Introduction to the Medical Student Clerkship

For New CA-1’s

2010
Clerkship Organization

- Students are assigned to a specific OR on most days
  - They are expected to review the patients and then contact you the afternoon/evening prior
  - They are instructed to page you once, and if you don’t respond, to meet you in your assigned OR 45min prior to the case start time
Clerkship Organization

- Students are assigned to a specific OR on most days
  - Please supervise all student IV attempts
  - Begin starting the IV BY 0700 (0800 on Wed)
  - Carefully gauge the patient’s response
  - If the patient is highly anxious, politely inform the student that you will start the IV yourself
  - Limit the student to one attempt per patient
Clerkship Organization

- The students will spend one day with the block team and pre-op clinic
  - Students are instructed to contact the block resident the afternoon/evening before
  - After the morning blocks, the students are to go on pain rounds
  - After pain rounds, or at 14:00 the students are to report to pre-op clinic
Goals and Objectives

Clerkship Goals

1. Provide the student with an understanding of the anesthesiologist's perioperative role, which extends through preoperative evaluation, the administration of anesthesia, and postoperative recuperation.
Goals and Objectives

Clerkship Goals

2. Provide the student with an awareness of the teamwork necessary to provide high quality medical care in the perioperative setting.

3. Provide students with an understanding of the basics of resuscitation, including the basics of intravenous access, and safely managing an airway.
Clerkship Objectives

- Medical Knowledge
  - Students will list medical conditions that affect anesthetic risk by organ system and describe the role of medical management of these conditions in changing anesthetic risk.
  - Students will demonstrate familiarity with anesthetic options (General, Regional, and Monitored Anesthetic Care).
Goals and Objectives

Clerkship Objectives

- Patient Care
  - Students will demonstrate the ability to maintain a mask airway and start an intravenous line. They will observe advanced airway management techniques.
  - Students will describe options for acute pain management in the surgical setting.
  - Students will complete a preoperative history and physical focusing on anesthetic concerns.
Goals and Objectives

Clerkship Objectives

- Communication
  - Students will present preoperative plans clearly and concisely to their resident and attending physician mentors.
  - Students will identify critical components of the preoperative and postoperative anesthetic visits.
  - Students will recognize the impact of patient and family culture on anesthetic decision-making.
  - Students will recognize the impact of patients’ preconceptions on anesthetic plans or decisions.
  - Students will recognize the impact of patient social issues on barriers to care.
Goals and Objectives

Clerkship Objectives

- Professionalism
  - Students will complete their assigned duties in a timely fashion.
  - Students will demonstrate respectful communication with patients, faculty and staff.
Goals and Objectives

Clerkship Objectives
- Systems Based Practice
  - Students will demonstrate an understanding of and comply with HIPAA regulations concerning patient confidentiality.
  - Students will recognize the contributions of all members of the care team in the perioperative and intraoperative arena, and gain an appreciation for the unique situation of simultaneous co-management of a patient by the surgical and anesthetic teams.
Clerkship Objectives

- Practice Based Learning and Improvement

  1. Students will demonstrate the ability to interpret the medical literature and apply it to the practice of evidence-based medicine.
Required Experiences

- Students will observe or participate, under the supervision of a faculty member, resident or anesthetist, in the following patient care scenarios:
**Required Experiences**

- Delivery of a general anesthetic to an adult patient.
- Delivery of a general anesthetic to a pediatric patient.
- Utilization of regional anesthesia as a primary surgical anesthetic.
- Explanation of anesthetic risks to a patient.
- Preoperative evaluation of a patient’s suitability for general anesthesia.
Required Experiences

Students will perform the following procedures under the supervision of a faculty member, resident or anesthetist:

- Placement of an intravenous catheter, with a goal of at least five IV placements during the two-week clerkship.
- Management of a patient airway, including mask ventilation and either LMA or endotracheal tube placement, with a goal of managing at least five airways during the clerkship.
Required Experiences

The mid-rotation feedback session will be a standard check-in for clerkships and students to determine if there are outstanding core experiences remaining, and the plan for how they will be met before the end of the rotation.

If students are having trouble meeting an experience requirement, refer them to Dr. Van Dyke.
Required Experiences

The purpose of ED-2, ultimately, is to have students gain core clinical skills related to core conditions specific to the clerkship experience. It is not a check-off exercise required for passing. Recognizing and beginning to master these skills will better prepare students for high stakes exams like YEPSA and Step II, and also help prepare for residency.
Required Readings

- Assignments from the textbook (Basics of Anesthesia) are accompanied by handouts in the clerkship binder
Required Readings

- Chapter 16 “Airway Management”
- Chapter 13 “Preoperative Preparation/Intraoperative Management”
- Chapter 39 “Acute Postoperative Pain Management”
- Conscious Sedation:
  - Chapter 36 “Outpatient Surgery” (p546)
  - Chapter 14 “Choice of Anesthetic Technique” (p178-9, p182-3)
- Chapter 33 “Pediatrics”
- Chapters 17 & 18 “Spinal & Epidural Anesthesia” & “Peripheral Nerve Blocks”
- Hemodynamic Monitoring: Handout in binder
- Vasopressors: Handout in binder
- Pharmacogenetics: Handout in binder
Mid-rotation Feedback

- All students fill out a mid-rotation feedback form and meet with Dr. Van Dyke to discuss:
  - Clinical performance based on daily evals
  - Progress toward meeting experience requirements
# UWSMPH Clerkship Mid-Rotation Student Feedback Form

*Complete Student Self-Assessment rating, then review with at least 1 supervisor who you have spent significant time in your rotation.*

<table>
<thead>
<tr>
<th>FEEDBACK ON STUDENT PERFORMANCE</th>
<th>Student Self Assessment</th>
<th>Supervisor Assessment</th>
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<tr>
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<td>Competent: At or above expected performance</td>
<td>Needs Improvement</td>
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<td></td>
<td>Competent: At or above expected performance</td>
<td>Needs Improvement</td>
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<td>Patient Care</td>
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<td>Takes an effective history</td>
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<td>Performs appropriate physical exam</td>
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<td>Generates and manages treatment plan</td>
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<td>Medical Knowledge</td>
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<td>Exhibits knowledge of diseases and pathophysiology</td>
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<td>Practice-Based Learning and Improvement</td>
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<td>Demonstrates skills in evidence-based medicine</td>
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<td>Interpersonal &amp; Communication Skills</td>
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<td>Oral presentation skills</td>
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<td>Respect/Compassion</td>
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<td>Response to feedback</td>
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<td>Accountability</td>
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**Student:** What am I doing well?

**Student:** What skills do I need to improve? What can I do to advance my performance?

Student’s Name: ___________________________ Date________________
Clinical Evaluation

- Every day that you work with a student, you will be emailed a “daily clinical evaluation form.”
- Please complete this form in a timely manner.
- If you feel that you can’t answer a question based on your experience with the student, leave it blank.
Daily Clinical Evaluation Form

- **Patient Care**
  - Interacts appropriately with patients
    - Y/N
  - Is prepared (reviewed patient charts)
    - Y/N

- **Medical Knowledge**
  - Understands relevant physiological concepts
    - Y/N
Daily Clinical Evaluation Form

- **Communication**
  - Attempted to contact resident/anesthetist pre-op
    - Y/N
  - Is able to clearly and succinctly present a patient Hx
    - Y/N

- **Professionalism**
  - Accepts constructive feedback
    - Y/N
  - Performs duties in a timely fashion
    - Y/N
Daily Clinical Evaluation Form

- **Practice Based Learning and Improvement**
  - Asks appropriate questions relevant to care
    Y/N

- **Systems Based Practice**
  - Respects patient confidentiality
    Y/N
  - Interacts appropriately and respectfully with all members of the health care team
    Y/N
Contacts

- **Clerkship Director:**
  - Dr. Kenneth Van Dyke, 3-6919; pager #1145

- **Student Services Coordinator:**
  - Audra Keith, 5-8033 amkeith@wisc.edu

- Any problems should be referred to these people.
Lectures

- All students are to be excused for scheduled lectures.
- Bear in mind that some lectures may be rescheduled.
# Anesthesiology Required Clerkship 148-812: Lecture Calendar

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<th>Monday</th>
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<td>Kenneth VanDyke, MD</td>
<td><strong>HSLC</strong></td>
<td>Joan Benca, MD</td>
<td>Carolyn Farrell, MD</td>
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<td>George Arntz, MD</td>
<td>Michael Ford, MD</td>
<td>Joan Benca, MD</td>
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<td><strong>&quot;IV Workshop&quot;</strong></td>
<td><strong>&quot;Medication Orientation&quot;</strong></td>
<td><strong>&quot;Pediatric Anesthesiology&quot;</strong></td>
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<td>Eric Bauman, RN, PhD</td>
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<td><strong>Senior Resident Grand Rounds</strong></td>
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<td><strong>&quot;TSA&quot;</strong></td>
<td><strong>&quot;Pharmacogenetics&quot;</strong></td>
<td><strong>Kirk Hogan, MD, JD</strong></td>
<td><strong>Kenneth VanDyke, MD</strong></td>
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<td>Michael Gills, MD</td>
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### ACUTE PAIN / OSC
- Page the "Blocks Resident" the night before to get the start time
- It’s usually earlier than the OR
- Read Dr. Ford’s acute pain handout
- White coat not needed
- Pain Rounds begin at 9:00 a.m. in the Blocks Room [across from OR Control]
- After Pain Rounds report to Anesthesia Preop Clinic – F8/2

### OR ETIQUETTE
- Introduce yourself to those working with you in the OR.

### DAILY SCHEDULE
- If you are assigned to work with Dr. Springman and an anesthesiologist, be sure to contact Dr. Springman the evening before. Also page the resident or anesthesiologist accordingly.
- To determine when and where to meet the resident/anesthesiologist you are assigned to work with tomorrow, page them tonight.
- Evaluations are sent to the individual you are assigned to work with on the daily schedule. If you work with someone else, please let Audra Keith know.

### LECTURES
- If you have waited for the lecture more than 15 minutes past the scheduled start time, please let Audra know.
- Several of the lectures/discussions can be viewed from the IME Video Library at the following link:

You are invited and encouraged to attend the Monday PM CA1 lecture, though it is not a requirement.
Absences

- Students are allowed two days of absences without required make-up
- All planned absences require approval of the clerkship director
- Students are required to notify the clerkship coordinator of any unplanned absences due to illness or family emergency
- Notify the clerkship coordinator (Audra) if your assigned student does not show up
Policies

- **Holidays**
  - Students are not required to work during designated holidays. This is a UWSMPH policy.

- **Core days**
  - Students are excused from their rotations during all three Core Days.
Student Work Hour Policy

- Duty hours must be limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house call activities.
- No duty shift shall exceed 24 hours, plus six-hour sign-off.
- Students are required to have at least one 24-hour period off per week on average.
- All students are advised to report overages to the designated clerkship administrator, the associate dean of students or the ombudsperson.
Teaching Tips/Expectations

- YOU are the student’s primary contact and teacher on any given day.
- Remember that the OR can be an extremely foreign and intimidating place, especially for students who’ve never been there.
- Remember that the student is paying a significant amount for the privilege of spending the day with you.
Teaching Tips/Expectations

- Be generous with positive reinforcement and gentle and constructive with corrections/criticism.
- Give frequent feedback.
- When teaching a procedure, such as an IV insertion, talk through each step as you would do it before the actual procedure.
Teaching Tips/Expectations

- The easiest way to teach in the OR is to “think out loud” as you monitor and manage the patient in front of you.

- If you run out of teaching topics, you can always ask the student if they would like to discuss the case studies in their course book.
Teaching Tips/Expectations

- You are not only a teacher, but a role model and an ambassador for our department and profession.
- Treat every student exactly how you would want to be treated if you were in their position.
- Maintain the highest standard of professional behavior at all times.
Teaching Tips/Expectations

- Remember that teaching is a skill that, with practice, develops and improves over time.