

# PGY-1 Survival Guide - KCHC

## ED Peds

### Hours/Locations

- Work eighteen 12 hour shifts. Day shifts: 7A to 7P, night shifts: 7P to 7A. Arrive at 6:45 to sign on and settle in.
- Rounds: 7AM, 3PM, 7PM, 11PM (attending and senior resident change of shift)
- M/T/Th/F go to "Morning Report" presented by senior resident, usually in the Peds Asthma Room immediately after 7 am rounds.
- On rounds goal is to ensure all patients are followed. Pt's are either "To Be Seen", "Admitted for x", "Attending sign outs" or "Resident sign outs"

### Attire: Scrubs

**Responsibilities** Goal for the end of the year: Provide high quality care for "bread & butter" complaints for a patient an hour. In the future, you will be expected to manage patient flow, but as an intern, your main job is to learn.

- Log on and sign into EPIC
- Right-click on a patient's name and click "assign-me". Click on "Treatment team" to assign your attending as a cosigner.
- If PEM fellow is on shift, assign them to your patient and present to them, they will present to attending.
- Pick up patients that have a nurse assigned to them, prioritize patient ESI level 2 or abnormal vitals, and patients that have been waiting the longest
- Write your "Initial assessment" (HPI)
- Write "Progress note" with updates, make sure to write procedure notes if you do procedures
- "Disposition": Must write "Dispo note" for every patient when discharging/admitting. Write prescriptions in this section as well, verify pharmacy.
- To make a referral to an ambulatory clinic, under Dispo tab go to "orders" and search "ambulatory care referral to \_\_\_\_" and select

the specialty. Non-e-referral appts are made by the clerk. Ambulatory Clinic schedules are available on clinical monster.

- When discharging, you can find patients' CC and include educational info for the patient on discharge instructions, give discharge paperwork to nurse so they can have parents sign it, but explain return precautions yourself.

### Tips/Helpful Stuff

- Put in "Insert Peripheral IV" order if you want an IV.
- Type & Screen must be signed (legibly) and have date and time or they will be discarded by blood bank.
- Send labs via chute to: blood gas (30) (if it contains a VBG/ABG) or chemistry (33)
- May have to call lab to verify if they received labs, and for "add on" labs
- Labs. "Collected" – scanned (maybe collected, maybe not), "In Process" – Running, in lab, "Final result" – Done.
- Procedure consents and procedure note templates are found on Clinical Monster

### Memorize these:

- Tylenol: 15 mg/kg (suspension 160 mg/5ml)
- Ibuprofen: 10 mg/kg (suspension 100 mg/5ml)
- Dexamethasone (decadron) .6 mg/kg

### Quick extensions to know/to check on labs:

5342	Chemistry (chute labs #33)
5373	Hematology (chute labs #30)
3378	CT 1st floor
1405	Ultrasound 1st floor
4601	CCT
4645	X-Ray