

Policy: Pediatric Emergency Medicine Fellows Roles and Responsibilities During Medical and Surgical Resuscitations in the Pediatric Emergency Departments (UMHS & HMC)

Purpose:

Clarification of roles in Pediatric Emergency Medicine rotations for EM residents and PEM fellows to promote equal access (for training purposes) to children requiring medical and trauma resuscitations and a mutually beneficial learning experience for both EM residents and PEM fellows.

Background:

The PEM fellowship is a dual track program accepting candidates from emergency medicine programs (after completion of 3 or 4 years) as well as pediatric programs (after completion of 3 years). New fellows in these tracks may enter the UMHS PEM fellowship program at the PGY 4 or 5 levels depending on their originating training program. Training goals and objectives of both the UMHS EM residency as well as the UMHS PEM fellowship require access to children with complex medical and surgical problems, including those requiring medical or trauma resuscitations. The UMHS EM residency is a four year training program. There is an overlap in the need to gain experience (direct participation AND supervision) in the care rendered to this population of children by both EM residents (PGY 3 & 4) as well as PEM fellows (PGY 4, 5 & 6). In order to provide a mechanism to allow maximal training access to these clinical situations clarification of trainee scheduling as well as roles and responsibilities during pediatric emergency shifts follows to minimize and /or avoid direct competition between these training groups.

Definitions:

- 1.) Supervisor: Resident/Fellow supervises overall patient care and of specific trainees (of lower PGY level) during medical decision making and procedures involved in care.
- 2.) Participant: Resident/Fellow participates in specific aspects of patient care (procedures, procedural sedation etc) as member of a team with supervisory role performed by another resident (higher PGY level), fellow or attending.

Methods:

- No changes will be made to current EM resident or PEM fellow total shift requirements in accordance with ACGME program specifications.
- Residents and fellows at the same (PGY) level of training will not be placed in supervisory roles to one another.
- During UMHS CES rotations EM PGY 4's and PEM PGY 4 fellows shift schedules will be distinct with minimal or no overlap via coordination between PEM fellowship coordinator and EM residency program.
- PEM fellows (PGY 4, 5, 6 & 7) working shifts in the Peds ED will perform "supervisory" roles to EM and other resident trainees (PGY 1, 2, 3,) performing "participant" roles during medical and surgical resuscitations.
- CES Faculty have ultimate responsibility for assigning roles and procedures with respect to all medical and traumatic resuscitations involving pediatric patients.
- Senior fellows (PGY 5 and above) will participate in supervisory roles over all residents in the department, regardless of training program or level of training.
- **PGY 4 PEM fellows and EM PGY 4 residents:** For infrequent short periods (UMHS & HMC) where an EM PGY 4 may overlap in a clinical shift with a PGY 4 PEM fellow, EM 4 residents and PEM fellows will alternate their assignment to pediatric medical and surgical resuscitation cases in a given shift. Even calendar days, supervisory resuscitation will start with EM 4 residents, odd calendar days supervisory resuscitation will start with PEM fellows. Alternation of these cases within a given

**Policy: Pediatric Emergency Medicine Fellows Roles and Responsibilities
During Medical and Surgical Resuscitations in the Pediatric
Emergency Departments (UMHS & HMC)**

shift will be tracked by an onsite log book (kept in UMHS CES/HMC ED) where pt name/reg (sticker) will be placed in the book with the EM resident vs fellow assigned the case. PEM fellows will be responsible for logging all medical and surgical resuscitations during CES shifts. Monthly assessment of this operation will be done by the fellowship coordinator and/or fellowship director and communicated to the EM fellowship coordinator/director.

Monitor:

Ongoing monitoring of monthly CES calendar will document residency/fellow hours of overlap cross referenced by medical/trauma resuscitations will occur and be presented for discussion at ongoing PEM fellowship/EM residency joint meetings at least bi annually.

Reviewed	07/2005	06/2009					
Revised							
Initials	MN	MN					