ANS R 2J - Anesthesiology & Critical Care Clerkship - Jax/MICU Jax

ANS R 2J | 4th Year Required | Anesthesiology | Clinical Science
MDC 7700

Prerequisites

This course is not offered to non-UF students

NOTE - The ANS portion of this course will be completed the first 2 weeks, followed by the MICU portion of the rotation.

Course Description

This four-week clerkship will challenge medical students to manage patients undergoing surgical procedures as well as those being cared for in the Intensive Care Unit. During the Operative two-week block, each student will be expected to critically examine the perioperative process as well as learn the fundamental procedures that are coupled to it. Those procedures include, but are not limited to, airway management, invasive hemodynamic monitors, intravenous fluid replacement and the use of vasoactive medications. The Critical Care two-week block will ask students to treat critically ill patients, and implement the necessary interventions for stabilization and management. The education begins with modules that each student must complete prior to the corresponding didactic session. The formal didactics tests critical thinking skills that will be exercised by simulation and problem-based learning discussions.

Students will be paired with anesthesia residents or CRNAs, in the main OR setting, the preoperative block room, or on the labor and delivery floor. Students are expected to arrive daily by 6:45 am in order to obtain their room or anesthesia provider assignments. Students must prepare for each operative case by researching the patient, the comorbidities, and operation. OR start time is 7:15 am daily. Wednesdays are the resident education day, and students are to attend the morning grand rounds as well as the resident lectures. Medical student specific lectures will be given throughout their two week rotation, to be conducted by assigned attendings and/or residents.

The clerkship is divided into two week blocks: Anesthesiology and Critical Care Medicine. Half of the class will start in each part, and will switch at the mid-point. Students will also have the opportunity to elect which Intensive Care Unit they would like to rotate through.

Course Faculty and Staff
Meeting Place and Time

Day 1: 8 am in the Dept of Anest on the 2nd flr (located by Central Staff elevator bank). Report to Donna Pappy in the Anesthesia Education Office.

Course Materials

Handbook of Clinical Anesthesia by first author Paul G. Barash; will be provided on loan to rotators.

Classes Offered

<table>
<thead>
<tr>
<th>Period</th>
<th>Length</th>
<th>Credits</th>
<th>(Avail / Max) Slots</th>
</tr>
</thead>
<tbody>
<tr>
<td>Period 7</td>
<td>4 Weeks (Oct 25 - Nov 21)</td>
<td>4</td>
<td>(2 / 2)</td>
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<tr>
<td>Period 9</td>
<td>4 Weeks (Jan 4 - Jan 30)</td>
<td>4</td>
<td>(1 / 2)</td>
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<tr>
<td>Period 10</td>
<td>4 Weeks (Jan 31 - Feb 27)</td>
<td>4</td>
<td>(0 / 2)</td>
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<tr>
<td>Period 11</td>
<td>4 Weeks (Feb 28 - Mar 27)</td>
<td>4</td>
<td>(0 / 2)</td>
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<tr>
<td>Period 12</td>
<td>4 Weeks (Mar 28 - Apr 24)</td>
<td>4</td>
<td>(0 / 2)</td>
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Evaluated Competencies

#1 Professionalism

Educational Objectives: Demonstrate honesty; integrity; selflessness; compassion and respect for patients; peers and other staff.

Method of Evaluation: Clinical evaluation from direct observation. We are looking for you to be prompt; involved; helpful; interested; professional in demeanor and
behavior. For example, Arrive on time in the morning; assist with room setup; participate in pre-anesthetic evaluation and sedation of the patient in preoperative holding; assist with transport and transfer in the OR; remain involved and interested during the operative course; return following conference to finish up the case; participate in patient wake-up and transfer to the PACU, and observe their immediate outcome.

#2 Patient Care

**Educational Objectives:** Correctly manage several airways; including at least attempted intubations. Attempt intravenous cannulation.

**Method of Evaluation:** Clinical evaluations from direct observation.

#3 Medical Knowledge

**Educational Objectives:** Students will review: 1. The initial assessment and management of a patient in respiratory and/or cardiovascular arrest. 2. Fluid management in resuscitation. 3. How to perform a preoperative evaluation of a patient including medical condition; physical status; airway examination; appropriate preoperative testing and the impact of anesthesia and surgery on their condition. 4. General tenets of intraoperative medicine including monitoring (selection; steps in placement and basic interpretation of invasive monitors) and anesthetic options. 5. How to recognize and manage common post-operative complications including pain; hypotension; respiratory depression; and myocardial ischemia. 6. The basics of mechanical ventilation and Adult Respiratory Distress Syndrome. 7. The pharmacology of anesthetic; sedative; narcotic and vasoactive medications. 8. Cardiovascular physiology and the basics of invasive monitoring techniques.

**Method of Evaluation:** OR discussion; case conferences; case write-ups; written examination; completion of on-line pharmacology quiz, airway evaluation website and additional quizzes through on-line system.

#4 Practice-Based Learning

**Educational Objectives:** Demonstrate physician scholar skills by seeking new knowledge; asking questions; and applying new knowledge appropriately.

**Method of Evaluation:** OR Discussion; case conferences.

#5 Interpersonal and Communication Skills

**Educational Objectives:** Ability to be effective at establishing rapport and communicating with patients and families, to be aware of the relevance of psychosocial factors, cultural diversity and support systems and display judgment and insight into communicating with others, including more difficult patients.

**Method of Evaluation:** Clinical observation and evaluations by faculty and resident mentors.
#6 Systems-Based Practice

**Educational Objectives:** Takes initiative to work with other members of the health care team.

**Method of Evaluation:** Clinical observation.