BHMC EMERGENCY MEDICNE PA/NP ROTATION INFORMATION

Congratulations on surviving the didactic portion of your education and welcome to your ER rotation. This will be an exciting and informative rotation. The ER is unlike other specialties in medicine: it is fast paced, requires knowledge of all other branches of medicine, attention to detail, and compassion. There are many parts you will need to put together in order to be successful in this arena. Below, you will find important bullet points on what is expected from each of you during your shifts. Again, welcome, and please don't hesitate to contact Dr. Mansour, or Diane Dreibelbis for any concerns or questions about your rotation.

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- 1 **Be on time**: please call the ER and let us know if you're running late: 954-355-5199 and ask to be connected to the mid-level PA or NP. Let them know you are a student and who you will be working with so that they will expect you.
- 2 **LEARNING OBJECTIVES:** please discuss your learning goals with your PA or MD for the day; we will help you accomplish these tasks.
- 3 **SEEING PATIENTS:** please discuss patients with the PA or MD before you see them so that we can help you select patients tailored to learning.
- 4 **PRESENTING:** if you don't know how to present tell us. Many think they know how, and they do not. It is a very important skill as a student and for your career. We will assess this skill for all patients. This is also a core requirement, and you must do it effectively for all the PAs and MDs you work with. YOU MUST PRESENT. Please do not tell us the patient "um, they had a car accident and their leg hurts". <u>Present in proper manner:</u>
 - Patient age
 - Sex (IF YOUR PATIENT IS PREGNANT YOU MUST PRESENT LMP/GsPs)
 - Chief complaint
 - Past medical history that is relevant ie, blood thinner for a head injury, stents placed for CP, migraine for HA, pregnancy for vaginal bleeding
 - **Brief history of the complaint**: pt presents today for hand pain after closing her finger in a door just prior to arrival. States car door closed on her left 3rd digit DIP and due to pain and bleeding, presents to ER for care. Etc.
 - **Pertinent positives and negatives**: pt reports pain and bleeding due to laceration in the digit, but denies any loss of sensation, denies loss of ROM, reports no other lacerations or injuries, etc
 - **PHYSICAL EXAM:** please do not present until you have done a complete physical exam. <u>YOU MUST DO AN EXAM</u>. Please do not skip any part of the PE, this will go against your review. Please remember you are learning and cannot omit

anything from the most important part of your interaction. Examine everything – skin, joints, range of motion, full abdominal exams, back exams - be suspicious, check your neuro exams – check all systems. Again: DO NOT SKIP A PHYSICAL EXAM, you WILL be asked about your findings. If you are unsure about how to do any part of an exam, please ask, we are happy to guide you.

****** YOU MAY NOT UNDER ANY CIRCUMSTANCES, DO A PELVIC OR A RECTAL EXAM UNSUPERVISED AND WITHOUT CONSENT FROM A PATIENT. SIGNED CONSENT IS A LAW IN THE STATE OF FLORIDA. AS A STUDENT YOU MAY NOT DO EITHER OF THESE EXAMS WITHOUT A SUPERVISING PA OR MD*******

- **DIFFERENTIAL DIAGNOSIS**: What is your reasoning for your choices? Why are you picking the radiology or exams you are choosing based on your DDX?
- PLAN: What's your plan? Admit? Discharge? Follow up? Why?
- **SCORING IF IT PERTAINS**: TIMI/PERC/HEART/PECARN/San Francisco score/NEXUS CRITERIA <<< do any of these pertain to your patient? Please be able to discuss these with your provider.
- **INTERPRETATION OF RESULTS**: please understand basic lab values, how they correlate, and be able to assess a basic XR and head CT.
- 5 **PROCEDURES:** Please do not do procedures by yourself. Please get a PA or an MD to discuss your plan for the procedure before starting. And please do not do any procedure until we can assess your skill level to do so especially if you haven't done it before. We are here to help you accomplish your learning objectives correctly and safely for you and the patient. **AGAIN: Please do not attempt to do any procedures unsupervised. You must present your plan of action for all procedures to your PA or MD before you start.**
- 6- THINGS TO DO AND SEE IN THE ER: you may observe other MDs or PAs administering patient care or doing procedures if you ask permission from the provider and the patient. YOU MUST INTRODUCE YOURSELF TO ALL PATIENTS, even if it is not your patient please be considerate and polite. The ER is an overwhelming place to be as a patient and a lot of people see each patient in order to provide care— please be mindful of this and always introduce yourself and ask permission to examine or observe. Remember: you are a student and you must introduce yourself as a student.
- 7 **ACCIDENTS or UNEXPECTED EVENTS:** please discuss any adverse outcome/event with your supervising provider right away; we are here to help you in all circumstances. The sooner you let us know the sooner we can help mitigate any problem.
- 8 **TRAUMA:** Under <u>NO CIRCUMSTANCES</u> are you to have direct patient care with a trauma patient or do a procedure even if it is just suturing without the explicit discussed consent of

your supervising PA or MD. DO NOT do any procedures or touch any patients in trauma without discussing it prior to seeing the patient.

YOU MAY OBSERVE IN TRAUMA IF THERE IS A CASE YOU ARE MADE AVAILABE FOR BY YOUR PROVIDER; however – do not distract the trauma doctors, nurses, or other providers while a trauma is underway. Save any questions for after the initial encounter. DO NOT DO ANYTHING UNLESS YOU ARE TOLD OR ASKED TO DO SO BY THE TEAM. OBSERVE ONLY AND DO NOT TOUCH THE PATIENT OR GET IN THE WAY.

Please be sure to look at any and all videos on the website and look up topics you may want to discuss.

Remember: be prompt, be respectful of patients and their health, and always discuss cases and plans with your supervising PA or MD. We are here to help you learn and have a productive learning experience.

Best of luck on your ED rotation!

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