Critical Care Selective Enabling Competencies and Learning Objectives

Patient Care and Clinical Skills Enabling Competencies

PC1. Obtain an accurate, age-appropriate medical history.

- Perform a focused medical history in an inpatient critical care/emergency medicine setting.
- Identify indications and complications of routine procedures and elements of consent in the inpatient critical care/emergency medicine setting.

PC3. Perform routine technical procedures and tests under supervision and with minimal discomfort to the patient.

PC4. Justify each diagnostic test ordered and proposed with regard to cost, effectiveness, risks and complications, and the patient’s overall goals and values.

- Discuss the risks and benefits of diagnostic/therapeutic decisions in the inpatient critical care/emergency medicine setting.

PC5. Apply clinical reasoning and critical thinking skills in developing a differential diagnosis.

- Demonstrate the ability to prioritize differential diagnoses according to urgency for treatment.
- Demonstrate the ability to critically interpret and assess patient information, including history, exam and pertinent diagnostic tests to develop an appropriate differential diagnosis and management plan.

PC6. Apply the principles of pharmacology, therapeutics, and therapeutic decision-making to develop a management plan.

- Use the most common therapeutics utilized in the inpatient critical care/emergency medicine setting.

PC8. Identify when patients have life-threatening conditions and institute appropriate initial therapy.

- Identify clinical instability in the inpatient critical care/emergency medicine setting and identify appropriate initial therapy.

PC10. Demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.
- Demonstrate cultural sensitivity and competence in the inpatient critical care/emergency medicine setting.

**Medical Knowledge Enabling Competencies**

**MK2. Explain various causes (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, behavioral, and traumatic) of major diseases and conditions and the ways in which they operate on the body (pathogenesis).**

- Demonstrate knowledge of the underlying mechanisms and risk factors for common conditions in the ICU/ER (e.g., sepsis, cardio-pulmonary failure, and shock).

**MK3. Describe how the altered structure and function (pathology and pathophysiology) of the body and its major organ systems are manifest through major diseases and conditions.**

- Demonstrate knowledge of and discuss the pathophysiology of common Intensive Care Unit/Emergency Room conditions, such as sepsis, cardio-respiratory failure, and shock.

**MK5. Demonstrate knowledge of the common medical conditions within each clinical discipline, including its pathophysiology and fundamentals of treatment.**

- Apply knowledge of causes and pathophysiology of common Intensive Care Unit/Emergency Room conditions to the care of the critically ill patient.

**Interpersonal and Communication Skills Enabling Competencies**

**IC1. Communicate effectively in oral format with patients and patients' families.**

- Use appropriate non-medical language when communicating with patients and families.

**IC2. Communicate effectively in oral format with colleagues, and other health care professionals.**

- Use clear and concise language, avoiding the use of abbreviations, when communicating with health care professionals in the inpatient critical care/emergency medicine setting.

**IC3. Communicate effectively in written format with colleagues, and other health care professionals.**
- Demonstrate effective and appropriate written communication in the electronic medical record.

IC4. Sensitively participate in end-of-life activities with other health care professionals and patients. Examples may include end of life discussions and pain management.

- Participate in an end-of-life or palliative care discussion with your team and/or patient and family.

Professionalism Enabling Competencies

PR1. Identify and consistently demonstrate ethical principles and behaviors in the care of patients.

- Treat everyone including patients, families, team members, faculty, peers, and staff with unconditional positive regard during every interaction and recognize the importance of patient centered delivery of healthcare.

PR2. Demonstrate professional behavior consistent with expectations for the medical profession including punctuality and attire.

- Arrive on time each day and actively prepare for and participate in patient care and teaching activities.
- Ask for and incorporate feedback regularly to improve performance.

PR3. Demonstrate respect for and adapt to different patient and medical cultures and expectations.

- Identify and adjust to the cultural nuances and expectations of different medical specialties.
- Identify and adapt to patient cultures to maintain patient-centered care.

Life Long Learning Enabling Competencies

LL2. Reflect upon clinical, service and educational experiences, evaluate positive and negative aspects, and make changes to improve future experiences.

- Differentiate between and compare educational and clinical experiences in the inpatient critical care/emergency medicine settings and other clinical areas you have experienced.

LL3. Demonstrate personal accountability by actively seeking feedback, admitting errors openly, and honestly modifying behavior.
- Request feedback at least twice during the rotation (midpoint and end) and always after difficult clinical situations from different sources (i.e., residents/fellows, attendings, nurses).
- Apply feedback to improve performance.

### Social and Health Systems Enabling Competencies

**SHS2. Identify disparities across populations in North Carolina and nationally and discuss physician roles in reducing these disparities.**

- Identify differences in access to specialized trauma and critical care specialties across the state.

**SHS5. Participate in identifying system errors and implementing potential systems solutions.**

- Communicate to your team members when you recognize an area for improvement or near-miss event.

**SHS6. Apply principles of translational research, patient safety, or quality improvement to enhance patient care.**

- Apply knowledge of quality improvement efforts in your area (e.g., central line infection bundles, ventilator associated pneumonia).

**SHS7. Demonstrate collaborative teamwork skills and the ability to work effectively with other members of the health care team.**

- Engage all members of the team during clinical rounds and medical decision making (e.g., nutritionist, pharmacy, respiratory therapist, sub-specialties).