

FRCPC Rotation Tips

Administration PGY3

Structure of Rotation

Longitudinal, self-directed, maintain a portfolio of activities. Between EMS and Admin expectations, try to get a few items done during each EM block.

Expectations

1. Participate in the 'Introduction to LEAN' Workshop put on by Saskatoon Health Region. Contact Tiffany Blair (tj.blair@sasktel.net) to arrange.
2. Participate as the 'engaged physician' in a Rapid Process Improvement Workshop (RPIW) involving the Emergency Department in Saskatoon. This is a 5 day event, so you can't have anything else scheduled during the days of this week. Contact Dr Stempien (stempien@islandnet.com) or Graham Blue (grahamrblue@gmail.com) to find out when potential RPIWs will be taking place.
3. Attend Emergency Leadership Council (ELC) meetings when on EM rotations, and participate in any related committee work at the discretion of Dr Stempien.
4. Attend EM Grand Rounds and Departmental meetings when on EM rotations. These occur on the 4th calendar Tuesday or Wednesday each month, excluding July and December.
5. Under the supervision of Dr Stempien, respond to a patient complaint involving the Emergency Department.
6. Under the supervision of Dr Stempien, contribute to a care plan for a frequent user ('friendly face') of the Emergency Department.
7. Attend any other relevant meetings, at the discretion of Dr Stempien.
8. Try to work some of your ED shifts with Drs Stempien, Cload and Wahba and focus teaching around administrative issues.
9. Consider attending the Saskatchewan Health Quality Council Annual Summit – alternates between Regina & Saskatoon, usually early May.

Scheduling

You will be scheduled for 12 shifts during each of your EM blocks in PGY3, to allow you to self-schedule your Admin and EMS tasks over the course of the year. Shift Scheduling policy as per usual through Leah.

Assessment/ITER

Dr Stempien will meet with you in mid to late May to fill out your ITER. Keep a portfolio of all of the Admin related tasks you complete over the year to give to Dr Stempien during your exit meeting. Take the initiative to set-up a time to meet with Dr Stempien in mid to late May. Your ITER needs to be completed in advance of your annual review.

Anesthesia PGY1&2

Structure of Rotation

4 week block, 3-5 days of SPEC (Safari Pain ER & Consults) Service, 3 weeks of OR

Expectations

No overnight call, Monday - Friday, 0700-1700 (may be earlier or later based on caseload). Roster for assignments posted at OR desk at each site. SR Resident from Anesthesia does the daily scheduling.

Scheduling

Contact Andrea McDonald (andrea.mcdonald@saskatoonhealthregion.ca) for any days off/holidays.

Assessment/ITER

Daily encounter cards on-line (one45) - Resident needs to send to faculty on one45 before it can be filled out. Make sure this happens at the beginning of the day. DEC's collated by Dr Raazi at end of rotation.

Helpful Resources

Ottawa Anesthesia Primer

Cardiology PGY1

Structure of Rotation

4 week block, with overnight call (up to 7 in a block, depending on resident numbers)

Expectations

Monday - Friday 0700-1800 (variable depending on case load), Sat/Sun 0800 handover

Scheduling

Contact Cardiology Chief Resident in advance of schedule to make call schedule/time off requests, at least 6 weeks in advance of the rotation. They will likely send you a welcome to the rotation letter with prompts for scheduling requests in advance of the rotation. Admin Asst Lesley Reynolds (lesley.reynolds@usask.ca) will know which resident is the chief for the block.

Assessment/ITER

Residents to send ITERs to the Cardiologist on CCU for each week they are on service.

Helpful Resources

Garcia & Holtz ECG textbook

Manual of Cardiovascular Medicine (Griffin)

Education PGY2

Structure of Rotation

1. 6 teaching shifts with new JURSI - no patient care responsibilities except for the patients that the trainee sees. Preceptor on shift to evaluate Resident's teaching skills (use specific Teaching Shift DEC for this - ask Leah to print them for you). Resident on shift to evaluate JURSI using standard JURSI DEC.
2. JURSI AHD lectures x 2
3. Phase B Pro Skills Group (10 hours of teaching in 3 chunks, approach to CP, Abdo Pain, SOB)
4. Participate in skills teaching for new JURSI
5. Attend Faculty Development Workshop
6. EM related teaching during block (Core Cases, JURSI Exam Review, +/- SIM)
7. Assist with JURSI EM skills teaching

Expectations

1. Coordinate with Leah to schedule with new JURSI
2. Coordinate with Dr Van De Kamp to schedule JURSI AHD lectures and JURSI skills teaching
3. Coordinate with Dr Smith to schedule Phase B Pro Skills

4. Meet with Dr Olszynski in advance of rotation, and during rotation to discuss learning issues that arise

Scheduling

See above.

Assessment/ITER

Keep portfolio of all teaching activities and assessments received and arrange to meet with Dr Olszynski by mid May at the latest. ITER to be filled out by Dr Olszynski before the end of May.

Helpful Resources

CanMEDS Springboards EM App

TIPS Manual

ED STAT Manual

Emergency Medicine Saskatoon

Structure of Rotation

14 shifts per block (12 per block during PGY3 to allow for EMS and Admin) PLUS 3 x 12hr PADIS Toxicology call.

Expectations

This is your program. Be an ambassador!

Scheduling

1. Per 2 days of vacation, your shift allocation will be reduced by 1 shift. For every 1 week of vacation, your PADIS call be reduced by 1, and your shift allocation will be reduced by 3.

2. Requests for scheduling to be made 6 weeks in advance of the start of the rotation. This should include all academic events: AHD, Textbook rounds, etc.. Leah Chomyshen will notify you by email to make your requests.

3. After the schedule is made, you can request up to 2 shift trades. There must be a legitimate reason for the trade. Any shift trades in excess of 2 must be approved by Dr Woods or Lalani.

4. Arrange PADIS call shifts with Patricia Nunez (patricia.nunez@albertahealthservices.ca). Submit your PADIS call schedule to Leah at the end of each month so she can submit call payments on your behalf.

Assessment/ITER

Fill out an ITER at the end of every shift. Keep these ITERs and submit them to Dr Van De Kamp. Leah to send an ITER for the EM rotation to Dr Van De Kamp at the end of the rotation.

Helpful Resources

Rosen's

Tintinalli

Goldfrank's

Roberts & Hedges

Nadim's Gold

Emergency Medicine Regina

Structure of Rotation

16 shifts per block (including PGY3) PLUS 3 x 12hr PADIS Toxicology call.

Expectations

This is your program. Be an ambassador!

Scheduling

1. Per 2 days of vacation, your shift allocation will be reduced by 1 shift. For every 1 week of vacation, your PADIS call be reduced by 1, and your shift allocation will be reduced by 3.
2. Requests for scheduling to be made 6 weeks in advance of the start of the rotation to Ann Finch (ann.finch@rqhealth.ca). This should include all academic events: AHD, Textbook rounds, etc.. Ann Finch will notify you by email to make your requests.
3. All subsequent shift trades must have a legitimate reason. Keep these to a minimum, none if possible. Make your requests in advance of the rotation.

4. Arrange PADIS call shifts with Patricia Nunez (patricia.nunez@albertahealthservices.ca). Submit your PADIS call schedule to Leah at the end of each month so she can submit call payments on your behalf.

Assessment/ITER

Fill out an ITER at the end of every shift. Keep these ITERs and submit them to Dr Hanson.

Helpful Resources

Rosen's

Tintinalli

Goldfrank's

Roberts & Hedges

Nadim's Gold

Emergency Medicine Regional

Structure of Rotation

Expectations

Scheduling

Assessment/ITER

Helpful Resources

Emergency Medical Services PGY3

Structure of Rotation

Longitudinal, self-directed, maintain a portfolio of activities. Between EMS and Admin expectations, try to get a few items done during each EM block.

Expectations

1. Complete a Dispatch observation shift at MD Ambulance. Arrange this through LeeAnn Osler (L.Osler@mdambulance.com).

2. Complete a Fire observation shift. Arrange this through Dave Bykowsky (Dave.Bykowsky@saskatoon.ca). Need waiver form filled out in addition to this.
3. Attend MD Ambulance Professional Development Officer meetings when on EM rotations (usually 4th calendar Monday afternoons). Tim Hillier chairs these meetings (T.Hillier@mdambulance.com).
4. Complete 2 ground ambulance ride-along shifts and 1 PCR review session with one of the Professional Development Officers. Arrange this with Matt McGurk (M.McGurk@mdambulance.com).
5. Complete 48 hours of STARS/Air Ambulance ride-alongs. Arrange this with John Froh (jfroh@stars.ca or jfrohmd@sasktel.net) and Tracey Steel (tsteel@stars.ca) from STARS, and Jon Witt (jonwittmd@gmail.com) and David Mandzuk (david.mandzuk@saskatoonhealthregion.ca). All residents should coordinate a common time for orientation to STARS/Air Ambulance.
6. Monitor the MD Ambulance 'Ask the Doc' blog, and ensure all questions are answered in a timely fashion. All responses must be reviewed with Dr Woods prior to submission.
7. Attend the bi-annual EMS Provincial Protocols meetings (Oct/April) if on an EM rotation.
8. Review one protocol of the Saskatchewan College of Paramedics, and consider revising it based on current evidence. Anaphylaxis, Charcoal, CHF, Manual Defib.
9. Chair monthly residency program EMS meetings. Maintain minutes of meetings as well as a dossier of all EMS related activities completed by the program.
10. Provide one teaching session at the bi-annual EMS conference (Sept/Apr).
11. Complete any EMS administrative tasks at the discretion of Dr Woods.

Scheduling

You will be scheduled for 12 shifts during each of your EM blocks in PGY3, to allow you to self-schedule your Admin and EMS tasks over the course of the year. Shift Scheduling policy as per usual through Leah.

Assessment/ITER

Dr Woods will meet with you in mid to late May to fill out your ITER. Keep a portfolio of all of the EMS related tasks you complete over the year to give to Dr Woods during your exit meeting. Take the initiative to set-up a time to meet with Dr Woods in mid to late May. Your ITER needs to be completed in advance of your annual review.

General Surgery PGY2

Structure of Rotation

4 week block, with overnight call (up to 7 in a block, depending on resident numbers).

Expectations

Ward work Monday - Friday 0630-1700 (variable depending on patient care), Saturday/Sunday handover at 0800.

There are opportunities to attend clinic and assist in the OR. This is arranged after rounds each morning.

Scheduling

1. Call schedule requests to Admin Resident 6-8 weeks in advance of the rotation. Contact Karen Bader (karen.bader@usask.ca) to determine who the resident doing scheduling is.

Assessment/ITER

Send ITERs to the attendings on the team you worked with the most (up to 3 preceptors).

Helpful Resources

Intensive Care Unit PGY2&3 (Saskatoon)

Structure of Rotation

4 week block, with overnight call (up to 7 in a block, depending on resident numbers). You will likely have call on 3 out of 4 weekends (one day of each weekend worked).

Expectations

Monday to Friday 0700-1700 (variable depending on patient care), Saturday/Sunday 0800 handover.

Scheduling

Scheduling requests to Susan Stevenson (susan.stevenson@saskatoonhealthregion.ca), 6-8 weeks in advance of the rotation.

Assessment/ITER

Leah to send ITER to Dr Kawchuk before the end of the rotation.

Helpful Resources

The ICU Book (Blue)

Ottawa Critical Care Guidelines

Internal Medicine PGY1

Structure of Rotation

4 week block, 11 x 16 hour ER Call shifts (~ every 3 days), variable depending on number of residents. 2-3 additional days of pre-op clinic and/or stress testing. No ward work.

Expectations

0800-2400. Assess Internal Medicine Consults from the ED and from the Community, review with your preceptor, write admission orders.

Scheduling

Scheduling requests to Internal Medicine Chief 6-8 weeks in advance of the rotation. Contact Jeanine Dice (jeanine.dice@usask.ca) to find out who the Chief Resident doing scheduling is.

Assessment/ITER

Residents to send ITERs to Internal Medicine Staff member(s) who worked with you the most.

Helpful Resources

Pocket Medicine (Sabatine)

Orthopedic Surgery PGY1&3

Structure of Rotation

4 week block. 48 hours per week, 4 x 12 hour ER Ortho shifts (1200-2400 or 1400-0200). You may need to help out with some ward rounds.

Expectations

Assess Ortho consults in the ED, review with SR Resident/Attending. Arrange OR/Admission. Splint/cast fractures. You may also be needed to help with procedural sedations. Put your name/cell phone number on the white board in the OR planning room when on rotation.

Teaching rounds at 1700 Monday to Thursday. For the Ortho residents, but Faculty are very good at making it relevant for ED residents.

Friday morning rounds (Ortho AHD) 0700-1000 are optional but useful to attend. Ortho residents appreciate it if you cover call during this time.

Scheduling

Discuss schedule with Ortho Chief Resident (saskortho@gmail.com) in advance of the rotation, to find out how to coordinate with other trainees on service. Try to pick days to work when the Ortho R1 is not on call to share procedural experience.

Assessment/ITER

ITER(s) to be send to Ortho/Trauma staff member(s) who you worked with each week/on call.

Helpful Resources

Handbook of Fractures (Egol)

Ortho Bullets (Website)

Wheelless (Website)

Traumapedia app (\$10)

Obstetrics & Gynecology PGY1

Structure of Rotation

4 week block, with overnight call (up to 7 in a block, depending on resident numbers). You will spend 3 weeks on the ward and 1 week at the sexual health clinic. You will likely still do call during your week of sexual health clinic.

Expectations

Monday to Friday 0700-1700, Saturday/Sunday 0800 handover.

The service tries to get EM residents to see Gyne consults in the ED, however these are infrequent.

Scheduling

Scheduling requests to Marj Lens (marj.lens@usask.ca) 6-8 weeks in advance of the rotation for Obstetrics AND at the **start of the academic year** to Brenda Lindberg (brenda.lindberg@saskatoonhealthregion.ca) for setting up the sexual health clinic week.

Assessment/ITER

Leah to send ITER to Dr Simpson at the end of the rotation.

Helpful Resources

Obstetrics pocketcard & Handout on fetal assessment given at the beginning of the rotation.

Sexual Health Resources:

TB Standards (PHAC)

http://tbevidence.org/wp-content/uploads/2014/04/Canadian_TB_Standards_7th-edition_English.pdf

Saskatchewan Provincial Tuberculosis Strategy 2013-2018

<http://www.health.gov.sk.ca/tb-strategy-pdf>

Canadian Guidelines on Sexually Transmitted Infections (PHAC)

<http://www.phac-aspc.gc.ca/std-mts/sti-its/index-eng.php>

SHR HIV Prevention, Treatment & Support Strategy

PDF in drop box

SHR HIV Strategy Report – 2012/2013

https://www.saskatoonhealthregion.ca/locations_services/Services/Positive-Living/Documents/SHR%20HIV%20Strategy%20Report%202012-13%20Final%202014-04-04.pdf

Neurosurgery PGY2

Structure of Rotation

4 week block, with overnight 'home' call (up to 7 in a block, depending on resident numbers).

Expectations

Monday to Friday 0600-1800 (variable depending on patient care), Saturday/Sunday 0800 handover.

Complete Spine Pathway course in advance of rotation.

Try to go to Spine clinics after rounds when possible.

Scheduling

Scheduling requests to Admin Asst (neuro.surgery@usask.ca), 6-8 weeks in advance of the rotation. They will tell you who the scheduling resident is.

Assessment/ITER

Resident to send ITER(s) to Neurosurgeon(s) you worked the most with in clinic/on call.

Helpful Resources

Neurosurgery Survival Guide App

ASIA Scale

Pediatric Emergency Medicine PGY1-5

Structure of Rotation

4 week block, 14-16 shifts per block depending on resident numbers.

Expectations

Teaching every Monday (or Tuesday when Monday is a stat holiday), alternates between SIM and Case Based Teaching.

A top 10 articles list has been made for the most common and important conditions seen in the Peds ED. Read these articles prior to starting the rotation.

All handouts for teaching (case based teaching) on one45.

All schedules are on our google calendar.

Scheduling

Scheduling requests to the Peds Chief Residents (pedschief.uofs@gmail.com) **12 weeks in advance** of the rotation for any vacation > 3 days, 8 weeks in advance for all other requests. Alternatively you can fill out your schedule requests

on <http://tiny.cc/UofSPedsRequests>. Include all of your academic requests. You will get notified at the start of the academic year, but you will NOT get a reminder in advance of the rotation.

Assessment/ITER

Fill out a Daily Encounter Care at the end of each shift. Give your DEC's to Dr Gamble at the end of the rotation. Leah to send ITER to Dr Gamble before the end of the rotation.

Helpful Resources

Top 10 articles

AAP/CPS guidelines (Bronchiolitis, Pneumonia, Croup, Acute Otitis Media, Asthma, Status Epilepticus, DKA, Urinary Tract Infection, Functional Constipation)

Red Book

Pediatric Intensive Care Unit PGY5

Structure of Rotation

Expectations

Scheduling

Assessment/ITER

Helpful Resources

Plastic Surgery PGY2

Structure of Rotation

4 week block, Acute Care Plastics Service. 1 in 3 call (home call), including either 1 full weekend, or 2 partial weekends (Fri/Sun + Sat)

Expectations

Monday to Friday 0700-1800 (variable depending on patient care).

Mostly work out of ambulatory care at SPH (opens at 0900). ORs start at 0800.

2 Case write-ups on interesting cases seen during the rotation, reviewed by Dr Card. Cases added to a database for undergraduate teaching.

Scheduling

Holiday requests to Dr Card (annika@quadrant.net) and Sharon (cr.duval@sasktel.net).

Assessment/ITER

Fill out template of days worked to Dr Card. She will determine who you have worked the most with to fill out your ITER. Dr Card will notify Leah as to which supervisor fills out the ITER.

Helpful Resources

Psychiatry PGY2

Structure of Rotation

4 week block, with overnight 'home' call (up to 7 in a block, depending on resident numbers). 2 weeks of Emergency Crisis Call, 2 weeks of ward.

Expectations

Daytime Crisis Call Monday to Friday 0830-1630 (variable depending on patient care)

Ward work Monday to Friday 0730-1700

Call interspersed while on ward and crisis call.

Spending time with Community Outreach RN and Mobile Crisis are good experiences if crisis call is quiet.

Scheduling

Scheduling requests to Kristine Zulak (kristine.zulak@saskatoonhealthregion.ca) 6-8 weeks in advance of the rotation. They will tell you who the scheduling resident is.

Assessment/ITER

Resident to send ITER(s) to Psychiatrists(s) you worked the most with on the ward/on call.

Helpful Resources

DSM V (copies in ER Psych Office)

Rx Files

Research PGY1&2

Structure of Rotation

Expectations

Scheduling

Assessment/ITER

Helpful Resources

Toxicology PGY1-3

Structure of Rotation

Expectations

Scheduling

Assessment/ITER

Helpful Resources

Trauma PGY5

Structure of Rotation

Expectations

Scheduling

Assessment/ITER

Helpful Resources

Emergency Medicine Ultrasound PGY1

Structure of Rotation

14 shifts per block PLUS 3 x 12hr PADIS Toxicology call.

Expectations

This is your program. Be an ambassador!

Scheduling

1. Per 2 days of vacation, your shift allocation will be reduced by 1 shift. For every 1 week of vacation, your PADIS call be reduced by 1, and your shift allocation will be reduced by 3.
2. Requests for scheduling to be made 6 weeks in advance of the start of the rotation. This should include all academic events: AHD, Textbook rounds, etc.. Leah Chomyshen will notify you by email to make your requests.
3. After the schedule is made, you can request up to 2 shift trades. There must be a legitimate reason for the trade. Any shift trades in excess of 2 must be approved by Dr Woods or Lalani.
4. Leah will schedule you with US IP preceptors during your shifts. Try to get ~ 16 scans (or 4 patients with all 4 scans) during each shift in order to get your 200 scans. If you finish your 200 scans, you still have to complete your 14 shifts. If you don't finish your 200 scans, you will need to make them up on other ED rotations, or convince one of the SR resident IPs to come and gets scans done on your own time.
5. Once you have finished all of your scans, you need to arrange to complete your IP exams with Dr Lalani.

Assessment/ITER

Fill out an ITER at the end of every shift. Keep these ITERs and submit them to Schaana.

Leah to send ITERs for the EM block to Schaana (before the block is finished), and to Dr Lalani for US (once the scans are completed and you have passed your exam).

Helpful Resources

US podcast

EDE Textbook

EDE blog

Sonospot blog