Goals and Objectives

Emergency Medicine Rotation

Overview

The primary goal of the Emergency Medicine rotation is to expose you to a large variety of presentations of varying degrees of acuity.

Orientation

The Emergency Medicine rotation will be comprised of 4 weeks at one of these teaching sites:

- McGill University Health Centre - Royal Victoria Hospital (RVH)
- McGill University Health Centre - Montreal General Hospital (MGH)
- Jewish General Hospital (JGH)

Information about scheduling requests and other issues at the RVH and MGH, as well as other documents related to rotation objectives can be found on the departmental website:

www.mcgill.ca/obgyn/teaching/residents/

Objectives

Often, the patient’s presenting problem will be outside the realm of your specialty, and so you may feel that you have nothing of value to learn from the case. Not so. As a practicing physician, patients will present to you with problems of all kinds, so it is important to learn a basic approach to the so-called “cardinal presentations” (e.g. fever, weakness, dizziness, abdominal pain, shortness of breath, etc). Furthermore, in your career you will likely be called upon, from time to time, to deal with an urgent situation. For example, the patient who faints in your waiting room, or the patient who develops an anaphylactic reaction to a medication you have just administered. A good grounding in the “A,B,C’s of Emergency Medicine will serve you well on these occasions.

The Emergency Rotation will also expose you to a less traditional method of data gathering than you would employ elsewhere. Often the history cannot be obtained directly from the patient because of altered mental status or language barrier, and at times the urgency of the presentation demands that treatment be initiated before history taking has been completed. One of the goals of the rotation is thus to enable you to recognize the severity of a patient’s illness and prioritize their care appropriately.

Another skill you will develop in the Emergency Department is “multitasking”. You will learn how to manage several patients simultaneously, remaining alert to any changes in the status of patients waiting for tests or consultants, and intervening when needed.

The number of patients waiting to be seen also places pressure on the physician to work quickly; thus, in the ED you are expected to improve the speed and efficiency of your work. This applies not only to history-taking and the physical examination, but also to your ability to generate a pertinent differential diagnosis, to document clearly, and to present the case in an organized and coherent manner. Rapid decision-making is
one of the cornerstones of Emergency Medicine. In this rotation you will learn to make rational and cost-effective choices with respect to ordering tests, initiating treatment, and arranging disposition or follow-up.

During your rotation you will have the opportunity to learn and practice many medical procedures. These may include suturing, lumbar punctures, peripheral and central venous access, arterial blood gases, procedural sedation, casting, pleurocentesis and abdominal paracentesis (to name a few). Before being permitted to practice any procedure on a patient, however, you will have to demonstrate to the attending physician your understanding of the indications, contraindications, technique, and complications associated with it, and you must be able to obtain informed consent from the patient. As the opportunities to practice procedures may be few, it is strongly recommended that you read up on these prior to starting the rotation; otherwise you may miss out on an important learning opportunity.

Nowhere in the hospital is system teamwork more important than in the Emergency Department. A single staff physician may be responsible for as many as forty sick patients at a time; unless he or she can work well with the team of highly trained nurses, clerks, social workers, and consultants, disaster will arise. You will need to integrate into this team in order to function in the department. Good communication skills and respect for your coworkers are key.

Certain medical problems fall within the expertise of emergency physicians in particular; resuscitation, toxicology, environmental maladies, and pain control are examples. You should take advantage of this brief opportunity to learn more about these conditions from people who are expert in these areas.

Specific Objectives and CanMEDS competencies

The role of medical expert is central to the function of the obstetrician-gynaecologist, and draws on the competencies for the roles of scholar, communicator, health advocate, manager, collaborator, and professional.

1. Medical Expert

   a. KNOWLEDGE of the Medical Expert
      • Gain knowledge in subspecialty areas of Emergency Medicine, particularly exposure to common obstetric and gynecologic emergencies:
         ▪ vaginal bleeding & pelvic pain in non-pregnant patient
         ▪ postmenopausal vaginal bleeding
         ▪ vaginal bleeding in pregnant patient
         ▪ ectopic pregnancy
         ▪ pelvic inflammatory disease
         ▪ vulvovaginitis
         ▪ mastitis
         ▪ breast disorders (cysts etc.)
         ▪ torcism

   b. SKILLS of the Medical Expert
      • Recognize the unstable patient and initiate treatment of the “A,B,C”s
      • Develop an approach to the cardinal presentations
      • Learn and practice some common emergency department diagnostic and therapeutic procedures
2. Communicator
- Gather data efficiently, document it clearly, and present it coherently
- Develop communication skills with the staff and consultants.
- Communicate directly with Emergency Department staff any problems or concerns that may arise regarding education, patient care and consultant interaction

3. Collaborator
- Function as a member of the ED team, respecting the roles and expertise of all team members

4. Manager
- Become familiar with rational, cost-efficient investigation and treatment of emergency department patients
- Understand the concept of continuity of the care and community resources for follow-up care available in and outside the hospital.
- Manage several patients simultaneously

5. Health Advocate
- Recognize the biopsychosocial factors that modify disease, and intervene when appropriate
- Recognize the impact of hospital overcrowding on patient safety and dignity, and intervene when possible

6. Scholar
- Search for and critically appraise sources of medical information relevant to the care of your patients

7. Professional
- Practice medicine ethically, consistent with the obligations of a physician
- Recognize own limitations and seek advice when needed
- Be punctual and complete all assigned tasks

Evaluation
- **MRESone45** - Your evaluation at the end of the rotation will be based on feedback collected at the end of each shift from the attending physician.

**Recommended text**
Ask ER attending staff.