Family Medicine Residency
Emergency Medicine Rotation
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## **Program Goal**

The overall educational goal for the emergency medicine component in the Family Medicine Residency will be that the residents gain competence in managing a variety of emergency care situations and that they gain competence in utilizing the consultant process peculiar to the Emergency Department. Educational objectives for this experience will include other educational experiences in emergency medicine including conferences, and didactic programs during the 3 year program. The residents on ER rotation are encouraged to attend the monthly ER Fellow Didactic Session provided by Dr. Brent Hatcher

Attending Physicians are the Emergency Medicine physicians at JMCGH ER with Dr. Mike Revelle as the medical director and Dr. Brent Hatcher as the evaluating physician in charge of the resident rotation. Each resident will be evaluated on the 6 Core Competencies at the end of their rotation.

1<sup>st</sup> Year rotation: (ER) Resident will spend 4 weeks during which they will rotate in the ER when they are scheduled for ER on the Master schedule. This should include 4 days of 12 hour shifts (48 hours). They should be seeing the same panel of patients as the ED physician. Residents will still take call during this rotation. The resident will have 2 half days of clinic.

2<sup>nd</sup> Year Rotation: (ER/PROC) Resident will work 8 separate 10 hour shifts to gain a broad experience. They should be seeing the same panel of patients as the ED physician. (80 hours) Residents will still take 2<sup>nd</sup> year call during this rotation. The residents will work 2 to 3 half days of clinic and be scheduled for Procedure Clinics at UTFM.

2<sup>nd</sup> Year Emergency Med Night: Resident is required to take call 3 nights per week and 2 weekend shifts per month. (Total of 12 shifts) During the weeknight call the resident is expected to see patients between 6PM and 12AM. They should be seeing the same panel of patients as the ED physician. After 12AM residents are available to assist the ER as needed and assist the UTFM On-call team primarily to help with admissions. On the weekend shift the resident is expected to round with the On-call team until they are completed. They are then expected to be present in the ER from 1PM until 11PM and available after that time as during the weekdays. (80 hours) The resident will have 3-4 half days of clinic.

2<sup>nd</sup> year PEDs ER: 2 week rotation the second year, will rotate in the ER with an ED Physician and see pediatric patients. They are to actively participate in the treatment, management, and disposition of the patients. They are also available to help with the follow up of the patient and do any available procedures.

Minimum contact hours (208)

During the rotation, residents will become familiar with the following:

- obtaining adequate information through history and physical examination with assistance as needed from attending and fellow physicians.
- writing orders for emergency visits including labs for further diagnostic evaluation and treatments.
- evaluation of patients with unstable vital signs and incorporating ACLS/PALS protocol into resuscitation of patients as needed.
- quality care markers and published guidelines for specific disease states such as congestive heart failure exacerbation, acute coronary syndromes, and pneumonia.
- discussing overall situation, plan of care and prognosis of patients who are being evaluated in the emergency room

## **Supervision**

Direct observation by attending and fellow faculty physicians in the emergency room

## **Rotation Objectives**

By the end of the Cardiology rotation, PGY I & II residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independency as he

or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	SPECIALTY SPECIFIC OBJECTIVES			
	Develop skills that allow for up to date, compassionate care	Conferences/Didactics	Direct Feedback	Daily
	of the adult and pediatric patient in the emergency room	Daily Rounds	Global Evaluation	Monthly
	while integrating evidence based medicine, local standards	Clinical Teaching	Procedure certification	Quarterly
	of care, nationally defined quality care markers and	Self Directed Learning	In-training Exam	Annually
	specialty recommendations upon consultation.			-
	Perform an adequate history and physical examination of	Conferences/Didactics	Direct Feedback	Daily
	the adult and pediatric emergency room patient.	Daily Rounds	Global Evaluation	Monthly
		Clinical Teaching	Procedure certification	Quarterly
		Self Directed Learning	In-training Exam	Annually
	Develop a rational plan of care for patients including	Conferences/Didactics	Direct Feedback	Daily
	diagnostic testing, initiation and alteration of medications,	Daily Rounds	Global Evaluation	Monthly
	and specialty consultation.	Clinical Teaching	Procedure certification	Quarterly
		Self Directed Learning	In-training Exam	Annually
	Maintain adequate, compassionate communication between	Conferences/Didactics	Direct Feedback	Daily
	the patient and medical staff.	Daily Rounds	Global Evaluation	Monthly
		Clinical Teaching	Procedure certification	Quarterly
		Self Directed Learning	In-training Exam	Annually
	Establish a reasonable and safe method of outpatient	Conferences/Didactics	Direct Feedback	Daily
	follow-up of patients upon discharge or admission to the	Daily Rounds	Global Evaluation	Monthly
	hospital.	Clinical Teaching	Procedure certification	Quarterly
		Self Directed Learning	In-training Exam	Annually
	Evaluate, diagnose, and manage patients with	Conferences/Didactics	Direct Feedback	Daily
	cardiovascular conditions including cardiac arrest,	Daily Rounds	Global Evaluation	Monthly
	myocardial infarction, dysrythmias, congestive heart	Clinical Teaching	Procedure certification	Quarterly
	failure, hypertension, cardiomyopathies, pericarditis and coronary artery disease.	Self Directed Learning	In-training Exam	Annually
	Evaluate, diagnose, and manage patients with	Conferences/Didactics	Direct Feedback	Daily
	gastrointestinal disorders including hepatitis, cirrhosis,	Daily Rounds	Global Evaluation	Monthly
		Clinical Teaching	Procedure certification	Quarterly

pancreatitis, colitis, diverticulitis, cholecystitis, peptic ulcer	Self Directed Learning	In-training Exam	Annually
disease, and bowel obstruction and gastroenteritis.		_	-
Manage and diagnose fluid and electrolyte disorders	Conferences/Didactics	Direct Feedback	Daily
including hypo/hyperkalemia, hypo/hypernatremia,	Daily Rounds	Global Evaluation	Monthly
hypo/hypercalcemia, and acidosis/alkalosis.	Clinical Teaching	Procedure certification	Quarterly
	Self Directed Learning	In-training Exam	Annually
Evaluate, diagnose, and manage patients with endocrine	Conferences/Didactics	Direct Feedback	Daily
conditions including diabetes mellitus, thyroid disorders,	Daily Rounds	Global Evaluation	Monthly
adrenal diseases, and lipid disorders.	Clinical Teaching	Procedure certification	Quarterly
-	Self Directed Learning	In-training Exam	Annually
Evaluate, diagnose, and manage patients with renal	Conferences/Didactics	Direct Feedback	Daily
conditions including urinary tract infections,	Daily Rounds	Global Evaluation	Monthly
nephrolithiiasis, acute and chronic renal failure and	Clinical Teaching	Procedure certification	Quarterly
obstruction.	Self Directed Learning	In-training Exam	Annually
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Evaluate, diagnose, and manage patients with hematologic	Conferences/Didactics	Direct Feedback	Daily
conditions including anemia, coagulopathies,	Daily Rounds	Global Evaluation	Monthly
mononucleosis, polycythemia, and major	Clinical Teaching	Procedure certification	Quarterly
hemaglobinopathies.	Self Directed Learning	In-training Exam	Annually
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Evaluate, diagnose, and manage patients with	Conferences/Didactics	Direct Feedback	Daily
musculoskeletal conditions including back pain, rheumatoid	Daily Rounds	Global Evaluation	Monthly
arthritis, collagen vascular diseases, osteoarthritis, sprains	Clinical Teaching	Procedure certification	Quarterly
and strains.	Self Directed Learning	In-training Exam	Annually
Evaluate, diagnose, and manage patients with infectious	Conferences/Didactics	Direct Feedback	Daily
diseases (bacterial, viral, and fungal) that are commonly	Daily Rounds	Global Evaluation	Monthly
encountered in the adult population.	Clinical Teaching	Procedure certification	Quarterly
	Self Directed Learning	In-training Exam	Annually
Evaluate, diagnose, and manage patients with neurological	Conferences/Didactics	Direct Feedback	Daily
conditions including stroke/TIA's, seizures, meningitis,	Daily Rounds	Global Evaluation	Monthly
coma, movement disorders, dementia, delirium, nerve	Clinical Teaching	Procedure certification	Quarterly
entrapment syndromes and tumors.	Self Directed Learning	In-training Exam	Annually
Evaluate, diagnose, and manage patients with pulmonary	Conferences/Didactics	Direct Feedback	Daily
disorders including asthma, COPD, bronchitis, pneumonia,	Daily Rounds	Global Evaluation	Monthly
thromboembolism, fibrosis, neoplasms, and respiratory	Clinical Teaching	Procedure certification	Quarterly
failure.	Self Directed Learning	In-training Exam	Annually
Develop skills in the following procedures commonly	Conferences/Didactics	Direct Feedback	Daily
performed in the emergency room	Daily Rounds	Global Evaluation	Monthly

	Medical Resuscitation	Clinical Teaching	Procedure certification	Quarterly
	Trauma Resuscitation	Self Directed Learning	In-training Exam	Annually
		Self Directed Learning	in-training Exam	Aimuany
	• X-Ray Interpretation			
	Casting and Splinting  EKG Later and Splinting			
	• EKG Interpretation			
	Fracture Management			
	Foreign Body Removal			
	Laceration Repair			
	Lumbar Puncture(Adult and Pediatric)			
	I&D Abscess			
	Joint Aspiration and Injection			
	Nasogastric Intubation			
	Regional Anesthesia			
	Procedural Sedation			
	Uncomplicated Joint Reduction			
	Wound Debridement			
	Mental Health Evaluation (Crisis Team)			
	Chest Tube Insertion			
	Central Venous Access including with USG Guidance			
	Incision of Thrombosed Hemorrhoid			
	Diagnostic Thoracentesis/Paracentesis			
	Endotracheal Intubation			
	Eye Exam for Foreign Body			
	Anterior Nasal Packing			
Medical Knowledge	SPECIALTY SPECIFIC OBJECTIVES			
	Demonstrate certification in each of the following areas:	Conferences/Didactics	Direct Feedback	Daily
	ACLS Certification	Daily Rounds	Global Evaluation	Monthly
	PALS Certification	Clinical Teaching	Procedure certification	Quarterly
	ALSO certification	Self Directed Learning	In-training Exam	Annually
	ATLS Certification(encouraged but not required)			
	Develop an in-depth knowledge of normal anatomy and	Conferences/Didactics	Direct Feedback	Daily
	physiology.	Daily Rounds	Global Evaluation	Monthly
	r,6j.	Clinical Teaching	Procedure certification	Quarterly
		Self Directed Learning	In-training Exam	Annually
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Develop and demonstrate the understanding of the	Conferences/Didactics	Direct Feedback	Daily
following patient care emergencies including but not	Daily Rounds	Global Evaluation	Monthly
limited to:	Clinical Teaching	Procedure certification	Quarterly
Foreign Body management	Self Directed Learning	In-training Exam	Annually
Acute Chest Pain			
Acute Abdominal Pain			
Acute Respiratory Distress			
• Shock			
Multiple Trauma			
Disaster Triage			
Acute Psychiatric Illness			
Poisoning of varying severity and Causes			
Major and Minor Burns			
• Lacerations			
Seizure Disorder			
Acute Eye Diseases and Injury			
Acute conditions of the Ear, Nose and Throat			
Legal-ethical Aspects of Emergency Care(Informed)			
consent, Competent Patient, Treatment of a Minor)			
Confidentiality			
Physician-Patient Relationship(blood alcohol testing,			
privileged communications and termination of patient			
care responsibility)			
Good Samaritan Status			
Medical Records and Forms for Emergency Care			
Psychiatric Commitment(Criteria and procedure)			
Child Abuse			
Criminal or Sexual Assault			
Death on Arrival or in the Emergency Department			
Communicable Diseases			
• Simple Fractures			
• Epistaxis			
Headache			
Fever without Source			
Demonstrate knowledge of the common disorders of the	Conferences/Didactics	Direct Feedback	Daily
adult medical patient including cardiovascular,	Daily Rounds	Global Evaluation	Monthly
gastrointestinal, fluid/electrolyte, endocrine, renal,	Clinical Teaching	Procedure certification	Quarterly
gastomicsunal, mularelectionyte, endocrine, renal,	Self Directed Learning		Annually
	Sen Directed Learning	m-naining Exam	Amuany

	hematologic, musculoskeletal, infectious disease, neurological, and pulmonary.			
Practice Based	SPECIALTY SPECIFIC OBJECTIVES			
Learning and Improvement	See General Family Medicine Objectives for a comprehensive list.			
	Utilize evidence based resources in the care of emergency room patients.	Conferences/Didactics Daily Rounds Clinical Teaching Self Directed Learning	Direct Feedback Global Evaluation Procedure certification In-training Exam	Daily Monthly Quarterly Annually
	Maintain a list of journal articles that apply to the care of emergency room patients	Conferences/Didactics Daily Rounds Clinical Teaching Self Directed Learning	Direct Feedback Global Evaluation Procedure certification In-training Exam	Daily Monthly Quarterly Annually
Interpersonal and	SPECIALTY SPECIFIC OBJECTIVES	5	8	
Communication Skills	See General Family Medicine Objectives for a comprehensive list.			
	Effectively communicate with patients and family members in the presence of the emergency medicine attending physicians.	Conferences/Didactics Daily Rounds Clinical Teaching Self Directed Learning	Direct Feedback Global Evaluation Procedure certification In-training Exam	Daily Monthly Quarterly Annually
	Describe the best approaches to choosing appropriate vocabulary, describing realistic outcomes, and working with "difficult" patients and family.	Conferences/Didactics Daily Rounds Clinical Teaching Self Directed Learning	Direct Feedback Global Evaluation Procedure certification In-training Exam	Daily Monthly Quarterly Annually
Professionalism	SPECIALTY SPECIFIC OBJECTIVES			
	See General Family Medicine Objectives for a comprehensive list.			
	Behave in a professional manner towards patients, their families, nursing and all ancillary staff	Conferences/Didactics Daily Rounds Clinical Teaching Self Directed Learning Press Gainey Survey	Direct Feedback Global Evaluation Procedure certification In-training Exam	Daily Monthly Quarterly Annually
Systems-Based	SPECIALTY SPECIFIC OBJECTIVES	, ,		
Practice	See General Family Medicine Objectives for a comprehensive list.			
	Develop an understanding of the role of various ancillary modalities of patient care that are available including physical and occupational therapy, speech therapy, wound care, nutritional education and home health.	Conferences/Didactics Daily Rounds Clinical Teaching Self Directed Learning	Direct Feedback Global Evaluation In-training Exam	Daily Monthly Annually

Utilize available resources in the community such as the	Conferences/Didactics	Direct Feedback	Daily
health department, DHS, DCS, and help for Abuse victims.	Daily Rounds	Global Evaluation	Monthly
	Clinical Teaching	In-training Exam	Annually
	Self Directed Learning	-	-
Compare different disaster plans for the community.	Conferences/Didactics	Direct Feedback	Daily
	Daily Rounds	Global Evaluation	Monthly
	Clinical Teaching	In-training Exam	Annually
	Self Directed Learning	_	

## **Educational Resources**

www.uptodate.com (available free through www.utdol.com in Jackson General Hospital based computers)

www.epocrates.com

www.emedicine.com

ACLS Handbook (copy supplied by UT)

Emergency Medicine A Comprehensive Study Guide; Sixth edition, Judith Tintinelli; American College of Emergency Physicians (copy supplied for each resident by ER group)

Procedures for Primary Care Physicians, John Pfenniger and Grant Fowler (copy available in ER/ resident lounge and UTFM preceptor area)