

1902 Pediatric Acute Neonatal ICU

Course: Pediatric Acute Neonatal ICU Course Number: PED 1902

Department: Pediatrics

Faculty Coordinator: Julide Sisman, MD

Assistant Faculty Coordinators: N/A

UTSW Education Coordinator Contact: Anthony Lee (Anthony.Lee@UTSouthwestern.edu)

Hospital: (Location of rotation) Parkland Medical Hospital

Periods Offered: Periods 1-12

Length: 4 weeks

Max # of Students: 2 (Post Clerkship Students)

First Day Contact: Julide Sisman, MD

First Contact Time: 7:15am

First Day Location: Parkland NICU, 3rd Floor WISH Tower

Prerequisites: PED 1801 Pediatric Core Clerkship

I. Course Description

Students will be assigned to one of the two resident/student teams (either the “Red” or “Blue” teams) in Parkland Memorial Hospital-NICU under the direct supervision of the Attending Neonatologist and Neonatal Fellow assigned to each team. Students will see their patients prior to daily teaching rounds and discuss briefly with the Senior Resident. On teaching rounds, students will present their patients to the Attending and Fellow. Students initially will be assigned intermediate-care infants and in the second or third week of the rotation they will be expected to follow 1-2 intensive-care neonates in conjunction with a second year resident on their team. Each student will be expected to prepare 2 – 3 short presentations on topics chosen by the student and Attending Physician. Students will attend all teaching conferences, as noted below.

<u>Goals</u>	<u>Objectives</u>	<u>Assessment Methods</u>
<p>Patient Care: Students, together with supervising faculty, must be able to provide patient care that is compassionate, appropriate and effective for the treatment of health problems and the promotion of health.</p>	<ul style="list-style-type: none"> Gather essential and accurate information about their patients. <i>Examples: Obtaining a complete maternal/family history, performing a physical examination on preterm and at-risk term neonates, and assessing the pattern of fetal growth, nutritional status and well-being of the preterm and term neonate after birth.</i> Make informed recommendations about 	<ul style="list-style-type: none"> Quality of Medical Records entries Skills evaluation from direct observation.

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	<p>diagnostic and therapeutic interventions based on physical examination, physiologic monitors, laboratory data, best medical evidence, and clinical judgment.</p> <p><i>Examples: Neonates with perinatal asphyxia, complications of prematurity.</i></p> <ul style="list-style-type: none"> • Along with the fellow and attending the student will communicate plan of care to parents. <p><i>Examples: Plan of care for mechanical ventilation.</i></p> <ul style="list-style-type: none"> • Work with health care professionals, including those from other disciplines, to provide patient-focused care, develop and carry out patient management plans. <p><i>Examples: Obstetric team, respiratory care, nutritionists, pharmacology, nursing.</i></p>	
<p>Medical Knowledge: Students must demonstrate knowledge about established biomedical and clinical sciences and the application of this knowledge to patient care. They must understand the approach to establishing a differential diagnosis in the sick neonate.</p>	<ul style="list-style-type: none"> • Demonstrate an understanding of the normal transitional processes occurring at birth, how these are modified by preterm birth, and how alterations in term/preterm neonates result in specific disease processes. • Understand the principles of neonatal resuscitation and stabilization including the ethical dilemmas in decision making in the delivery suite and the role of prenatal counseling at birth. • Understand the patterns of fetal growth, the postnatal problems associated with abnormal fetal growth (e.g., SGA, IUGR and LGA), how to meet the nutritional needs of the preterm neonate in order to promote postnatal growth. • Understand the role and purpose of intensive care, for the neonate, the short and long-term ethical, societal and philosophical concerns, and the reason to obtain a continuing assessment of outcome. 	<ul style="list-style-type: none"> • Each student is required to create a case presentation and to present it to the faculty and fellows during the rotation. It is recommended that students present an interesting case they encountered during their rotation. However, they are also permitted to present on a topic of interest that relates to pediatric NICU. The presentation will be given in the designated department conference room.
<p>Interpersonal and Communication Skills: Students must be able to demonstrate interpersonal and communication skills</p>	<ul style="list-style-type: none"> • Give clear, concise, well-organized case presentations, exchange patient information 	<ul style="list-style-type: none"> • Observations of faculty and staff.

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<p>that result in effective information exchange with NICU/Newborn team members and patients and their families.</p>	<p>effectively with members of the team (<i>e.g., nurses, residents, and fellow</i>), work effectively with other members when indicated, and participate in rounds.</p> <ul style="list-style-type: none"> • Explain complex treatments to parents without medical jargon. 	
<p>Practice-Based Learning and Improvement: Medical students must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning. Medical students are expected to develop skills and habits to be able to meet the following goals</p>	<ul style="list-style-type: none"> • Locate and assimilate evidence from scientific studies related to their patient’s “ health problems. “ <i>Example: Randomized controlled trials of therapy for patent ductus arteriosus.</i> • Use information technology to manage information, access on-line medical information; and support their education. 	<ul style="list-style-type: none"> • Each student is required to create a case presentation and to present it to the faculty and fellows during the rotation. It is recommended that students present an interesting case they encountered during their rotation. However, they are also permitted to present on a topic of interest that relates to pediatric NICU. The presentation will be given in the designated department conference room. • Critical review of a relevant article.
<p>Professionalism: Medical students must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles.</p> <p>Students must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.</p>	<ul style="list-style-type: none"> • Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and their families that supersedes self-interest; accountability to patients and the profession, and a commitment to excellence and on-going professional development. <i>Example: Willingness to seek additional patients for evaluation.</i> • Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care and confidentiality of patient information. • Demonstrate sensitivity and responsiveness to patients’ or their family’s culture, age, gender and disabilities. 	<ul style="list-style-type: none"> • Observations of faculty and staff.

II. Methods of Instruction

Didactic:

The students will attend the following scheduled conferences:

- Resuscitation Conferences – 2nd and 4th Mondays at 1200pm.

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- Morbidity-Mortality Case Conferences (Sept-June) – 1st and 4th Thursdays (PMH) and 2nd Thursday (CMC) at 1200.
- On most other days, there is a noon teaching conference given by an Attending Neonatologist.
- Students are welcome to attend the Research Conference and Journal Club held by the Division of Neonatal-Perinatal Medicine, every Friday (Sept-June) at 0800 – 0900 in the Pediatric Conference Room, F3.112 in the UTSW Medical School.
- Other conferences (e.g., Pediatric Grand Rounds and the Pediatric/OBGYN Perinatal Conference) can be attended as time allows.

Clinical:

- The primary learning opportunity for the students takes place on daily teaching rounds. The students will be expected to attend high-risk deliveries whenever possible and learn the basics of neonatal resuscitation and stabilization. They will attend parent counseling sessions with the Fellow or the neonatologist covering that rotation as the “L&D Attending” in order to learn more about this aspect of care of the high-risk pregnancy.

III. Overview of Student Responsibilities

Because there will be no opportunity to schedule compensatory days, excused absences are limited and must be discussed with the Course Director before starting the course. The student is expected to complete the course during the period selected.

- Night call will be every 4th night.
 - During the evenings, the students will be expected to attend deliveries with the senior resident and/or Neonatal Nurse Practitioner and participate in procedures (e.g., umbilical catheterizations, as needed).
 - The students are expected to stay in the NICU until 10 p.m. when on-call.
 - Weekend rounds begin promptly at 0900 each Saturday and Sunday.
- Students are expected to cover their patients for 3 of the 4 weekends.
 - Students will have 1 day off per week during the elective.
 - Students must notify the Fellow assigned to their team whenever they will be off, so that cross-coverage can be arranged.
 - During the afternoons prior to days off, the students will check out their patients to the resident(s) or NNP(s) who will be covering for them.
 - Before leaving each day, students will check out their patients to the on-call resident or practitioner.

Additional course details are sent to the students prior to beginning the rotation.

IV. Method of Evaluation of Students and Requirements

Grades are pass-fail; there are no examinations: Students will be evaluated by their attending physician and Fellow in Neonatal- Perinatal Medicine. Students will be evaluated on their participation in rounds, the adequacy of their patient care, their understanding of the pathophysiology of the disease that their patients might have, and the quality of their progress notes and charts.

It is mandatory that the student complete the on-line evaluation prior to release of his/her grade and evaluation.