

**THE UNIVERSITY OF BRITISH COLUMBIA**

**Adult Critical Care Medicine**

**Postgraduate Training Program**

## Specific Objectives for Respiratory and Bronchoscopy Rotations

Medical Expert

***Given a patient with respiratory illness, the resident must be able to establish the need, indications, contraindications of a fiberoptic bronchoscopy. The resident must be able to achieve the technical competence in the use of the fiberoptic bronchoscope and related equipment.***

***The Resident shall demonstrate:***

1. **Knowledge, handling and care of the equipment: bronchoscopes, light sources, video camera and accessories, brushes (especially bacteriology brush) and forceps.**
2. **Indications, contraindications, risk assessment and complications of Bronchoscopy**
3. **Pre-medication, sedation and upper airway anaesthesia for Bronchoscopy**
4. **Precautions during Bronchoscopy**
5. **Airway anatomy, nasal and oral fiber-optic intubation**
6. **Bronchoscopy during a telectasis, hemotysis, airway obstruction**
7. **Bronchial suctioning, bronchial washings, B.A.L., bacteriology brushing (including PCP)**
8. **Handling of the specimens (from the Bronchoscopy suite to the laboratory)**

***Technical Skills:***

**Fiberoptic bronchoscopy**

***These skills will be taught by:***

* **clinical exposure during the clinical rotations**
* **attendance at academic half days / hospital based rounds**
* **formal process of graded responsibility**
* **teaching of procedural skills**
* **Journal clubs**

***These skills will be evaluated by:***

* **monitoring of performance at daily ward rounds**
* **in training evaluations at mid-term and completion of designated core and elective rotations**
* **annually partaking the MCCKAP written examination sponsored by the Society of Critical Care Medicine**
* **twice yearly written examinations**
* **quarterly review of performance by Program Director and other members of the Division of Critical Care Medicine**
* **performance of research and quality assurance/improvement projects**
* **presentation of research projects at the annual Residents Research Competition**
* **in-training evaluations and meeting of expectations**

***At the end of the training the Resident will be expected to:***

* **demonstrate diagnostic and therapeutic skills for ethical and effective patient care**
* **access and apply relevant information to clinical practice**
* **demonstrate effective consultation with respect to patient care education and legal opinions**

COMMUNICATOR:

***Competencies:***

* **Recognize the need for effective communication with patients and their families**
* **Recognize the need for effective communication with medical and non-medical colleagues**
* **Act as a consultant and co-ordinate management involving a number of consultants**
* **Be able to refer problem issues or problem cases appropriately**

***These skills will be taught and assessed by:***

* **daily observation of trainee performance by clinical supervisors with regular feedback**
* **observation of Resident – staff interaction during rotations**
* **a review of the written record by the attending physicians with ongoing feedback**

COLLABORATOR:

***Competencies:***

* **Effectively consult with other physicians and health care professionals**
* **Work effectively as part of multi-disciplinary team**
* **Act as a leader of a multidisciplinary team**
* **Contribute to the education of medical, nursing and paramedical staff**

***These skills will be taught by:***

* **observation of daily practice patterns with regular feedback**
* **attendance at interdisciplinary rounds**

***These skills will be evaluated by:***

* **direct observation**
* **feedback through in-training evaluation**

MANAGER:

* **Learn how to triage multiple requests for consultations**
* **Learn how to provide adequate care and maintenance of equipment**
* **Learn the importance of developing people skills**
* **Create a congenial and stimulating work environment**
* **Learn how to delegate responsibilities in a fair and non-threatening manner**
* **Instill enthusiasm amongst colleagues in the work place**
* **Recognize and manage problems with junior staff in a non-threatening and constructive manner**
* **Learn how to utilize resources to effectively balance patient care and health care economics**
* **Work to develop effective and efficient patient management strategies by:**

- **avoiding duplication of services**

**- involving other caregivers**

**- appropriate use of information technology**

* **Organize / co-ordinate ongoing QA review processes of procedures, morbidity and mortality, and clinical practice**

***These skills will be taught in the following manner:***

* **assignment of annual QA projects**
* **learning computer skills**

***These skills will be evaluated by:***

* **observation of trainees by rotation supervisors and attending physicians with feedback on a regular basis and through ITER’s**
* **attendance at academic half days**

HEALTH ADVOCATE:

***Competencies:***

* **Recognize the risk factors for a variety of common critical illnesses and counsel families and colleagues in ways to minimize the acquisition risk**
* **Develop the ethic that the patient’s welfare always takes precedence in the event of medical, political or ethical conflicts**
* **Appreciate the difficult and stressful situations associated with the environment of critical care**
* **Learn to identify and minimize the stresses placed upon the patients, their relatives, and hospital staff**

***These skills will be taught by:***

* **observation of practices of attending physicians and other members of the interdisciplinary team**
* **annual series of ethical seminars**
* **ethical case discussions at morning clinical ward rounds and academic half days**

***These skills will be evaluated by:***

* **provision of feedback through ITER’s**
* **presentation of a QA project performed under the supervision of a member of the Division of Critical Care**

SCHOLAR:

***Competencies:***

* **Accumulate the necessary knowledge to be a competent critical care physician**
* **Learn how to apply basic and clinical science to patient care**
* **Establish a comprehensive self-directed learning and educational strategy**
* **Impart a similar enthusiasm to their colleagues**
* **Develop an appreciation of the role of critical analysis in the assessment of current scientific developments**
* **Develop an understanding of evidence based medicine**
* **Participate in processes of clinical audit and quality improvement activities**
* **Maintain competence in critical care**
* **Commit to forever pushing the boundaries of excellence in caring for critically ill patients**

***These skills will be taught by:***

* **Provision of appropriate teaching courses at academic half days**
* **Defined lectures of epidemiology and evidence based medicine at academic half day**
* **Critical appraisal of the literature at Journal Club sessions**
* **Assignment and completion of QA projects**

***These skills will be evaluated and monitored by:***

* **monitoring of attendance at academic half days**
* **regular formal and informal feedback**
* **formal feedback through ITER’s**
* **written examination**
* **assessing teaching skills during rounds and lectures to junior staff and other members of the health care team**
* **presentation of Research and QA projects at the Annual Residents Research competition**

PROFESSIONAL:

***Competencies:***

* **Develop an ethical framework for the delivery of the highest quality care**
* **Understand professional obligations to patients and colleagues**
* **Exhibit appropriate personal and interpersonal professional behaviors**
* **Act with integrity, honesty and compassion in the delivery of the highest quality health care**

***These skills will be taught by:***

* **lectures at academic half days**
* **observation of the daily practice patterns of attending physicians and other health care workers**

***These skills will be evaluated by:***

* **daily observation of trainees by attending physicians**
* **formal evaluations through ITER’s**
* **annual meetings with the Program Director**

**ADDENDUM:**

**Surrey Memorial Bronchoscopy Rotation Expectations:**

* **Each Resident will liaise with Dr. Ted Lawson at the start of their rotation to identify educational goals and Dr. Lawson and the Resident will work together to try and shape the rotation to fit these goals.**
* **Bronchoscopies run from approximately 11: 30am and continue until 3pm.**
* **The time spent at SMH each day before the Bronchoscopies begin as well as the remainder of the day once Bronchoscopies are completed will be spent helping out different services at SMH.**
* **Each Resident must find a balance between choosing extra work that fits their career goals and helping the staff at SMH as appreciation for participating in an elective at their hospital.**
* **The extra work in addition to bronchoscopies may take the shape of respiratory consults, assisting in cases in the ICU and helping with various services that need extra coverage.**