



Department of Emergency Medicine Queen's University

Emergency Medicine Clerkship Rotation Guidelines

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**DEPARTMENT OF EMERGENCY MEDICINE
QUEEN'S UNIVERSITY**

**TABLE OF CONTENTS
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- 1) [OVERALL AIMS](#)
- 2) [ORGANIZATION](#)
 - a. [Time off requests](#)
 - b. [Orientation](#)
- 3) [CLINICAL SHIFTS](#)
 - a. [Clinical Responsibilities](#)
- 4) [INTERPROFESSIONAL SHIFTS](#)
 - a. [ECG technologist shift](#)
 - b. [Phlebotomy shift](#)
 - c. [ER triage/PCA shift](#)
 - d. [ER nursing shift](#)
 - e. [ER nurse practitioner shift](#)
 - f. [Social Work shift](#)
 - g. [Procedure shift](#)
- 5) [TEACHING](#)
 - a. [Clinical shift teaching](#)
 - b. [Self-directed learning](#)
 - c. [Learning modules](#)
 - d. [Emergency Medicine grand rounds](#)
 - e. [Junior resuscitation drills](#)
- 6) [ASSESSMENT:](#)
 - a. [Clinical shifts](#)
 - b. [Interprofessional shifts](#)
 - c. [Learning modules](#)
 - d. [Exam](#)
 - e. [Mid-rotation feedback](#)
 - f. [End-rotation assessment](#)

ROTATION GOAL:

At the end of this clerkship rotation in Emergency Medicine at Queen's University, you will demonstrate skills in assessing, problem formulation, management and disposition of undifferentiated patients with acute illness. This is a unique opportunity for you to practice and improve your skills in decision-making and clinical reasoning.

Emergency Medicine focuses on recognizing, evaluating, and caring for acutely ill patients and often undifferentiated. The patient population ranges from pediatrics to geriatrics and encompasses various illnesses, from chronic disease to critical condition. It is a high-pressure, fast-paced specialty that requires a broad base of medical knowledge and technical skills. Emergency Physicians are first-contact physicians who care for patients of all ages and a nearly infinite variety of conditions and degree of illness - often before a definite diagnosis is made. The services provided in the Emergency Department are an essential link in the health care continuum between community resources and hospital-based resources.

This rotation in Emergency Medicine allows you to evaluate a variety of patients presenting with undifferentiated illness. You will work closely with Emergency Physicians and senior residents to function in an environment that combines appropriate autonomy with supervision. You will have the opportunity to perform a variety of technical skills under direct supervision. Additionally, you will have a chance to work alongside various interprofessional colleagues who also support patients in the Emergency Department.

ORGANIZATION

The clerkship rotation in Emergency Medicine is four weeks long. During this rotation, you are expected to work a minimum of 8 and a maximum of 12 **clinical shifts** in the Emergency Department at Kingston General Hospital or the Urgent Care Centre at the Hotel Dieu Hospital.

You are also expected to participate in several interprofessional learning shifts, including shifts with ER nursing, triage, social work, ECG technologists and phlebotomists.

Teaching during this rotation will include **self-directed learning** (including learning modules), a **teaching shift** with faculty, **Emergency Medicine grand rounds** and **resuscitation simulation**.

Time-off requests

To request any Personal Days or Conference Leave during your rotation in Emergency Medicine, please contact Tara Callaghan, Clerkship Curriculum Coordinator at UGME, for approval. Their email address is ugme.clerkship@queensu.ca.

Link to [Time-off form](#)

Orientation

An orientation to the Emergency Medicine rotation will be held once at the beginning of the block. Questions regarding the EM rotation can be directed to Catie Hannaford (Program Coordinator) Department of Emergency Medicine, Victory 3, KGH, ext. 8118.

CLINICAL SHIFTS

The Emergency Medicine rotation is preceptor based. You will be assigned to a group of 2-3 faculty preceptors with whom they will do their clinical shifts. Everyone will be assigned eight shifts with their preceptors, and the schedule will be posted to Elentra. You will also be provided with your group's scheduled shifts and have the opportunity to pick up an additional four shifts (maximum of 12 clinical shifts per 4 weeks) if you wish to do so.

***Please do not request to work the HDH evening shift or the KGH night shift unless explicitly approved to do so by your faculty preceptor.**

Please be aware that faculty often trade/change shifts. Every effort will be made to avoid having the students' shifts affected and communicate changes quickly. If you opt to do extra shifts, communication with your faculty preceptors and Tiffany Roy is crucial so that schedules are appropriately updated. Additionally, as per UGME guidelines, clerks are not permitted to work "back-to-back" shifts (i.e., two shifts in the same calendar day) or to "short shift" with less than 12 hours between the finish time of one shift and the start time of the next.

Shifts are scheduled seven days a week. You are expected to work a minimum of one weekend during their rotation, and this may include the final Sunday of the block. If this interferes with travel plans to the next rotation, please advise Catie Hannaford ASAP to make alternate arrangements.

Clinical Responsibilities

1. Please report to your faculty preceptor on the first clinical shift of your rotation. Your faculty preceptor will give you a brief introduction to the Emergency Department and its operation.
2. It is expected that you will complete your EDIS training module and familiarize yourself with the system before your first shift. The EDIS module can be found at the following link (minimum usage requirement Google Chrome 17, Internet Explorer 9, Safari 5.1)
<https://www.dropbox.com/s/pgse6myenpsimpz/Residents%20NPs%20and%20clerks%20EDIS%20Overview%20and%20documentation%20v.1.pptx?dl=0>
3. You will work under the direct supervision of your faculty preceptors and occasionally senior residents.
4. You will assess patients and present their clinical findings, differential diagnosis and management plans to their faculty preceptors. Patients' conditions may deteriorate while they await assessment. If you find yourself in a situation where you are concerned that a patient is unstable or sicker than your level of comfort, find your faculty preceptor before you complete your assessment.

5. You **SHOULD NOT** order diagnostic tests or therapy before discussion and approval by their preceptors. Do not promise testing or therapy to patients before reviewing with preceptors.
6. You **SHOULD NOT** have more than one un-reviewed patient at a time. This means you cannot see a patient other than another before reviewing the first patient with your faculty.
7. You will record their histories/physicals/impressions and plans in the Emergency Department chart on EDIS. Please be clear and concise.
8. NO patient should be discharged before reviewing with preceptors.
9. It would be best if you always behaved professionally. This includes wearing proper attire (scrubs, professional attire – no jeans) and identifying name tags, appropriate communication with the patient and their relatives, attention to the patient's safety and confidentiality and the practice of useful infection control techniques.
10. During the COVID-19 pandemic, you will not be expected to assess patients in the departments' COVID assessment areas (section C at KGH and back hallway at HDH). Furthermore, you will not participate in "protected" COVID19 intubations or resuscitations for your safety and to preserve the PPE supply.

INTERPROFESSIONAL SHIFTS

Emergency Medicine is an interprofessional practice. Students are expected to participate in several interprofessional learning shifts during their 4-week rotation in Emergency Medicine. These shifts are self-scheduled, but the student is expected to complete them all before the end of the rotation. The schedule sign-up is done via Doodle Poll and will be sent to you so you can sign-up. The number of students permitted to attend specific shifts is limited to one per shift to overwhelm various services with learners. These will be assigned in a first-come, first-serve priority.

You will participate in at least one of all the following interprofessional shifts:

- a. ECG technologist
- b. Phlebotomist
- c. ER triage/PCA
- d. ER nursing
- e. ER nurse practitioner
- f. Social Worker
- g. Procedure shift with resident

a) ECG technologist shift

Please call Voicera ext. 1335 and ask for ECG East. The technologist will show you how to operate the ECG machine. You are expected to perform and interpret 10-15 ECGs during your shift. Although not mandatory, you can receive feedback on your ECG interpretation for additional learning by sending them to Dr. Rahmani electronically.

Please review your ECG module before this shift – [Analysis and Interpretation of the Electrocardiogram](#)

Interprofessional assessment form: [IP ECG.docx](#)

Interprofessional Shadow Feedback Form-ECG: [Shift Form](#)

b) Phlebotomist

Please call Voicera ext. 1335 and ask for ER Phlebotomy. The phlebotomist will show you how to select an appropriate vein, cleanse the skin and draw blood. You will be expected to perform 10-15 blood draws during the shift. Additionally, you will have the opportunity to go to the core lab and see the samples' processing.

Please review the following information before this shift:

Pre-analytical Variables [Document #1](#)

IP- Quick Phlebotomy Guide for Med Students [Document #2](#)

IP - BLOOD CULTURE COLLECTION [Document #3](#)

Interprofessional assessment form: [IP Phlebotomy.docx](#)

c) ER triage nurse/ Personal Care Assistant

Go to Charge Nurse in ER at A desk, and they will assign you. During this shift, you will spend the first half working with the ER personal care assistants. You will have the opportunity to learn how to safely ambulate patients, move patients in bed, bathe, toilet and feed patients. Students will observe the ER triage process during the second half of the shift and learn about triage principles and the CTAS score.

Interprofessional assessment form: [IP ER .docx](#)

d) ER Nursing

Go to Charge Nurse in ER at A desk, and they will assign you. During this shift, you will have the opportunity to participate in several clinical experiences that will depend on the department's patients at the time of their shift. The available experiences include:

- Taking ambulance reports and complete follow through with assessment, documentation and initial care for the patient
- Assist in the set-up of bedside monitoring devices and intravenous infusions.
- Taking vital signs
- Starting IVs on patients
- Assisting in putting Pinel restraints on patients
- Assisting with cardioversion
- Measuring peak flows
- Applications of air casts, cervical collars, slings/immobilizers
- Foley catheter insertion and care/ bladder scanning
- Blood glucose monitoring
- Application of dressings
- Suture/staple removal
- Eye and ear irrigation
- Assisting in conscious/procedural sedation and capnography monitoring

Please review your module on [IV Access](#) and [Urinary catheterization](#) before your shift

Interprofessional assessment form: [IP ER .docx](#)

e) ER Nurse Practitioner

Please call Voicera ext. 1335 and ask for Danny Quann. During this shift, you will have the opportunity to participate in the interdisciplinary team (social work, physiotherapy and occupational therapy) to manage long-stay ER patients needing placement or increased support before discharge. You will also participate in the reconciliation of test result discrepancies in the ER. If appropriate to the department's flow, you will assess lower acuity patients under the nurse practitioner's supervision.

Interprofessional assessment form: [IP ER .docx](#)

f) Social Work:

Please ask the unit clerk in Section A to page Mental Health SW. Depending on departmental flow, you will have an opportunity to observe and participate in various ER social workers' tasks. These tasks may include mental health risk assessments, trauma/crisis intervention, discharge planning, resource facilitation, elder abuse assessments, child protection assessments, and end-of-life/palliative discussion.

Please read the following articles before your social work shift:

https://www.uhn.ca/corporate/News/Pages/Social_work_Emergency_Department_connects_patients_support.aspx

<https://documentcloud.adobe.com/link/review?uri=urn:aaid:scds:US:54f19617-41b2-4a23-9d17-dc650cc06c07>

<https://documentcloud.adobe.com/link/track?uri=urn:aaid:scds:US:59a936bd-af27-450c-88b6-d2042e4d7fc8>

<https://documentcloud.adobe.com/link/track?uri=urn:aaid:scds:US:0d8721ab-aab4-447b-8621-75aed390815b>

Interprofessional assessment form: [IP ER .docx](#)

g) Procedure shift:

You will meet the ER-resident at the HDH UCC desk at 12:30 on the day of their scheduled shift (please refer to individual schedules). During this shift, students will not primarily assess patients. Under the supervision of the resident, you will perform any procedures in the department. This would include laceration repair, cast application, abscess draining, tick removal etc. If there is downtime, you will have the opportunity to learn necessary ultrasound skills and review ECGs and X-rays with the resident.

Please review [Basic Suturing \(test\)](#) module and the [Casting module](#) before your procedure shift.

Interprofessional assessment form: [IP ER .docx](#)

TEACHING:

Clinical shift teaching:

Most of the teaching in this rotation happens at the bedside during clinical shifts. You are expected to perform focused histories and physical examination, formulate a differential diagnosis (with consideration of potentially life-threatening pathologies) and propose a management and disposition plan for each of your patients. You are expected to provide an organized oral presentation to their staff following each clinical encounter and complete the electronic chart visit documentation.

By the end of the rotation, you should have a basic organized approach to common emergency presentations. These presentations include:

- a. Chest pain
- b. Shortness of breath
- c. Acute abdominal pain
- d. Headache
- e. Eye complaints (i.e., eye pain/visual loss)
- f. Ear/nose /throat complaints (i.e., epistaxis/pharyngitis/otitis media)
- g. Fever
- h. Musculoskeletal pain or injury
- i. Psychiatric illness (i.e., depression/anxiety/schizophrenia/ assessment of suicide risk)
- j. Poisoning/overdose
- k. Geriatric assessment

You should make every effort to see at least one example of these presentations during your rotation. If there are presentations students need to see, advising faculty preceptors at the beginning of a shift may facilitate finding appropriate patients.

The following resources are helpful to review before your clinical shifts:

Approach to the Undifferentiated Patient

<https://www.saem.org/cdem/education/online-education/m3-curriculum/group-approach-to-the-undifferentiated-patient/approach-to-the-undifferentiated-patient>

How to present cases in the ER:

<https://www.saem.org/cdem/education/online-education/medical-student-presentations-video>

How to get the most out of your Emergency Medicine Clerkship:

<https://www.saem.org/cdem/education/online-education/m3-curriculum/motivation/how-to-get-the-most-out-of-your-emergency-medicine-clerkship>

Self-directed learning:

While you will receive bedside teaching and a high degree of clinical supervision during the rotation, it is your responsibility to do independent reading around these clinical presentations and review the appropriate technical skills modules.

It is expected that you will review the approach to 10 cardinal Emergency Department presentations on the Flipped EM Classroom - <https://flippedemclassroom.wordpress.com>. The Flipped EM Classroom is an excellent resource and provides a virtual platform for core knowledge. The whiteboard presentations are concise and relevant.

Another excellent resource is the Clerkship Directors of Emergency Medicine (CDEM) curriculum, which can be found at <https://www.saem.org/cdem/education/online-education/m4-curriculum>. It is excellent for students as its content focuses on clerkship. Videos, diagrams and notes are provided.

Learning Modules:

Mandatory learning modules for your EM rotation are the four listed below. It is expected that the attached quizzes will be completed **before** the end of the 4-week rotation.

https://elentra.healthsci.queensu.ca/community/clerkshipperiop/resources/mandatory_modules_quizzes

- **Module 1: Carpal Bones**
- **Module 2: Radiographic Examination of Ankle Bones**
- **Module 3: Analysis and Interpretation of the Electrocardiogram**
- **Module 4: Pediatric Elbow Radiology**

Additionally, several self-learning modules are relevant to your rotation and interprofessional skills. These should be reviewed/completed during your rotation. These can be found on Elentra and include:

1. [Basic Suturing \(test\)](#)
2. [Basic Airway Management \(test\)](#)
3. [IV Access](#)
4. [Arterial Blood Gases](#)
5. [Lumbar Puncture \(quiz\)](#)
6. [Advanced Airway Management](#)

7. [Analysis and Interpretation of the Electrocardiogram*](#)

Emergency Medicine Grand Rounds

These educational rounds occur every Thursday at 08:30 am from September to June and cover several topics per session relevant to the practice of Emergency Medicine. Please check the Department of Emergency Medicine website for the teaching schedule as there are sometimes changes. (<https://emergencymed.queensu.ca/schedules/rounds-conferences>)

During the COVID-19 pandemic, these rounds are being offered via Zoom. The information and links will be sent to you weekly via email.

Teaching shift:

During this 4-hour shift, you will be observed by a faculty member making a relevant history and focused physical examination on an emergency department patient. This will allow you to complete your Mini-CEX. You will then present their findings, develop a differential diagnosis and propose a management plan. The faculty will provide immediate feedback and complete the Mini-CEX form.

These shifts are **scheduled** and can be found on Elentra. They are **mandatory** and difficult to reschedule, so attendance is crucial.

Junior Resuscitation Drills:

These interprofessional resuscitation simulations occur every Friday from 08:00-10:00 at the Simulation Centre located on the 2nd floor of the School of Medicine, Debriefing Room 200. They cover topics such as cardiac arrest, tachycardias and bradycardias.

Due to COVID, there is a limit of two students per week. You can sign up on a first-come, first-serve basis and will be provided with the Doodle poll information at the beginning of your rotation.

Casting Sessions:

During this session, you will work with a casting technologist. The technologist will demonstrate the application of a short arm cast, and then you will have the opportunity to practice applying a cast on a classmate. These sessions will be scheduled on Elentra. Please ensure to sign the attendance sheet during the session.

Radiology Teaching:

You will have the opportunity to attend Radiology Grand Rounds. Although not a mandatory part of your rotation, you are encouraged to attend. Access will be granted to two ER clerks per week to the MS Teams Radiology Resident group where the rounds and half day are presented.

Per week there are 4 staff lectures at noon and academic half day.

https://urldefense.proofpoint.com/v2/url?u=https-3A__radiology.queensu.ca_academics_radiology_education-5Fschedule&d=DwIGaQ&c=JZUmuHfvZaOkNOGiUpQbGyGsM8Jf9oFbjpAib-DiM1Q&r=zS2_c1rCXNITzcnEs94tkyxaiEfM9khQ-PIW35yUV1A&m=GbbQZViuy_AMHjeogW9wwY5uDybvVH1GIRR4NwAUfLc&s=OHJWScxA3SqOmXcTEVZQ6_QXCTiSliSwMIaDuqPQeR4&e= .

ASSESSMENT:

1) Clinical shifts

Trigger a daily EM Shift report assessment form in Elentra for each shift worked. All forms must be completed by the end of the rotation. They are a marker of attendance as well as feedback for learning.

2) Interprofessional Shifts

Bring an interprofessional assessment form to these shifts and have them completed by the provider at the end of the shift.

There are specific forms for the ECG shift and the phlebotomy shift. All other shifts share the same form. All these forms can be found on Elentra:

<https://elentra.healthsci.queensu.ca/community/clerkshipperiop:documents?section=view-folder&id=5221>

By the end of the rotation, students should have a total of 7 interprofessional assessments completed. It is the student's responsibility to ensure that these forms are returned to Catie Hannaford on time. They can either be dropped off in-person to Victory 3 or emailed in PDF form to Catie.Hannaford@kingstonhsc.ca. These shifts are a requirement of the rotation, and you will not complete the rotation without these assessments.

3) Learning Modules

These four modules and associated quizzes must be completed by the end of the rotation for the student to complete the rotation.

4) Exam

There is an Emergency Medicine exam at the end of the rotation, which consists of MCQ's and SAQ's. This exam covers the teaching done in the rotation and self-directed learning around the common emergency presentations outlined above.

5) Mid-rotation feedback

Done on Elentra with faculty preceptors. You should arrange a mutually agreeable time with their preceptors after your first four clinical ED shifts.

6) End rotation feedback

It will be scheduled at the end of the rotation with Dr. Rahmani.