

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
 - vi. Chest decompression
 - vii. CPR
 - viii. Dental trauma
 - ix. Epistaxis management
 - x. Fracture stabilization/reduction/immobilization
 - xi. Gastric lavage
 - xii. Joint aspiration
 - xiii. Joint dislocation/immobilization
 - xiv. Removal of foreign bodies: skin, eye, ear
 - xv. Slit lamp
 - xvi. Tonometry
 - xvii. Venous access; peripheral and central
 - xviii. 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 health care team.
- f. Manage concerns, conflicts, and/or complaints within the multi-disciplinary team and with patients/family

3. Collaborator

- a. Understand the importance of 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 within the community

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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