Emergency Medicine Levels of Care

PROCEDURE/SKILL	LEVEL OF CARE	SUPERVISION	MILESTONE	COMPETENCY
Recognizes in a timely fashion when further clinical intervention is futile	PGY 3	Direct	PC1	PC
Integrates hospital support services into a management strategy for a				
problematic stabilization situation	PGY 3	Indirect	PC1	PC
Synthesizes essential data necessary for the correct management of				
patients using all potential sources of data	PGY 3	Indirect	PC2	PC
Practices cost effective ordering of diagnostic studies	PGY 3	Indirect	PC3	PC
Understands the implications of false positives and negatives for post-				
test probability	PGY 3	Indirect	PC3	PC
Synthesizes all the available data and narrows and prioritizes the list of				
weighted differential diagnoses to determine appropriate management	PGY 3	Indirect	PC4	PC
Selects the appropriate agent based on mechanism of action, intended				
effect, possible adverse effects, patient preferences, allergies, potential				
drug-food and drug-drug interactions, financial considerations,				
institutional policies, and clinical guidelines, including patient's age,				
weight, and other modifying factors	PGY 3	Indirect	PC5	PC
Considers additional diagnoses and therapies for a patient who is under				
observation and changes treatment plan accordingly	PGY 3	Indirect	PC6	PC
Formulates sufficient admission plans or discharge instructions				
including future diagnostic and/or therapeutic interventions for ED				
patients	PGY 3	Indirect	PC7	PC
Engages patient or surrogate to effectively implement a discharge plan	PGY 3	Indirect	PC7	PC
Employs task switching in an efficient and timely manner in order to				
manage the ED	PGY 3	Indirect	PC8	PC
Performs the indicated procedure, takes steps to avoid potential				
complications, and recognizes the outcome and/or complications				
resulting from the procedure	PGY 3	Indirect	PC9	PC
Performs airway management in any circumstance taking steps to avoid				
potential complications, and recognizes the outcome and/or				
complications resulting from the procedure	PGY 3	Indirect	PC10	PC
Demonstrates the ability to perform a cricothyrotomy	PGY 3	Direct	PC10	PC
Uses advanced airway modalities in complicated patients	PGY 3	Direct	PC10	PC

Emergency Medicine Levels of Care

Performs procedural sedation providing effective sedation with the				
least risk of complications and minimal recovery time through selective				
dosing, route and choice of medications	PGY 3	Direct	PC11	PC
Repairs wounds that are high risk for cosmetic complications such as				
eyelid margin, nose, ear	PGY 3	Indirect	PC13	PC
Describes the indications for and steps to perform an escharotomy	PGY 3	Direct	PC13	PC
Routinely gains venous access in patients with difficult vascular access	PGY 3	Direct	PC14	PC

KEY

Supervision:

Direct - the supervising physician is physically present with the resident and patient.

A faculty physician, other than another resident, is physically present during the key portions of the procedure or is immediately available.

Indirect - the supervising physician is physically within the hospital or other site of patient care and is immediately available to provide direct supervision.

Oversight - the supervising physician is available to provide review of procedures/encounters with feedback after care is provided.

Core Competencies:

- 1. Patient Care (PC)
- 2. Medical Knowledge (MK)
- 3. Practice-Based Learning & Improvement (PBL)
- 4. Systems-Based Practice (SBP)
- 5. Interpersonal & Communication Skills (IC)
- 6. Professionalism (P)