



NASSAU UNIVERSITY MEDICAL CENTER EMERGENCY MEDICINE CLERKSHIP MANUAL





Welcome

Dear Student,

Welcome to our department! We look forward to working with you in the weeks ahead. It is our hope that this rotation will serve as an introduction to the knowledge base and skill set required for the practice of Emergency Medicine. The specialty of Emergency Medicine covers all medical and surgical fields presenting as urgent and critical situations. This is an opportunity for you to draw together everything that you have learned thus far and gain confidence in your ability to diagnose and treat patients. Whether or not you choose Emergency Medicine for a career, this rotation can provide knowledge and experience that will ease the stress of internship, provide a foundation for your post graduate education, and will also enhance your future clerkships, electives and other endeavors. This is your time and your education; use it to the fullest extent. This manual is meant as a guide to help you benefit as much as possible from your experience and to make your rotation a successful one. Good luck!

Sincerely,

Dean Olsen, DO

Residency Program Director

Director of Medical Education

Department of Emergency Medicine

Nassau University Medical Center

Mobile: (303) 859-9182

E-mail: dean.olsen05@gmail.com



Important Contacts

Evan Link

Resident, Clerkship Director

E-mail: elink@numc.edu

240-346-4077

Talhat Mubarik

Resident, Clerkship Director

E-mail: tmubarik@numc.edu

240-346-4077

Dean Olsen, DO

Emergency Medicine Program Director

E-mail: dean.olsen05@gmail.com

Aaron Lim, DO and Laleh Botesazan, DO

Chief Residents

E-mail: numcemchief@gmail.com

Rosemary Cali

Residency Program Coordinator

Phone: (516) 296-2899

Fax: (516) 572-5465

E-mail: rcali@numc.edu



NUMC Overview

Facilities

Nassau University Medical Center is a public benefit corporation and a 530 bed major academic teaching hospital. It is Nassau County's premier Level One Trauma Center, with over 70,000 visits to our Emergency Department each year and more than 300,000 ambulatory visits to our hospital and the outlying health centers.

Highlights

- Level One Trauma Center
- A newly built \$36M state of the art Emergency Department which features:
 - 32 patient rooms
 - 2 resuscitation rooms
 - A large 2-bay trauma room
 - The latest in advanced equipment including a 640 slice CT scanner
 - A designated E.D. Ultrasound Room
- A fully electronic medical record system within the ED, which includes electronic tracking board and charting.
- Over 2000 trauma patients per year
- Stroke Center – Gold Plus Performance Achievement Award recipient – Awarded by the American Heart Association
- A new state of the art Burn Center
- Hyperbaric Center with multi-place Hyperbaric Chamber
- A Physical Medicine and Rehabilitation Unit recognized for top Press Ganey Satisfaction scores and America's Best Doctors designation.
- A new 'Primary Care Center' which will provide families with easy and fast access to urgent and primary care services.
- Home to:
 - The Medical Control of the Nassau County Police Department
 - The Nassau County Fire, Police, and EMS Academy
- 24/7 Toxicology Services
- A helipad – we receive more than 50 percent of the area's most critically injured patients, as well as those with serious acute medical problems via ambulance and helicopter
- The Coalition Against Domestic Violence
- Rape Advocacy Program

Education

Students rotating through the emergency medicine department at NUMC gain experience in evaluating and managing emergency department patients through direct bedside teaching from residency trained and board certified emergency physicians. Students work with emergency medicine residents, as well as physician assistants and nurse practitioners in the department.

Clerkship Overview

Emergency Medicine Educational Conferences

1. Resident Conference didactics are held every Wednesday from 7:30 am to 12:30 pm (times subject to change; notifications will be made during conference or via e-mail). Didactics during these conferences include, but are not limited to, Tintinalli review, attending and residents lectures, M&M presentations, journal club, procedures workshops, ECG reviews, visual diagnosis quizzes, Foundation lectures, cases reviews and oral board review.
2. Student lectures by EM residents are given following the residency didactics and are more focused on core content which students are expected to know at the end of their rotation.
3. **Attendance at ALL scheduled didactics is MANDATORY.** You are required to sign the attendance sheet. We will always try to inform you of changes to the lecture schedule; however, it is your responsibility to acquire this information from the attending or other rotating students in the event that you miss a conference.
4. Please **contact the Resident Clerkship Directors or Dr. Olsen** in advance if you will not be able to attend the conference.

Clinical Education

1. This is where you will learn the most, and where you will find the greatest learning curve. The practice of Emergency Medicine demands not only an understanding of disease and treatment, but also an ability to triage patients, prioritize departmental functions, and create solutions to novel problems, which occur on a daily basis. It is not enough to know what to do for your patients (theory); you must learn how to do it (logistics).
2. You will be asked to see many patients during your rotation, but remember you do not need to wait to be asked! Verify with an attending/resident/midlevel before you see any patient. Once assigned a patient you are expected to perform a **FOCUSED** history and physical exam (do not perform a genitourinary exam without a provider present). You will then discuss the case with attending/resident/midlevel and a treatment plan will be made.
3. Follow up on your patients! It is better to see fewer patients and know everything about them than to see many and know very little. You are expected to follow up on lab and imaging results and to re-evaluate your patients after treatments. You should be the first to know of these because you will be following fewer patients than the provider following the case with you. Update the provider with results immediately. **Inform a provider immediately of ANY patient whose clinical status appears to be deteriorating.**
4. You are expected to perform basic procedures on patients such as IV catheterization, laceration repair, I&D of abscesses, bladder catheterization, ABG sampling, NG/OG Tube placement, application of a cardiac monitor, vital signs measurement, etc... **Never perform any procedure without the instruction of an attending, resident, midlevel, or nurse! A provider or nurse must always be present during any procedure you perform to supervise.**
5. Be enthusiastic to learn and ask lots of questions. The ER is fast-paced with assessment, management and disposition planning all occurring simultaneously. If you do not understand why certain tests or procedures are being performed, stop us and ask! Your goal should be to understand the reasoning behind every step in the management of your patients from presentation to disposition.
6. You are expected to perform basic procedures on patients such as IV catheterization, laceration repair, I&D of abscesses, bladder catheterization, ABG sampling, NG/OG Tube placement, application of a cardiac monitor, vital

signs measurement, etc... **Never perform any procedure without the instruction of an attending, resident, or midlevel! A provider must always be present during any procedure you perform to supervise.**

7. When possible, you are encouraged to attend all trauma and resuscitation notifications. When working on Team A, you will respond to medical resuscitations. When working on Team B, you will respond to trauma resuscitations. You are not to attend traumas when you are working on Team A or resuscitations when you are working on Team B. This policy prevents the trauma and resuscitation rooms from becoming over-crowded.
8. You are likely to be asked to assist in managing patients in the trauma and resuscitation rooms, however, if the room is very crowded and there are too many people you may be asked to stand aside and observe only until the patient is stable. **It is NUMC ED policy that students are not allowed to do any IV placement or blood draws in the Trauma or Resuscitation Rooms, unless directed otherwise. Do not follow trauma patients to the operating room or to any other departments.**
9. **Students are NOT allowed to enter any documentation into patients' electronic medical records. DO NOT sign your name on any discharge paperwork or other documentation.**

Work Schedule

1. **Follow your shift schedule as provided. ***Do not skip any shifts and do not move shifts without prior approval. An individualized attendance log will be given to you and must be filled out each shift by an attending, EM resident, PA, or NP.** If you are going to be late, you should call the team you are working on in order to inform one of the attending physicians. The main ED number is **516-296-2100**.
2. If calling out sick, you will need to notify the clerkship director by email, and you must call the team that you were assigned to, to inform them of your absence. A doctor's note will be required for your absence to be excused and you will be required to make up your shift on a date approved by the clerkship director.
3. In the event of illness or personal hardship impacting your work schedule, **please contact the Resident Clerkship Director and Dr. Olsen** immediately. We will work with you to accommodate your situation as in any way we can. You should also contact your medical school/health professions school so they are aware.
4. If you are late, have any emergencies, illness, or personal hardship please let Dr. Lim/ Dr. Link/ Dr. Mubarik AND Dr. Olsen know immediately via email/text (please include your name)

Evaluations

1. Each student is given a booklet at the beginning of their rotation, which contains daily evaluation sheets and a procedure log. Evaluations in the booklet are to be completed at the end of every shift by the attending/resident/PA/NP you are working with. Evaluations will also be completed at the end of your rotation. These evaluations will be copied and forwarded to your school after completion. Please hand in your booklets at the end of your rotation to the ED office, and notify the student coordinators that you have submitted your booklets..
2. All students will be required to complete a 50-question emergency medicine clerkship exam, which must be completed by the end of the rotation. Access to and instructions for completing the exam will be e-mailed to students shortly after the beginning of their rotation. Exam scores will be factored into assigning each student's final grade.

Key Pointers for an Enjoyable and Successful Rotation

1. Please feel free to leave your coat/belongings in the staff lounge. However, we are **not** responsible for them and recommend that you **do not** leave any valuables in the staff lounge. In the event that the lounge is locked, please ask one of the staff for access.
2. **Introduce yourself to the Attendings, Residents, PA's, NP's and Nursing staff at the beginning of your shift.**
3. **Wear your white coat at all times with your hospital ID photo facing forward.** Scrubs are considered appropriate attire and are recommended for clinical shifts.
4. When shadowing a patient encounter with an attending, resident, PA, or NP always introduce yourself to the

patient. It may be wise to shadow on your first day and learn the workflow of the department as you shadow. After this, you may be assigned patients just as a Resident/PA would – with close supervision by the attending or resident.

5. **Treat all nurses and department staff with respect.** They may not have as much textbook knowledge as you, but they undoubtedly know more about the practice of medicine in the ED. Be humble and remember that you can learn from anyone! **Nurses, especially, can be a tremendous resource when it comes to learning how to draw blood and place IVs. Make sure you are supervised during any blood draws or IV placements. ****Students are not allowed to draw blood for type and screen/type and cross-match (Red and Pink tubes) or Blood Cultures.****
6. **DO NOT eat or drink in the Emergency Department.** You may eat and drink in the ED staff lounge, hospital cafeteria or coffee shop. You may store any food you bring with you in the ED staff lounge refrigerators.
7. Please clean up after yourself. Keep the ER clean. Soiled linens are to be placed in hampers located in the corner of every patient's room. Please do not leave dirty linen on the floor. Any sharp instruments must be placed in a sharps container. Make sure rooms are clean before bringing patients in.
8. **DO NOT ENTER THE ED OR LEAVE THE ED THROUGH THE EMS ENTRANCE**



Information for Medical Students Auditioning for Emergency Medicine Residency

Emergency medicine residency programs require applicants have their recommendation letter-writers complete a **Standard Letter of Recommendation (SLOE)**. The SLOE is a standardized evaluation form used uniformly by emergency medicine residency program faculty to accurately evaluate and compare your performance to the overall pool of applicants seeking emergency medicine residency. The SLOE has become an invaluable source of information for program faculty who do not consider traditional letters of recommendation to be of equal quality or to bear equal merit. This makes the SLOE one of the most important parts of your application, and one of the best ways to enhance your application. The emergency medicine residency program leadership at NUMC is happy to complete a SLOE for every student interested in applying for emergency medicine residency. **NOTE: It is at the discretion of the residency faculty who will ultimately receive a SLOE.**

Please understand that the SLOE process can only be started once the following are completed and submitted:

1. A **minimum of four** SLOE evaluation forms completed by core faculty or a senior EM resident that you have worked with. SLOE evaluation forms will be handed out at the beginning of your rotation, upon notification that you are interested in Emergency Medicine residency.
2. An ERAS request form (PDF) that must be filled out online and emailed to numcsloem@gmail.com

Please direct your ERAS request form to Dr. Olsen, EM Program Director, who will be filling out your SLOE. It is your responsibility alone to follow up on whether or not the SLOE evaluations were turned in. **Please understand that due to the high volume of interested applicants, it may take weeks before we upload your evaluations. Please notify a student coordinator AND Dr. Olsen that you have submitted your Manilla envelope to the appropriate location.**

Ways to improve your SLOE

Below is a list of items available to you, which help us evaluate you better for your Standard Letter of Evaluation.

1. **Procedure log:** The back of your Clerkship Book has a list of procedures you potentially will perform in the ED. Please review this list prior to your first clinical shift so you have an idea of what is expected and what you potentially may perform on your rotation. Some of these have a minimum number needed to complete, while others are do not due to the frequency with which they occur. We encourage you to perform as many procedures as possible with appropriate supervision. Please study the indications for, complications of, and steps necessary to complete each of these procedures.
2. **Journal Club:** At least once a month there will be journal club presented by one of the ED Residents. It is optional, but encouraged for auditioning students to reach out to your Clerkship Director (Nicole McAllister) to get these articles in advance, and volunteer to present one. The article is to be split by two students, one who will discuss the Intro and Methods the other who will discuss the Results and Discussion. For details, please reach out to any senior resident who can guide you in your preparation.
3. **Hot Topic Presentations:** You will have the opportunity to give a brief, approximately 15-20 minute presentation

on new and trending topics in Emergency Medicine. Please reach out to senior residents, or Dr. Olsen if you need help choosing a topic. This is also an optional but encouraged assignment.

4. **Resident Evaluations:** This form is optional but will aid us in improving the educational experience for you and future students rotating through our department. You can hand these forms to Heidi at any time throughout your rotation. Honest feedback is encouraged.
5. **Required Readings Manual:** Required reading for all students. This is a compilation of high yield material pertaining to Emergency Medicine. It contains essential information that will help you understand the fundamentals of Emergency Medicine. You will likely be asked questions during your clinical shifts on material covered within this manual.

Thank you again for your interest in Nassau University Medical Center. We hope you learn a lot, have an excellent clinical experience and have fun doing so. For more information about our residency program please visit www.numcem.com. Go to Student Section. Password: numcemstudents