Obstetrics and Gynecology: Intensive Care Unit Rotation Objectives: PGY 2, Foundations of Discipline

CanMEDS Framework: Medical Expert, Communicator, Collaborator, Leader, Health Advocate, Scholar, and Professional.

Intensive Care Unit (ICU) Learning Objectives

Medical Expert:

1. Knowledge: General Clinical
   1.1 Demonstrate diagnostic and therapeutic skills for ethical and effective patient care.
   1.2 Follow protocols implemented in the unit and adhere to the established unit standards.
   1.3 Learn the differences in history and physical examination in critically ill patients
   1.4 Understand the use and limitations of investigations commonly used in the ICU

2. Knowledge: Specific Clinical Problems
   2.1 Improve knowledge base in the ability to recognize, resuscitate, and stabilize patients sustaining or at risk of a cardiopulmonary arrest or other life-threatening disturbances.
   2.2 Improve knowledge of applied clinical physiology and homeostasis and the ability to recognize, prevent and treat single or multiple organ failure
   2.3 Improve understanding of physiology, pathophysiology, and pharmacology as they pertain to a critically ill patient.
   2.4 Select medically appropriate investigative tools, interpret the results of common diagnostic tests and demonstrate an understanding of cost-effectiveness, limitations, and complications.

2.5 Acquire skills in interpretation of
   2.5.1 Common rhythm disturbances
   2.5.2 Blood gases and assess acid-base status
   2.5.3 Basic ventilator orders
   2.5.4 Chest imaging

The resident must be able to demonstrate a working knowledge in the following areas:

1. CNS
   1.1 Recognition of patients with and causes of altered levels of consciousness
   1.2 Seizure disorders and status epilepticus

2. CVS
   2.1 Causes and management of cardiac failure and hypertensive emergencies.
   2.2 Invasive and non-invasive hemodynamic monitoring
   2.3 Basic use of ionotropes and vasopressors

3. Pulmonary
   3.1 Acute and chronic respiratory failure
   3.2 Airway management and indications for intubation
   3.3 Basic ventilatory support and monitoring parameters.

4. Shock
   4.1 Classification of shock and outline hemodynamic patterns

Rotation Information
Jodi Millan (administrative support)
Darren Markland (ICU attending)

Reading material:
Review ventilation and ventilators, sepsis guidelines, pressor indications, antibiotics, blood gas interpretation. For further information, refer to the resident Google drive.

Rotation duration:
2 blocks (8 weeks)

Vacation and time off:
Maximum of 4 days allowed off for the 2 blocks. This includes any academic requirements outside of half-day (ie exams). For further information refer to the resident vacation policy

Review of rotation objectives:
Rotation objectives should be reviewed with the resident soon after their rotation begins.

Assessment: EPA Completion
Below
Rotation evaluations are done by ICU staff physicians, with feedback from allied health professionals.

Surgical Foundations EPAs
FD1a Providing initial management for critically ill surgical patients,
Patient Assessment

FD1b Providing initial management for critically ill surgical patients,
Procedure

FD7b Managing uncomplicated postoperative surgical patients,
5. Renal
5.1 Cause of acute and chronic renal failure
5.2 Monitoring, preventing and recognizing renal failure when it occurs.

6. Immune
6.1 The investigation, monitoring, and treatment of infection, sepsis, and septic shock states.

7. GI
7.1 Recognition, investigation, and management of GI bleeds, ischemia, obstruction, infection, perforation, liver dysfunction.

8. Endocrine
8.1 Knowledge of stress states in the critically ill patient
8.2 Improve knowledge of the nutritional/electrolyte support of critically ill patients.
8.3 Causes for multi-system failure

9. Critical illness in pregnancy
9.1 Improve the ability to investigate, diagnose, and manage a peripartum or pregnant woman suffering from a critical illness.
   Improve knowledge of maternal cardiovascular, respiratory and renal physiology during pregnancy
   Improve the ability to diagnose and manage specific pregnancy-related diseases including:
   9.1.1 Pre-eclampsia /eclampsia
   9.1.2 HELLP syndrome
   9.1.3 Pulmonary disorders
   9.1.4 Cardiac disorders
   9.1.5 Peripartum Cardiomyopathy
   9.1.6 Acute renal and hepatic failure including acute fatty liver
   9.1.7 Amniotic Fluid Embolism
   9.1.8 DIC
   9.1.9 Management of end of life issues
   9.1.10 Understanding DNR Orders

10. Knowledge: Technical
The resident should gain skills in the following procedures:
   10.1 Basic airway management (bag/mask ventilation and uncomplicated intubation)
   10.2 Insertion of central venous catheters
   10.3 Insertion of arterial lines
   10.4 Insertion of chest tubes

Communicator

The resident will:
1. Establish a professional relationship with patients and their families.
2. Obtain and collate relevant history from patients and their families.
3. Listen effectively.
4. Discuss appropriate information with patients, families, and other members of the health care team.

To achieve these objectives, the resident will:
6. Personally examine and review each of their assigned patients before morning rounds.
7. Present the history and physical findings of critically ill patients to the attending physician in an organized and concise manner.
8. Identify the problems in a critically ill patient and generate a problem list and outline a plan to address each problem identified.
9. Demonstrate professional communication with other health care professionals regarding all aspects of patient care.
10. Assess, communicate with, and support patients and families confronted with a critical illness.
11. Explain life-sustaining therapies, in clear language, and describe the expected outcome of such therapies given the patient's goals and wishes.
12. Demonstrate respect and understanding of the role of other team members in communicating and facilitating decision-making with critically ill patients and their families.
13. Communicate effectively with families who may be dysfunctional, angry, confused, or litigious.
14. Explain the concept of brain death and organ donation in clear language.
**Collaborator**

The resident will:
1. Consult effectively with other physicians and health care professionals.
2. Contribute effectively to other interdisciplinary team activities.

To achieve these objectives, the resident will:
3. Develop an ability to work effectively and harmoniously with other health care workers.
4. Effectively participate in interdisciplinary rounds, demonstrating the ability to accept, consider, and respect the opinions of other team members, while contributing personal specialty-specific expertise.
5. Identify the role, expertise, and limitations of all members of an interdisciplinary team required to achieve a goal related to patient care optimally.

**Leader**

The resident will:
1. Utilize personal resources effectively to balance patient care, continuing education, and personal activities.
2. Improve knowledge of the allocation of finite health care resources.
3. Utilize information technology to optimize patient care and lifelong learning.

To achieve these objectives, the resident will:
4. Utilize appropriate time management for effective patient care, administrative duties, and scholarly activities.
5. Complete tasks that are discussed on rounds in a timely manner seeking help appropriately.
6. Be able to identify personal limitations and seek help appropriately.

**Health Advocate**

The resident will:
1. Identify the important determinants of health affecting patients.
2. Contribute effectively to improve the health of patients and communities.

To achieve these objectives, the resident will:
3. Respect and empower patient autonomy.
4. Promote equitable health care.
5. Apply the principles of quality improvement and quality assurance.
6. Recognize the risk factors for a variety of common critical illnesses and counsel families and colleagues in ways to minimize the acquisition risk.
7. Educate patients and families about and promote the importance of long-term health behaviors and preventative health care.
8. Educate patients and families of critically ill patients on the lifestyle and health issues that have led to the illness.

**Scholar**

The resident will:
1. Develop, implement, and monitor a personal, continuing education strategy.
2. Critically appraise sources of medical information and applies evidence-based practices to the care of the critically ill patient.
3. Facilitate the learning of patients, students, and other health professionals.
4. Recognize knowledge gaps and read around their cases.
5. Be aware of medical literature and understand how to search and critically appraise it.
Professional

The resident will:
1. Endeavor to monitor learning by regularly attempting EPAs.
2. Deliver the highest quality care with integrity, honesty, and compassion.
1. Exhibit appropriate personal and interpersonal professional behaviors.
2. Understand professional obligations to patients and colleagues.

To achieve these objectives, the resident will:
3. Develop and demonstrate the use of a framework for recognizing and dealing with ethical issues in clinical and research practice, including truth-telling, consent, conflict of interest, resource allocation, and end-of-life care.
4. Exhibit appropriate personal and interpersonal professional behaviors, including keeping attending physicians apprised of relevant events, interacting appropriately with the nursing staff, and being available to the unit when needed while on call.

CanMEDS Framework: Medical Expert, Communicator, Collaborator, Leader, Health Advocate, Scholar, Professional.

<table>
<thead>
<tr>
<th>Revisions</th>
<th>Approved at RPC Meeting</th>
</tr>
</thead>
<tbody>
<tr>
<td>CaMEDS roles updated</td>
<td>December 16, 2019</td>
</tr>
</tbody>
</table>