Introduction

Students in the final year of the Bond University Medical Program have 6 rotations to train in a broad array of medical, surgical, and other specialities.

These Rotations are made up from one of each of:

- Anaesthetics, Critical Care, and orthopaedics (2 weeks of each)
- Elective or Capstone
- Emergency Medicine,
- Flexible/End of year elective
- General Practice,
- Selective

The capstone, elective, flexible and selective rotations provide students’ a choice of interest area, or speciality placement, to gain additional clinical experience on top of specified clinical curriculum placements.

The learning priorities for all clinical specialities are to gain insight and understanding of the most common presentations and conditions encountered. It is anticipated that all students will have opportunities to enhance their skills in history taking and clinical examination. Students should also be encouraged to translate the information from patient interactions into commonly used formats by interns, such as ISBAR (Introduction, Situation, Background, Assessment, Recommendation)

Additional specific procedural skills development is welcomed

Year 5 Learning Outcomes

- Apply current medical and scientific knowledge to individual patients, populations and health systems. (S1)
- Demonstrate cognitive, technical and interpretive skills in undertaking an accurate, detailed system focussed history from a range of patients within a variety of clinical settings. (P1)
- Perform an accurate and complete physical examination in any body system including mental state examination. (P2)
- Use knowledge of common and important conditions, the patient history and physical examination findings, and clinical data, to undertake clinical reasoning and formulate probable and differential diagnoses. (P3)
- Recognise and assess deteriorating and critically unwell patients who require immediate care. Perform common emergency and life support procedures. (P4)
- Safely perform a range of common procedures including safe, effective and economic prescribing. (P5)
- Select and justify common investigations, with regard to the pathological basis of disease, utility, safety and cost effectiveness, and interpret their results. (P6)
- Formulate an initial management plan in consultation with patients, family and carers across a variety of clinical settings considering psychosocial and cultural aspects that may influence management. (P7)
- Integrate prevention, early detection, health maintenance and chronic disease management into clinical practice. (H1)
- Discuss and critically reflect on population health issues applicable to the relevant clinical and community setting. (H2)
- Demonstrate knowledge and a critical understanding of medico-legal and ethical issues that impact on patient management. (H3)
- Demonstrate an ability to clerk a case across a range of patients and from a variety of clinical settings. (H4)
- Comply with organisational policies regarding timely and accurate documentation. (H5)
• Discuss the complex interactions between healthcare environment, doctor and patient, promoting risk awareness and reporting risks in the workplace. (H6)
• Demonstrate an ability to work as an effective team member, understanding and respecting the variety of roles within the clinical setting whilst acknowledging the professional responsibilities relevant to their position. (H7)
• Communicate effectively in wider roles including health advocacy, teaching and assessing and appraising. (H8)
• Integrate the practice of evidence based medicine in the care of patients. (S2)
• Uphold the standards and values of the medical profession and perform clinical activities in accordance with ‘Good Medical Practice for Doctors in Australia’. (H9)
• Plan and execute a substantial research-based project, OR capstone experience and/or professionally focused project and write up (S3)
• Self-evaluate their own professional practice, and know when and how to refer patients (H10)
• Demonstrate life-long learning behaviours (H11)
S= Scientist and Scholar, P=Practitioner, H= Health advocate and professional

Critical Care Rotation

The basis of the Critical Care Rotation is for students to see patients whose clinical presentation relates to a broad array of emergency and potentially life threatening problems and to experience first-hand the daily routine and practice of medicine within the critical care environment of Emergency Department and the Intensive Care Unit. Students are expected to learn about the assessment and management of critically ill patients in the clinical setting.

The knowledge explosion and rapid advances in medicine generally, and in both emergency and intensive care particularly, mean that it is impossible to cover everything in one single rotation. However, knowledge of the common emergency presentations and conditions will provide a firm foundation for students continuing professional development.

To cover a broad range of conditions students need to see as many patients as possible.

Goals

The goals for the Critical Care Rotation are:

Emergency Medicine

• To provide students with learning experiences associated with the variety of acute presentations in both adult and paediatric patients through the ED
• For students to hone their history taking and examination skills and use clinical reasoning to form diagnoses and differential diagnoses in this undifferentiated patient population
• For students to learn about and to become comfortable discussing clinical management of patients requiring acute care
• For students to develop clinical knowledge and understanding of the common emergency conditions presenting through the ED
• To provide students with a real-life clinical working environment and opportunity to work with a clinical team.
**Intensive Care Medicine**

- To provide students with learning experiences associated with the variety of critical ill patients in ICU
- For students to hone their history taking and examination skills and use clinical reasoning to form diagnoses and differential diagnoses in this acute setting
- For students to learn basic principles in the recognition of serious illness and its clinical management
- For students to develop clinical knowledge and understanding of the common conditions seen in the ICU
- To provide students with a real-life clinical working environment and opportunity to work with a clinical team.

**Critical Care Learning Outcomes**

- Correctly perform a history/physical examination focusing on acute care and resuscitation
- Recognise serious illness requiring urgent management/intervention
- Undertake and interpret common acute investigations such as ECG, ABG etc.
- Demonstrate knowledge and understanding of the relevant anatomical, biochemical, physiological and pathological processes commonly encountered in critical care
- Pharmacological and clinical management of acute patients
- Formulate differential diagnoses and a management plan
- Interpret common diagnostic tests and imaging in the critical care environment
- Identify and know how to manage common and important acute clinical conditions
- Recognise serious illness requiring urgent management/intervention
- Demonstrate understanding of the principles of resuscitation
- Use evidence-based medicine approach in emergency and intensive care medicine

**Timetable and Contacts**

**Students are expected to be present 5 days a week during their rotation.** If students are unable to attend for any reason, they are required to advise the clinician, hospital co-ordinator (where available) and the Placements Team at Bond University.

Student involvement in the day-to-day care and management of patients provides the best opportunity for learning. Students will be able learn the most through interviewing and examining patients and being involved in clinical decision making at the bed side.

As well as clinical knowledge, students must display other professional skills such as working well within the multidisciplinary team, considering the psychological and social impact of the illness on the patient and the family, being honest, empathetic, and respectful with regard to the patient’s choices and decisions. It is also important for students to recognise their own limitations, competencies, and scope of practice associated with their stage of training.
Clinical Supervision and Assessment

Formal educational sessions should be conducted every week throughout the clinical rotation to reinforce and enhance their learning. These sessions may vary throughout the placement.

During the clinical placement, students will be supervised by a number of clinicians such as those in specialist training pathways in the medical team. Weekly student case presentations and mini CEXs can be assessed by these team members. Students need to submit written case reports to BOND.

One case presentation, and/or one mini CEX, should be assessed by the Supervising Consultant (unless there are extenuating circumstances).

The END of Rotation summative assessment:

Should use the In Training Assessment (ITA) form and reflect:

The student’s clinical history taking and examination skills.

1. The student’s performance and professional conduct during the rotation
2. A formal case presentation and/or mini CEX assessed by the Consultant
3. The Consultant’s signature and assessment opinion with input from the team.

Students need to submit one written case report, two mini CEXes, and ITAs to BOND

Assessment is completed on Bond University’s Osler App/website. The student requests the supervisor to review their assessment via Osler. The supervisor can be a user of Osler (require login details) or be requested as a Guest Assessor (email link to assessment). It is recommended to be set up as a user if completing numerous assessments.

Please contact osler@bond.edu.au for further information or to be set up as a user on Osler.

If you have any concerns regarding any aspect of student behaviour and/or performance

Please contact the Medical Program Placement Team (0420 928 125 or MED-Placements@bond.edu.au) ASAP.