

Barrett, Lori J

From: Fritzlzar, Sandy J
Sent: Wednesday, July 19, 2006 3:28 PM
To: Colletti, James E; Patten, Lane C; Klinkhammer, Martin D; Fritzlzar, Sandy J; 'sandyfritzlzar@hotmail.com'
Cc: Ankel, Felix K; Gunnarson, Teri M; Hegarty, Cullen B
Subject: NCS Proposal - Needs discussion!

Hi All. Here is a revision of the current NCS proposal. Included are all options for the NCS shift during the first half of this academic year. Nothing has been decided about what will be the NCS resident responsibility and what will not be their responsibility. Please note the conflicts already seen with the current proposal. This is a long and somewhat painful email - but PLEASE read it and give input... Sandy

NON-CLINICAL SHIFT

PURPOSE:

To enhance and diversify the residents' experience and knowledge base in a variety of areas through the implementation and maintenance of a scheduled Non-Clinical Shift (NCS) on every Tuesday.

GENERAL GUIDELINES:

- The G3 Resident scheduled on Amion as "NCS" will start their shift no later than 8:00AM.
- The resident will assume the responsibility for teaching the education workshops to medical students, interns, and rotators.
- The NCS resident on Tuesdays will also be the facilitator for one of the critical case presentations the following day. The resident will be responsible for the brief presentation accompanying their critical cases. The resident is also encouraged to gather other information, follow up data, equipment, or anything else which would augment the educational experience of the critical case(s).

THE MORNING SCHEDULE WILL CONSIST OF ONE OF THE FOLLOWING:

1. **Regions Medical Student/Rotator Workshops:** The resident will be responsible for teaching the medical student workshop from 2-3:30PM. The following dates are scheduled for the 1st half of the year:

Aug 1 st	Med trauma (AKA Sim Center, see below)	Kevin Smith
Aug 8 th	Ortho	Beth Wicklund
Aug 15 th	C-spine	Lane Patten
Aug 22 nd	Eye	No NCS resident???
Aug 29 th	Med trauma (AKA Sim Center, see below)	Sandy Fritzlzar – volunteering to cover NCS
Sept 5 th	Ortho	Beth Wicklund
Sept 12 th	C-Spine	Emily Mason
Sept 19 th	Eye	Sandy Fritzlzar
Sept 26 th	Med trauma (AKA Sim Center, see below)	Martin Klinkhammer
Oct 3 rd	Ortho	Heidi Lako
Oct 10 th	C-spine	Heidi Lako
Oct 17 th	Eye	Kevin Smith
Oct 24 th	Med trauma (AKA Sim Center, see below)	Emily Mason
Oct 31 st	Ortho	Joe Madigan
Nov 7 th	C-Spine	No NCS resident???
Nov 14 th	Eye	Martin Klinkhammer
Nov 21 st	Med trauma (AKA Sim Center, see below)	Roseanne Ekstrom
Nov 28 th	Ortho	Joe Madigan
Dec 5 th	C-Spine	Sandy Fritzlzar
Dec 12 th	Eye	Kevin Smith
Dec 19 th	Med trauma (AKA Sim Center, see below)	Joe Madigan
Dec 26 th	none	

2. **Simulation Center:** On designated Tuesdays, the resident will report to the Sim Center at 8:00 a.m. for simulation training and/or teaching sessions. The simulation experience will be coordinated by one of the staff physicians intimately involved in sim center teaching, training, and experience. The lead physician is Cullen Hegarty. The following dates (8a-4pm) are scheduled for the 1st half of the year:

July 11 th	2 sessions	Sandy Fritzlar
Aug 1 st	2 sessions	Kevin Smith
Aug 29 th	2 sessions	Sandy Fritzlar – volunteering to cover NCS
Sept 26 th	2 sessions	Martin Klinkhammer
Oct 24 th	2 sessions	Emily Mason
Nov 21 st	2 sessions	Roseanne Ekstrom (also covering Rotator Orientation?)
Dec 19 th	1 session	Joe Madigan (also covering Rotator Orientation?)

3. **GMEC Meetings:** The resident will attend the monthly GMEC meeting if they are scheduled for a NCS on that Tuesday. The meetings are held at 7AM in the Board Room on the 3rd Tuesday of the month. The follow dates are scheduled for the 1st half of the year:

Aug 15 th	Lane Patten
Sept 19 th	Sandy Fritzlar
Oct 17 th	Kevin Smith
Nov 21 st	Roseanne Ekstrom
Dec 19 th	Joe Madigan

4. **Rotator Orientation:** The resident will teach a wound care / suture workshop for the off-service rotators as part of the rotators orientation to the emergency department. These workshops will start at 8AM in the EMD and will take ~60 to 90 minutes depending upon the skill level of the rotating residents. The following dates are scheduled for suture workshops for the 1st half of the year:

July 25 th	Emily Mason
Aug 22 nd	No NCS resident – will need PA coverage???
Sept 19 th	Sandy Fritzlar
Oct 3 rd	Heidi Lako
Nov 14 th	Martin Klinkhammer
Nov 21 st	Roseanne Ekstrom (also covering Sim Center?)
Dec 12 th	Kevin Smith
Dec 19 th	Joe Madigan (also covering Sim Center?)
Jan 9 th	Roseanne Ekstrom

5. **UMN Procedure Labs:** The resident will teach procedure labs at the UMN to medical students.

There are NO Tuesday procedure labs scheduled at the UMN.

6. **IF NCS resident does not have a mandatory experience scheduled for that morning, that resident is responsible for determining their morning experience.** They should email Jim Colletti to inform him of their selected morning experience. The following are examples of possible activities or experiences they could pursue:

- a. ILMA experience: The resident could gain ILMA experience if there are any available ILMA patients at the outpatient surgery center.
- a. Ultrasound experience: The resident may check to see if a staff physician involved with ultrasound education is available for ultrasound teaching (Kurt Isenberger and Peter Kumasaka). The resident could also teach medical student(s) and/or intern(s) the basics of ultrasound and performing the FAST exam. Ultrasound could be performed on ED patients, inpatients, or volunteers. The other participants must have available free time and participation must be acceptable to the off-service attending physician(s) or emergency department staff physician responsible for supervising that participant.
- a. Radiology experience: The resident could choose to read plain films or CT's with one of the morning radiologists with their approval.
- a. They could contact one of the ultrasound technicians and observe formal ultrasound technique to enhance their ultrasound experience and expertise.

- a. Research Project: The resident could use their time to work on their research project (i.e. collect data, chart review, data analysis, etc).
- a. Other: They may arrange or organize another experience that would be beneficial to their residency experience and future career. This must be pre-approved by Asst Residency Director Jim Colletti.

The resident may need to make arrangements prior to the start of the NCS on Tuesday (i.e. contact intern on anesthesia or an interested medical student to arrange ultrasound teaching, contacting Pat or Outpt surgery center about available ILMA's, etc).

Barrett, Lori J

From: Dahms, Rachel A
Sent: Monday, August 13, 2007 2:44 PM
To: EMD Residency Committee
Subject: Non-clinical shift discussion

All,

There has been some drift in what the 3rd year non-clinical shift (NCS) is supposed to be (see attached for current duties and a bit more info). I met with a Chief recently and we discussed some of the possible changes and issues these changes would generate. It seems that with the changing of conference to Thursdays, it makes sense to switch the NCS to Wed. Cullen has preliminarily OK'd switching the student workshops to Wed also starting in January, and there is a preliminary OK from the Sim folks to switch student sim to Wed also.

My thoughts (and I welcome any discussion about this, or bringing up alternatives or issues) are that:

NCS changes to Wednesday starting Jan 1

NCS resident is in charge of Critical Case discussion the following Thursday

NCS resident remains in charge of student workshops or sim activities that day

NCS resident is expected to be physically present for some time period (how long? I think 4-6 hours, but this is open for discussion) on the NCS day

If working on research or other duties, could be excused from this requirement in advance to work at home for part of the day

(FYI, amion counts an NCS as a 10-hr shift, just like any other—this is up for debate also!)

The remainder of time on the NCS day could be used for elective educational or admin duties—extra US experience, anesthesia practice, directed reading, etc. This needs to be arranged by the resident prior to the shift.

NCS resident is required to submit plans for the NCS day to us (?Cullen or me?) by the Friday prior to the NCS shift. If not submitted then... (lightning smites the offending resident—or perhaps an extra shift or make-up duty somewhere?)

NEW—NCS resident is responsible for student interviews/lunch/tours as needed that Wednesday, when not doing the workshop/sim activities?

The resident on Admin or Tox is responsible for attending the GME meeting on the 3rd Tuesday of the month at 7 AM—this would cover 7-8/12 months but leave 4-5 unattended. ?if the extra 4-5 would be uncovered, covered by the chiefs, or covered by a free second or third-year depending on schedules?

I was going to bring this up for discussion at the ResComm meeting but we ran over. Feel free to reply to the group with your thoughts!

Rachel Dahms, MD
Assistant Residency Director
Emergency Medicine
Regions Hospital

Non-Clinical Shift Discussion

Current NCS responsibilities

Student workshops at 12:30 OR
Sim center student workshops at 8:00

GME meeting at 7AM, third Tuesday

?Critical case presentation for the following Wednesday
Current seniors voted to have day-shift on conference day do Crit Case

Intermittently, UMN teaching labs for students
?if for pay or if \$\$ goes into residency funds

+/- Anesthesia, US, other focused study (?reading)

Catch-up on paperwork, logs, scholarly activity

NCS problems

Physical presence not always happening
NCS on Tuesday may not be Day shift on Thursday for Critical Case
?skipping conference if not working that day
Variability of experience depending on the day
No accountability besides student workshops

NCS redefinition?

Change days to Wednesday?
Would involve changing student workshops, sim center
Would miss GME meetings
May mesh with UMN labs better
Then need to clarify \$\$ and time issues
Keep NCS Tuesday?
Change scheduling so NCS resident is on Days Thursday, or keep separate?
Require physical presence? How long?
Require plans submitted to Asst Director 1 week in advance?
Put in portfolio

Need to disseminate/clarify expectations for residents

	FTE's	TOTAL ED SHIFTS	ED Shifts /FTE	ed hrs/ week	DAYS	EVES	NIGHTS	hrs/wk with kids	SPKIDS shifts	hrs/wk with ncs	NCS shifts	hrs/wk with backup	BACKUP shifts	TOTAL HOURS/WEEK
R1	2.75	37	13.45	33.64		23	14						16	
R1	1.54	19	12.34	30.84		12	7						16	
R1	2.75	31	11.27	28.18		19	12						33	
R1	3.96	49	12.37	30.93		28	20						15	
R1	2.75	37	13.45	33.64		27	10						33	
R1	2.86	30	10.49	26.22		19	11						25	
R1	2.57	30	11.67	29.18		19	11						11	
R1	2.5	33	13.20	33.00		21	12						21	
R1	3.37	40	11.87	29.67		24	16						24	
R1 average	2.78	34.00	12.24	30.59		21.33	12.56							
R2	4	69	17.25	43.13	23	24	22					45.63	4	45.63
R2	3	52	17.33	43.33	20	16	16					48.33	6	48.33
R2	4	72	18.00	45.00	22	25	25					45.63	1	45.63
R2	4	75	18.75	46.88	25	24	26					48.13	2	48.13
R2	1.89	34	17.99	44.97	11	12	11					47.62	2	47.62
R2	3.5	62	17.71	44.29	22	16	24					45.00	1	45.00
R2	3.6	66	18.33	45.83	23	20	23					49.31	5	49.31
R2	3.21	57	17.76	44.39	20	17	20					45.95	2	45.95
R2	4.32	72	16.67	41.67	21	29	24					45.14	6	45.14
R2 average	3.50	62.11	17.75	44.39	20.78	20.33	21.22					46.75	3.22	46.75
R3	6.75	101	14.96	37.41	29	27	31	39.48	7	40.59	3	42.81	6	42.81
R3	5.3	74	13.96	34.91	21	22	19	36.79	5	38.68	4	42.45	8	42.45
R3	3.6	53	14.72	36.81	16	16	17	39.03	4	40.42	2	43.19	4	43.19
R3	4.5	76	16.89	42.22	20	23	24	44.44	5	46.11	3	51.11	9	51.11
R3	5	78	15.60	39.00	24	20	23	41.40	6	42.90	3	45.90	6	45.90
R3	5	78	15.60	39.00	20	23	20	41.00	5	43.00	4	45.00	4	45.00
R3	3.17	51	16.09	40.22	12	13	15	42.74	4	45.11	3	51.42	8	51.42
R3	5.75	90	15.65	39.13	26	28	23	41.22	6	43.39	5	46.43	7	46.43
R3	5	78	15.60	39.00	25	19	20	41.00	5	42.50	3	45.00	5	45.00
R3 average	4.90	75.44	15.45	38.63	21.44	21.22	21.33	40.79	5.22	42.52	3.33	45.93	6.33	45.93