



XI congresso nazionale

**SIMEU**

ROMA 24-26 MAGGIO 2018

La formazione in Medicina d'Emergenza-Urgenza negli USA



Università  
degli Studi  
della Campania  
*Luigi Vanvitelli*

**Dott.ssa Anna De Vita**

# Clinical experience at NorthShore University

## Skokie Hospital



## Highland Park



## Glenbrook Hospital

## Evanston Hospital



# Residency Program



PGY- Duration	Objectives
<p><b>PGY-1</b></p> <ul style="list-style-type: none"> <li>• <b>Emergency Medicine</b> (5 months)</li> <li>• <b>Pediatric EM</b> (2 months)</li> <li>• <b>Medical ICU</b> (1 month)</li> <li>• <b>Surgical ICU</b> (1 month)</li> <li>• <b>Trauma</b> (1 month)</li> <li>• <b>Anesthesia</b> (1 month)</li> </ul>	<ul style="list-style-type: none"> <li>• Discussion of clinical cases with attending physician</li> </ul>
<p><b>PGY-2</b></p> <ul style="list-style-type: none"> <li>• <b>Emergency Medicine</b> (6 months)</li> <li>• <b>Pediatric EM</b> (1 month)</li> <li>• <b>Medical ICU</b> (1 month)</li> <li>• <b>Surgical ICU</b> (1 month)</li> <li>• <b>Trauma</b> (1 month)</li> <li>• <b>Pediatric ICU</b> (1 month)</li> <li>• <b>Infectious Disease</b> (1 month)</li> </ul>	<ul style="list-style-type: none"> <li>• Emergency procedure</li> <li>• Run “board rounds” when acting as most senior level resident in a treatment area of the ED</li> </ul>
<p><b>PGY-3</b></p> <ul style="list-style-type: none"> <li>• <b>Emergency Medicine</b> (9 months)</li> <li>• <b>Medical ICU</b> (1 month)</li> <li>• <b>Toxicology</b> (1 month)</li> <li>• <b>Administration</b> (1 month)</li> </ul>	<p>Total autonomy</p> <ul style="list-style-type: none"> <li>• Emergency procedures: particular emphasis on <b>airway management</b></li> <li>• Manage critical trauma patients</li> <li>• Responsible for running “board rounds”</li> </ul>



# Residency Program

*Residency can be stressful-Let's make it easier!*



<i>PGY</i>	<i>Annual Base Salary</i>	<i>Education Found</i>
PGY-1	\$56,600	SAEM Annual Meeting
PGY-2	\$59,170	40-hour Medical Legal Seminar
PGY-3	\$61,333	ACEP Annual Scientific Assembly



- **Individual subscription to Up-To-Date**
- Meal Tickets and Free Parking
- **Attendance** (and travel/hotel expenses) at **AMA,NMA/SNMA, AAEMS** if paper presented
- Textbook/Educational materials of \$500 per academic year
- Subscriptions to Annals of Emergency Medicine, Journal of Emergency Medicine, Academic Emergency Medicine
- **Paid certifications ACLS** (provider/istructor), **ATLS, APLS,** Neonatal Resuscitation **NRP**)
- **Paid membership** (ACEP; EMRA; SAEM; AMPA)





# Living Chicago



# Continous Simulation LAB

## Grainger Center for Simulation and Innovation (GCSI)

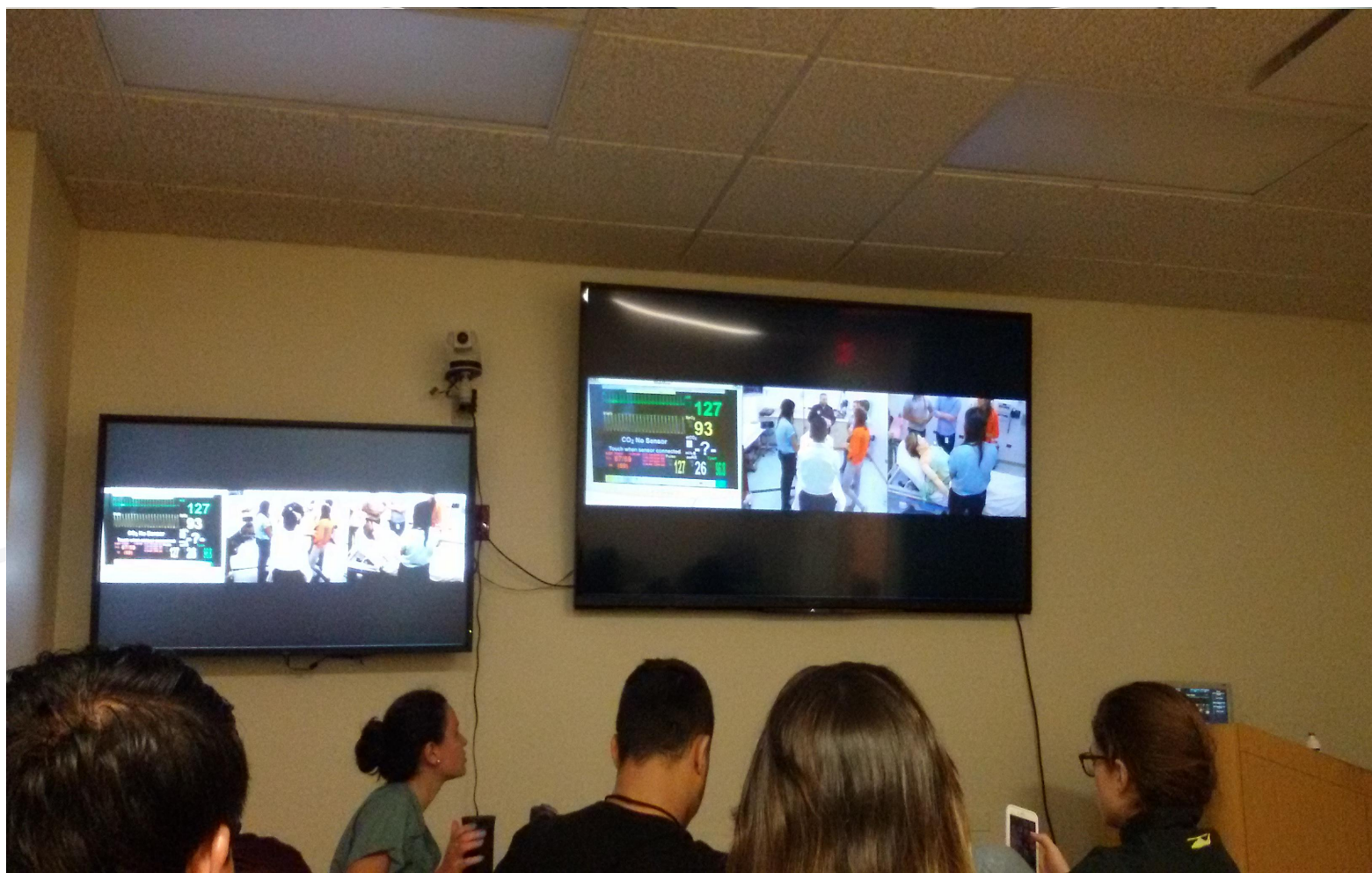


- Emerging technologies to improve education and patient safety.
- **multidisciplinary simulation center** providing complementary and collaborative health care education, training and research opportunities.
- Help healthcare practitioners to **improve their clinical performance, reduce errors, and refine their teamwork** and communication skills
- It actively improves patient care, **reducing healthcare costs and improving outcomes**



# Continous Simulation LAB

## Grainger Center for Simulation and Innovation (GCSI)



# Residents' Scholarly Activities



- Principles of **research**, including how research is conducted, evaluated, explained to patients, and applied to patient care.
- At least **5 hours per week of didactic experience**, supervised by core physician faculty members
- Each core physician **faculty** must attend **20 percent** of didactic experience per year
- **Residents** must attend **70 percent** of the didactic offer



# Accreditation Council for Graduate Medical Education (ACGME) Competencies

## Residents must:

- Be able to provide **patient care** that is compassionate, appropriate, and effective way
- Be able to **competently perform all medical, diagnostic and surgical procedures**
- **Perform** indicated procedures on all appropriate patients, including those who are uncooperative, at the extremes of age, hemodynamically unstable and high risk for
- Provide safe acute pain management, **anesthesia**, and procedural sedation regardless of the clinical situation



# ACGME Skills

## Central Venous Access Competency Checklist

Action	Not Done	Incorrect	Correct	Comment
Verbalizes site selection				
Obtains informed consent				
Perform time out				
Washes Hands				
Opens Kit				
Sterile Gown / Glove				
Sterile US Cover Applied				
Unpacks Kit				
Flushes lines w/saline				
Position Patient				
Sterile Prep and Drape				
Localize the IJ w/US				
Administer local anesthetic				
Access the Vein w/US guidance				
Manometry if applicable				
Insert guide wire 15-20cm				
Confirm wire in IJ w/US				
Remove needle				

## Lumbar Puncture Procedural Competency Checklist

	Action	Completed	Comment
1.	Obtained Informed Consent		
2.	Wash hands		
3.	Time Out Performed		
4.	Patient Positioned Appropriately		
5.	Identify Landmarks		
6.	Sterile Glove and Mask		
7.	Kit opened and organized in sterile fashion		
8.	Skin Cleansed with betadine		
9.	Sterile Drape		
10.	Local Anesthetic Administered at skin		
11.	Local Anesthetic to deeper structures.		
12.	Spinal Needle Introduced at proper position and angle		
13.	Needle Bevel directed laterally		
14.	Measure opening pressure		
15.	CSF collected in proper tubes		
16.	Stylet replaced prior to needle removal		
17.	Pressure Held for hemostasis		
18.	Site Cleaned and dressing applied		
19.	Proper Labs ordered		
20.	Patient placed in supine position		

Resident: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty: \_\_\_\_\_ Pass / Fail: \_\_\_\_\_

# Scuola di Specializzazione Emergenza-Urgenza...in 9 anni

- **Minimo 3 anni di attività clinica**
- **300 cartelle cliniche redatte**

- **30 ventilazioni con pallone Ambu**
- **20 intubazioni oro tracheali**

- **Trattamento di almeno 50 traumi maggiori**
- **Autonomia nella gestione di un Trauma Team**



- **20 accessi venosi centrali**
- **40 cardiac pacing**
- **10 posizionamento di pacemaker**

- **Riduzioni di lussazioni**
- **Posizionamento splints**

- **Punture lombari**
- **Gestione epistassi**
- **Tamponamento anteriore e posteriore**



# Difference USA vs Italy

	USA	Italy
<b>Date of Birth</b>	1968	2009
<b>Duration</b>	3 years	5 years
<b>Salary</b>	\$53000 (average) per year	€20000 (average) per year
<b>Simulation LAB</b>	Mandatory during the whole residency	Not planned in all residency
<b>Anesthesia and sedation</b>	Performed in autonomy by EM physician	Usually performed by anesthesiologist
<b>Complementary education</b>	<ul style="list-style-type: none"><li>• Financially supported</li><li>• Certifications granted (ACLS,ATLS,APLS;NRT)</li></ul>	Provided by residents

# *What after formation?*

Legislative aspects should be updated in order to give to EM physician his place in Emergency Department without have to wait for other specialists to do of the patient management





**Special thanks to Alexandra Asrow for the great opportunity!!!!**

*Filomena Scarano*

*Anna De Vita*

