

**Wayne State University Department of Emergency Medicine  
Emergency Medicine Residency Program**

**EM3 OBSERVATION MEDICINE ROTATION**

Rotation	<b>Observation Medicine</b>		
Institution	<b>Detroit Receiving Hospital 3T Observation Unit</b>		
Year of training	<b>EM1</b>	<b>EM2</b>	<b>EM3</b> XXX

**Educational Goals:**

Topics in the core curriculum will be emphasized through outside reading, didactic lectures with observation medicine faculty, hands on management of observation patients in the CDU under the supervision of observation medicine attending physician, and self-assessment with short answer questions.

1. Learn the principles of observation medicine including historical background, goals of treatment and management of observation patients, and basic observation unit management
2. Understand the fundamental selection criteria for observation patients
3. Understand basic observation protocols practiced at DRH 3T
4. Learn the AHA guidelines on testing low risk patients presenting to the emergency department with chest pain
5. Learn the modalities for provocative testing of chest pain patients and ideal patient selection for each modality
6. Learn the management of transient ischemic attack by rapid diagnostic protocol
7. Learn the basics of observation billing, reimbursement and documentation

**Educational Objectives:**

Medical Knowledge

- Define observation status as it applies to patients in the emergency department
- Describe the benefits of observing patients in the emergency department-run 3T
- Describe the optimal length of stay and admit rate for observation patients
- Describe the key components of a basic observation unit protocol, chest pain diagnostic protocol, and transient ischemic attack protocol.
- Describe at least five common observation medicine eligible conditions-including

**Wayne State University Department of Emergency Medicine  
Emergency Medicine Residency Program**

**EM3 OBSERVATION MEDICINE ROTATION**

patient selection, ED care before the observation unit, observation unit care, documentation and criteria for admission and discharge. Reference high quality peer reviewed papers where possible. The resident will present understanding of these criteria to the rotation director (or assistant rotation director) at the end of the rotation.

- Describe the indications, contraindications, limitations, risks, sensitivity and specificity of different cardiac imaging modalities
- Describe to the supervising attending on duty, medications used for coronary vasodilatation - mechanism of action, contraindications, adverse reactions/antidote.
- Describe radioactive isotopes used in non-invasive cardiac imaging and imaging modalities
- Discuss decision making based on results of non-invasive cardiac imaging
- Discuss current best practices in management of transient ischemic attack including diagnostics.
- Discuss observation unit care of heart failure patients and its outcomes.

Patient Care

- Participate in management of patients in the observation unit under the supervision of the attending physician on duty.

Professionalism

- The resident will proactively manage their time to ensure mandatory attendance at didactics and will come prepared to discuss the material with faculty
- The resident will respect the team concept of management of observation patients
- The resident will discuss with the rotation attending any issues that may arise with personnel or staff
- The resident will discuss with the rotation coordinator if any didactics or CDU rounds are missed

Interpersonal and Communication Skills

- Demonstrate the ability to participate in the team model of observation patient care
- Demonstrate the ability to manage time effectively

**Wayne State University Department of Emergency Medicine  
Emergency Medicine Residency Program**

**EM3 OBSERVATION MEDICINE ROTATION**

Systems Based Practice

- Demonstrate the ability to appropriately select patients for observation based on dynamic resource availability and individual patient needs
- Demonstrate understanding of observation medicine utilization within a hospital system or healthcare organization

Practice Based Learning

- Discuss opportunities for quality improvement of new and pre-existing observation protocols.

**Description of Clinical Experience:**

The resident will work four 8 hour shifts per week plus one or two weekend days for a period of 2-4 weeks in the DRH 3T Observation Unit. (The time may be flexible, but will usually be 9am-5pm.) The resident will be responsible for evaluating existing patients-determining and effecting dispositions-either admission or discharge. The resident will interact with the E.D. and determine the appropriateness of potential new patients. If placed in observation, the resident will perform an H&P, develop a management strategy, write orders (using observation order sets) and contact the patient's PCP and any consultants needed. The resident will work under the direct supervision of the observation medicine attending.

**Description of Didactic Experience:**

The resident is required to participate in didactic lectures: 1. "Principals of Observation Medicine", 2. "Observation Medicine and Chest Pain", 3. "Observation Medicine and Billing & Reimbursement", and 4. "Observation Medicine and TIA". These didactic lectures are held during the rotation and given by the Medical Director and Assistant Medical Director of Observation Medicine. The resident is expected to read the materials presented in the syllabus prior to didactics and rounding in the CDU as well as complete the assessment to demonstrate understanding of the principles being taught. The resident will be available to attend the regularly scheduled Emergency Medicine departmental lectures on Thursday mornings.

**Evaluation Process:**

The resident will be evaluated by the attendings with whom they have worked via a written form. A standard evaluation form used by the residency and university will then be completed at the end of the rotation by the rotation director or assistant director assimilating all of the evaluations.

**Feedback Mechanism:**

**Wayne State University Department of Emergency Medicine  
Emergency Medicine Residency Program**

**EM3 OBSERVATION MEDICINE ROTATION**

Evaluation forms are reviewed semi-annually with each resident and their program director. If a problem or complaint is identified during the rotation it is immediately addressed by the program director and/or assistant program director with appropriate resolution. Rotation evaluations completed by the residents are reviewed as received to address problems or update the curriculum. Any specific problems are addressed as soon as they are identified.

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