



EMERGENCY MEDICINE CLERKSHIP MANUAL 2021 - 2022

BROOKDALE UNIVERSITY HOSPITAL AND MEDICAL CENTER



EMERGENCY MEDICINE CLERKSHIP MANUAL

CLERKSHIP LEADERSHIP

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CLERKSHIP COMMITTEE

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IMPORTANT NUMBERS

Adult ED: (718) 240-3224/6216

Pediatric ED: (718) 240-5364/3972

Students are expected to comply with clerkship, hospital, and rotation guidelines, satisfactory attendance and participation in clinical shifts and didactic sessions and conduct themselves in a manner that is appropriate for the institution and patient care, including written and verbal communications.

The following is the policy and procedures manual for the EM clinical clerkship; this information should be read in its entirety before the start of the rotation:

- I. Goals & Objectives
- II. Rotation Overview
- III. Clinical Schedule
- IV. Sick call policy
- V. Shift Requirements
 - 1. End-of-Shift Evaluations
 - 2. Reviewing Evaluations
- VI. Didactic Conferences
 - 1. Reading Material
- VII. Final Week of the Rotation
 - 1. Oral Presentations
 - 2. Examinations
- VIII. Final Grades
 - IX. EM SLOE
 - X. End-of-Rotation Meetings
 - XI. Interviewing at Brookdale Hospital

I. GOALS & OBJECTIVES

Through our EM clerkship, students will be able to:

- ✓ Gain an understanding of how the hospital works as a whole, starting from the Emergency Department (ED).
- ✓ Gain experience in performing a focused history and physical exam.
- ✓ Gain experience presenting their findings to attending physicians and advanced practice providers*
- ✓ Broaden their understanding of differential diagnosis and treatment plans
- ✓ Take advantage of the opportunity to perform and/or observe a wide range of procedures

People are willing to teach students and trainees who show interest, therefore, students should ask questions, stay involved, and be an **active** member of the team. If, at any time, this is not the case, students should notify the EM Clerkship Team.

^{*} The development of this skill is <u>critical</u>; though it is understood that everyone may not intend to practice emergency medicine, everyone can have a valuable and enjoyable experience during this clerkship rotation. There is something that can be learned from <u>every</u> patient. Students will see firsthand that though transitions in care for hospitalized patients are high-risk times, these occasions are opportunities to identify needed information and actively think about each patient's condition.

II. ROTATION OVERVIEW

Working in the Emergency Department offers the unique opportunity to evaluate the "undifferentiated" patient. The clinical environment is intense and, at times, will seem chaotic; however, students will be able to gain an understanding of how the hospital functions.

Students will also have opportunities to perform and/or observe a wide range of procedures and should plan to be proficient in some (i.e. IV placement) by the completion of the rotation. Common ER procedures include:

- Peripheral IV starts
- NG/OG tube placement
- Foley catheter placement
- CPR, ACLS protocols
- Central line placement
- Intubations
- Chest tube placement
- endotracheal intubations,

- central line placements,
- laceration repairs,
- reductions of dislocated joints and fractures,
- splint placements,
- lumbar punctures,

- nasogastric tube placements,
- US guided procedures,
- resuscitations of critically ill patients, and, likely,
- a few patient deaths.

Most of these procedures will not be appropriate for medical students to perform; therefore students should <u>always</u> ask their resident/attending before attempting any procedure or exam. Students should <u>never</u> perform a procedure without <u>direct supervision</u>. It is **imperative** during this rotation that students recognize their limitations as a student.

Furthermore, if a student finds him/herself working with a patient that s/he feels is too sick to proceed (whether due to pain, shortness of breath, acuity of the complaint, or any other reason), s/he should <u>immediately</u> inform the resident or attending with whom s/he is working. *It is the responsibility of every medical provider to remember that the patient ALWAYS comes first.*

III. CLINICAL SCHEDULE

Our rotations always begin on Mondays; while rotations are typically 4-weeks long, some PA program students, occasionally, complete 5 weeks. Students are assigned 12-hour shifts accordingly in the following areas of the ED:

	ED AREAS**				
PROGRAM/ INSTITUTION	TRAUMA & CRASH (AREA A)	ADULT MEDICINE (AREAS B & C)	FAST TRACK (LOW-ACUITY)	PEDS ER	TOTAL # OF SHIFTS
NYIT / SABA / SGU	4	6	2	2	14
SUNY DOWNSTATE	3	4	1	2	10
PA PROGRAMS	3	6	3	2	14

^{**} Emergency Psychiatry is an area of our ED, but students are **not** assigned shifts there.

Scheduling guidelines include the following:

- Students do not work more than 5 **consecutive** clinical shifts in a row.
- Each clinical shift **must** be separated by 8 hours.
- Clinical shifts start at 7 am or 7 pm.
- Swing shifts are usually scheduled after a didactic session, from 1 pm 7 pm.
- Students will only be scheduled for 5 6 overnight shifts.

Many variables affect the schedule, including the number of students, residency interviews, USMLE/COMLEX testing, and students intending to apply for an EM residency. All best efforts are made to arrange a fair schedule for all students and avoid scheduling more than one student on a particular shift in order to prevent compromising the individual learning experience.

Once the schedule is distributed, it is each student's responsibility to review it and show up promptly for all assigned shifts. Students are not to contact the EM Clerkship Team regarding schedule changes.

To view the EM Resident/Attending schedule online:

1. Go to www.amion.com
2. Select Secure Login
3. Enter the password as brookem and select Login

Scheduling Messaging Help Order

IV. SICK CALL POLICY

If a student is ill and unable to attend a scheduled clinical shift or didactic session, s/he must email the EM Clerkship Team at EMClerkshipTeam@bhmcny.org and cc brookdalemedstudents@gmail.com and his/her medical school/clinical/program coordinator at least 4 hours prior to the start time of your shift.

Calling out sick more than three (3) times during this clerkship rotation may require withdrawal from and/or rescheduling of the rotation. All sick call shifts must be made up.

V. SHIFT REQUIREMENTS

Students are expected to adhere to the following requirements while on clinical duty:

- Arrive promptly/early; tardiness is **heavily** frowned upon. Students should introduce themselves to clinical staff (Residents, Attendings, NPs/PAs) and ask for the attending in charge (not applicable for *Fast Track*, which is only staffed by NPs/PAs).
- Participate in sign-out. The hand-off process is vital and students may be expected to provide care to the patients being discussed.
- Engage with the attending and residents during their shifts. Students should consider themselves as part of the team and are required to stay for the entire 12-hour shift. If a student needs to leave at any time before the shift ends, s/he **must** notify their supervising attending for that day.
- Be active on shifts, look up information, and take initiative and be prepared to:
 - see their own patients;
 - take a focused history and physical;
 - start formulating plans/ think of a differential diagnosis;
 - follow up on labs/imaging results; and,
 - assist with procedures.

In emergent situations, students may be asked to assist with drawing labs/IV placements, and/or transporting patients to radiology. However, students are not supposed to be errand persons. If this happens, students should inform the EM Clerkship Team.

- Be mindful that presenting a patient in the ED is different than in all other specialties. Guidance on how to present in the ED can be found at:
 - http://onlinelibrary.wiley.com/doi/10.1111/j.1553-2712.2008.00145.x/full
 - https://flippedemclassroom.files.wordpress.com/2013/08/acem_145_sm_datasupplements1.pdf

SHIFT EVALUATIONS:

At least 50% of each student's final grade will be calculated from an average of the <u>total</u> number of shift evaluations received. The instructions for requesting shift evaluations from Senior (PGY-3) Residents or Attendings are listed below. *Please note that Junior Residents (PGY - 1 & 2) or residents from other EM residency programs are <u>not</u> permitted to complete these evaluations.*

- 1. Email the Attending and/or Senior Resident (PGY -3) and include a one-line salutation addressing the clinician **and cc:** brookdalemedstudents@gmail.com.
- 2. Format the subject line as follows: Shift evaluation: LAST NAME, First initial date; _ shift.
- 3. List any procedures performed during the shift.
- 4. Attach a photo of yourself.
- 5. Include the link*** to the evaluation form: https://forms.gle/EVthyb5xW3N3cGh26

*** SUNY Downstate students should include the link provided by their school.

Failing to request the completion of shift evaluations on time increases the risk of an Attending/Senior Resident forgetting details about a student's clinical shift performance. Therefore, at the end of <u>each</u> clinical shift, students should ask their supervising Attending/PA/NP/Senior Resident (if working with *Locums* Attendings) for an email address by which they can provide the link to the *End-of-Shift* evaluation.

REVIEWING EVALUATIONS

The Clerkship Team will review any student's evaluation, *upon request*, and/or discussions regarding areas of improvement and rotation progress during the mid-rotation evaluation.

VI. DIDACTIC CONFERENCES

Dedicated student sessions involve videos and relevant cases, which must be viewed ahead of the scheduled didactic session. Didactics also include lectures, practical applications, Ultrasound (US) presentations, simulation cases, and, occasionally, skills labs.

As scheduled, students are expected to attend the following:

Day	Conference	Time	Participants
Mondays	US QA Conference	10 am – 3 pm	US Director & Faculty, Residents
Wednesdays	EM Conference****	8 am – 2 pm	Residents, Faculty

**** SUNY Downstate students are scheduled to attend one (1) EM Conference during the rotation and are not scheduled for clinical shifts on attend their weekly medical school conference on Thursdays.

READING MATERIAL

The required reading for this rotation can be found online at https://flippedemclassroom.wordpress.com/ in the "Approach to…" links. Students should review these materials in order to maximize learning and participating in didactic sessions.

The following textbooks/websites are not required but are helpful during this clerkship rotation:

- http://www.cdemcurriculum.org/
- First Aid for the Emergency Medicine Clerks hip, 3rd Ed.
- Emergency Medicine PreTest Self Assessment and Review, 3rd Ed.
- Case Files Emergency Medicine, 3rd Ed.
- Deja Review Emergency Medicine, 2nd Ed.



CURRICULUM

This curriculum is based on that created by the Clerkship Directors in Emergency Medicine (<u>PubMed reference</u>) and brought to life on the <u>student curriculum website</u>.

The Approach To...

This is based on ten "Approach To" topics which cover a suggested approach a student may take when a patient presents with one of the following complaints.

- 1. Abdominal Pain
- 2. Altered Mental Status
- 3. Cardiac Arrest

VII. FINAL WEEK OF THE ROTATION ORAL PRESENTATION

Each student is required to a present a clinical case to the EM Clerkship Director, or designee, <u>during the final didactic session of the rotation</u>. The format is to be a presentation of a written patient note based on the clinical encounter; this should not be *PowerPoint*. An example of a satisfactory oral presentation is provided to students.

The case *should*:

- be of a patient that s/he managed during the rotation.
- be approximately 5 8 minutes in length and
- include:
 - o a pertinent history;
 - o physical exam findings;
 - o an assessment including differential diagnosis;
 - o a plan for management; and,
 - o disposition.

The presentation:

- should include any follow-up information, if available.
- may include support materials like ECG's or radiology images
- must include references.

In addition, students **must** include at least one (1) journal article or evidence-based medicine (EBM) article that is *relevant to EM*. **Review articles or summaries from** *Up to Date* **should not be used**. Students can email the EM Clerkship Team to confirm whether a journal article selection is appropriate.

EXAMINATIONS

During the final week of the rotation, MS-4 students from NYIT, SABA, SGU, or a PA program will take an exam from the *Society of Academic Emergency Medicine (SAEM)*. SAEM log-in credentials will be provided during the final week of the rotation.

VIII. FINAL GRADES

In order to pass our EM Clerkship, students must satisfy **all** the following criteria:

- 1. Satisfactory Attendance of all assigned clinical shifts;
- 2. Minimum average grade of *Pass* on *end-of-shift* evaluations;
- 3. Satisfactory conference attendance; *1 missed conference = 5-pt deduction*
- **4. 70%** or higher on the end of rotation exam (*MS-4 students only*);
- 5. Minimum final grade of *Pass* on the Oral Presentation; and
- 6. Maintaining professionalism with staff and patients.

The EM Clerkship Director will complete a final comprehensive evaluation, including feedback from staff that will be a calculated accordingly:

MS-4 STUDENTS

- 50% End-of-shift evaluations
- 20% Student Conference participation/attendance
- 15% Written Exam
- 10% Oral presentation
- 5% Professionalism

MS-3 & PA STUDENTS

- 60% End-of-shift evaluations
- 20% Student Conference participation/attendance
- 15% Oral presentation
- **5%** Professionalism

Final grades are assessed* accordingly:

A	94 - 100	Honors
B+	85 – 93	High Pass
В-	75 - 84	Pass
C	70 - 74	Low Pass

* Final grades for students of SUNY Downstate will be calculated by their Clerkship Director.

CLINICAL REMEDIATION/PROBATION/FAILURE OF THE CLERKSHIP

Failure to meet the listed requirements of the EM Clerkship will result in either probation and/or failure of the clerkship rotation. Throughout the rotation, if a student persistently receives unsatisfactory shift evaluations or fails to meet any of the six requirements listed above, a letter will be sent to him/her and his/her program/medical school coordinator, along with a verbal discussion on corrective actions.

Failure to meet the minimum requirements for passing the rotation will result in a formal letter being sent to the student the Dean of his/her School or a program official. This letter will outline the reason(s) for failing the rotation and the required corrective action(s) that must be taken in order to have the probationary status and/or failure rescinded by the EM Clerkship Team.

IX. EM STANDARD LETTER OF EVALUATION (SLOE)

Applying to an Emergency Medicine residency program requires an *EM SLOE*. Students who maintain **good standing** and *successfully* complete our EM Clerkship program can request a SLOE at **the end of the rotation** by emailing their <u>current</u> CV and *ERAS LOR request form* to Smitia Semexant at <u>ssemexant@bhmcny.org</u>.

Only one (1) SLOE will be provided from the *entire* EM faculty for any particular student. **If a request can** be granted, students should allow up to two (2) weeks for the completed SLOE to be uploaded to *ERAS*.

X. END-OF-ROTATION MEETING

Throughout the rotation, students will have opportunities for informal meetings with any of our Program Directors. Students who are interested in an EM career should inform Smitia Semexant at ssemexant@bhmcny.org. Pending availability, all efforts will be made to schedule an end-of-rotation meeting with one of our Program Directors.

XI. INTERVIEWING AT BROOKDALE HOSPITAL

Medical students who are interested in applying to our EM Residency Program should inform the EM Clerkship Team during the rotation. Students rotating during the ERAS interview season (typically November – January), students will be scheduled for an interview date that is <u>after</u> the end of the clerkship rotation.



Students should direct any questions or concerns regarding this manual or the Clerkship program to the EM Clerkship Team. It is our hope that students enjoy their rotation, learn a lot, and have fun.

Again, welcome to EM at Brookdale Hospital!