacies of the specialty in two weeks, nor should you be expected to do so, but you will see a variety of patients with minor to major problems.

A more realistic goal is obtaining an overview of the specialty, learning some common presenting complaints and their emergency evaluation, and learning to perform some common procedures.

Goals:

- 1. Expand your breadth of knowledge in acute medicine, resuscitation and the management of emergent patients
- 2. Gain exposure to areas unique to emergency medicine (paramedics and the EMS system, toxicology, environmental emergencies, cardiopulmonary resuscitation, trauma resuscitation, social problems)
- 3. Identify the facets of emergency care that distinguish it from inpatient medicine.

Objectives:

- 1. Develop an approach to the patient with acute chest pain
- 2. Develop an approach to the patient with acute abdominal pain
- 3. Develop an approach to the patient with acute respiratory distress/Shortness of Breath
- 4. Develop an approach to the patient with altered mental status
- 5. Develop an approach to the patient with fever
- 6. Develop an approach to the patient with traumatic injuries
- 7. Develop an approach to the patient with shock/resuscitation
- 8. Develop an approach to the patient with syncope
- 9. Develop an appreciation of the unique approach to the emergency patient: setting priorities, simultaneous evaluation and treatment, and determining the life threat for a given chief complaint.
- 10. Develop an approach and foundational (preclinical) principles to a patient presenting with an exposure to a critical event
- 11. Learn to perform some basic emergency department procedures.
- 12. Assess the etiology of the pulse oximetry reading in a acutely ill patient.
- 13. Interpret a chest radiograph.
- 14. Interpret an electrocardiogram.
- 15. Understand the team approach to emergency medicine, including both pre-hospital and the emergency department. All members must develop familiarity with each other's role and skill level, as well as maintain respect for others' contributions.
- 16. Develop communication skills in interacting with families, colleagues, and ED staff.
- 17. Discuss gram stain or culture results as indicated by the patient case
- 18. Identify appropriate pharmacological agents for endotracheal intubation, treatment of infections, shock, laceration repair, and pain
- 19. Gain exposure to areas unique to emergency medicine (paramedics and the EMS system, toxicology, environmental emergencies, cardiopulmonary resuscitation, trauma resuscitation, social problems)
- 20. Participate in patient care with cross-cultural clinical skills and interpreter

Preset Patient Encounters

You will need to see at least one patient with the following chief complaint during your rotation:

- 1. Altered mental status
- 2. Chest pain
- Abdominal pain
 Shortness of breath/respiratory distress
- 5. Fever

- 6. Syncope 7. Trauma 8. Shock/resuscitation

Goals and Objectives for Simulation Lab Teaching:

Attendance and participation is mandatory.

Goal:

- 1. Understand the role of captain of a code team
- 2. Understand ancillary roles of team members

Objective:

- 1. Synthesize treatment plans for codes (doses of medications are not necessary to know)
- 2. Demonstrate team-player spirit
- 3. Discuss physiology of each case
- 4. Analyze the process of the code during debrief

Required Reading:

Text is Emergency Medicine: An Approach to Clinical Problem-Solving, 2nd Edition, (Sections included in your Packet)

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1.	Cardiac Arrest	Chapter 3, Pg. 39-59
2.	Shock:	Chapter 4, Pg. 60-74
3.	Abdominal Pain:	Chapter 5, Pg. 77-96
4.	GI Bleeding	Chapter 6, Pg. 97-112
5.	Chest Pain:	Chapter 8, Pg. 131-153
6.	Syncope.:	Chapter 9, Pg. 154-169
7.	Toxicology	Chapter 15, Pg. 259-287
8.	Febrile Infants	Chapter 26, Pg. 439-453
9.	Altered Mental Status	Chapter 31, Pg. 517-534
10.	Headache	Chapter 32, Pg. 535-551
11.	Psycho-behavioral D/O	Chapter 35, Pg. 583-599
12.	Respiratory Distress	Chapter 37, Pg. 623-638
13.	Vaginal Bleeding	Chapter 40, Pg. 677-690
14.	Trauma	Chapters 41-44, Pg. 693-773
15.	Wound Care	Chapter 49, Pg. 871-891
16.	Ultrasound-Trauma	Emergency Ultrasounds: Chapter 4, Pg. 44-9

REQUIRED READING: Clinical Diagnosis and Management by Laboratory

Methods, 20th Edition, John Bernard Henry, p296-300

17. Pre-hospital Care

CDEM Student Portal & Study Modules: See Canvas> EMDN 821>Course Requirements> Study Modules.

Requirements for passing this Rotation:

Tintinalli 5th Edition: Chapter 1,2, Pg. 1-11

(The rotation is pass/fail, but you will be evaluated in several different categories of knowledge, skills, and conduct.)

- 1. Completion of Test on the second Friday of your rotation at 0800am. Location will be announced at orientation. Test Score <50 will require a test retake.
- 2. Attendance at all assigned shifts. (You must make up missed shifts)
- 3. Attendance 1st Monday lecture—0830-1030am. Location will be announced.
- 4. Attendance 1st Wednesday of rotation-- Resident's Conference or Grand Rounds 0800-1100-- Location will be given at orientation.

 Please note; If there is a conference scheduled it will be announced at orientation.
- 5. Mandatory Attendance 2nd Wednesday of Rotation –Simulation Lab at the Centennial Complex (4th floor) from 0800-1100am.
- 6. Completion of reading program
- Completion of your evaluation forms:
 - a. Distribute your evaluation forms to <u>2</u> attendings and <u>2</u> PEM fellows or EM PGY 2/PGY 3 residents who worked with you (clinical shift at RCH—4 attendings.) It is better to get more rather than less evaluations.
 - b. Turn in to Lyne the names of the attending and resident physicians who are doing your evaluations
- 8. Turn in 2 completed History and Physical forms, signed by Resident or Attending.
- 9. Completion of Requirements check list.
- 10. Turn in your Emergency Department evaluation form at the end of your rotation.
- 11. Patient log—turn in mid-rotation and end of rotation.
- 12. Completion of Student Evaluation of Faculty and Clerkship on One45.
- 13. Your grade will be issued when the above requirements are completed.

<u>Honor Requirements:</u> Our Clerkship is using the SAEM National Emergency Medicine Board Exam this academic year. The Test score criteria may be adjusted. You will be notified if this changes your grade.

a. Passing the written test greater than 86%--45 points

Passing the written test 81-85%--35 points

Passing the written test 76-80%-25 points

- b. Scholarly activity (summary of research, case study, ethics write-up, etc) approved by Clerkship Director—35 points
- c. Outstanding clinical skills/evaluations as observed by attending evaluations—25 points (marked as Honors).
- d. All required clerkship activities completed on-time (Monday after rotation@ 5:00pm) 10 points

Honors>80points

High Pass: 75-79 Points

Low pass: <60% on test

Fail: test score <50%

Clerkship Grading Policies

Grading for the Emergency Medicine required course is based on a point system.

Grade	Points
Honors	≥ 80
High Pass	75-79
Pass	10-74
Low Pass	test score <60% (automatic)
Fail	Test score <50% (automatic)

Points may be earned:

Category	Points
Test score >86%	45
Test score 81-85%	35
Test score 76-80%	25
Scholarly activity	Up to 35 points (need clerkship approval)
Clinical evaluations as high pass	25
Clinical evaluations as honors	35
Professionalism	10

Scholarly activity may be a case study of a patient you evaluated in the emergency department, an ethical dilemma you encountered, or clinical issue that was raised. This requires clerkship director approval. The write up must have at least 4 current journal article references in addition to others.

Professionalism points are obtained by completing clerkship requirements in a timely fashion (when they are due), being respectful, etc.

Emergency Medicine Clerkship Work Hour Policy

- ❖ Each student is required to complete 8--8hour shifts per 2 week rotation.
- They are given 1 week-end off clinical shifts (Saturday & Sunday).
- * The shifts are:
 - 2 day (0600-1400)
 - 2 afternoon (1400-2200)
 - 2 nights (1800-0200, 2200-0600).
 - 2 Pediatric Emergency Medicine shifts (time varies)
- ❖ Each shift has a minimum of 8 hours before the start of the next shift.
- * Required educational activities are excused from clinical time and are not in addition to it.
- * Required reading and web-based teaching is to be completed by the student at their leisure prior to completion of the rotation.
- ❖ A minimum of 6 shifts need to be completed for passing.