FOURTH YEAR ELECTIVE TITLE
ADVANCED SELECTIVE IN CRITICAL CARE - MEDICINE

COURSE NUMBER
CRIT 8909

LOCATION
MMC

ELECTIVE DIRECTOR
Shannon Ursu, MD

ELECTIVE FACULTY
Department of Medicine
Critical Care Attendings

ELECTIVE CONTACT
Gwen Gunter
Department of Medicine

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BLOCKS AVAILABLE
ALL

DURATION/WEEKS
MIN: 4 MAX: 4

HOURS PER WEEK
60-80

STUDENTS
MAX: 2

LECTURES/SEMINARS
YES

OUTPATIENT
No

INPATIENT
YES

HOUSESTAFF
YES

NIGHT CALL
ON CALL UNTIL 9PM EVERY 3RD NIGHT
WHEN WEEKENDS
YES BUT STUDENTS WILL GET 1 WEEKEND DAY OFF EACH WEEK

LAB
No

EXAM REQUIRED
No

OVERALL EDUCATIONAL GOAL OF ELECTIVE

OBJECTIVES:

I. Patient care:
   - Acquire accurate and relevant history from the patient in an efficient customized prioritized and hypothesis driven fashion
   - Perform an accurate physical exam using appropriate technique and maneuvers
   - Accurately track important changes in the physical examination over time for inpatients
   - Identify and understand the clinical significance of abnormalities found on the physical examination
   - Develop prioritized differential diagnosis, evidenced based diagnostic, and therapeutic plans for common inpatient conditions
   - Identify and justify a working diagnosis, citing evidence from the clinical presentation to support the diagnosis
   - Interpret the result of common diagnostic testing including routine blood chemistries, EKGs, urinalysis, etc
   - Develop and implement a comprehensive management plan for each patient
   - Assess risks, benefits, and costs of treatment options
   - Recognize when to seek guidance
   - Make daily adjustments to the management plan as new clinical data arises
   - Perform relevant bedside procedures correctly under supervision

II. Medical knowledge:
   - Demonstrate basic interpretation of common diagnostic testing such as blood work, ABGs, chest xrays, etc
   - Apply knowledge of pathophysiology and basic science to the clinical care of the patient
   - Demonstrate a strong foundation in analytical clinical reasoning when solving clinical problems
   - Interpret physical examination and ancillary test results using predictive values, pretest probabilities, and likelihood ratios to guide further management decisions

III. Practice-based learning and improvement:
   - Respond welcomingly and productively to feedback from all members of the health care team
   - Self-reflect and recognize personal areas of performance which require improvement
Develop an action plan for performance improvement based on self-reflection and external feedback
Participate in the education of patients, families and other team members
Appreciate the importance of self-directed learning for professional development

IV. Interpersonal and communication skills:
- Deliver appropriate, succinct, hypothesis driven oral presentations. Present both the pertinent positive and negative details.
- Effectively use an interpreter to engage patients who do not speak English
- Write clinical documentation that synthesizes clinical data and demonstrates sound clinical reasoning
- Communicate effectively with team members, patients, and other healthcare professionals
- Participate in sign out between providers
- Formulate a relevant clinical question to address with a consultant when presenting clinical information
- Summarize key issues and succinctly discuss management plans with team members and consultants
- Involve patients and families in shared decision making
- Develop a therapeutic relationship with patients and their families by explaining information in easy to understand terms

V. Professionalism:
- Recognize the scope of your abilities
- Recognize that disparities exist in health care and that they may impact patient care
- Treat patients with dignity, civility, and respect regardless of race, culture, gender, ethnicity, age or socioeconomic status and express sensitivity to differences
- Maintain patient confidentiality
- Document and report clinical information truthfully
- Accept personal errors and honestly acknowledge them
- Respond promptly to clinical responsibilities including colleagues, patients, and families
- Assume responsibility for patient care
- Demonstrate reliability and punctuality for clinical responsibilities and daily educational activities
- Dress and behave with respect for patients, colleagues, faculty, and staff
- Understand the importance of respect for patient privacy and autonomy

VI. Systems-based Practice:
- Reflect awareness of common socioeconomic barriers that impact patient care
- Minimize unnecessary tests, procedures, and therapies
- Work effectively as a member within the inter-professional team to ensure safe patient care
- Identify any significant issues in the medical system that may impact the care of patients
- Understand the basics of quality improvement initiatives and how they impact medical care
- Function as a member of a multidisciplinary healthcare team

**BRIEF DESCRIPTION OF ACTIVITIES:**

During the ICU rotation you will join the team caring for acutely ill patients in the medical intensive care unit. Sign out occurs by 7am followed by multidisciplinary bedside rounds, a series of didactics, and afternoon bedside sign out at 5pm. Students are expected to follow your patients from admission to the ICU to transfer or discharge from the ICU. A history and physical is preformed and documented daily. The formulation of the assessment and plan will be presented and discussed daily in teaching rounds. Students are be expected to write detailed notes daily which will be reviewed by the senior resident. Students will follow 1 interns call schedule in which they will be on call every 3rd day until 9pm. The students will be given off 1 weekend day each week. Excused absences cannot exceed 2.5 days during the rotation.

Students should expect to participate in all aspects of care for their patients while in the ICU. They will learn
about initial resuscitation of a variety of clinical scenarios. They will also participate in the consultation for unstable patients followed by the ongoing monitoring and care for these patients. They will learn the multidisciplinary approach used in our institute to manage complex patients. Students will also learn the basic principles of mechanical ventilation. Students will learn evaluation and management for patients with respiratory failure, shock, cardiac arrest, acid base disorders, acute neurologic deterioration, thromboembolism, toxidromes and more.

**METHOD OF STUDENT EVALUATION:**

- Students will have daily dialog with the attending and receive frequent formative verbal feedback
- Students will receive a formal evaluation form from the attending on service each week
- The final evaluation and grade is standardized among all sites and reflects the clinical experience and didactic education
- The final grade is decided by weighting the Faculty Global Assessment Evaluation Form (60%); the final Oral Presentation (20%) and Case Presentations (20%).

**Are there any prerequisites for this elective?**  No X_____ Yes_____ please specify.

**Is this elective available to third year medical students as well?**   No X_____ Yes_____