

## Sub-internship Description

**Campus:** Southeast (Fargo)

**Sub-Internship Title:** Surgical and Trauma Critical Care

**Location of Sub-Internship:** Sanford Medical Center – Fargo, ND

**Department:** Surgery

**Course Number:** SURG 9296-02

**Preceptor(s):** Dr. Mentor Ahmeti, Dr. Megan Bowen, Dr. Rebekkah Devasahayam, MD; Dr. Sheryl Sahr, Dr. Kristin Hogg-Korderas, Dr. Khaled Zreik, Dr. Bharghav Mistry, Dr. Steven Briggs

**Period(s) offered:** All

**Number of students per period:** 1

**Course Prerequisites:** Completion of Surgery Clerkship

**Phase Available:** ONLY Phase 3

**Purpose:** To provide an educational opportunity for students to participate in care of surgical critical care patients at the level of an acting intern.

**Objectives:** After completing the sub-internship, the student will be able to

1. Obtain a history and perform a physical exam.  
*EPA #1; Competency 3.1*
2. Present the history and physical in a concise, well-organized format.  
*EPA #6; Competency 3.7*
3. Form and prioritize a differential diagnosis. Select a working diagnosis.  
*EPA #2; Competency 3.3*
4. Discuss orders and prescriptions and construct evidence-based management plans.  
*EPA #4; Competency 3.4, 3.8*
5. Select screening and diagnostic studies and labs and interpret the results of these tests.  
*EPA #3; Competency 3.2, 3.3*
6. Recognize patients who are critically ill or require emergent care and initiate the appropriate initial steps in that care. Reassess patients on an ongoing basis and adjust plan of care as appropriate.  
*EPA #10; Competency 3.5*
7. Document the clinical encounter in a timely fashion.  
*EPA #5; Competency 3.7, 5.7*
8. Communicate effectively with patients and their families regarding diagnoses and plans of care with respect for cultural and socioeconomic backgrounds.  
*Competency 3.9, 4.1*
9. Work effectively as a member of the interprofessional healthcare team including giving and accepting patient handoffs at transitions of care.  
*EPA #8, #9; Competency 3.5, 7.5*
10. Research a clinical question relating to patient care with appropriate evaluation of resources and use of evidence-based information.  
*EPA #7; Competency 1.6, 1.10, 2.7*
11. Formulate or update an accurate problem list for patients under his or her care.  
*EPA # 5; Competency 3.3, 3.7*

**Specialty Specific Objectives:** (These should be linked to EPAs and Year 4 Competencies which can be found at <https://med.und.edu/education-resources/phase3.html#Yr4O> under “Overview & Objectives”)

Please include any procedures the student will be expected to perform:

12. Obtain informed consent for procedures.

*EPA #11 - Year 4 LO #12*

13. Under appropriate supervision perform critical care procedures appropriate for a surgical intern  
Including: intubation, intravenous access, ventilation management, tracheostomies, gastrostomy tube  
placements, bronchoscopies, thoracostomy tube placements, arterial lines, critical care ultrasound.

*EPA #12 – Year 4 LO #4 & 14*

**Instructional Activities:** During this elective, the student will be involved in/experience:

1. The student will assume primary responsibility of his or her assigned patients under the supervision of an upper level resident or attending.
2. Participate in all aspects of care for the critically ill.
3. Present a researched topic to the critical care team.

**Evaluation Methods:** The preceptor will:

1. By direct observation, evaluate the student’s ability to perform a complete history and physical pertinent to the AI specialty and present his or her findings. (objective #1, 2)
2. By direct observation or review of written work, evaluate the student’s ability to form a complete differential diagnosis and select a working diagnosis. (objective #3)
3. By direct observation or verbal discussion, evaluate the student’s formulation of patient management plans including those for patients requiring emergent management. (objective #4, 6)
4. By direct observation, verbal discussion or review of written work, evaluate the student’s selection and interpretation of screening and diagnostic laboratory tests. (objective #5)
5. By direct observation, evaluate the student’s documentation of clinical encounters. (objective #7, 11)
6. By direct observation and via feedback from the healthcare team, patients, and families, evaluate the student’s communication skills including patient handoffs. (objective #8, 9)
7. By review of written or verbal presentation made by the student, evaluate the student’s use of evidence-based information to research a patient care question. (objective #10)

*Include below the evaluation methods to be used for the specialty specific objectives. Link the evaluation method to the objective #.*

8. By direct observation, evaluate the student’s ability to obtain informed consent (objective 11).
9. By direct observation, evaluate the student’s ability to perform critical care procedures under supervision (objective 12).

## **Assessment:**

Evaluation methods #1-9 will be assessed using the Entrustability scale.

| Level | Descriptor                                                                          | Example                                                                                 |
|-------|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| 1     | "I had to do"                                                                       | Requires complete hands on guidance, did not do, or was not given the opportunity to do |
| 2     | "I had to talk them through"                                                        | Able to perform tasks but requires constant direction                                   |
| 3     | "I had to prompt them from time to time"                                            | Demonstrates some independence, but requires intermittent direction                     |
| 4     | "I need to be there in the room just in case"                                       | Independence but unaware of risks and still requires supervision for safe practice      |
| 5     | "I would not have needed to be there other than to fulfill regulatory requirements" | Complete independence, understand risks and performs safely, practice ready             |

*\*This scale was adapted from the Ottawa surgical competency operating room evaluation (O-SCORE): A tool to assess surgical competence. Acad Med. 2012; 87:1401-407.*

Please indicate who will be completing the assessment. If more than one preceptor, how will scores be compiled?

The primary preceptor will be responsible for assessment. At the discretion of the primary preceptor, additional preceptors may be asked to comment.

## **Grading Criteria:**

To receive honors, the student must:

Perform at a level of >4.5 average and have received no scores lower than 3.

To pass the Sub-I, the student must:

Perform at a level of >2.0 average and have received no scores less than 2.

If the student does not pass, remediation will consist of:

If a student fails an Sub-I, the Sub-I director and campus dean will work with the student to form a written remediation plan (signed by all 3) that specifically addresses the competencies that the student did not meet during the rotation. A copy of this plan will be sent to Student Affairs. In order to pass the Sub-I, the student will be required to meet the original passing requirements. A student may not receive honors on an Sub-I that was initially failed.