

Must Do's

Clinical Procedures

*Students should have the opportunity to participate in the following:
(Students are encouraged to seek out these experiences.)*

- Endotracheal intubation - Assisted
- General anaesthesia - Observed
- Intravenous sedation - Observed
- Operating room surgical checklist - Participated
- Spinal / epidural anaesthesia - Observed

Must See's

Patient Encounters

*It is expected that the student will likely encounter the following:
(Students are encouraged to seek out these experiences.)*

- Shock / hypotension (eg GI bleed, sepsis)
- Transfusion: product ordering, transfusion reactions
- Trauma diagnosis and management (students should attempt to log an authentic experience; simulation accepted if necessary)

MEDD 431

Clerkship (48 credits)

Clerkship Course Overview

This 12-month course follows the initial two years of medical school. The overall goal is to provide students with core experiences across the breadth of medicine through both clinical and academic learning opportunities. Students will interact with patients under the supervision of Clinical Faculty members in order to develop a solid foundation of knowledge, skills, and abilities described by the UBC Exit Competencies. Clinical activities will occur in ambulatory, hospital-based, rural/remote settings, and specialist clinics. The types of specialist clinics may vary from site to site, taking into account local availability and accessibility to specialists. Variability in clinical exposure will draw on the strengths of each site.

Anesthesiology

Anesthesiology is a rotation during the Surgical and Perioperative Care (SPC) Block.

The SPC Block allows students the opportunity to develop and apply knowledge and skills relevant to the assessment and management of patients with surgical diseases, the acquisition of a foundational competence in simple surgical skills, the evaluation of pre-operative patients, operating room protocols and surgical assisting, and the post-operative care and follow-up of surgical patients.

In addition, students will have the opportunity to develop and apply knowledge and skills relevant to musculoskeletal medicine pathology, plus surgical exposure to orthopaedic injuries and management.

Students will be scheduled as follows: four weeks General Surgery, two weeks Orthopedics, two weeks Anesthesiology and two 2-week Surgical Sub-Specialty rotations.

Clinical Learning Objectives

By the end of their rotation in Anesthesiology, the student will be able to do:

- 1 Perform a pre-operative evaluation of the patient coming for anesthesia, including conducting a pre-anesthetic medical history and a focused physical examination.
- 2 Perform a focused assessment of a patient's airway and correlate this with the potential expected ease or difficulty of airway management.
- 3 Identify patients and clinical scenarios where potential complications of airway management may develop, and demonstrate a team approach to management that includes the presence of an "airway expert".
- 4 In collaboration with senior members of the health care team
 - a. Choose anesthetic drugs and techniques
 - b. Provide intraoperative monitoring and care
 - c. Provide postoperative care
 - d. Order and initiate fluid and blood component therapy, including in the setting of a patient with signs and symptoms suggestive of shock
- 5 Establish and maintain effective working relationships with colleagues, other health care professionals, and patients.
- 6 Demonstrate effective communication (verbally and in writing) with patients, their families, and the health care team.

Clinical Learning Objectives Cont.d

By the end of their rotation in Anesthesiology, the student will be able to do:

- 7 Perform the set of core practical and technical skills, adhering to proper technique and all patient safety protocols, including appropriate informed consent. Specifically Bag and mask ventilation; intravenous starts (*Mapped to WBA direct observation #14: Perform general procedures of a physician*”).
- 8 Function as a reliable member of the healthcare team, abiding by UBC and Faculty of Medicine codes of professional conduct fulfilling a responsibility to patient and their families, and to colleagues and other health professionals.