LEARNING OBJECTIVES FOR CRITICAL CARE ROTATION II, UCSD MEDICAL CENTER

I. PATIENT CARE

Residents will be expected to build upon already acquired fundamental clinical and will be able to demonstrate competence in:

1. Obtaining a comprehensive medical history
2. Performing a comprehensive physical examination
3. Assessing the patient’s medical condition
4. Making appropriate use of diagnostic studies and tests
5. Integrating information to develop a differential diagnosis
6. Implementing a treatment plan

Residents will participate in bedside procedures and will demonstrate competence in technical skills in:

1. Airway management
2. Application of ACLS protocol
3. Diagnostic and therapeutic bronchoscopy
4. Insertion and management of invasive monitors
5. Initiation, maintenance and weaning of pressors and inotropic support
6. Echocardiographic examination and interpretation
7. Cardioversion
8. Percutaneous cricothyroidotomy/tracheostomy
9. Percutaneous thoracostomy tube insertion
10. Placement and management of neuroaxial and peripheral nerve blocks

II. MEDICAL KNOWLEDGE
Residents will be able to discuss the following issues in critical care:

1. Cardiac and respiratory resuscitation
2. Application, management and weaning of mechanical ventilation
3. Recognition and management of life-threatening arrhythmias
4. Management of shock and heart failure
5. Diagnosis and management of sepsis and other infections
6. Prevention, diagnosis and management of renal dysfunction
7. Diagnosis and management of neurological dysfunction
8. Metabolic, nutritional and endocrine effects of critical illnesses
9. Hematological and coagulation disorders
10. Monitoring and medical instrumentation
11. Diagnosis and treatment of acute, chronic and cancer-related pain
12. Diagnosis and management of ICU-related psychosomatic disorders
13. Ethical issues related to ICU care

III. PRACTICE-BASED LEARNING AND IMPROVEMENT

1. Be able to use information technology, on-line resources, expert consultation, and primary texts.
2. Be able to critically evaluate the critical care literature.
3. Apply scientific evidence to decision making.
4. Be able to compare evidence-based practice to commonly taught experience based decision making to develop a personal practice habits and strategy.
5. Demonstrate se self-reflection in the analysis of the practice experience and perform practice-based improvement activities.

IV. INTERPERSONAL AND COMMUNICATION SKILLS

1. Be able to interact effectively and professionally with patients, families, physicians, nurses, and other members of the health-care team.
2. Practice compassionate end-of-life care
3. Provide effective consultation to other physicians and health care professionals

4. Be able to maintain comprehensive, timely, and legible medical records

5. Be able to present information about patient care to their attendings, attendings from other services, fellows, residents, nursing staff, family members and other members of the care team.

6. Effectively conduct patient interviews, obtain consents for treatment or procedures performed, clearly communicate therapeutic plans, share bad news, and explain treatment expectations.

7. Learn techniques to decrease patient and patient family anxiety.

8. Learn effective communication techniques during periods of stress in order to decrease patient and family anxiety.

9. Be able to effectively communicate concerns with members of the healthcare team.

10. Demonstrate effective communication about medical literature and relevant publications applicable to common ICU problems.

11. Learn strategies and techniques for teaching other trainees, including medical students, the principles of critical care medicine.

V. PROFESSIONALISM

1. Be able to work effectively within a multidisciplinary critical care team.

2. Demonstrate respect, compassion, integrity, and kindness in relationships with patients, families, and colleagues.

3. Demonstrate sensitivity and responsiveness to gender, age, culture, religion, sexual preference, socioeconomic status, beliefs, behaviors and disabilities

4. Understand concepts of patient confidentiality and informed consent.

5. Develop the ability to formulate constructive feedback in response to problems encountered in the workplace.

6. Demonstrate behavior and demeanor that adheres to ethical principles, respect, compassion and integrity.

7. Demonstrate sensitivity to patients’ gender, beliefs, needs, and disabilities.

8. Demonstrate commitment to duties towards the patients, the family members and all other parties involved in patient care, including attendings, fellows and residents, nursing and ancillary staff.
9. Learn communication techniques with patients and families of different cultural backgrounds who possibly speak little English.

10. Understand the legal and ethical issues involved in patient consent.

11. Demonstrate a commitment to advocating patient care that is appropriate for their individual needs.

12. Adhere to institutional and departmental standards and policies.

13. Demonstrate ability to appropriately take on, share and delegate patient care responsibilities.

14. Demonstrate a commitment to ongoing professional development.

15. Learn how to discuss and record cases with complications and/or poor outcomes.

16. Be able to effectively balance one’s own personal affairs with clinical and educational duties as outlined in this document.

VI. SYSTEMS-BASED PRACTICE

1. Understand and use the indications for ICU admission.

2. Understand and use the criteria for ICU discharge.

3. Understand concepts related to transfer of patients from outside institutions.

4. Be able to discuss concepts of cost-efficiency in the ICU.

5. Be able to discuss limitations of ICU care and concepts of futility.

6. Be able to discuss practice cost effective health care and resource allocation without compromising the quality of patient care or patient safety.

7. Learn how to manage consultations and referrals to other services.

8. Be able to discuss the complex systems that form the foundation for care of patients suffering from various diseases.

9. Be able to discuss the interactions that take place between primary care teams, intensive care specialists, and nurses in the overall hospital management of these complex patients.

10. Learn how to effectively use information management in patient care.