

Surgical (STICU) Critical Care/Intensive Care Unit Experience

SUR.M200

SUR.S200

Duration: 4 weeks

Enrollment: Maximum 3 students, Savannah 2 students

Prerequisite: Successful completion of third year clerkships

Macon Course Director: Dennis Ashley, M.D

Savannah Course Director: M.Gage Ochsner, M.D.

Macon Contact: Senesta Corbin @ (478) 633-1199

Savannah Contact – Debbie Brickner, 912-350-8076

Course Goal: To provide fourth year medical students an understanding of the unique aspects of critical care medicine provided in the intensive care unit setting and provide an opportunity for learning about critical care medicine through active participation in patient care in the intensive care unit setting.

General Description: This rotation gives the student exposure to the acutely ill patient in the intensive care unit. The student will have an opportunity to manage one to two patients with the surgical critical care team. The team usually consists of medical students, residents and an attending critical care physician. Students will be exposed to a wide array of critical illness and will have the opportunity to manage respiratory failure with ventilator management, cardiac failure, etc. Students will also have the opportunity to assist with multiple procedures that are commonly performed in the intensive care unit. This is a Monday-Friday daily rotation. Students are expected to present their patients on rounds and then attend daily teaching conferences. There is no night or weekend call for this rotation.

Learning Outcome Objectives

After this rotation, students will be able to:

- 1.Outline the indications and criteria for admission to and transfer from an intensive care unit
- 2.Actively and appropriately participate in the care of critically ill patients in an ICU setting that emphasizes a multidisciplinary team approach to patient care and values the contribution of all those participating in care of the patient.
- 3.Manage ICU patient airways appropriately and provide appropriate respiratory
- 4.support including mechanical ventilator management
- 5.Recognize and treat life-threatening conditions common in the ICU setting.
- 6.Provide appropriate fluid and electrolyte therapy for the critically ill ICU patient.
- 7.Provide appropriate nutritional support for the critically ill ICU patient.
- 8.Recognize, understand the basis of, and treat hemodynamic instability in the critically ill ICU patient.

Surgery ICU Learning Objectives (Cont'd)

9. Recognize the psychological aspects of critical care and critical illness on ICU patients and their families and tailor the care they provide appropriately.
10. Summarize the most common ethical issues involved in critical care medicine including patient autonomy, consent, end of life care, and withdrawal of care.
11. Participate appropriately in patient procedures performed in the intensive care setting under the direct supervision of the teaching faculty.
12. Accurately explain the pathophysiology associated with conditions and problems in the ICU patient.
13. Summarize appropriate indications for the use of blood products
14. Diagnose and manage acute renal failure

Duty Hours: 8:00 AM – 5:00 PM Monday through Friday, Savannah is 6:00AM – 6:00PM 6 days a week in compliance with the 80 hr /week rule.

Call: None required – available if requested by student

Expectations: Report on time. Be available for rounds, admissions, procedures throughout the day. Write a daily detailed progress note on each assigned patient. Present patients to attending and team. Attend didactic sessions. Complete assigned readings.

Evaluation: Students will be evaluated on their clinical skills by taking a pre-test and a post-test. The post-test will be used as the final grade. (pass/fail)

References:

- Text Book of Critical Care 4th Edition, Shoemaker, Ayres, Grenvik and Holbrook
- The ICU Book 2nd Edition, Paul L. Marino, M.D.

Appendix A: Critical Care Surgery Procedure List

Students may have the opportunity to perform or assist with the following procedures under faculty supervision. Procedure availability will be highly dependent on patient load, pathology, and team composition.

- Central venous catheter placement
- Endotracheal intubation
- Arterial blood gas specimen collection
- Enteral feeding tube placement
- Arterial catheter placement
- Mechanical ventilator management
- Total parenteral nutrition management
- Thoracentesis
- Paracentesis
- Swan-Ganz Catheter placement and data interpretation
- Foley catheter placement
- Percutaneous Endoscopic Gastrostomy
- Venacava filter placement
- Pericardiocentesis
- Percutaneous Tracheostomy