

University of Ottawa Critical Care Medicine: Community ICU Rotation Objectives:

CanMEDS Roles	CanMEDS Key Competencies	Methods To Facilitate Achievement of Competency
<p>1. Medical Expert a. Knowledge:</p>	<p>a) Management of Hypoxemic Respiratory Failure b) Management of Hypercarbic Respiratory Failure c) Principles of mechanical ventilation and other methods of respiratory support d) Management of the ventilated patient e) Principles of liberating the patient from invasive mechanical ventilation f) Principles of invasive and non-invasive hemodynamic monitoring g) Physiology and management of myocardial ischemia, congestive heart failure, cardiogenic shock and cardiac arrhythmias h) Physiology and management of renal failure i) Principles of early resuscitation of the unstable patient j) Physiology and management of the septic patient k) Diagnosis and management of upper and lower gastrointestinal hemorrhage l) Pathophysiology and management of acute hepatic failure m) Management of the poisoned, drug overdosed and toxin exposed critically ill patient n) Differential diagnosis and management of common thrombotic and coagulopathic disorders o) Management of sedation and analgesia requirements for critically ill patients p) Management of fluid, electrolyte and nutritional requirements of critically ill patients q) Management of oncologic emergencies r) Diagnosis and management of brain death s) Management of common neuromuscular disorders requiring ICU support t) Management of the critically ill trauma patient u) Preparation of the patient and management of safe intra and inter-city patient transfer to another health-care facility</p>	<ul style="list-style-type: none"> • Daily ICU patient rounds • Daily ICU x-ray rounds • Daily ICU sign-over rounds • ICU core lecture series • Self-directed reading • Literature appraisal using principles of EBM • Presentation of one seminar to ICU Staff and other learners • Participation in morbidity and mortality reviews where appropriate
<p>b) Technical skills:</p>	<p>a) Ability to assess and manage the ABC's of a critically ill patient b) Obtain and perform measurement of all vital signs, including oxygen saturation and non-invasive blood pressure</p>	<ul style="list-style-type: none"> • Supervised performance by ICU Staff physicians [or other appropriate physician] &

	<ul style="list-style-type: none"> c) Intravenous access in a critically ill patient d) Airway management including performance of endotracheal intubation e) Fiberoptic Bronchoscopy in the intubated patient f) Insertion of femoral, internal jugular and subclavian venous and dialysis catheters g) Insertion of arterial lines h) EKG interpretation i) Insertion of a Swan-Ganz catheter j) Application of Cardioversion and Defibrillation k) Insertion of orogastric and nasogastric tubes l) Insertion of thoracostomy tubes and thoracentesis m) Performance of lumbar puncture n) Declaration of brain death 	documentation of procedures on ICU patients
2. Communicator	<ul style="list-style-type: none"> a) To develop the ability to communicate complicated medical information and related issues in simple terms to families of critically ill patients and the ICU Team b) To develop the ability to communicate with families and the ICU team in times of medical and/or family crises c) To develop the ability to discuss the goals of care with families of critically ill patients d) To develop the ability to discuss the goals of care and care plan with the ICU team and other Consulting services e) To develop the ability to discuss End-of-Life & Palliative care with families of critically ill patients f) To effectively and appropriately deliver positive and negative feedback to junior house staff 	<ul style="list-style-type: none"> • Observation and participation in family meetings held by Attending ICU physicians • Daily communication with families for updates on patient condition • Observation of nursing interaction and families • Participation in evaluations of other Junior ICU learners
3. Collaborator	<ul style="list-style-type: none"> a) To effectively employ, in a timely manner, consulting medical and allied-health services in the management of the critically ill patient b) To work in a collaborative manner with fellow learners and care-givers 	<ul style="list-style-type: none"> • Observation and feedback regarding interaction with consulting medical and allied-health services • Participation in morbidity and mortality reviews where appropriate

<p>4. Manager</p>	<p>a) The ability to effectively distribute time amongst patient care, learning and teaching</p> <p>b) To effectively prioritize care delivery to ICU patients</p> <p>c) To effectively prioritize the employment of ICU personnel and resources with respect to ICU consults from within and outside the hospital</p> <p>d) The ability to recognize and manage the effects of fatigue and mental stress on patient care and personal safety</p>	<ul style="list-style-type: none"> • Discussion of time issues with ICU Staff physicians • Observation and feedback regarding the managerial role
<p>5. Health Advocate</p>	<p>a) To familiarize oneself with the relative costs [risks, benefits and monetary costs] of different diagnostic and treatment modalities & strategies for specific disorders/illness</p> <p>b) To familiarize oneself with programs available for prevention of many critical illnesses, such as trauma, alcohol, drug and tobacco addiction (etc.)</p> <p>c) To demonstrate proficiency with obtaining informed consent for ICU procedures, therapeutics or research projects</p> <p>d) To demonstrate an understanding of the concept of futility</p>	<ul style="list-style-type: none"> • Discussion of medical decision-making, decision analysis and cost-effectiveness concepts on rounds with ICU Staff physicians and pharmacists • Participation in and directing family discussions
<p>6. Scholar</p>	<p>a) To facilitate personal learning through self-appraisal and reflection upon gaps in clinical; knowledge, experience and/or reasoning</p> <p>b) To deliver clinical education to other ICU learners</p> <p>c) To regularly upgrade knowledge content through; literature review and appraisal and discussion with medical and other allied health-care colleagues</p>	<ul style="list-style-type: none"> • Bedside teaching during patient care rounds • One didactive, interactive presentation specific to an ICU topic, to ICU learners, Staff physicians and/or allied health-care personnel during the month-long rotation • Review and present one clinical study or trial using evidence-based medicine principles

		<ul style="list-style-type: none"> • Discuss with ICU Staff physicians options for developing a personal learning strategy
7. Professionalism	a) To demonstrate a commitment to ethical clinical practice	<ul style="list-style-type: none"> • Discussion of ethical dilemmas on patient care rounds

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