

## 2. EMERGENCY MEDICINE

| Emergency medicine placement   |                                     |
|--|-------------------------------------|
| <b>Student's data.</b> These fields are completed by the student   |                                     |
| Period of performing the placement   |                                     |
| First and last name  | No of study book                    |
| E-mail address   | Phone number                        |
| <b>Performing the placement.</b> The doctor supervising the student completes these fields at the end of the placement. We ask that you confirm the completion of different parts of the practice logbook with a mark in the <b>yes</b> box  |                                     |
| The student has presented 8 case studies   | <input type="checkbox"/> <b>yes</b> |
| The student has presented the self-analysis  | <input type="checkbox"/> <b>yes</b> |
| I have assessed the student in the following categories: <ul style="list-style-type: none"> <li>▪ contact with the patient and collecting the history</li> <li>▪ objective examination of the patient</li> <li>▪ theoretical knowledge and clinical thinking</li> <li>▪ participation in the everyday work of the department</li> <li>▪ <b>and</b> given an assessment in free form</li> </ul> |                                     |
| <input type="checkbox"/> <b>yes</b>  |                                     |
| <b>Supervisor's data.</b> The doctors supervising the student complete these fields at the end of the placement.   |                                     |
| First and last name  | Doctor's registration code          |
| Hospital and department  | Stamp and/or signature              |
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## 2.1. Work with patients

During the emergency medicine placement, you have to write **8 case studies** on given forms. The topics of these case studies are the more frequent reasons for visits in the emergency department and are shown in the next table. In the same table, you can keep a record of already written case studies by making marks in the box **C** (case study). When the supervisor has read your case study, and is satisfied therewith, ask him/her to write his/her signature next to the box. **One case study can be written on one topic.**

With this task, we wish to motivate you to take your time and think about the patient as a whole. Remember, what did you do and why? What is the patient's background — why did he/she come to you? What happens with him/her in the future? What can be learned from one or another case? We presume that you will nonetheless have to fill the hospital's documentation and there is no need to duplicate it.

Try to distribute your activities evenly with your supervisor. If you will leave all of the case studies to the end of the placement, you may not have time to focus properly and your supervisor may not have the possibility to read them and give feedback. For example, agree to present one case study a week.

| Topics of case studies in emergency medicine |                            |
|--|----------------------------|
| Allergic reaction, rash                      | <input type="checkbox"/> C |
| Dyspnoea, breathlessness                     | <input type="checkbox"/> C |
| Nausea, vomiting                             | <input type="checkbox"/> C |
| Extremity pain                               | <input type="checkbox"/> C |
| Increase in body temperature                 | <input type="checkbox"/> C |
| Muscle cramps, twitches                      | <input type="checkbox"/> C |
| Throat pain                                  | <input type="checkbox"/> C |
| Hearing loss, blocked ear                    | <input type="checkbox"/> C |
| Diarrhoea                                    | <input type="checkbox"/> C |
| Abdominal pain                               | <input type="checkbox"/> C |
| Hypertension                                 | <input type="checkbox"/> C |
| Ear pain                                     | <input type="checkbox"/> C |
| Cough  | <input type="checkbox"/> C |
| Local infection                              | <input type="checkbox"/> C |
| Poisoning                                    | <input type="checkbox"/> C |
| Neurological focal findings                  | <input type="checkbox"/> C |
| Weakness, fatigue                            | <input type="checkbox"/> C |
| Headache, balance disorder, dizziness        | <input type="checkbox"/> C |

|                                     |                            |  |
|-------------------------------------|----------------------------|--|
| Chest pain                          | <input type="checkbox"/> c |  |
| Back pain                           | <input type="checkbox"/> c |  |
| Arrhythmia, palpitations            | <input type="checkbox"/> c |  |
| Change of consciousness, fainting   | <input type="checkbox"/> c |  |
| Trauma                              | <input type="checkbox"/> c |  |
| Oedema of extremities, trunk, lungs | <input type="checkbox"/> c |  |
| Dysuria                             | <input type="checkbox"/> c |  |

**Case study in emergency medicine**

Presenting problem

Triage

red  orange  yellow  green  blue

History

Objective findings. Include results from relevant analyses and investigations

Differential diagnosis

Primary diagnosis

Primary management. Substantiate briefly!

Plan for further investigations. How will the results change the management?

Treatment continues  at home  as outpatient  as inpatient or  patient died

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On these pages you have to write down at least **three cases** that taught something extra valuable to you. For example, you could write here if during management of some patients: (a) you learned to use an unfamiliar medicine or treatment method; or (b) you learned something valuable about communication with patients or colleagues.

| <b>Presenting problem, short history</b> | <b>Interesting or informative aspect</b> |
|--|--|
|  |  |
|  |  |
|  |  |
|  |  |

| <b>Presenting problem, short history</b> | <b>Interesting or informative aspect</b> |
|--|--|
|  |  |
|  |  |
|  |  |
|  |  |

## 2.2. Self-analysis

Here you can: (a) write about what you saw and did during the practice; (b) analyse your strengths and weaknesses observed during everyday clinical work; or (c) think what you would like to and are able to improve in yourself, in the department, in the hospital or in the healthcare system in general.

| Self-analysis |
|---------------|
|               |

### 2.3. Supervisor's assessment

We ask you to evaluate the student in five categories: (a) rapport with the patient and collecting history; (b) objective examination of the patient; (c) theoretical knowledge; and (d) participation in the everyday work of the department. In the fifth category you can assess the student in free form, if you find it to your liking. You can point out the students strengths and weaknesses and give advice on what to work on in the future. If you're short on time, fill in only either the first four parts or the latter.

Remember, that not all students are and cannot be excellent to the utmost! We recommend: (a) to start with the rating **C** (good); (b) think if the student corresponds to the description, is better or worse; and (c) then move correspondingly up or down when answering.

| <b>Rapport with the patient and collecting history</b>   |                                      |
|--|--------------------------------------|
| Student establishes rapport with all patients easily. He/she collects history in a structured and thorough manner, taking into account the presenting problem and does not overlook anything.  | <b>A</b><br><input type="checkbox"/> |
| Student establishes rapport with most patients easily. He/she collects history in a structured and thorough manner, taking into account the presenting problem and does not neglect anything. He/she has overlooked some circumstances, but nothing important.                                 | <b>B</b><br><input type="checkbox"/> |
| Student does not have major difficulties in establishing rapport with the patient. He/she collects history in a generally structured way. Sometimes, he/she overlooks some circumstances, but usually nothing important. He/she could further improve his/her skills with consistent training. | <b>C</b><br><input type="checkbox"/> |
| Student displays some difficulties in establishing rapport with the patient. He/she collects history in a not very structured way. Sometimes, he/she overlooks important circumstances. He/she could further improve his/her skills with consistent training.                                  | <b>D</b><br><input type="checkbox"/> |
| Student does not achieve rapport with most patients. His/her history collecting is unstructured and he/she often overlooks important circumstances.  | <b>E</b><br><input type="checkbox"/> |
| It is hard to evaluate the student, as participation in everyday clinical work was insufficient.   | <b>F</b><br><input type="checkbox"/> |

Supervisor's stamp and/or signature

| <b>Objective examination of the patient</b>   |                                      |
|---|--------------------------------------|
| Student knows different patient examination methods and the indications for their use to an excellent level and has a good overview of the theory underneath. He/she examines the patient in a structured and thorough way, taking into account the presenting problem and does not neglect anything.                     | <b>A</b><br><input type="checkbox"/> |
| Student knows the patient examination methods and indications for their use well. He/she examines the patient in a structured and thorough way, taking into account the presenting problem. He/she has overlooked some circumstances, but nothing important.  | <b>B</b><br><input type="checkbox"/> |
| Student knows the methods for patient examination to satisfaction and also the indications for their use. He/she examines the patient in a generally structured way. Sometimes, he/she overlooks some circumstances, but usually nothing important. He/she could further improve his/her skills with consistent training. | <b>C</b><br><input type="checkbox"/> |
| Student's knowledge of the patient examination methods and indications for their use is sometimes fragmentary. He/she does not examine the patient in a structured way and sometimes he/she overlooks important circumstances. He/she could further improve his/her skills with consistent training.                      | <b>D</b><br><input type="checkbox"/> |
| Student's knowledge of the patient examination methods and indications for their use are fragmentary. He/she does not examine the patient in a structured way and often overlooks important circumstances.  | <b>E</b><br><input type="checkbox"/> |
| It is hard to evaluate the student, as participation in everyday clinical work was insufficient.  | <b>F</b><br><input type="checkbox"/> |

| <b>Theoretical knowledge and clinical thinking</b>  |                                      |
|---|--------------------------------------|
| Student has deep and integral knowledge in most domains. If he/she does not know something, he/she finds answers to the questions quickly and without assistance. His/her clinical thinking is systematic and he/she presents his/her reasoning clearly and explicitly.   | <b>A</b><br><input type="checkbox"/> |
| Student's knowledge in most domains is thorough. There are some gaps, but he/she finds answers to the questions within reasonable time and without assistance. His/her clinical thinking is systematic and he/she presents his/her reasoning clearly and explicitly.  | <b>B</b><br><input type="checkbox"/> |
| Student's knowledge in most domains is good although there are some gaps in further details. He/she finds answers to the questions within reasonable time, rarely needing assistance. His/her clinical thinking is systematic in general terms and he/she presents his/her reasoning comprehensibly. He/she could further improve his/her knowledge with consistent training. | <b>C</b><br><input type="checkbox"/> |
| Student's knowledge in most domains is sufficient, but there are considerable gaps. He/she needs time to find answers to the questions and he/she often needs assistance doing this. Sometimes, his/her clinical thinking is not systematic or he/she presents his/her reasoning incomprehensibly. He/she could further improve his/her knowledge with consistent training.   | <b>D</b><br><input type="checkbox"/> |
| Student's knowledge in most domains is fragmentary. He/she needs time to find answers to the questions and he/she often needs assistance. His/her clinical thinking is not systematic and he/she presents his/her reasoning incomprehensibly.   | <b>E</b><br><input type="checkbox"/> |
| It is hard to evaluate the student, as participation in everyday clinical work was insufficient.  | <b>F</b><br><input type="checkbox"/> |

Supervisor's stamp and/or signature



| <b>Participation in everyday clinical work</b>  |                                      |
|---|--------------------------------------|
| Student always has correct appearance, is responsible, accurate and organized. He/she shows creativity and initiative in clinical work. He/she is polite when communicating with colleagues as well with patients. He/she knows the limits of his/her competence and does not surpass them, but asks for help from a colleague. During consultation, he/she presents available data and the clinical question clearly and explicitly. | <b>A</b><br><input type="checkbox"/> |
| Student always has correct appearance, is responsible, accurate and organized. He/she is polite when communicating with colleagues as well as patients. He/she knows the limits of his/her competence and does not surpass them, but asks for help from a colleague. During consultation, he/she presents available data and clinical question clearly and explicitly.  | <b>B</b><br><input type="checkbox"/> |
| Student always has correct appearance and is responsible. He/she is polite when communicating with colleagues as well as patients. He/she knows the limits of his/her competence and does not surpass them, but asks for help from a colleague.   | <b>C</b><br><input type="checkbox"/> |
| Student mostly has correct appearance and is responsible. During the placement there were situations when he/she could have behaved more politely when communicating with a colleague or a patient. He/she knows the limits of his/her competence and mostly does not surpass them. Further efforts are needed.   | <b>D</b><br><input type="checkbox"/> |
| Student should be more responsible regarding his/her work assignments and communicate more politely with colleagues and patients. Further efforts are needed.   | <b>E</b><br><input type="checkbox"/> |
| It is hard to evaluate the student, as participation in everyday clinical work was insufficient.  | <b>F</b><br><input type="checkbox"/> |

Supervisor's stamp and/or signature

## 2.4. Supervisor's assessment

We ask you to evaluate the student in free form. Questions to proceed from: (a) his/her relevant theoretical knowledge and how well he/she was able to implement them; (b) what was his/her attitude to his/her everyday tasks; and (c) is there any reason why you would like to bring him/her into spotlight.

| <b>Supervisor's assessment</b> |
|--------------------------------|
|                                |

Supervisor's stamp and/or signature