

Clinical Rotation Summary

Rotation	Emergency Medicine							
Institution	Various Community Sites							
Year of training	EM1		EM2	✓	EM3			
<p>Educational goals:</p> <p>Develop competency to practice in a community emergency department environment. This includes aspects unique to community emergency medicine practice such as communicating with staff consultants and having a limited number of physicians in the Emergency Department.</p> <p>Educational objectives:</p> <ol style="list-style-type: none"> 1. Demonstrate appropriate knowledge and skills to resuscitate patients with acute life-threatening emergencies. (PC, MK) 2. Demonstrate appropriate knowledge and skills to treat patients with urgent or acute medical or surgical problems. (PC, MK) 3. Demonstrate procedural skills used in caring for patients with emergent or urgent medical or surgical problems. (PC, MK) 4. Participate in didactic conferences through case presentations and/or didactic lectures. (MK, PBL) 5. Participate in patient transfer calls. (MK, SBP) 								
<p>Description of clinical experiences:</p> <p>Residents have the opportunity to see all types of patients. They are supervised by attending staff. They manage patients primarily. Clinical duties should average 40 clinical hours per week and adhere to ACGME duty hours regulations. Residents may take vacation or may be pulled for back-up from this rotation.</p>								
<p>Description of didactic experiences:</p> <p>A minimum of five hours of didactic conferences is held each week. All residents are excused from clinical duties for didactic conferences and are expected to attend.</p>								
<p>Evaluation process:</p> <p>Residents receive written summative evaluations after completion of the rotation in the Hudson Hospital ED. They are evaluated on their knowledge base, performance of procedural skills appropriate for their level of training and professional attitudes. Residents are responsible for keeping track of all procedures performed. These logbooks are reviewed at least twice a year by the Program Director. Annual oral examinations, the national in-service examination, and case presentations at conference are also used to evaluate residents.</p>								
<p>Feedback mechanisms:</p> <p>The faculty on duty in the Emergency Department provides immediate formative feedback on clinical performance. Such feedback is considered most important in the resident's education. Several times during the year residents meet with their preceptors. In addition, the Program Director meets with each resident twice each year to review the department's evaluation of the resident.</p>								
<p>Rosh Review: Self-assigned questions</p>								