

**Pediatric Emergency Medicine
Goals and Objectives**

Program Goal

The goals and objectives for the training program in Pediatric Emergency Medicine at LeBonheur Children’s Medical Center are to produce an individual who is clinically proficient in all aspects of Pediatric Emergency Medicine with special emphasis on the management of the critically ill and injured child. A graduate of the program should possess a sound fund of knowledge in all aspects of Pediatric Emergency Medicine, be able to effectively transmit this knowledge as a teacher, and serve as a resource person for the community. Competence in research design and analysis should be demonstrated through active involvement in projects and critical appraisal of the literature using the principles of evidence based medicine. The physician should also be familiar with the relevant issues regarding the administrative, legal and ethical aspects of Pediatric Emergency Medicine.

Pediatric Emergency Medicine General Objectives

By the end of the three year Pediatric Emergency Medicine residency program, all residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independency as he or she progresses throughout the year.

Key of Methods

Teaching Methods

- CT=Clinical Teaching
- JC=Journal Club
- EBMC=Conference
- MMC=Morbidity & Morality Conference
- ATLS=ATLS Course
- SM=Sedation Module
- WMM=Wound Management Module
- PEM= Study Course with book chapter*
- BPQ=Board preparation questions
- REM=Role modeling/Mentoring
- LEC=Lectures
- CITI=CITI course
- EC= ACGME-Ethics Conference
- ACLS=ACLS Course

Evaluation Methods

- DO=Direct observation w/ checklist
- SA=Self Assessment
- PL=Procedure Log
- RL=Resuscitation Log
- PS=Documentation of Procedural Sedation
- GL=Rotation Global Evaluation Form
- PRES=Conference Presentation
- INEX=In training Examination
- QI=Quality Improvement Project
- ILP=Individualized Learning Plan
- 360=360 degree evaluation
- PT=Module post tests
- PCL=Patient Care Log

Frequency of Evaluations

- MON=monthly
- QA=quarterly
- 2A=semiannually
- A=annually
- D=daily

*Text Book: Fleisher GR, Ludwig S. Textbook of Pediatric Emergency Medicine. Lippincott, Williams, & Wilkins, Philadelphia, 2005.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	GENERAL OBJECTIVES			
	Provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.	WMM, SMM, CT, ATLS	GL DO PL PT	MON MON 2A 2A

			PRES	MON/A
	Communicate effectively and demonstrate caring and respectful behaviors when interacting with patients and their families.	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Gather essential and accurate information about their patients.	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgments.	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Develop and carry out patient management plans.	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Counsel and educate patients and their families.	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Use information technology to support patient care decisions and patient education.	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Perform competently all medical and invasive procedures considered essential for the area of practice.	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Provide health care services aimed at preventing health problems or maintaining health.	WMM, SMM, CT, ATLS	GL DO PL PT	MON MON 2A 2A

			PRES	MON/A
	Work with health care professionals, including those from other disciplines, to provide patient-focused care.	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	SPECIALTY SPECIFIC OBJECTIVES			
	See specific rotations for a detailed list of patient care objectives.			
Medical Knowledge	GENERAL OBJECTIVES			
	Demonstrate knowledge about established and evolving biomedical, clinical, and cognitive sciences and the application of this knowledge to patient care.	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Demonstrate an investigatory and analytic thinking approach to clinical situations.	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Know and apply the basic and clinically supportive sciences which are appropriate to their discipline.	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	SPECIALTY SPECIFIC OBJECTIVES			
	See specific rotations for a detailed list of medical knowledge objectives.			
Practice Based Learning and Improvement	GENERAL OBJECTIVES			
	Investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
	Analyze practice experience and perform practice-based improvement activities using a systematic methodology.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL	MON 2A MON 2A

			RL QI	2A A
	Locate, appraise, and assimilate evidence from scientific studies related to their patients' health problems.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
	Obtain and use information about their own population of patients and the larger population of patients from which their patients are drawn.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
	Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
	Use information technology to manage information, access on-line medical information; and support their own education.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
	Facilitate the learning of students and other health care professionals.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
	SPECIALTY SPECIFIC OBJECTIVES			
	Evaluate patient care practices, discuss how they meet standards, and develop ways to improve these practices.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
	Compare clinical practice, patient safety, and quality of care	LEC, JC, MMC,	DO	MON

	with evidence based medicine.	CT, REM	360 Degree GL PL RL QI	2A MON 2A 2A A
	Participate in all mandated conferences (include a list of conferences).	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
	Complete a QA/QI project under faculty direction.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
	Demonstrate improvement in clinical management and diagnostic assessment.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
	Implement new scientific advances and clinical approaches from a variety of sources into current patient care practices.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
	Analyze and evaluate medical literature and examine alternate sources for information that pertains to their patient's health problems.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
	Take responsibility for lifelong learning.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL	MON 2A MON 2A 2A

			QI	A
	Use information technology such as Up-To-Date, PubMed or Ovid to enhance patient care.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
	Teach fellow residents, medical students, and interns.	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
	Maintain appropriate records documenting practice activities (such as patient logs).	LEC, JC, MMC, CT, REM	DO 360 Degree GL PL RL QI	MON 2A MON 2A 2A A
Interpersonal and Communication Skills	GENERAL OBJECTIVES			
	Demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients' families, and professional associates.	CT, REM, LEC	DO 360 GL	MON 2A MON
	Create and sustain a therapeutic and ethically sound relationship with patients.	CT, REM, LEC	DO 360 GL	MON 2A MON
	Use effective listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills.	CT, REM, LEC	DO 360 GL	MON 2A MON
	Work effectively with others as a member or leader of a health care team or other professional group.	CT, REM, LEC	DO 360 GL	MON 2A MON
	SPECIALTY SPECIFIC OBJECTIVES			
	Carefully listen to patients to assess the patient's health problems including their verbal and non-verbal communications.	CT, REM, LEC	DO 360 GL	MON 2A MON
	Demonstrating respectful and considerate attitudes, effectively communicate with patients, families, and other health care personnel, when addressing management plans,	CT, REM, LEC	DO 360 GL	MON 2A MON

	patient issues, and especially end-of-life decisions.			
	Accurately present (verbally and written) a case to attending physicians, fellow residents, and other health care professionals.	CT, REM, LEC	DO 360 GL	MON 2A MON
	Provide timely, legible, and thorough medical record documentation - histories and physical examinations, admission notes, progress notes, procedure notes and discharge summaries.	CT, REM, LEC	DO 360 GL	MON 2A MON
	Provide education and counseling to patients, and families using non-technical and clear language. (Use non-verbal and verbal communication skills)	CT, REM, LEC	DO 360 GL	MON 2A MON
	Demonstrate skill in handling all difficult patient care situations.	CT, REM, LEC	DO 360 GL	MON 2A MON
	Spend adequate time with patients addressing their questions and concerns.	CT, REM, LEC	DO 360 GL	MON 2A MON
	Work well within team consisting of students, residents, attending physicians, nurses, and patients.	CT, REM, LEC	DO 360 GL	MON 2A MON
	Function effectively as a consultant for specialty and subspecialty care.	CT, REM, LEC	DO 360 GL	MON 2A MON
Professionalism	GENERAL OBJECTIVES			
	Demonstrate a commitment to carrying our professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.	CT, REM, EC, LEC	DO 360 GL	MON 2A MON
	Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients, and society that supercedes self-interest; accountability to patients, society, and the profession; and a commitment to excellence and on-going professional development.	CT, REM, EC, LEC	DO 360 GL	MON 2A MON
	Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care confidentiality of patient information, informed consent, and business practices.	CT, REM, EC, LEC	DO 360 GL	MON 2A MON
	Demonstrate a sensitivity and responsiveness to patients' culture, age, gender, and disabilities.	CT, REM, EC, LEC	DO 360 GL	MON 2A MON
	SPECIALTY SPECIFIC OBJECTIVES			

	Demonstrate respect, compassion, integrity, punctuality, reliability, and honesty with regards to patients and colleagues.	CT, REM, EC, LEC	DO 360 GL	MON 2A MON
	Show regard for the opinions of others.	CT, REM, EC, LEC	DO 360 GL	MON 2A MON
	Display initiative and leadership.	CT, REM, EC, LEC	DO 360 GL	MON 2A MON
	Acknowledge errors, alert patients and appropriate health care providers about the errors, and create a plan of action to minimize them.	CT, REM, EC, LEC	DO 360 GL	MON 2A MON
	Demonstrate concern for the educational development of students and residents.	CT, REM, EC, LEC	DO 360 GL	MON 2A MON
	Volunteer for activities for the good of the institution and community.	CT, REM, EC, LEC	DO 360 GL	MON 2A MON
	Ask for help when needed and accept constructive feedback.	CT, REM, EC, LEC	DO 360 GL	MON 2A MON
	Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.	CT, REM, EC, LEC	DO 360 GL	MON 2A MON
	Maintain patient confidentiality.	CT, REM, EC, LEC	DO 360 GL	MON 2A MON
	Compassionately respond to issues of culture, age, gender, ethnicity, and disability in patient care.	CT, REM, EC, LEC	DO 360 GL	MON 2A MON
Systems-Based Practice	GENERAL OBJECTIVES			
	Demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.	CT, MMC, LEC, EC	360 DO GL	MON 2A MON
	Understand how their patient care and other professional practices affect other health care professionals, the health care organization, and the larger society and how these elements of the system affect their own practice.	CT, MMC, LEC, EC	360 DO GL	MON 2A MON
	Know how types of medical practice and delivery systems	CT, MMC, LEC,	360	MON

differ from one another, including methods of controlling health care costs and allocating resources.	EC	DO GL	2A MON
Practice cost-effective health care and resource allocation that does not compromise quality of care.	CT, MMC, LEC, EC	360 DO GL	MON 2A MON
Advocate for quality patient care and assist patients in dealing with system complexities.	CT, MMC, LEC, EC	360 DO GL	MON 2A MON
Know how to partner with health care managers and health care providers to assess, coordinate, and improve health care and know how these activities can affect system performance.	CT, MMC, LEC, EC	360 DO GL	MON 2A MON
SPECIALTY SPECIFIC OBJECTIVES			
Demonstrate ability to deliver high-quality medical care in a private, government, and inner city hospital settings.	CT, MMC, LEC, EC	360 DO GL	MON 2A MON
Demonstrate the knowledge of different types of medical practice and health care delivery systems and understand how this affects patient care.	CT, MMC, LEC, EC	360 DO GL	MON 2A MON
Demonstrate knowledge of business aspects of medical practice including coding, billing, and insurance.	CT, MMC, LEC, EC	360 DO GL	MON 2A MON
Work with ancillary team members (discharge planners, case managers, and social workers) to provide high quality cost-effective care.	CT, MMC, LEC, EC	360 DO GL	MON 2A MON
Use systematic approaches to reduce errors.	CT, MMC, LEC, EC	360 DO GL	MON 2A MON
Practice effective allocation of health care resources to avoid compromising quality of care.	CT, MMC, LEC, EC	360 DO GL	MON 2A MON
Interact with patients, attending physicians and allied health care personnel as part of a health care team.	CT, MMC, LEC, EC	360 DO GL	MON 2A MON
Serve as a patient advocate in the outpatient and inpatient setting.	CT, MMC, LEC, EC	360 DO GL	MON 2A MON
Direct care in inpatient and outpatient settings as a member of a multidisciplinary team.	CT, MMC, LEC, EC	360 DO	MON 2A

			GL	MON
	Demonstrate knowledge of how the health care system including other physicians, nurses, and health care professionals affect their patient care practices.	CT, MMC, LEC, EC	360 DO GL	MON 2A MON

EMERGENCY DEPARTMENT ROTATION
LEBONHEUR CHILDREN'S MEDICAL CENTER

By the end of the ED rotation at LeBonheur, the **first year** residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independence as he or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	SPECIALTY SPECIFIC OBJECTIVES			
	Under direct supervision, work up patients including: medical history, physical exam, diagnostic procedures	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Manage medical and trauma resuscitations	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Take limited sign-out from pediatric residents	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Under direct supervision provide resuscitation for patients 14 years and younger who have suffered blunt and penetrating trauma	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Evaluate patients with an undifferentiated chief complaint and diagnose whether it falls in the areas of surgical,	WMM, SMM, CT, ATLS	GL DO	MON MON

medical, or subspecialty		PL PT PRES	2A 2A MON/A
Perform diagnostic evaluations rapidly, with simultaneous stabilization of any life threatening process and to proceed with appropriate life-saving interventions before arriving at a definitive diagnosis	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
Perform under direct supervision, the following emergency procedures, including but not limited to: <ul style="list-style-type: none"> • Chest tube insertion • Insertion of large bore intravenous catheters for fluid resuscitation • Wound suturing 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
Under the supervision of ED attending, manage patients with cardiopulmonary arrest	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
Evaluate, diagnose and manage patients with injuries from near drowning, smoke inhalation, carbon monoxide poisoning, heat illnesses, hypothermia, radiation accidents, and electrical injuries	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
Monitor and interpret appropriate parameters the following devices to provide critical assessment of patient progress including but not limited to: <ul style="list-style-type: none"> • Pulse oximeter • Non-invasive blood pressure monitors • Cardiac and respiratory monitors 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
Utilize invasive monitoring and machines such as arterial lines, central venous pressure monitors, cardiac pacing devices, end tidal CO ₂ monitors, and both volume and pressure ventilators	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
Evaluate, diagnose, and manage patients with the following allergic and immunologic emergencies including but not limited to: <ul style="list-style-type: none"> • Asthma 	WMM, SMM, CT, ATLS	GL DO PL PT	MON MON 2A 2A

	<ul style="list-style-type: none"> • Allergic reactions • Allergic rhinitis • Serum sickness • Eczema • Immune disorders • HIV 		PRES	MON/A
	<p>Evaluate, diagnose, and manage patients with the following cardiovascular emergencies including but not limited to:</p> <ul style="list-style-type: none"> • Congestive heart failure • Cardiac arrhythmias • Pericardial disease • Infectious endocarditis • Blunt and penetrating cardiac and great vessel trauma • Cardiac tamponade • Congenital heart defects 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	<p>Assess patients suffering from a variety of congenital malformations and defects with special medical needs including but not limited to the following:</p> <ul style="list-style-type: none"> • Congenital heart defects • Down's Syndrome • Other chromosomal disorders • Cystic fibrosis • Sickle cell disease • Hemophilia • Other genetic syndromes 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	<p>Assess and treat patients with the following dermatologic emergencies including but not limited to:</p> <ul style="list-style-type: none"> • Dermatitis (atopic, seborrheic, allergic contact, diaper) • Drug reactions • Impetigo • Urticaria • Superficial fungal infections • bites and infestations • Warts and molluscum • Pityriasis rosea • Variety of viral exanthems • Rashes associated with systemic disease (Rocky Mounted Spotted Fever, Lyme Disease, 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A

	Meningococemia)			
	Assess patients with dental emergencies including but not limited to the following: <ul style="list-style-type: none"> • Trauma • Abscess • Soft tissue contusions and lacerations in the oral cavity • Mandible fractures 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Evaluate patients with the following endocrine and metabolic disorders including but not limited to: <ul style="list-style-type: none"> • Diabetic ketoacidosis • Hypoglycemia • SIADH • Diabetes insipidus • Adrenal disorders • Thyroid dysfunction • Parathyroid disorders • Rickets • Pituitary dysfunction • Inborn errors of metabolism 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Assess patients with gastrointestinal emergencies including but not limited to the following: <ul style="list-style-type: none"> • Acute and chronic vomiting and diarrhea • Viral hepatitis • Acute biliary tract disease • Pancreatitis • Abdominal pain (appendicitis, peritonitis, intestinal obstruction, peptic ulcer disease, hernias) • GI bleeding (anorectal fissures, hemorrhoids, colitis, polyps, hemolytic uremic syndrome, Henoch-Schonlein purpura) 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Assess patients with the following hematologic and oncologic emergencies including but not limited to: <ul style="list-style-type: none"> • Anemia • Sickle Cell disease • Thalassemias • Methemoglobinemia • Idiopathic thrombocytopenic purpura • Platelet function abnormalities 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A

	<ul style="list-style-type: none"> • Hemophilia and Von Willebrand's disease • Disseminated intravascular coagulation • Hypercoagulable conditions • Neutropenia • Transfusion reactions • Leukemias • Solid tumors 			
	<p>Evaluate patients with the following infectious emergencies including but not limited to:</p> <ul style="list-style-type: none"> • Sepsis • Bacteremia • Meningitis • Encephalitis • Upper and lower respiratory tract infections • viral and bacterial gastroenteritis • Cellulitis • Lymphadenitis • Impetigo • Osteomyelitis • Septic arthritis • Urinary tract infections • Sexually transmitted diseases • Viral syndromes • Rocky Mountain spotted fever • Lyme disease • Toxic shock syndrome 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	<p>Assess patients with the following neurologic emergencies including but not limited to:</p> <ul style="list-style-type: none"> • Seizures • Headaches • Encephalopathy • Disorders of motor function • Cranial nerve dysfunction • Movement disorders • Disorders of balance • Developmental delay • Head trauma • Skull fractures 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A

	<ul style="list-style-type: none"> • Loss of consciousness due to trauma • Shaking/Impact head injuries • Spinal cord injuries • Peripheral nerve injuries 			
	<p>Evaluate patients with the following ophthalmologic emergencies including but not limited to:</p> <ul style="list-style-type: none"> • Periorbital and orbital cellulitis • Conjunctivitis from viral, chemical, bacterial and traumatic causes • Styes • Orbital trauma • Hyphema • Ruptured globe • Blowout fractures • Eyelid lacerations • Retinal hemorrhages • Corneal injuries • Vision loss 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Obtain visual acuities by examining eyes with a slit lamp	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	<p>Assess patients with the following psychosocial disorders:</p> <ul style="list-style-type: none"> • Depression • Suicide attempts • Psychoses • Conduct disorders • Attention deficit hyperactivity disorder • Behavioral problems • Eating disorders • Substance Abuse • Rape • Physical Abuse • Pregnancy 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	<p>Assess patients with the following pulmonary emergencies including but not limited to:</p> <ul style="list-style-type: none"> • Acute respiratory failure 	WMM, SMM, CT, ATLS	GL DO PL	MON MON 2A

	<ul style="list-style-type: none"> • Pneumonia • Stridor • Croup • Asthma • Bronchiolitis • Bronchitis • Pulmonary edema • Pulmonary embolism • Pleuritis • Sleep apnea • Cystic fibrosis • Pneumothorax • Hemothorax • Flail Chest • Pulmonary contusion • Traumatic asphyxia • Tracheal and bronchial injuries 		PT PRES	2A MON/A
	<p>Gain exposure to patients with the following renal and genitourinary emergencies including but not limited to:</p> <ul style="list-style-type: none"> • Dehydration • Electrolyte disorders • Hypertension • Nephrotic syndrome • Acute renal failure • Hemolytic-uremic syndrome • Henoch-Schonlein purpura • Renal tubular acidosis • Chronic renal failure • Dialysis • Testicular and penile problems • Urinary tract infections • Urinary retention • Renal calcinosis 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
Medical Knowledge	SPECIALTY SPECIFIC OBJECTIVES			
	Demonstrate application of the knowledge about the disease entities outlined above to patient care			
	Demonstrate intellectual curiosity in their approach to clinical situations			

	Correlate clinical signs and symptoms of the above mentioned diseases with a pathophysiologic approach to their management			
	Become familiar with patient “flow” in the ED and processes to evaluate patients efficiently			
Practice Based Learning and Improvement	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Interpersonal and Communication Skills	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Professionalism	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Systems-Based Practice	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			

Second Year Pediatric Emergency Medicine Resident

By the end of the ED rotation, the **second year** residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independency as he or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	SPECIALTY SPECIFIC OBJECTIVES			
	Initiate basic workup of patients and present a management plan to the precepting faculty	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	With minimal faculty supervision, manage medical resuscitations with emphasis on stabilization with special attention to the airway, breathing, circulatory and neurologic status	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	With minimal faculty supervision, participate in resuscitation of patients 14 years and younger who have suffered blunt or penetrating trauma using principles	WMM, SMM, CT, ATLS	GL DO PL	MON MON 2A

	a comprehensive list.			
Systems-Based Practice	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			

Third Year Pediatric Emergency Medicine Resident

By the end of the ED rotation, the **third year** residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independency as he or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	SPECIALTY SPECIFIC OBJECTIVES			
	Demonstrate independence in completing patient workup and formulate a plan for disposition prior to being precepted by PEM faculty	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Independently manage medical resuscitations	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Demonstrate ability to independently manage resuscitation and stabilization of patients 14 years and younger who have suffered blunt or penetrating traumas	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Same as outlined for the second year resident but become a supervisory adjunct (“junior” attending) in the ED			
	Manage all trauma & medical codes or resuscitations			
Medical Knowledge	SPECIALTY SPECIFIC OBJECTIVES			
	Demonstrate application of the knowledge about the disease entities outlined above to patient care.			
	Demonstrate intellectual curiosity in their approach to clinical situations.			
	Correlate clinical signs and symptoms of the above mentioned diseases with a pathophysiologic approach to their management.			

Practice Based Learning and Improvement	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Interpersonal and Communication Skills	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Professionalism	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Systems-Based Practice	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			

ADULT ED ROTATION
VANDERBILT UNIVERSITY MEDICAL CENTER

By the end of the **Adult ED rotation at Vanderbilt**, the **first year** residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independency as he or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	SPECIALTY SPECIFIC OBJECTIVES			
	Describe (1) how to approach adult emergency patients, (2) how to recognize and triage common emergent conditions encountered in an adult population, (3) how to manage them acutely, and (4) Become familiar with evaluation and stabilization protocols for chest pain and stroke	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Demonstrate rational test ordering, including the cost benefit of tests such as ultrasound, CT, nuclear medicine studies, interpretation of routine x-rays, and triaging and caring for multiple patients will all be elements of the learning process	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Manage both medical and surgical patients (especially laceration repair, minor trauma, and minor orthopedic injuries and splinting)	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
	learn about procedures including the slit lamp, central lines,	WMM, SMM, CT,	GL	MON

	airways, ultrasound, dental blocks, wrist and foot blocks, ACLS algorithms and I & D of abscess	ATLS, ACLS certification	DO PL PT PRES	MON 2A 2A MON/A
	Become facile with gynecological and first trimester obstetric emergencies and pelvic examinations	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Evaluate, diagnose, and manage adult patients with the following emergencies including but not limited to: <ul style="list-style-type: none"> • Cardiovascular • Gastrointestinal • Pulmonary • Neurologic • Substance Abuse 	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Manage emergency room patients suffering from psychiatric disorders	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
Medical Knowledge	SPECIALTY SPECIFIC OBJECTIVES			
	Become familiar with typical adult doses of antibiotics, sedatives and resuscitation medications			
	Correlate clinical signs and symptoms of common disease entities encountered in an adult population, with a pathophysiologic approach to their management			
Practice Based Learning and Improvement	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Interpersonal and Communication Skills	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
	Communicate effectively with referring physicians, admitting physicians and consultants			
	Interact with nurses, ancillary health care providers			
	Appropriately deal with difficult patients and families			
Professionalism	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for			

	a comprehensive list.			
	Describe common ethical issues in the ED			
Systems-Based Practice	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
	Describe how to avoid high risk legal situations			

Second Year Pediatric Emergency Medicine Resident

By the end of the **Adult ED rotation at Vanderbilt**, the **second year** residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independency as he or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	SPECIALTY SPECIFIC OBJECTIVES			
	Manage more patients in the ED with less input from the Emergency Faculty physicians	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Assess and manage both critically ill and urgent patients with both medical and surgical problems	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Describe the rational ordering of tests and to assume responsibility for the efficiency of the ED operation and its economic use of resources (System-based practice).	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Begin to assume a teaching role for interns and students (Practice-based learning and improvement).	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Develop further confidence in performing airway management, ultrasound, laceration repair and minor orthopedic injury management and other problems	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A

	Make admission and discharge decisions under the auspices of the EM faculty member and to begin to understand who should be admitted and when it is safe to discharge	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Describe the relative costs to the patient of prescriptions, tests and admission; and the various levels of insurance coverage and how this impacts care in the ED	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Expand knowledge of how to deal with patients, their unique needs (cultural, gender-based, disability-based), and their families; and how to deal with privacy issues	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Interact with nurses, all levels of ancillary health care providers, including EMT's, consultants, admitting physicians, and referring physicians in order to provide optimal care	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Evaluate adult patients with medical and surgical problems and improve skills in the diagnosis and management of common adult problems.	WMM, SMM, CT, ATLS, ACLS certification	GL DO PL PT PRES	MON MON 2A 2A MON/A
Medical Knowledge	SPECIALTY SPECIFIC OBJECTIVES			
	Correlate clinical signs and symptoms of common adult such as coronary artery disease, cerebrovascular accidents, and aortic aneurysm with a pathophysiologic approach to their management			
	Learn to become a nurturing advisor to general emergency medicine residents in management of the pediatric patient			
Practice Based Learning and Improvement	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Interpersonal and Communication Skills	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Professionalism	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for			

	a comprehensive list.			
Systems-Based Practice	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			

Third Year Pediatric Emergency Medicine Resident

By the end of the **Adult ED rotation at Vanderbilt**, the **third year** residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independency as he or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	SPECIALTY SPECIFIC OBJECTIVES			
	Continue to evaluate large numbers of a wide variety of ED patients but to assume a greater teaching and administrative role. There will be increased interactions with the nursing leadership	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Learn to become a nurturing advisor to general emergency medicine residents and medical students in management of the pediatric patient	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Although there will be fewer patients for whom the resident is a primary provider, the resident should assume a greater role in triaging and managing the ED flow (System-based practice).	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	The resident will assume greater responsibility for the evaluation, management and disposition of decisions for patients, especially those in the critical care areas of the ED (System-based practice).	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Continued practice of airway, ultrasound and other procedural skills (Practice-based learning and improvement).	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Responsibility for decisions made, however, still ultimately rests with the EM Attending physician	WMM, SMM, CT, ATLS	GL DO	MON MON

			PL PT PRES	2A 2A MON/A
	There will be more opportunities for death-telling, dealing with problem patients and difficult issues (Communication skills and professionalism).	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
Medical Knowledge	SPECIALTY SPECIFIC OBJECTIVES			
	Correlate clinical signs and symptoms of common adult such as coronary artery disease, cerebrovascular accidents, and aortic aneurysm with a pathophysiologic approach to their management			
Practice Based Learning and Improvement	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Interpersonal and Communication Skills	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Professionalism	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Systems-Based Practice	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			

ICU Rotation

LeBonheur Children's Medical Center

By the end of the ICU rotation, the **first year** residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independency as he or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	SPECIALTY SPECIFIC OBJECTIVES			
	Provide care of critically ill or injured children with chronic medical and mechanical needs	WMM, SMM, CT, ATLS	GL DO	MON MON

			PL PT PRES	2A 2A MON/A
	Utilize invasive monitoring and machines such as arterial lines, central venous pressure monitors, Swan-Ganz catheters, cardiac pacing devices, intracranial pressure monitors, end tidal CO ₂ monitors, and both volume and pressure ventilators	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
Medical Knowledge	SPECIALTY SPECIFIC OBJECTIVES			
	Acquire skills for central line and arterial line placement including transducer set up and use of bedside sonographic technology			
	Become familiar with the parameters for cardiopulmonary monitoring			
	Become familiar with vasoactive drugs, their dose ranges, side effects and indications			
	Review the critical care management of common pediatric emergencies such as DKA, sepsis, shock, traumatic brain injury and respiratory failure			
	Become familiar with principles of invasive and non invasive mechanical ventilation techniques			
Practice Based Learning and Improvement	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Interpersonal and Communication Skills	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Professionalism	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Systems-Based Practice	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			

Orthopaedics/Radiology Rotation

By the end of the Orthopaedics/Radiology rotation, the **first year** residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independency as he or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care (Orthopaedics)	SPECIALTY SPECIFIC OBJECTIVES			
	Using the Salter-Harris classification system, identify five types of physeal fractures	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Describe the importance of proper immobilization in the initial management of fractures	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Recognize the signs and symptoms and describe the treatment of compartment syndrome	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Evaluate injuries commonly associated with neurovascular compromise	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Recognize the importance of subtle radiographic indicators of fractures such as presence of joint effusion, fat pad sign, soft tissue disruption, bony relationships, and angles.	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Plan the management of the following types of fractures: osteochondral, greenstick, epiphyseal injuries, and plastic and bowing fractures	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Evaluate, diagnose, and manage patients with bone and joint infections, compartment syndrome, penetrating intra-articular wounds, subluxations, slipped capital femoral epiphysis, Legg-Calv'e-Perthes disease osteochondroses, torticollis and soft tissue contusions and hematomas, clavicular fractures, proximal humerus and humeral shaft	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A

	fractures, supracondylar fractures, fractures of the distal radius and ulna, buckle of radius fractures, navicular fractures, metacarpal fractures, phalangeal fractures, femoral fractures, pelvic fractures (their differential association with abdominal and genitourinary trauma), tibial fractures, fibular fractures, calcaneal fractures, metatarsal fractures, patellar fractures, patellar sleeve fractures, osteochondroses, fractures of the distal humerus, injury/fractures of the olecranon, ulnar shaft fractures, radial head fractures, and Monteggia fractures			
	Evaluate, manage, and understand the mechanism of injury in dislocation of the shoulder, elbow, radial head, metacarpal-phalangeal dislocation, interphalangeal dislocation, knee, patellar dislocation, claviculomanubrial joint, hip, ankle dislocation, wrist dislocation, carpal bone dislocations (eg, lunate), and avulsion injuries (eg, AIIS, ASIS, ischial tuberosity, tibial spine, tibial tuberosity avulsions)	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Evaluate and manage repetitive stress injuries (eg, stress fractures)	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Properly administer splinting and casting techniques	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Patient Care – Radiology			
	Learn the indications for various radiological studies (plain films, fluoroscopy, ultrasound, CT and MRI)			
	Become competent in interpreting plain radiographs			
	Become familiar with fundamentals of CT interpretations			
Medical Knowledge (Orthopaedics)	SPECIALTY SPECIFIC OBJECTIVES			
	Define greenstick (incomplete) and buckle fractures	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module

	Understand the pathophysiology of ligamentous injuries, as compared with growth plate injuries	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Demonstrate an understanding of the mechanism of injury in clavicular fractures, proximal humerus and humeral shaft fractures, supracondylar fractures, fractures of the distal radius and ulna, buckle of radius fractures, navicular fractures, metacarpal fractures, phalangeal fractures, femoral fractures, pelvic fractures (their differential association with abdominal and genitourinary trauma), tibial fractures, fibular fractures, calcaneal fractures, metatarsal fractures, patellar fractures, patellar sleeve fractures, osteochondroses, fractures of the distal humerus, injury/fractures of the olecranon, ulnar shaft fractures, radial head fractures, and Monteggia fractures	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Learn the management of partial finger tip amputations			
	Be able to perform simple fracture reductions (distal forearm, phalangeal)			
	Be able to perform uncomplicated joint dislocation reduction (Elbow, shoulder, finger, patella, radial head)			
	Develop competency in performing a neurovascular examination of an injured extremity			
	Patient Care - Radiology			
	Review teaching files of common diagnoses encountered in the emergency department			
	Learn the limitations of various studies used to localize soft tissue foreign bodies			
Practice Based Learning and Improvement	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Interpersonal and Communication Skills	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Professionalism	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			

Systems-Based Practice	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			

Toxicology Rotation
Vanderbilt University Medical Center

By the end of the **Toxicology rotation at Vanderbilt**, the **third year** residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independency as he or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	SPECIALTY SPECIFIC OBJECTIVES			
	Demonstrate a familiarity with the initial approach to all patients with poisoning and overdose	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Describe when gastric decontamination is indicated and what types of gastric decontamination to use in specific poisonings	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Manage common poisonings and overdoses including acetaminophen, aspirin, tricyclic antidepressants, lithium, digoxin, calcium channel blockers, beta-blockers, anticonvulsants, CO, methemoglobinemia, alcohols, iron, isoniazid, cyanide, organophosphates, antihistamines, anticholinergics, acid and alkali ingestions, and the stings of spiders and snakes	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Recognize signs and symptoms and plan the management of the following toxic substances: <ul style="list-style-type: none"> Herbal/alternative remedies Toxic mushroom and plant ingestion Ketamine, PCP, and GHB-like agents Hallucinogens Sympathomimetics (including cocaine, 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A

	<ul style="list-style-type: none"> • amphetamines, MDMA and Ecstasy) • Alcohol, ethanol, isopropyl, and methanol • Oral Hypoglycemic Drugs • Cardiovascular Agents (digoxin, clonidine, betablockers) • Antidepressants • Theophylline • Salicylates • Phenothiazines and other neuroleptics • Narcotics • Iron • Anticholinergics • Acetaminophen • Lead • Organophosphates • Hydrocarbons • Alkalis and Acids 			
	Recognize signs and symptoms and plan the management of alcohol, benzodiazepine, and opioid withdrawal	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Recognize and manage serotonin syndrome, neuroleptic malignant syndrome, methemoglobinemia, and ingestions that are associated with delayed toxicity (e.g., oral hypoglycemic drugs)	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Make management decisions on gastric emptying, supportive care, specific antidotes, admission, appropriate monitoring, and psychiatric referral	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
Medical Knowledge	SPECIALTY SPECIFIC OBJECTIVES			
	Describe the different types of metabolism kinetics and elimination of various drugs and poisons	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Demonstrate knowledge of the antidotes currently available	CT, JC, PEM,	GL	MON

		BPQ, LEC, CITI, WMM, SMM	DO PRES INEX PT	MON MON/A A End of module
	Describe the usefulness of ancillary studies in the treatment of methhemoglobinemia, alcohol, benzodiazepine and opioid withdrawal, alkali and acid exposures, hydrocarbon ingestions, organophosphate exposure, lead exposure, medication overdoses, illicit drug overdose, and toxic plant ingestions,	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Identify the major types of ingestions by age	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Know the indications and contraindications of naloxone and cyanide kit and flumazenil and fomepizole	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Know which ingestions commonly cause metabolic acidosis, rapidly lethal, radio-opaque, seizures, and dysrhythmia	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Demonstrate the knowledge of which chemicals require skin decontamination or immediate eye decontamination	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Describe the role of gastrointestinal tract decontamination, enhanced elimination, including the use of multiple-dose activated charcoal, enhanced elimination through alkalinization of the urine and hemoperfusion, activated charcoal, including substances not adsorbed by charcoal, enhanced elimination through hemodialysis	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Learn the common childhood poisonings that will require aggressive therapy i.e. poisonings where “one pill can kill”			
	Become familiar with the full range of functions of the <i>Micromedex</i> and <i>Poisondex</i> data base systems			

	Learn about administration and operation of the state funded <i>Middle TN Poison Control Center</i> based in Nashville			
Practice Based Learning and Improvement	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Interpersonal and Communication Skills	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Professionalism	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Systems-Based Practice	SPECIALTY SPECIFIC OBJECTIVES			
	Describe how a poison center works, how to deal with patients and physicians on the hot-line.			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			

Anesthesia/Sedation Rotation

By the end of the Anesthesia/Sedation rotation, the **first year** residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independency as he or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	SPECIALTY SPECIFIC OBJECTIVES			
	Administer the following types of anesthesia or sedation including but not limited to: <ul style="list-style-type: none"> • Procedural Sedation • Nitrous Oxide Administration • Local and Regional Anesthesia 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Perform pre and post operative evaluations	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Under direct faculty supervision, perform the following	WMM, SMM, CT,	GL	MON

	<p>procedures including but not limited to:</p> <ul style="list-style-type: none"> • Peripheral intravenous line placement • Airway management: bag and mask ventilation • Endotracheal intubation • Extubation • Continuous anesthesia and arterial line placement 	ATLS	DO PL PT PRES	MON 2A 2A MON/A
	Discuss post-extubation complications and formulate management plan	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Interpret monitoring devices to provide continuous patient assessment	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Utilize invasive monitoring and machines such as arterial lines, central venous pressure monitors, Swan-Ganz catheters, cardiac pacing devices, intracranial pressure monitors, end tidal CO ₂ monitors, and both volume and pressure ventilators	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Safely administer appropriate drugs for each situation	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Perfect bag-valve-mask ventilation technique			
	Gain competency in endotracheal intubation of infants, children & adolescents			
	Become familiar with rapid sequence induction in different clinical scenarios			
	Learn the onset, duration, indications & side effects of all sedative-hypnotics as well as neuromuscular blocking agents.			
Medical Knowledge	SPECIALTY SPECIFIC OBJECTIVES			

	Know the anatomy and pathophysiology relevant to procedural sedation and pain management techniques, nitrous oxide administration, and local and regional anesthesia	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Discuss the indications and contraindications for procedural sedation and pain management techniques	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Discuss the complications associated with procedural sedation and pain management techniques, nitrous oxide administration and local and regional anesthesia	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Describe the key steps and potential pitfalls in performing procedural sedation and pain management techniques, nitrous oxide administration, and local and regional anesthesia	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Describe the pharmacology of anesthesia drugs used for sedation and intubation	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Practice peripheral & central venous cannulation technique			
	Review the sedation protocols at Le Bonheur as they apply to procedures performed on non-intubated patients in the <i>Starlight</i> room			
	Recognition of the potentially difficult airway			
	Fundamentals of management of the difficult airway			
Practice Based Learning and Improvement	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Interpersonal and Communication	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for			

Skills	a comprehensive list.			
Professionalism	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Systems-Based Practice	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			

Surgery Rotation

By the end of the Surgery rotation, the **first year** residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independency as he or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	SPECIALTY SPECIFIC OBJECTIVES			
	Respond to consults from other services with emphasis on participation in emergency department consultations and response to level 1 trauma activation response	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Observe and assist with surgical procedures when appropriate (wound repair, Thoracostomy, replacement of Gastrostomy tubes and central lines, incision & drainage of abscesses, subcutaneous foreign body removal)	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Utilize invasive monitoring and machines such as arterial lines, central venous pressure monitors, Swan-Ganz catheters, cardiac pacing devices, intracranial pressure monitors, end tidal CO ₂ monitors, and both volume and pressure ventilators	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Gain exposure to the following surgical emergencies including but not limited to: <ul style="list-style-type: none"> • Laceration repair • Cysts 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A

	<ul style="list-style-type: none"> • Abscess incision and drainage • Intussusception • Incarcerated inguinal and umbilical hernias • Malrotation of the bowel • Volvulus • Pyloric stenosis • Hirschsprung's disease • Meckel's diverticulum • Abdominal tumors • Esophageal and tracheal foreign body removal • Mediastinal tumors • Chest wall tumors • Tracheo-esophageal fistula • Diaphragmatic defects • Soft tissue masses 			
Medical Knowledge	SPECIALTY SPECIFIC OBJECTIVES			
	Understand the principles of wound management with emphasis on techniques of wound repair			
	Learn the relevant anatomy for placement of central lines in children			
	Review complications of surgical procedures such as central lines, Thoracostomy, Gastrostomy tube placement and subcutaneous foreign body removal			
	Pathophysiology of acute perforative and non perforative appendicitis			
	Indications for diagnostic imaging in evaluation of acute abdomen			
	Review current trends in the non operative management of acute perforative appendicitis and blunt solid organ trauma in pediatrics			
Practice Based Learning and Improvement	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Interpersonal and Communication Skills	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Professionalism	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			

Systems-Based Practice	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			

EMS Rotation

By the end of the EMS rotation, the **second year** residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independency as he or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	SPECIALTY SPECIFIC OBJECTIVES			
	Become familiar with out-of-hospital pediatric protocols for basic and advanced life support	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Direct observation of the pre-hospital system during “ride-along” with assigned ambulance unit			
	Understand the role of dispatch and 911 system organization for the city of Memphis			
	Assist EMS medical director in focused quality assurance and/or administrative projects as they pertain to EMS for children			
Medical Knowledge	SPECIALTY SPECIFIC OBJECTIVES			
	Describe the epidemiology of pediatric out-of-hospital care	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Develop the knowledge of the components of emergency medical service (EMS) systems	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Demonstrate an understanding of the legal authority of emergency medical services (EMS) agencies to plan and regulate EMS systems	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES	MON MON MON/A

			INEX PT	A End of module
	Differentiate between basic life support (BLS), advanced life support (ALS), and two-tier (BLS and ALS) emergency medical service systems	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Describe the relationship of emergency medical services for children (EMSC) within the EMS system	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Recognize unique problems of rural emergency medical services for children	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Distinguish major levels of prehospital providers by training background and scope of practice (first responders, EMT-B, EMT-I, EMT-D, and EMT-P)	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Demonstrate an understand how the regional poison center relates to out-of-hospital toxicologic assessment and treatment	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Describe the roles of 911 and ambulance dispatch	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Develop knowledge of pediatric out-of-hospital treatment protocols for basic life support and advanced life support personnel	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Compare and contrast 911 and enhanced 911	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES	MON MON MON/A

			INEX PT	A End of module
	Describe the essential basic life support and advanced life support pediatric equipment for ambulances	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Distinguish between roles of ground transportation from roles of air transportation	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Describe the role of regionalization of special-care receiving hospitals (eg, pediatrics, trauma, pediatric critical care)	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Discuss the principles of field triage for both illness and injury	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Demonstrate an understanding of the principles in providing emergency care in disasters, multi-casualty events, and mass gatherings	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Describe the principles of field triage in a disaster	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
Practice Based Learning and Improvement	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Interpersonal and Communication Skills	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Professionalism	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for			

	a comprehensive list.			
Systems-Based Practice	SPECIALTY SPECIFIC OBJECTIVES			
	Recognize the special medicolegal problems faced by the out-of- hospital care provider in handling consent, refusal of care by parents/caretakers and minors and do-not-resuscitate orders	CT, MMC, LEC, EC	DO GL 360	MON MON 2A
	Describe the role of the out-of-hospital care provider in handling suspected child abuse	CT, MMC, LEC, EC	DO GL 360	MON MON 2A
	Distinguish between on-line (direct) and off-line (indirect) medical direction	CT, MMC, LEC, EC	DO GL 360	MON MON 2A
	Discuss the role of the base hospital	CT, MMC, LEC, EC	DO GL 360	MON MON 2A
	Describe the physician's role in medical direction for pediatrics	CT, MMC, LEC, EC	DO GL 360	MON MON 2A
	Demonstrate an understanding of the role of field policies (eg, intubation, sudden infant death syndrome, physician-on-scene, treatment refusal, interfacility transport) in managing emergency medical services for children	CT, MMC, LEC, EC	DO GL 360	MON MON 2A

OB/GYN Rotation

By the end of the OB/GYN rotation, the **second year** residents are expected to expand and cultivate skills and knowledge learned during previous training and to achieve the following objectives based on the six general competencies. The resident should exhibit an increasing level of responsibility and independency as he or she progresses throughout the year.

Competency	Required Skill(s)	Teaching Method(s)	Formative Evaluation Method(s)	Frequency of Evaluation
Patient Care	SPECIALTY SPECIFIC OBJECTIVES			
	Plan diagnostic evaluation and initial intervention for patients with the following OB/GYN disorders, including but not limited to: <ul style="list-style-type: none"> • Vaginal bleeding • Breast lesion • Vaginal Discharge 	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A

	Manage patients with urethral prolapsed, labial adhesions, imperforate hymen, acute dysfunctional uterine bleeding, ectopic pregnancy and the potential complications of this condition, acute dysmenorrhea	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Recognize the signs and symptoms and complications of ectopic pregnancy, dysmenorrhea, dysfunctional uterine bleeding	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Identify the risk factors for ectopic pregnancy	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Recognize serious and/or life-threatening causes of vaginal bleeding, breast lesions	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Demonstrate competence in performing a forensic exam on sexual abuse victims	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Utilize forensic exam equipment that facilitate collection of evidence	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Assess patients with sexually transmitted diseases, pelvic inflammatory disease, pregnancy, spontaneous abortions, ovarian cysts, abscesses and torsion, minor vaginal lacerations, labial adhesions, urethral prolapsed, vaginal foreign bodies, and Bartholin cysts	WMM, SMM, CT, ATLS	GL DO PL PT PRES	MON MON 2A 2A MON/A
	Become familiar with assisting a normal childbirth including assessment of stage of labor and stabilization of the mother in the immediate post partum phase			
Medical Knowledge	SPECIALTY SPECIFIC OBJECTIVES			
	Develop an understanding of the range of situations that	CT, JC, PEM,	GL	MON

	social workers see in the emergency room	BPQ, LEC, CITI, WMM, SMM	DO PRES INEX PT	MON MON/A A End of module
	Know the etiology by age and pathophysiology of breast lesions, vaginal bleeding, vaginal discharge, dysfunctional uterine bleeding, and dysmenorrhea	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Understand the pathophysiology of normal pregnancy and ectopic pregnancy	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Know the indications for and interpret results of ancillary studies dysfunctional uterine bleeding, dysmenorrheal, ectopic pregnancies	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Demonstrate an understanding of the different stages of puberty	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
	Develop knowledge of the hallmarks of abuse	CT, JC, PEM, BPQ, LEC, CITI, WMM, SMM	GL DO PRES INEX PT	MON MON MON/A A End of module
Practice Based Learning and Improvement	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Interpersonal and Communication Skills	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Professionalism	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for a comprehensive list.			
Systems-Based Practice	SPECIALTY SPECIFIC OBJECTIVES			
	See General Pediatric Emergency Medicine Objectives for			

	a comprehensive list.			
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