MCMASTER UNIVERSITY:  
CCFP(EM) RESIDENCY TRAINING PROGRAM

Objectives: Tertiary Care Emergency Medicine Rotation

1. Medical Expert
   a. Demonstrate diagnostic and therapeutic skills for ethical and effective patient care.

   b. Access and apply relevant information to clinical practice.

   c. Demonstrate effective consultation services with respect to patient care, education and legal opinions.

   d. The Emergency Medicine Resident will demonstrate knowledge regarding:
      
      i. The pathophysiology of disease and injury

      ii. The prompt recognition of acute illness and injury

      iii. The natural history of disease and illness

      iv. Specific clinical presentations

      v. The principles of resuscitation

      vi. The principles of investigations

      vii. The principles of diagnosis and management decisions

      viii. The requirements for follow up care

      ix. The principles of emergency department organization with respect to the corporate hospital structure

      x. The principles of quality assurance, risk management, and standards of care

      xi. The relationship of the emergency department with the EMS

   e. The Emergency Medicine Resident will:
      
      i. Demonstrate competence and efficiency in physical examination of the patient including special examination techniques for specific diagnoses

      ii. Develop appropriate differential diagnosis and initiate comprehensive management of:
1. Acute illness/injury
2. Traumatized patients
3. Acute age related disorders
   a. Paediatrics
   b. Geriatrics
4. Toxicological disorders
5. Environmental disorders
   iii. Function as team leader for all resuscitation
   iv. Function in the capacity of the emergency physician with responsibility for management of the Department during a shift
   v. Perform a clinical assessment and collect all appropriate information
   vi. Perform Consultations
   vii. Create appropriate Records and reports
   viii. Supervising and teaching interns and clinical clerks
f. Demonstrate the following techniques:
   i. Airway management; rapid sequence intubations
   ii. Analgesia; conscious sedation
   iii. Anaesthesia; local/nerve blocks
   iv. Arterial access; arterial puncture and arterial line
   v. Bites: animal/human
   vi. Bladder catheterization/irrigation
   vii. Chest decompression
   viii. CPR
   ix. Dental trauma
   x. Epistaxis management
   xi. Fracture stabilization/reduction/immobilization
xii. Gastric lavage

xiii. Joint aspiration

xiv. Joint dislocation/immobilization

xv. Removal of foreign bodies: skin, eye, ear

xvi. Slit lamp

xvii. Tonometry

xviii. Venous access; peripheral and central

xix. Wound management; abscess/infection, suturing

2. Communicator
   a. Communicate effectively and compassionately with the patient and family

   b. Establish therapeutic relationships with patients/families.

   c. Obtain and synthesize relevant history from patients/families/communities.

   d. Listen effectively.

   e. Discuss appropriate information with patients/families and the health care team.

   f. Manages concerns, conflict, and/or complaints within the multi-disciplinary team and with patients/family.

3. Collaborator
   a. Understand the importance of a multidisciplinary team and interact effectively with physicians, nurses, and other health professionals

   b. Consult effectively with other physicians and health care professionals.

   c. Contribute effectively to other interdisciplinary team activities.

   d. Be able to function as the base hospital physician for the EMS
4. Manager
   a. Allocate finite health care resources wisely.
   b. Manage the entire emergency department during a shift with respect to flow, efficiency, and best patient care
   c. Understand the basic principles of quality assurance/risk management issues
   d. Utilize information technology to optimize patient care, life-long learning and other activities
   e. Utilize resources effectively to balance patient care, learning needs, and outside activities.
   f. Work effectively and efficiently in a health care organization.

5. Health advocate
   a. Contribute effectively to improved health of patients and communities.

   For questions or comments, please contact:
   b. Develop an understanding of the bioethical issues affecting patients.
   c. Identify the important determinants of health affecting patients.
   d. Recognize and respond to those issues where advocacy is appropriate.
   e. Demonstrate an understanding of the support services in the community such as CCAC (Homecare), homeless shelters, detox services for patients being discharged from the ED
   f. Understand various approaches to health care advocacy and policy change

6. Scholar
   a. Apply best practice to patient care decisions, based on critical appraisal of relevant literature.
   b. Contribute to development of new knowledge.
   c. Demonstrate the skills of self-assessment and self-directed learning by identifying their own areas of improvement and addressing them with resources available.
   d. Develop, implement and monitor a personal continuing education strategy.
   e. Facilitate learning of patients, medical trainees/students and other health professionals.
7. Professional

a. Deliver highest quality care with integrity, honesty and compassion.

b. Demonstrate the maturity and responsibility expected of all professionals, through;

i. Reliability, punctuality, and attendance

ii. Self-assessment and insight

c. Exhibit appropriate personal and interpersonal professional behaviours.

d. Practice medicine ethically consistent with obligations of a physician

e. Demonstrate understanding of;

i. The concepts of informed consent in the care of children, adults, and the elderly

ii. Advanced directives, DNR requests, and their application to the care of patients

iii. And be to explain what is involved in the withdrawal of care.

iv. The concept of futility and apply it to emergent situations

For questions or comments, please contact:

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