



# University of Glasgow | School of Medicine

## EMERGENCY MEDICINE BLOCK

\_\_\_\_\_ HOSPITAL

## CURRICULUM AND LOGBOOK



Student Name

Matriculation Number

Email Address

Hospital

Start Date

Finish date

ED Supervisor

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## HOSPITAL EMERGENCY DEPARTMENT

Description of how your ED works

### LOG BOOK

The overall aims of the EM attachment are for you to:

- Acquire first hand experience of the assessment and management of a wide spectrum of acutely ill and injured patients.
- Become proficient in clinical examination and practical procedures.

This workbook is designed to help give structure and guidance during your Emergency Medicine attachment. The workbook **must be completed and handed in** to your supervising tutor at the feedback session on the final day. Your workbook will be graded and this will form part of your EM mark.

#### Short case reflection

Please use the Short Case worksheets to record your Patients interaction for the following; 1 Trauma, 1 acute medicine, 1 critical care, 1 acute surgical, 1 frailty and please note these should be discussed with a senior clinician.

## **ROTA**

This is a template of your assessment – fill it out as you go along and you can use it as a self-assessment tool. This is the criteria we will use for your end of block assessment. Ask if you are having problems, preferably before the last week.

	<i>ABOVE EXP.</i>		<i>BELOW EXP</i>
<b>Professional Attributes</b>			
-Attendance and Reliability	No absences	All absences explained in advance unless exceptional circumstances – documented on MyCampus	No explanation for absences. 5 or more absences University will be informed if this occurs
-Ability to manage own learning	All assessments completed on time. F/U of patient. Multiple additional learning opportunities		Formal assessments not completed. No additional learning opportunities. Didn't attend teaching sessions
Relationship with team	"We'd like you to be an FY2 here"		Complaints regarding attitude
<b>CLINICAL COMPETENCE</b>			
Knowledge			
History Taking			
Clinical Examination Skills			
Clinical Judgement			
Communication Skills			
<b>FORMAL ASSESSMENT</b>	Must be completed by an ST4 or person of a higher grade.		
Mini CEX			
CBD – Presentation			
5 Short Case Reflections (Medical, Surgical, Trauma, Critical Care, Frailty)	All 5 discussed by ST4 or above. At least one with consultant.		Not complete
17 Essential Presentations	All 16	13 - 15	Less than 13
Exam – Score out of 70	> 55	45 - 55	< 45
Presenting at unit meetings, writing an audit, or completing a piece of written work			
Significant contribution to the handling of a difficult or particularly complex case			
Extra attendance			



Welcome! Here's a challenge that will help you settle in on **Day 1**.  
 Tick the box when you've completed them and we'll review together.



Use POD system. What are the different types of PODS available for?	
Be observed taking bloods and put in Venflon (NB. Not from patient with a BBV)	
Take a history, examine, formulate a management plan & present a patient who has not yet been assessed by a doctor	
Push a patient to X-ray	
Find ground floor CT	
Find transfer bags	
Find training/seminar room (& learn door code)	
Download GGC Medicine App onto smart phone (if you have one)	
Download iResus App onto smart phone (if you have one)	
Use blood gas analyser	
Watch a nurse take a handover from a paramedic and triaging them in a cubicle	
Do an ECG & learn how to record patient details on the ECG machine	
Learn what you can and can't put in the macerator (found in the sluice)	
Learn what you can and can't put in a sharps bin	
How many types of bin do we have in the ED?	
List 10 things you need to do to make sure you are compliant with infection control guidelines.	
Find out where blankets are stored in each area of the department	
Introduce yourself to a staff member who applies plaster casts and inform them you would like to help.	
Triage – find out where it is, find out the name of the triage nurse	
Find out who Consultant in Charge is – what is their role?	
Where is the Standby phone located?	
Where are the porters based?	
Find a splash of blood and clean it away	
Set up a trolley for suturing	



## Procedure Log

Procedure	Level of Competence	Supervisor	Date
Measure temperature	Unsupervised		
Measure pulse rate and BP	Unsupervised		
Measure O2 saturation	Unsupervised		
Carry out venepuncture	Unsupervised		
Carry out intravenous cannulation	Unsupervised		
Carry out arterial blood gas sampling	Unsupervised		
Manage blood samples correctly and safely	Unsupervised		
Take blood cultures	Unsupervised		
Measure blood glucose (BM)	Close supervision		
Carry out and interpret 3 and 12-lead ECG	Unsupervised		
Carry out peak flow respiratory test	Unsupervised		
Carry out urine multi dipstick test	Unsupervised		
Carry our cognitive state examination	Unsupervised		
Provide oxygen to a patient	Close supervision		
Carry our catheterisation	Close supervision		
Use local anaesthetic	Close supervision		
Carry out wound care and basic wound closure	Close supervision		
Employ safe disposal of clinical waste, needles and sharps	Close supervision		

### Levels of supervision:

Unsupervised - Trusted to act unsupervised (under clinical oversight). Supervisor advises what to do and returns to check everything

Close supervision – Trusted to act with close supervision. Supervisor directly observes student perform procedure in clinical area.

## PROCEDURES

<b>Procedure</b>	<b>Full Description</b>
Measure temperature	Measure body temperature. Measure a patient's body temperature using an appropriate recording device.
Measure pulse rate and BP	Measure pulse rate and blood pressure. Measure a patient's pulse and blood pressure using manual techniques and automatic electronic devices.
Measure O2 saturation	Carry out transcutaneous monitoring of oxygen saturation. Apply, and take readings from, an electronic device which measures the amount of oxygen in the patient's blood
Carry out venepuncture	Carry out venepuncture. Insert a needle into a patient's vein to take a sample of blood for testing
Carry out intravenous cannulation	Carry out intravenous cannulation. Set up an infusion using infusion devices. Insert a tube into a patient's vein to take a sample of blood for testing, give an injection or give fluids via the vein. Make the appropriate choice of fluids and their doses and demonstrate the correct use of electronic devices which drive and regulate the rate of fluid administration
Carry out arterial blood gas sampling	Carry out arterial blood gas and acid base sampling from the radial or femoral artery in adults. Insert a needle into a patient's radial artery (in the wrist or forearm) or the femoral artery (in the groin) to take a sample of blood to test levels of gases, such as oxygen and carbon dioxide, , and the balance of acidity and alkalinity in the blood
Manage blood samples correctly and safely	Manage blood samples correctly and safely. Make sure that blood samples are placed in the correct containers, that these are labelled correctly and sent to the laboratory promptly and in the correct way. Take measures to prevent spillage and contamination. Highlight high risk samples, for example samples from patients who have blood borne viruses, appropriately to other staff
Take blood cultures	Take blood cultures. Take samples of venous blood to test for the growth of infectious organisms in the blood
Measure blood glucose (BM)	Measure blood glucose. Measure the concentration of glucose in the patient's blood at the bedside using appropriate equipment and recording and interpreting the results
Carry out and interpret 3 and 12-lead ECG	Carry out and interpret a 3 and 12-lead electrocardiograph. Set up a continuous recording of the electrical activity of the heart. Ensure the recorder is functioning correctly, and interpret the tracing
Carry out peak flow respiratory test	Carry out peak flow respiratory function tests. Perform a peak flow test to see how well the patient's lungs are working
Carry out urine multi dipstick test	Carry out, and advise patients how to carry out, a urine multi dipstick test. Test a sample of urine for abnormal contents, such as blood or protein, and for pregnancy



Carry our cognitive state examination	Carry out a cognitive state examination. Make an assessment of the patient's mental processes such as orientation (awareness of who they are, the date and where they are for example), ability to remember things they were told a few minutes earlier, ability to recognise and name common objects and ability to carry out simple numerical calculations
Provide oxygen to a patient	Provide oxygen to a patient. Prescribe and administer oxygen using a delivery method appropriate for the patient's needs and monitor and adjust oxygen as needed
Carry our catheterisation	Carry out male and female urinary catheterisation. Pass a tube into the urinary bladder to permit drainage of urine, in male and female patients
Use local anaesthetic	Use local anaesthetics. Perform local anaesthesia applied directly to the skin or injected into skin or body tissues
Carry out wound care and basic wound closure	Carry out wound care and basic wound closure and dressing. Provide basic care of surgical or traumatic wounds and apply dressings appropriately
Employ safe disposal of clinical waste, needles and sharps	Employ safe disposal of clinical waste, needles and other 'sharps'. Ensure that these materials are handled carefully and placed in a suitable container for disposal



## ESSENTIAL PRESENTATIONS

During your 5-week block you should aim to see the following presentations. If you do not have the opportunity to see them then you must read around the topic and understand how they may present and are treated.

NO	ITEM	DATE(s) SEEN
1.	Basic Airway management	
2.	ABCDE Approach to the unwell patient	
3.	Anaphylaxis	
4.	Acute exacerbation COPD	
5.	Acute exacerbation Asthma	
6.	Chest Pain – IHD/ACS/STEMI – PCI	
7.	Cardiac Arrest	
8.	GI Bleed	
9.	Sepsis + Septic Shock	
10.	Collapse / Altered Conscious Level	
11.	GCS/Neurological Examination	
12.	Head + Cervical Spine Injury	
13.	Acute Confusion	
14.	Fits & Seizures	
15.	DKA	
16.	#Neck of Femur	
17.	Minor Injury	

## CURRICULUM

Domain	Knowledge – Skills - Behaviours	
<b>History Taking</b>	Knowledge	Recognise the importance of different elements of history Recognise that patients do not present history in structured fashion Know likely causes and risk factors for conditions relevant to mode of presentation Recognise that history should inform examination, investigation and management
	Skills	Identify and overcome possible barriers to effective communication Manage time and draw consultation to a close appropriately Assimilate history from the available information from patient and other sources Focus on relevant aspects of history
	Behaviours	Show respect and behave in accordance with Good Medical Practice

Domain	Knowledge – Skills - Behaviours	
<b>Clinical Examination</b>	Knowledge	Understand the need for a valid clinical examination Understand the issues surrounding consent and capacity in the ED Understand the basis for clinical signs and the relevance of positive and negative physical signs Recognise constraints to performing physical examination and strategies that may be used to overcome them Recognise the limitations of physical examination and the need for adjunctive forms of assessment to confirm diagnosis
	Skills	Perform an examination relevant to the presentation and risk factors that is valid, targeted and time efficient Interpret findings from the history, physical examination and mental state examination, appreciating the importance of clinical, psychological, religious, social and cultural factors Actively elicit important clinical findings Perform relevant adjunctive examinations
	Behaviours	Show respect and behaves in accordance with Good Medical Practice

Domain	Knowledge – Skills - Behaviours	
<b>Therapeutics and Safe Prescribing</b>	Knowledge	Recall indications, contraindications, side effects, drug interactions and dosage of commonly used drugs Recall range of adverse drug reactions to commonly used drugs, including complementary medicines Define the effects of age, body size, organ dysfunction and concurrent illness on drug distribution and metabolism relevant to the trainees practice
	Skills	Review the continuing need for long term medications relevant to the trainees clinical practice Anticipate and avoid defined drug interactions, including complementary medicines Advise patients (and carers) about important interactions and adverse drug effects
	Behaviours	Recognise the benefit of minimising number of medications taken by a patient Appreciate the role of non-medical prescribers

Domain	Knowledge – Skills - Behaviours	
<b>Time Management, Decision Making and Clinical Reasoning</b>	Knowledge	<p>Understand that organisation is key to time management</p> <p>Understand that some tasks are more urgent or more important than others</p> <p>Understand the need to prioritise work according to urgency and importance</p> <p>Understand that some tasks may have to wait or be delegated to others</p> <p>Outline techniques for improving time management</p> <p>Understand the importance of prompt investigation, diagnosis and treatment in disease management</p> <p>Interpret history and clinical signs</p> <p>Conceptualise clinical problem</p> <p>Generate hypothesis within context of clinical likelihood</p> <p>Test, refine and verify hypotheses</p> <p>Develop problem list and action plan</p>
	Skills	<p>Estimate the time likely to be required for essential tasks and plan accordingly</p> <p>Group together tasks when this will be the most effective way of working</p> <p>Recognise the most urgent / important tasks</p> <p>Organise and manage workload effectively</p> <p>Interpret clinical features, their reliability and relevance to clinical scenarios including recognition of the breadth of presentation of common disorders</p> <p>Recognise critical illness</p> <p>Generate plausible hypothesis(es) following patient assessment</p> <p>Construct a concise and applicable problem list using available information</p> <p>Construct an appropriate management plan and communicate this effectively</p>
	Behaviours	<p>Ability to work flexibly and deal with tasks in an effective fashion</p> <p>Communicate changes in priority to others</p> <p>Remain calm in stressful or high pressure situations and adopt a timely, rational approach</p> <p>Recognise the difficulties in predicting occurrence of future events</p> <p>Show willingness to search for evidence to support clinical decision making</p>

Domain	Knowledge – Skills - Behaviours	
<b>Team working and communication</b>	Knowledge	<p>Outline the components of effective collaboration</p> <p>Describe the roles and responsibilities of members of the healthcare team</p> <p>Structure an interview appropriately</p> <p>Understand the importance of the patient's background, culture, education and preconceptions (ideas, concerns, expectations) to the consultation process</p> <p>Recognise that every patient/relative may desire different levels of explanation and have different responses to bad news</p> <p>Recognise that breaking bad news can be extremely stressful for those involved</p> <p>Outline and follow the guidance given by the GMC on confidentiality</p>
	Skills	<p>Accurate attributable note-keeping</p> <p>Establish a rapport with the patient and any relevant others (e.g. carers)</p> <p>Listen actively and question sensitively to guide the patient and to clarify information</p> <p>Identify and manage communication barriers, tailoring language to the individual patient and using interpreters when indicated</p> <p>Deliver information compassionately, being alert to and managing their and your emotional response (anxiety, antipathy etc)</p> <p>Use and share information with the highest regard for confidentiality, and encourage such behaviour in other members of the team</p>
	Behaviours	<p>Recognise the importance of prompt and accurate information sharing with the Primary Care team following hospital discharge</p> <p>Approach the situation with courtesy, empathy, compassion and professionalism, especially by appropriate body language</p> <p>Ensure that the approach is inclusive and patient centred and respect the diversity of values in patients, carers and colleagues</p> <p>Respect the different ways people react to bad news</p>

Domain	Knowledge – Skills - Behaviours	
<b>Evidence and Guidelines</b>	Knowledge	<p>Understand the elements of clinical governance</p> <p>Recognise that governance safeguards high standards of care and facilitates the development of improved clinical services</p> <p>Recognise importance of evidence-based practice in relation to clinical effectiveness</p> <p>Outline the use of patient early warning systems to detect clinical deterioration</p> <p>Understand the principles of infection control as defined by the GMC</p> <p>Understand the principles of preventing infection in high risk groups (e.g. antibiotic use to prevent Clostridium difficile) including understanding the local antibiotic prescribing policy</p> <p>Understand the advantages and disadvantages of guidelines</p> <p>Understand the role of audit &amp; Quality Improvement (developing patient care, risk management etc)</p> <p>Understand the steps involved in completing the audit cycle</p>
	Skills	<p>Recognise the potential for infection in patients being cared for</p> <p>Actively engage in local infection control procedures and antibiotic guidelines</p> <p>Appraise retrieved evidence to address a clinical question</p>
	Behaviours	<p>Encourage all staff, patients and relatives to observe infection control principles</p> <p>Keep up to date with national reviews and guidelines of practice (e.g. NICE and SIGN)</p> <p>Aim for best clinical practice (clinical effectiveness) at all times, responding to evidence-based medicine</p> <p>Recognise the occasional need to practise outside clinical guidelines</p> <p>Recognise the need for audit in clinical practice to promote standard setting and quality assurance</p>

Domain	Knowledge – Skills - Behaviours	
Major Presentations	Knowledge	Demonstrate knowledge of: <ul style="list-style-type: none"> <li>• Anaphylaxis</li> <li>• Cardio-respiratory arrest</li> <li>• Major trauma</li> <li>• Septic patient</li> <li>• Shocked patient</li> <li>• Unconscious patient</li> </ul>
	Skills	Recognise clinical consequences of acute anaphylaxis Rapidly assess the collapsed patient in terms of ABC, airway, breathing and circulation and perform BLS Be able to perform and interpret the primary and secondary survey Be able to assess a trauma patient: perform and interpret primary and secondary survey Rapidly assesses the shocked patient in terms of ABC, airway, breathing and circulation Institute immediate, simple resuscitation (oxygen, iv access, fluid resuscitation) Arrange simple monitoring of relevant indices (oximetry, arterial gas analysis) and vital signs (BP, pulse & respiratory rate, temp, urine output) Make a rapid and immediate assessment including examination of coverings of nervous system (head, neck, spine) and Glasgow Coma Score
	Behaviours	Exhibit a calm and methodical approach Demonstrate ability to work in a team and succinctly present clinical details of situation Recognise need for immediate assessment and resuscitation

Domain	Knowledge – Skills – Behaviours			
Acute Presentations	Knowledge	Demonstrate knowledge of: <table border="0" style="width: 100%;"> <tr> <td style="vertical-align: top;"> <ul style="list-style-type: none"> <li>• Abdominal pain and swelling, including loin pain</li> <li>• Acute back pain</li> <li>• Acute confusional state and delirium</li> <li>• Acute psychiatry</li> <li>• Aggressive/disturbed behaviour</li> <li>• Blackout/collapse</li> <li>• Breathlessness</li> <li>• Chest pain</li> <li>• Falls</li> <li>• Fever</li> <li>• Fits/seizures</li> </ul> </td> <td style="vertical-align: top;"> <ul style="list-style-type: none"> <li>• Frailty</li> <li>• Haematemesis/melaena</li> <li>• Headache</li> <li>• Head Injury</li> <li>• Limb pain/swelling</li> <li>• Palpitations</li> <li>• Poisoning</li> <li>• Rash</li> <li>• Traumatic limb and joint injuries</li> <li>• Weakness and paralysis</li> <li>• Wound assessment and management</li> </ul> </td> </tr> </table>	<ul style="list-style-type: none"> <li>• Abdominal pain and swelling, including loin pain</li> <li>• Acute back pain</li> <li>• Acute confusional state and delirium</li> <li>• Acute psychiatry</li> <li>• Aggressive/disturbed behaviour</li> <li>• Blackout/collapse</li> <li>• Breathlessness</li> <li>• Chest pain</li> <li>• Falls</li> <li>• Fever</li> <li>• Fits/seizures</li> </ul>	<ul style="list-style-type: none"> <li>• Frailty</li> <li>• Haematemesis/melaena</li> <li>• Headache</li> <li>• Head Injury</li> <li>• Limb pain/swelling</li> <li>• Palpitations</li> <li>• Poisoning</li> <li>• Rash</li> <li>• Traumatic limb and joint injuries</li> <li>• Weakness and paralysis</li> <li>• Wound assessment and management</li> </ul>
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	Skills	Take a thorough history and examination to arrive at a valid differential diagnosis Be able to identify those that require admission and those who may be safely discharged Be able to recognise life/limb-threatening trauma Perform mental state examination Understand importance of undertaking appropriate investigations Interpret appropriate diagnostic tests Perform an ECG Be able to insert a urinary catheter and NG tube Demonstrate ability to secure appropriate venous access and set up IV fluids Be able to take ABGs Be able to demonstrate the technique of wound toilet, wound closure and use of dressings <b>The above should be demonstrated during your block or at a skills session at the UoG.</b>		
Behaviours	Exhibit timely assessment in the acute phase Recognise the importance of a multi-disciplinary approach Recognise the need for a chaperone Appreciate that some events are terminal and End of Life Care should be instituted.			

