## **Emergency Medicine Orientation**

#### Chris Cox MA, MD, DABEM

Undergraduate Clerkship Coordinator Anrew Steele Moore Education Administrative Assistant Department of Emergency Medicine Dalhousie University School of Medicine Beginning of Shift A = Pod 1 B = Pod 3,4,5 C = Pod 2

Look for this schedule in all the pods. Your preceptor is listed above your name.

You will meet your preceptor at the physician desk in your assigned Pod. It will be easier to log on successfully to EDIS if you wait for your preceptor to log on first.

DATE	Trauma Team	Flow Physicia
March 1	0700-1900 1900-0700 Coles	0730 1100 MCVex
	Nurse Practitioner	1530 Watson
POD 1 (A)	Charge (C)	POD 3-5 (B)
counters.		
Learners:	7	
A1 0700 Staff: Wu	C1 0830 Staff: Murphy	B1 0900 Staff: N. Petrie
Amelie Pelland	Tracy Heyer Tracy Zhang	Learners.
A2 1430 Staff: Magee	C2 1600 Staff: Mac Donald	B2 1500 Staff:
Learners: °	Ahmed Al Hussein	Brian Well
A3 2 Staff: Carter	2130 Staff:	<b>C3 2200</b> Field
Learners:	am Aleksis	Liberty Lui
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## Log On

With your I.D. swipe over the magnet on top of he computer "One Sign" Badge. This should sign you in automatically. When you sign up for your first patient you will be asked choose your preceptor. You and your EM attending will be linked for the rest of the shift.

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## **Shift Plan**

Discuss with your preceptor their expectations of you during the shift. Important questions to ask are when and where they want to you to document your history/physical/orders on the patient's chart. At the completion of the case hold the chart for your preceptor to sign.

If you are in Pod 1 ask your preceptor if they feel your patient can be safely moved from their exam room to the waiting rooms 3 and 4. You can bring the patient there yourself or ask the nurse to do it after any labs have been obtained. Explain to the patient that they will be brought back into the exam room after their studies are completed.



### Laboratory Orders

Check the Box on the right side of the chart for the lab work you wish to order. It is a good idea to review these with your preceptor before submission. Once orders are complete be sure to communicate the orders to the patient's nurse and give them the charted orders. If you want practice with phlebotomy, ask your nurse if you assist them and they will help you do it in most cases.



Radiology Orders are made on the EDIS system. Review all x-ray orders with your preceptor prior to making your selection in the computer.

CT/US orders are also entered through the EDIS system but must be reviewed with the Radiologist (See List at the workstation), 7am-5 pm and the Radiology Resident after that.

In house paging is 67\_\_ 1\_\_ Pager#\_\_\_Your #.

	<b>Radiology Con</b>	sultants	•
	Hot Seat	473-2865	•
	CT Neuro	473-4910	
•	CT Body /	47.3-8536,)	
	Bone CT	473-8289	
	Ultra Soünd	473-2436	
	Ultra Sound	473-1640	
	Reporting		
A State State State	CT Scanner	473-8509	
and a second	CT Tech	498-0782 ~ "	
	Nuc Med	473-2449/3673	
	Rad Resident pgr	1285	

Once you have chosen the study you want under INVESTIGATIONS

send it to the Radiology department by pressing the LAB RAD FORMS button on the lower middle of the screen.

This will open a new window which will list the triage information. You can edit or add to this information to explain the clinical reason for the study.



When you press the printer button, it will list the following printer options to send the order:

- DI CT
- DI US
- DI EM(XRAYS)

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When your orders are successfully entered you will see a clock in the **Diagnostics column**. When it has been received and entered at the Radiology dept. a fraction will come up such as 0/2 stating that the study is pending. When the fraction has a numerator such as 2/2 the images are complete and should be available on the PAX screen.

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### Laboratory Results

You will find your patient's Laboratory results in this column, click on it and they will come up in a new screen.

Previous laboratory values are available on **HPF**, and **Clinical Portal** which can be accessed from the Microsoft explorer homepage for CDHA. Ask your preceptor if you cannot access these databases.

The triage screen, when opened, will allow you to check a patient's previous visits to CDHA hospitals. Here you can access any labs from the visits at the Halifax Infirmary.

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SCRIPTION - UNKNO	52/57	4/5		******	
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# Radiology

### Images

PAX stations will show images at each physician work station in the Pods. You can search by name, Medical Record #, or look in the day's list from the Halifax Infirmary Emergency Department.

Results should be on the left screen with the images on the right if they have been read. Otherwise you can call the radiologist directly from the list posted in each work station.



### **Consultations**

You should be calling the consultants directly to present your patient and the reason for your consultation.

**Emergency Paging: 473-1700** will get the "locating operator" who will page the consultant for you. Remember to review the consultation with your preceptor before paging the consultant. If you are having difficulty obtaining the consult, inform your preceptor immediately so that they can finish the consult and avoid any further delay.

Once the consultant has been called place the consult service in the EDIS system using the box next to the one you used for Radiology orders. It will show up in the "C" column when complete

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### **End of Shift**

Complete your end of shift feedback form with the diagnosis of the each patient you have seen during the day. Your preceptor will discuss your presentations and procedure skills during the shift.

They will give you topics to review or suggestions on how to improve on your clinical performance.

It is good form to ensure that all patients which you will signing over to the next team have all their orders entered, consults called, outpatient prescriptions written, and ideally any procedure completed prior to leaving the department. You should check in with your patients, describe the care plan to them, and see if they have any more requests before you sign off the case.



### **End of Shift**

 Place your completed form in the physician's write up room between Pod 1 +
 The security code is 2154.

3. Please complete your end of shift reflection questions in your log.

4. Please review your preceptor in ONE 45. We appreciate your feed back which will help improve the educational experience in our department.

Our Attending Physicians require these reviews as part of their educational portfolio when they apply for promotion.



### **Simulation Bay**

A new addition to our student experience is our "Sim Bay" sessions. You will be notified by Andrew when these are scheduled and they are mandatory.

The Simulation Bay experiences are medical scenarios in which you will learn resuscitation and practice team work. The sessions provide our students with a safe environment for practicing procedures such as endotracheal intubation, I.V. placement/ABG's, Ultrasound applications, and efibrillation/ cardioversions.



### Rounds

our academic day and rounds are held every Wednesday at 12 pm usually in the Royal Bank Theatre.

As these experiences are mandatory, you will be excused during your shift to attend these events.

Prior to leaving the department make sure your preceptor is aware you are leaving and that all your patients are signed over to them.

### **Core Lectures**

Seminars are core lectures scheduled on a regular basis to augment your ED experience. These lectures take place in Tupper Link second Floor. The PowerPoint Slides are available on BBLearn under "Seminars" in the Emergency Medicine Section.

- Vertigo and Syncope
- Shock
- Emergency Approach to PV Bleeding
- Emergency Approach to Airway
- Approach to Chest Pain
- Opthalmic Emergencies
- Toxicology
- Approach to Dyspnea
- Fractures/Emergency Perspective
- Analgesia and Sedation
- C-Spine Clearance and Head Injury Assessment
- Initial Trauma Assessment

### **Triage Shift**

You will be required to schedule a triage shift with the Paramedics. The contact person is John Cole and can be reached at:

John.Cole@cdha.nshealth.ca

This is an opportunity to understand how the CTAS system provides the prioritization of patient admission in to the Emergency Medicine system.

Level I	Resuscitation	see patient immediately
Level II	Emergency	within 15 minutes
Level III	Urgency	within 30 minutes
Level IV	Less Urgency	within 60 minutes
Level V	Non Urgency	within 120 minutes

**Procedure Shift** 

You will have the opportunity to schedule a shift with one of our Senior Nurses, Debbie MacDonald, in which you will practice procedures such as I.V. placement, ABG's, NG tubes, and Foley Catheters.

Please contact Debbie at: debra.macdonald@cdha.nsh ealth.ca





### Good Luck and Have Fun!

Questions or Problems?

Call: (902) 473-8921 or email steeleaw@cdha.nshealth.ca

Email Dr Cox: chriscox@dal.ca

