

Ronald Reagan UCLA Medical Center /Olive View-UCLA Medical Center Emergency Medicine Residency
Rotation Curriculum

Rotation: **Community Emergency Medicine** (PGY2, PGY3, PGY4)

Site: Antelope Valley Hospital (CSMC)

1600 West Avenue J

Lancaster, CA 93534

Contacts: **Rotation Director**

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Schedule: https://rm.verinform.com/pm/pm_start.phtml?db=ucla

Enter assigned user name and password. Under the "Schedules" section:

PGY1 Select "EMC Rotator Schedule"

PGY2-4 Select "Resident Schedule"

The schedule is also available at http://www.my.calendars.net/ER_RESIDENT

Shifts

ax 12:00 PM to 10:00 PM

ay 3:00 PM to 11:00 PM

Xa/p Indicates start time for 12-hour shifts (Ex: 1p = 1:00 PM to 1:00 AM)

Description of Rotation:

The AVH Emergency Medicine rotations allow our residents to achieve a superior mastery of critical care and invasive procedures. Residents work solely in the high acuity areas and only one EM resident is assigned at any time. To maximize resident learning, attendings on duty will direct the

resident to the highest acuity patients and offer all invasive procedures to the resident. Because of the high acuity, there is a large number of procedures to be performed daily.

Rotation assignments:

PGY2 – 2 weeks

PGY3 – 4 weeks

PGY4 – 4 weeks

Responsibilities:

Given the emphasis on performing procedures, EM residents are primarily responsible for approximately one patient per work hour. The priorities of the rotation are:

- 1) Perform procedures.
- 2) See high acuity patients and traumas.
- 3) See pediatrics patients.
- 4) See other ED patients. You must see patients in the ED when not busy doing procedures, running codes or otherwise helping the attending and staff in the ED. Thus, when there are fewer procedures/traumas in the department, you see more patients, and likewise your patient load decreases as you get busy doing lines, cracking chests, etc.

PGY2 residents may sign up for patients and see them on their own initially. They may also fill in the front of the T sheet and their own physical exam. After that, PGY2 residents must discuss orders with the attendings at which point the patient, orders, and chart become the attending's responsibility. Therefore, the attending and scribe will fill in all lab data/ imaging/ MDM/ diagnosis, as well as discussing the patient with relevant consultants/ PMDs etc. PGY2 residents can write orders on patients in conjunction with the attendings input only.

PGY3 and PGY4 residents are allowed to write orders, follow up on labs/imaging, call PMDs and consultants. Currently only attendings may call admitting physicians. However, residents must also discuss the care of the patient with the attending before anything but basic orders are written.

All residents are responsible for writing a procedure note for every procedure they perform and these must be co-signed by the attending.

Goals and Objectives

This rotation focuses on the management of critically ill and injured patients in the ED and the mastery of procedural skills. On completion of this rotation residents should demonstrate vastly improved procedural competence and confidence.

GOALS AND OBJECTIVES	COMPETENCIES ADDRESSED	SKILL LEVEL				ASSESSMENT/EVALUATION TOOLS
		Introduction	Familiarity	Proficiency	Mastery	
1.0 SIGNS, SYMPTOMS, AND PRESENTATIONS						
Recognize the level of acuity of patients presenting the ED including critical, emergent, and low acuity.	PC,MK,SBP	PGY1		PGY2	PGY3	FE, OE,NE
Prioritize sequence of physician tasks based on patient acuity. Physician tasks include: <ul style="list-style-type: none"> • emergency stabilization • focused history and physical • diagnostic studies • therapeutic interventions including pharmacotherapy • observation and reassessment • consultation • disposition • documentation and • multi-tasking • team management 	PC,MK, SBP	PGY1	PGY2	PGY3	PGY3	FE, OE,NE
Able to risk stratify patients presenting with complaints including chest pain and shortness of breath using current evidence.	PC, MK, PBL	PGY1	PGY2	PGY3	PGY4	OE,FE,
Utilizes an evidenced based approach in the management of pediatric fever.	PBL,MK,PC	PGY1		PGY2	PGY3	FE,OE,
2.0 ABDOMINAL AND GASTROINTESTINAL DISORDERS						
Diagnosis and manage of acute abdominal presentations including: <ul style="list-style-type: none"> • appendicitis • diverticulitis • pancreatitis • biliary disease • abdominal aortic aneurysm 	PC,MK	PGY1	PGY2	PGY3	PGY4	FE, OE
3.0 CARDIOVASCULAR DISORDERS						
Recognize and manage patients requiring cardiac pacing.	PC,MK	PGY1	PGY2	PGY3	PGY4	FE,OE

Diagnosis and management of acute coronary syndromes.	PC,MK,SBP	PGY1	PGY2	PGY3	PGY4	FE,OE,NE
Recognize and manage presentations associated with congenital disorders of the cardiovascular system.	PC, MK,SBP	PGY1	PGY2	PGY3	PGY4	FE, OE
Recognize and manage cardiac dysrhythmias including ventricular and supraventricular conduction disorders.	PC,MK, SBP	PGY1	PGY2	PGY3	PGY3	FE, OE
Recognize and manage diseases of the myocardium including congestive heart failure, cardiomyopathy including ischemic cardiomyopathy, and myocarditis	PC,MK,SBP	PGY1	PGY2	PGY3	PGY4	FE, OE
Recognize and manage hypertensive disease presenting to the ED including asymptomatic hypertension, and hypertensive emergency.	PC,MK,SBP	PGY1	PGY2	PGY3	PGY4	FE, OE
4.0 CUTANEOUS DISORDERS						
Recognize and manage common cutaneous disorders including: <ul style="list-style-type: none"> • skin cancer • decubitus ulcers • dermatitis, • infections • maculopapular lesions • vesicular lesions. 	MC,MK SBP	PGY1	PGY2	PGY3	PGY4	FE, OE
5.0 ENDOCRINE, METABOLIC, AND NUTRITIONAL DISORDERS						
Recognize and manage common endocrine and metabolic disorders including: <ul style="list-style-type: none"> • acid-base disturbances • adrenal diseases • fluid and electrolyte disturbances • complications of diabetes including diabetic ketoacidosis and hypoglycemia • thyroid disorders 	MC,MK,SBP	PGY1	PGY2	PGY3	PGY4	FE, OE
6.0 ENVIRONMENTAL DISORDERS						
Recognize and manage common environmental disorders including:	MC,MK,SBP	PGY1	PGY2	PGY3	PGY4	FE, OE

<ul style="list-style-type: none"> • bites and envenomations • radiation emergencies • dysbarism • electrical injuries • high-altitude illness • submersion injuries • temperature related illness 						
7.0 HEAD, EAR, EYE, NOSE, THROAT DISORDERS						
Recognize and manage common Head, Ear, Nose, and Throat disorders including: <ul style="list-style-type: none"> • ear foreign bodies • dental disorders • otitis media • otitis, externa • perforated tympanic membrane • epistaxis • sinusitis • Ludwig’s Angina • sialolithiasis • parotitis • epiglottitis • pharyngitis, and retropharyngeal abscesses 	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
Recognize and manage common traumatic and nontraumatic ophthalmologic presentations including: <ul style="list-style-type: none"> • conjunctivitis • corneal abrasions • foreign bodies • glaucoma • hyphema • iritis • orbital cellulitis • ruptured globe 	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
Perform ophthalmologic examination techniques including slit lamp examination, fundoscopy, and	PC, MK	PGY1	PGY2	PGY3	PGY4	FE

tonometry.						
8.0 HEMATOLOGIC DISORDERS						
Recognize and manage common hematologic disorders including: <ul style="list-style-type: none"> • transfusion reactions • sickle cell anemia • coagulation defects • thrombocytopenia • disseminated intravascular coagulation • anemia • methemoglobinemia • leukemia, and lymphoma 	P, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
9.0 IMMUNE SYSTEM DISORDERS						
Recognize and manage the manifestations and complications of Human Immunodeficiency Virus (HIV)	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
Recognize and manage allergic reactions, anaphylaxis, angioedema and drug allergies	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
Recognize and manage collagen vascular disorders including: <ul style="list-style-type: none"> • reactive arthritis • rheumatoid arthritis • scleroderma • systemic lupus erythematosus • vasculitis. 	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
10.0 SYSTEMIC INFECTIOUS DISORDERS						
Recognize and manage bacterial infections including: <ul style="list-style-type: none"> • sepsis • tuberculosis, • chlamydia and gonococcal infections • endocarditis, • syphilis • tetanus • meningococemia 	PC, MK	PGY1	PGY1	PGY3	PGY4	FE, OE

Recognize and manage the manifestations of exposure to biologic weapons.	MC,MK	PGY1	PGY2	PGY3	PGY4	FE, OE
Recognize and manage tick-borne illness including Lyme Disease and Rocky Mountain Spotted Fever,	MC,MK	PGY1	PGY2	PGY3	PGY4	FE, OE
Recognize and manage viral infections including: <ul style="list-style-type: none"> • Mononucleosis • Influenz • Hantavirus • Herpes Simplex • Chicken pox and herpes zoster • Rabies • Roseola • Rubella 	MC,MK	PGY1	PGY2	PGY3	PGY4	FE, OE
Recognize and manage protozoan infections including malaria and toxoplasmosis	MC,MK	PGY1	PGY2	PGY3	PGY4	FE, OE
11.0 MUSCULOSKELETAL DISORDERS (TRAUMATIC AND NONTRAUMATIC)						
Recognize and manage common adult and pediatric orthopedic injuries including open and closed fractures, sprains and infections.	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
Recognize and manage joint disorders including: <ul style="list-style-type: none"> • gout • septic arthritis • adult and juvenile rheumatoid arthritis • osteoarthritis 	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
Recognize and manage soft tissue infections including: <ul style="list-style-type: none"> • cellulitis • fasciitis • felon • paronychia • gangrene • tenosynovitis 	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
12.0 NERVOUS SYSTEM DISORDERS						

<p>Recognize and manage nervous system disorders including:</p> <ul style="list-style-type: none"> • Bell's palsy • trigeminal neuralgia • multiple sclerosis • headache • Hydrocephalus • dementia • Parkinson's disease • pseudotumor cerebri • meningitis • myelitis • dystonias • Guillain-Barre syndrome • myasthenia gravis • peripheral neuropathy • seizure disorders including febrile seizures and status epilepticus • spinal cord disorders including compression 	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
13.0 OBSTETRICS AND GYNECOLOGY						
<p>Recognize and manage complications of pregnancy including:</p> <ul style="list-style-type: none"> • Abortion • Ectopic pregnancy • Abruption placentae • Placenta previa • Preeclampsia, eclampsia, and HELLP syndrome • Infections • Rh isoimmunization. 	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
<p>Perform an emergency vaginal delivery including recognizing and managing complications including:</p> <ul style="list-style-type: none"> • malposition of fetus • nuchal cord • prolapse of cord • endometritis 	PC,MK	PGY1	PGY2	PGY3		FE, OE

<ul style="list-style-type: none"> • hemhorrhage • uterine rupture 						
Recognize and manage disorders of the female genital tract including: <ul style="list-style-type: none"> • pelvic inflammatory disease and tubo-ovarian abscess • ovarian cyst • ovarian torsion • Bartholin’s abscess • vaginitis • vaginal bleeding. 	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
14.0 PSYCHOBEHAVIORAL DISORDERS						
Recognize and manage psychobehavioral disorders including: <ul style="list-style-type: none"> • alcohol dependence • eating disorders • acute psychosis • bipolar disorder • depression • suicide risk, • schizophrenia • drug-seeking behavior • anxiety disorder • delirium • dementia 	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
Recognizes patterns of and utilizes appropriate resources in the management of of child abuse, intimate partner violence, elder abuse, and sexual assault	PC,MK,SBP	PGY1		PGY2	PGY3	FE,NE,OE
15.0 RENAL AND UROGENITAL DISORDERS						
Recognize and manage renal and urogenital disorders including: <ul style="list-style-type: none"> • acute and chronic renal failure • complications of hemodialysis • urinary tract infection including pyelonephritis • glomerulonephritis 	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE

<ul style="list-style-type: none"> • nephrotic syndrome • prostatitis • benign prostatic hypertrophy and urinary retention • testicular torsion • Fournier’s gangrene • nephrolithiasis • balanitis • phimosis and paraphimosis • priapism 						
16.0 THORACIC-RESPIRATORY DISORDERS						
Recognize and manage pulmonary disorders including: <ul style="list-style-type: none"> • pulmonary embolism • pneumonia • pneumothorax • chronic obstructive pulmonary disease • asthma • airway foreign bodies • septic emboli • mediastinitis • pertussis • croup and bronchitis • pulmonary hypertension 	MK,PC	PGY1	PGY2	PGY3	PGY4	FE, OE
17.0 TOXICOLOGIC DISORDERS						
Recognize and manage patients with a suspected poisoning or overdose including: <ul style="list-style-type: none"> • Acetaminophen • Alcohols • Anticoagulants • Anticonvulsants • Antidepressants • Antihistamines • Antipsychotics • Carbon monoxide • Cardiovascular drugs 	MK,PC,SBP	PGY1	PGY2	PGY3	PGY4	FE, OE

<ul style="list-style-type: none"> • Caustic Agents • Cocaine • Cyanides • Hallucinogens • Heavy Metals • Herbicides • Hydrocarbons • Iron, • Isoniazid • Lithium • Mushrooms • Neuroleptics • Opiates • Organophosphates • Salicylates • Sedatives/Hypnotics 						
18.0 TRAUMATIC DISORDERS						
Manage adult and pediatric traumatic resuscitations	PC, MK	PGY1	PGY2	PGY3	PGY4	FE,NE,OE,PE
Communicates effectively as Leader of Trauma Team Leader	ICS ,SBP		PGY2	PGY3	PGY4	FE,NE,OE,PE
Recognize and manage adult and pediatric traumatic disorders including: <ul style="list-style-type: none"> • abdominal penetrating and blunt injuries • thoracic blunt and penetrating injuries • pericardial tamponade • pneumothorax • facial fractures • dental fractures • genitourinary trauma • head trauma • spinal injuries • amputations 	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE

Stratify by severity and manage patients presenting with chemical, electrical and thermal burns. Initiates transfer to burn center when indicated.	SBP,MK,PC	PGY1	PGY2	PGY3	PGY4	FE, OE
Understand the principles of Medical Direction and Triage during a Mass Casualty Incident	SBP,MK,PC	PGY2	PGY3			
PROCEDURAL SKILLS						
Perform ED trauma procedures including: <ul style="list-style-type: none"> • tube thoracostomy • lateral canthotomy • central venous access • thoracotomy • intraosseous venous access 	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
Manage the patient with an uncomplicated airway by endotracheal intubation.	PC, MK	PGY1		PGY2	PGY3	FE, OE
Manage the patient with an uncomplicated airway by endotracheal intubation. Manage the patient with the difficult airway using: <ul style="list-style-type: none"> • laryngeal mask airway techniques • fiberoptic laryngoscopy • gum elastic bugie • cricothyroidotomy 	PC, MK	PGY1	PGY2	PGY3	PGY4	FE, OE
Perform rapid sequence intubation (RSI) including the use of paralytic and induction agents.	PC,MK	PGY1	PGY2	PGY3	PGY4	FE, OE
Manage patients with non-invasive ventilation techniques including CPAP (Continuous Positive Airway Pressure) and BiPAP (Bi-level Positive airway Pressure)	PC,MK	PGY1	PGY2	PGY3	PGY4	FE, OE
Close simple lacerations.	PC,MK		PGY1	PGY2	PGY4	FE
Close complex lacerations	PC,MK		PGY2	PGY3	PGY4	FE
Perform bedside Ultrasonography for indications including: <ul style="list-style-type: none"> • trauma (FAST) 	PC, MK	PGY1	PGY2	PGY3	PGY4	FE

<ul style="list-style-type: none"> • biliary disease • hydronephrosis • vascular access • cardiac function • pericardial disease • deep vein thrombosis (DVT) 						
INTERPERSONAL AND COMMUNICATION SKILLS						
Performs a focused EM history	PC, MK,C		PGY1		PGY2	FE,OE,
Communicates presentation effectively to attending physician.	PC, MK,C		PGY1		PGY2	FE,OE,
Communicates effectively with other members of the ED team including techs, nurses, scribes and clerks.	ICS			PGY1		FE,NE,PE
Utilizes translation services effectively when taking care of non-English speaking patient.	PC,ICS, SBP,P				PGY1	FE,PE,NE
Effectively communicates bad news including death telling.	ICS		PGY2	PGY3	PGY4	FE,NE,OE,PE
PROFESSIONALISM						
Maintain patient privacy and confidentiality in the ED.	P			PGY1		NE,PE,FE
Maintains professional standards for residents including promptness and proper dress in the ED.	P			PGY1		FE,NE,PE
SYSTEM-BASED PRACTICE SKILLS						
Understand and apply the principles of ED operations such as information management, patient throughput and crowding, safety and security.	SBP	PGY3	PGY4			FE,PE
Work efficiently in the ED to ensure efficient patient flow.	SBP	PGY1	PGY2	PGY3	PGY4	FE,NE,PE
Provides cost effective care in the ED when ordering diagnostic tests.	SBP, PBL	PGY1	PGY2	PGY3	PGY4	FE,PE,OE,NE
Effectively communicates patient hand-offs with ED residents at shift change, and in disposition of care to other services.	P, ICS, SBP			PGY1	PGY2	FE,PE,OE
Utilizes a scribe in effective patient charting.	ICS, SBP			PGY3		NE,FE
Apply the principles of patient safety in the ED	SBP,PC		PGY1		PGY2	FE,

Teach medical students, and other residents in the ED.	ICS , MK		PGY1	PGY2	PGY4	FE,PE
Understand the principles of end-of-life care including advanced directives and palliative care.	SBP,PC,MK	PGY1	PGY2	PGY3	PGY4	FE, NE,OE

PC Patient Care

MK Medical Knowledge

SBP System Based Practices

P Professionalism

ICS Communication

PBL Practice Based Learning and Improvement

FE Faculty Evaluations

NE Nursing Evaluation

OE Oral Examination

Assessment

Monitoring of the accomplishment of the stated objectives will be performed using the following methods:

1. Global Rating: end of rotation evaluation of resident with respect to the stated objectives by EM faculty and nursing staff.
2. Procedure Logs: the number of completed procedures will be monitored.

Please refer to attached chart at the end of this document for more details.