# PED1-4036/F PEDIATRIC ICU Course Policies and Procedures

Co-Course Director Name: Nadeem I. Shafi, MD Office Location: Le Bonheur CFRT, 346R

Phone Number: 901-287-6303 Email Address: nshafi@uthsc.edu This is your initial point of contact Coordinator Name: Office Location: Phone Number: Email Address:

## Location

LeBonheur Children's Hospital, 5<sup>th</sup> floor, Physician Work Room

# Faculty

Faculty and fellows assigned to the Pediatric Critical Care Service for the month will supervise the student in the evaluation and management of patients.

# Introduction

This elective introduces the 4<sup>th</sup>-year medical student to the care of critically ill children in the sophisticated, technologically-rich environment of the pediatric intensive care unit (PICU). The student will encounter life-threatening pediatric conditions such as sepsis, trauma, status asthmaticus, and DKA; a variety of post-operative cases such as spinal fusions and brain tumor resections; and a range of other conditions which require children to have intensive care monitoring. The student may be exposed to extracorporeal support modalities such as ECMO and continuous renal replacement.

The student will assume the care of patients under the supervision of Pediatrics residents as well as Pediatric Critical Care fellows and faculty. Fundamentals of critical care such PALS, patient evaluation, airway and hemodynamic stabilization will be reviewed.

## **Elective Goals**

The student will learn to recognize concepts of physiology and pathophysiology in clinical presentations, and apply them in monitoring and management strategies. The student will gain familiarity with invasive procedures common in the PICU. Finally, the student will gain experience in engaging families who are under the duress of having a critically ill child.

# **Elective Objectives**

#### **Patient Care**

- Provide communication effectively and sensitively to patients and families in the PICU.
- Provide psychosocial support to patients and families who are enduring critical illness

## **Medical Knowledge**

 Demonstrate a commitment to acquiring the knowledge base expected of general pediatricians caring for seriously ill children under the guidance of intensivists.

## **Practice-Based Learning and Improvement**

• Access evidence and knowledge-tools to refine patient care in the PICU setting.

## **Interpersonal and Communication Skills**

- Participate effectively as part of an interdisciplinary team in the PICU to create and sustain information exchange.
- Maintain accurate, timely, and legally appropriate medical records on complex, critically ill
  children.

#### **Professionalism**

• Demonstrate a commitment to carrying out professional responsibilities while providing care in the PICU.

# Attendance and Required Experiences

The student will participate in daily rounds and implement care plans like a resident, fully integrating with the multidisciplinary team. S/he will follow patients daily, formulate and refine care plans, and implement them under supervision. The student will be expected to attend daily noon conferences within the Critical Care Division; when one is not scheduled, s/he will attend the resident noon conference. S/he will also attend the department's Grand Rounds on Wednesday mornings at 8 am. The student will be expected to be present during codes, procedures, and evaluations of critically ill children in the general inpatient areas.

Duty Hours: The student will spend 60-80 hours per week on this rotation. S/he will be expected to take 4 calls during the month, but will have the option to take more as long as 80 hours per week are not exceeded and other resident duty hour rules are not violated. The student will have one day per week off from clinical duties.

Rotation Weekly Schedule: The student will arrive daily at  $\sim$  6:30 am to learn of new patient assignments, collect data, perform assessments, and formulate preliminary plans in collaboration with the Pediatrics residents. S/he will attend rounds  $\sim$  8 am - 11 am. The remainder of the afternoon will be followed by implementation of final care plans, completion of documentation, discussions with families, and handoff to the night team.

# **Student Evaluation**

## PROFESSIONAL CONDUCT

In 1986, the College of Medicine established its Code of Professional Conduct. The document, available in *The Centerscope*, addresses those responsibilities to patients, colleagues, family, and community as well as to the individuals themselves. Following discussion with incoming students, it is assumed that all will subscribe to this code as part of their commitment to the profession of medicine. An egregious professionalism violation may be considered grounds for course failure.

#### **DECLARATION OF DISABILITY**

Any student who would like to self-disclose as a student with a disability in the College of Medicine at UTHSC must register and officially request accommodations through the Disability Coordinator in Student Academic Support Services (SASS). Regardless of a student's geographic location for experiential education, all requests for accommodations must be submitted with supporting documentation and reviewed for reasonableness by the Disability Consultant. Students should contact Laurie Brooks to set up an appointment to discuss specific needs at <a href="mailto:lbrook15@uthsc.edu">lbrook15@uthsc.edu</a> or (901) 448-1452. All conversations regarding requests for accommodations are confidential.

## **DUTY HOURS**

- 1. Duty hours will be limited to 80 hours per week averaged over a four-week period, inclusive of all inhouse call and patient care activities.
- 2. Continuous on-site duty, including in-house call, will not exceed 30 consecutive hours. Students may remain on duty additional hours to participate in transferring care of patients, conducting outpatient clinics, maintaining continuity of medical and surgical care, and attending required didactic activities.
- 3. Students will be provided with one day in seven free from all educational and clinical responsibilities, averaged over a rotation, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical, didactic, and administrative activities.

4. Students should be provided with a 10-hour period after in-house call during which they are free from all patient care activities.

#### STUDENT ASSESSMENT

Students have a formative assessment at the half-way mark of the preceptorship and a summative clinical assessment at the end of the rotation based on clinical performance as defined in the objectives.

GRADING SCALE (this is the College of Medicine grading scale adopted for the entire curriculum by the CUME, beginning May 2014.)

<u>Letter Grade</u>	Final Percentage
А	89.5-100
В	79-89
С	67.5-78
F	<u>&lt;</u> 67.49

# **Academic Difficulty**

Students having difficulty in the course are strongly encouraged to seek help as soon as possible by seeking advice from the resident, fellow, and attending on the service. Students are also encouraged to check with the SASS and the Kaplan Clinical Skills Center to see if academic support is available.

# **Course Evaluation**

Students are strongly encouraged to participate in the Hall Tackett evaluation survey on New Innovations at the conclusion of the course.

# Textbooks and Literature

Nichols, D.G. (Ed.) (2008). <u>Rogers' Textbook of Pediatric Intensive Care, 4<sup>th</sup> ed</u>. Lippincott Williams & Wilkins, Philadelphia, PA.

Pediatric Critical Care Clinical Library: An network-based library of articles pertinent to the field, maintained by faculty and fellows of the Division.