

# SCOPE OF PRACTICE

The goal of the Emergency Medicine Residency training program at the Medical University of South Carolina is to prepare the physician trainee for the independent practice in the field of Emergency Medicine. This is accomplished through supervised clinical experiences and complemented by a robust, longitudinal EM curriculum program. Supervised clinical experiences are organized to allow progressive responsibility for patient management as residents develop increasing clinical competence within the Emergency Medicine specialty. The degree of professional responsibility accorded to the resident is progressively increased throughout the course of training according to the PGY level and individual capabilities.

Clinical care provided by any Emergency Medicine (EM) resident <u>always takes place under the direct supervision</u> of an EM attending physician while in the Emergency Department (ED). Resident progress through the program is monitored by the EM Faculty and Program's Clinical Competency Committee (CCC); clinical responsibility is increased only as residents demonstrates appropriate skills to handle this increased responsibility.

### PGY-1

- The Trainee is always under the direct supervision of an EM attending physician while in the Emergency Department (ED).
- PGY-1 residents are responsible for the initial evaluation, stabilization, and disposition of individual acutely ill or injured patients.
  - Responsible for a fewer number of ED patients while learning the basic EM clinical skills and approach to patient care within the ED.
  - Expected to gradually contribute toward patient flow, as their skill level and knowledge base expand throughout the academic year.
- Not expected to assume any type of supervision of other learners, although occasionally they do informally supervise medical students.
- Complete history and physical on each patient admitted, occasionally with an upper-level resident.
- Establish diagnosis and treatment plans for assigned patients, occasionally with an upper-level resident.
- Participate in daily patient hand-offs at shift changes, bedside teaching, and white board teaching.
- Perform procedures and contact consultants as necessary on assigned patients.
- Charts must be completed within 24 hours of the patient encounter by all EM residents.

### Charts on admitted patients, critically ill, or complex patients will be completed before the shift is over.

- Attend and participate in weekly didactic conference; this is protected time and attendance is mandatory.
- Required lecture presentations during PGY-1: one case report and one Emergency Ultrasound Image Review during EUS month.
- Perform other duties as specifically directed by the attending physician.
- PGY-1 residents have no direct administrative role to perform but are exposed to various administrative issues during orientation sessions and at
  residency didactic conference.
- Choose a faculty mentor(s) by October of Intern year.

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- Complete two IHI Research Modules & CITI Research Modules by December.
- Finalize CQI proposal by June of Intern year; proposals will be approved by program leadership & faculty supervisor.
- Active during recruitment season for future residency candidates, participating in social events and meet & greets,...
- Residents are expected to become ACLS, BLS, and PALS providers during the PGY-1 year (arranged during July orientation month).

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# SCOPE OF PRACTICE

## PGY - 2

- The Trainee is always under the direct supervision of an EM attending physician while in the Emergency Department (ED).
- PGY-2 resident assumes increased responsibility in the initial evaluation, stabilization, and disposition of acutely ill or injured patients.
- They are expected to carry most critical patients in the ED at any given time, thus developing the ability to care for multiple patients simultaneously.
- Based upon the clinical situation, the PGY-2 resident is encouraged to initiate the appropriate workup and treatment while discussing care with the EM attending at some point during that patient's ED stay. This experience allows the PGY-2 resident to develop and improve procedural skills including procedural or moderate sedation, clinical judgment, patient flow capabilities, and decision-making skills.
- The PGY-2 resident will assist PGY-1 off-service residents or medical students in initiating patient workups.
- As the year progresses, the resident will continue to assume more responsibility for team leadership, supervision, and administration in the clinical and didactic arenas. These residents will begin to provide direct medical control of EMS calls.
- Participate in daily patient hand-offs at shift changes, bedside teaching, and white board teaching.
- Perform procedures and contact consultants as necessary on assigned patients.
- Complete discharge summaries on assigned patients.
- Charts must be completed within 24 hours of the patient encounter by all EM residents.

#### • Charts on admitted patients, critically ill, or complex patients will be completed before the shift is over.

- Attend and participate in weekly didactic conference; this is protected time and attendance is mandatory.
- Required lecture presentations during PGY-2: one case report, one core content, and one trauma conference while of trauma rotation.
- Perform other duties as specifically directed by the ED attending physician.
- When on rotations outside of the ED, perform duties as directed by the supervising physician on those respective services.
- Meet with mentor(s), at least twice a year.
- Continue work on CQI project.
- Active in recruiting future residency applicants, by assuming leadership in the organization of the associated social events and the interview day.



# SCOPE OF PRACTICE

## PGY-3

- The Trainee is always under the direct supervision of an EM attending physician while in the Emergency Department (ED).
- PGY-3 residents manage advanced clinical, administrative, supervisory, and educational functions within the ED.
  - PGY-3 residents will continue to develop their expertise in patient care and procedural skills including procedural or moderate sedation, team leadership, supervising resuscitations and managing multiple patients simultaneously.
  - The resident will focus on managing the entire ED, becoming more autonomous, and learning to delegate and refine triage skills. They are expected to supervise their juniors, off-service rotators and students and to lead by example.
  - The PGY-3 resident will continue to direct medical control for EMS calls.
  - o PGY-3 residents will be supervised exclusively by the EM attending physician while in the ED.
  - Residents will be expected to teach on all clinical shifts and to actively participate in conferences both as presenters and audience members. They are expected to give a total of three didactic lectures, with one presentation having a pediatric focus.
- Participate in daily patient hand-offs at shift changes, bedside teaching, and white board teaching.
- Perform procedures and contact consultants as necessary on assigned patients.
- Complete history and physical on each patient admitted.
- Establish diagnosis and treatment plans for assigned patients under the supervision an EM attending physician.
- Complete discharge summaries on assigned patients.
- Charts must be completed within 24 hours of the patient encounter by all EM residents.

#### • Charts on admitted patients, critically ill, or complex patients will be completed before the shift is over.

- Attend and participate in weekly didactic conference; this is protected time and attendance is mandatory.
- Required lecture presentations during PGY-3: one pediatric topic, one core content, and one journal club presentation with their faculty mentor(s).
- Perform other duties as specifically directed by the ED attending physician.
- When on rotations outside of the ED, perform duties as directed by the supervising physician on those respective services.
- Meet with mentor.
- Finalize CQI project write-up by November 1st of PGY-3.
- Active in recruiting future residency applicants, by assuming leadership in the organization of the associated social events and the interview day.
- Residents will complete renewals for ACLS, BLS, and PALS certifications.
- All PGY-3 residents will complete their CQI project and Scholarly Activity requirements by December of their PGY-3 year.