

Pediatric Critical Care Night Float Rotation

Department: Pediatrics
Faculty Coordinator: Leslie Garner, MD
Location: Children's Medical Center of Dallas

I. Rotation Description:

The night float rotation is designed to provide opportunities for independent learning and peer to peer teaching in the context of patient care in a pediatric intensive care unit. Problem based situations encountered by the resident will require the resident to use pathophysiologically based knowledge of common life threatening illnesses, clinical judgment, current scientific evidence, and discussions with the supervising fellow and attending to develop appropriate management plans for his/her patients.

Night float residents will function as an integral part of a multi-disciplinary team which provides comprehensive, 24 hour coverage to critically ill neonates, infants, and children.

II. Rotation Structure:

Rotation Length: 2 weeks

Hours: Monday- Thursday: 7PM-9AM
Sunday 5PM-9AM

Team Composition: 2 Senior residents will rotate as night float physicians each block. Each resident will be assigned to one of two PICU teams (A or B) and will cover the existing patients and newly admitted patients for their designated team up to a maximum of 14 patients per team. A supervising fellow will be in house each night and a senior fellow and attending will be on call and available from home.

Resident Duties: Night float residents will cover all admissions to their designated PICU service and address all the acute care management issues of the patients on their service overnight. Overnight duties include performance of admission histories and physical exams on all newly admitted patients, assessment of new patients in terms of differential diagnosis and initial management planning, completion of admission paperwork including admission orders, follow-up/completion of management plans initiated on existing patients by the day team, and management of acute patient care issues which arise on existing patients. At the end of their shift, the residents will be responsible for signing out their patients to the day

team with thorough discussion of overnight issues for each patient. Additionally, the night float residents are responsible for presenting all newly admitted patients to the entire team including the attending on morning rounds. Morning rounds are intended to be a forum for directed teaching of the residents and for feedback on overnight management decisions. The night float residents are encouraged to attend the first portion of morning rounds (7:30-9:00am) even if there were no new admissions overnight so that they might benefit from case based teaching and constructive feedback by the attending. Finally, the night float is responsible for completing a daily progress note on all new patients admitted before midnight on the night shift.

III. Learning Goals and Objectives: (based on ACGME competencies for resident education) Night float residents are expected to review the PICU learning goals and objectives. An evaluation tool will be developed to assess achievement of these objectives during the 2 week rotation.

GOAL 1: Patient Care *Provide family centered patient care that is developmentally and age appropriate, compassionate, and effective for the treatment of health problems and the promotion of health*

Resident must...

- A. Perform all duties involved in the direct care of the patients on his/her designated team
- B. Gather essential and accurate information about their patients using medical history, physical exam, physiologic variables, and pertinent diagnostic studies, formulate diagnostic and therapeutic plans, and execute these plans in consultation with the PICU fellow and attending
- C. Provide ongoing evaluation of existing patients and modification of management plans in accordance with the changing medical needs of the patients in conjunction with the fellow and attending
- D. Appropriately escalate the level of care when necessary.
- E. Participate in the transfer of patients into and out of the PICU by completing necessary paperwork and discussing the patient with the referring or accepting physician when appropriate.

GOAL 2 Medical Knowledge: *Understand the scope of established and evolving biomedical, clinical, epidemiological, and social-behavior knowledge needed by a pediatrician; demonstrate the ability to acquire, critically interpret, and apply this knowledge in patient care.*

Please see stated goals and objectives for the Pediatric Critical Care Rotation

GOAL 3: Interpersonal and Communication Skills *Demonstrate interpersonal and communications skills that result in information exchange and partnering with patients, their families, and professional associates*

Night float residents must be able to...

- A. Assume care of designated patients from the day team during formal check out rounds
- B. Communicate changes in patient status and management plan to the bedside staff and family and document these changes accurately in the medical record
- C. Communicate significant changes in patient status/management plan and the need for escalation of care to the supervising fellow and/or attending in a timely manner
- D. Enter accurate and appropriately detailed admission notes, physical exams, and daily progress notes in the medical record in a timely manner

GOAL 4: Practice Based Learning and Improvement *Demonstrate knowledge, skills, and attitudes needed for continuous self-assessment, using scientific methods and evidence to investigate, evaluate, and improve one's patient care practice.*

Residents must...

- A. Demonstrate the ability to utilize scientific evidence in making diagnostic and therapeutic decisions for their patients
- B. Perform self-assessment to identify deficiencies and knowledge gaps and develop an improvement strategy for these areas
- C. **Continue self assessment and self directed learning by doing PREP questions which are accessible to every resident from Pedialink.org website I'm not sure how we can evaluate this and are there specific questions on critical care?**
- D. Accept constructive feedback from attendings and fellows and use this information to improve their patient care practices

GOAL 5: Professionalism *Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to diversity*

Residents must...

- A. Demonstrate personal accountability for each patient under the care of their designated teams
- B. Demonstrate confidentiality and privacy when dealing with patients and their families.
- C. Demonstrate appropriate documentation in the medical record by composing accurate admission and daily progress notes, appropriately completing consultation forms, and signing orders on the chart.
- D. Provide necessary support, with the assistance of social workers, chaplains, child life specialists, and translators, to all families.
- E. Understand ethical, cultural, religious, and spiritual values of patients and their families when providing health care.

GOAL 6: Systems Based Practice *Understand how to practice high quality health care and advocate for patients within the context of the health care system*

Residents must...

- A. Provide assistance to patients and their families in dealing with system complexities
- B. Know the role and resources provided by members of the multidisciplinary team
- C. Acknowledge medical errors, identify cause of medical errors, and change personal practice to avoid medical errors
- D. Avoid use of unapproved abbreviations in the medical record

IV. Methods of Resident Evaluation

- A. Night float residents who participate in morning rounds will receive constructive feedback from the PICU attending and/or fellow on their overnight patient management decisions.
- B. Attendings will complete the online resident evaluation tool at the end of the 2 week rotation and discuss the evaluation with the resident individually.