



Welcome to CHM!

- ED Pods
 - Zebra – fast track
 - Tiger/Lion – trauma
 - Elephant/Rhino
 - Giraffe/Alligator (opening summer 2018)
 - Angelfish – psych holding
- Rotation Duration
 - Typically 4 weeks
 - CHM operates on a block schedule →
13 blocks/academic year

EMR ACCOUNTS

- You will receive an email with information about setting up an account 1 week prior to the start of your rotation.
- Contact DMC Help Desk if you have questions about your account.
 - (313) 966-2400
- Email your **username** to **krichard5@dmc.org** immediately -- so that a dictation account can be set up

EMR TRAINING

- **When:**
 - Typically following orientation
- **Where:**
 - 3rd floor Harper/Hutzel Building (3 Murphy)
- **Need to schedule training:**
 - email Elena Sikaleski esikales@dmc.org or page her at 97530

ID BADGES

- **DMC residents**
 - Your badge is programmed to start on the first date you are schedule to start your rotation
- **Medical Students**
 - follow instructions from the Med School Coordinator
- **Other trainees needing a badge**
 - **Parking Access and Badge Office**
 - ground floor at the Kresge Eye Institute 4717 St Antoine St
 - phone (313) 745-2145
 - hours 7:30am- 4pm M-F
 - \$10 CASH ONLY
 - You can take the free DMC Shuttle from in front of the CHM parking structure to get to this building.

PARKING

- Parking Badge
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PEM WEBSITE

- All rotation requirements and instruction documents can be found on our website:
 - <http://www.chmpem.com/education>
- You will receive a **unique UN/PW** to access the website → before your rotation starts
- Please log in to make sure your account access is working
- Contact Jen Noble with website problems jnoble@dmc.org or text (734) 277-3471

EDUCATIONAL REQUIREMENTS

- Each time you rotate at CHM you are to complete a module
 - **Module 1** – first rotation
 - **Module 2** – second rotation
 - **Module 3** – third rotation
- 5-min presentations should really ***only*** be 5 min
- All modules are available on the website:
 - <http://www.chmpem.com/education>

EDUCATIONAL CONFERENCE

- Weekly didactic educational meetings are Wednesday mornings from 7am-11am
- You give your 5min presentations at this meeting
- You are expected to attend the conference as long as you are **not in violation of your duty hours**

WORK SCHEDULES

- The most current shift schedule is available on the website
 - www.chmpem.com/education
- **No changes or switches**
- Email krichard5@dmc.org with any ***emergency*** scheduling requests
- Arrive 15 min before your shift starts

LATE OR SICK

- If you are going to be late to a shift or are sick, notify the Trauma attending at (313) 966-0489
- All missed shifts must be made up

EVALUATIONS

- **Clear Queue** - electronic evaluation tool that can be set up on your smartphone
 - **Performance** – attending & fellow should evaluate you **EACH** shift
 - **Procedures** – attending should evaluate **ALL** procedures
- Instruction for setup at orientation and on the website

SCRUBS, FOOD, ETC

- **Scrubs**

- DMC employees have access to the CHM ScrubEx machines

- **Food**

- Subway and Bigby coffee are located on the main floor of the hospital

SIGNOUT

- At shift change - help to complete the **Sign Out Form**
- Blank **Sign Out Form** template can be printed from the website
- Transfer care to the next resident to follow the patient
- Reassess the patient

I Stable Watcher Unstable	I Stable Watcher Unstable	I Stable Watcher Unstable
<i>Place Pt. Sticker Here</i>	<i>Place Pt. Sticker Here</i>	<i>Place Pt. Sticker Here</i>
P atient Summary Give Brief Summary Statement Admission Obs Pending DC PMHx HPI	P atient Summary Give Brief Summary Statement Admission Obs Pending DC PMHx HPI	P atient Summary Give Brief Summary Statement Admission Obs Pending DC PMHx HPI

TRIAGE CATEGORIES - PATIENTS

7 PEPC32 | CHM CO PEPC32 | CHM ADC32 | CHM CO ADC32 | CHM GPAMI100 | CHM GPAMI100A | CHM GPAMI100B | CHM GPAMI WalkMIS | CHM SURECZ | CHM INPCCH | CHM OPMECH | CHM
 All Beds | CHM Angelfish | CHM Octopus | CHM Seahorse | CHM Whale/Penguin | CHM Turtle | CHM Marina | CHM Twr All Beds | CHM Twr Lion | CHM Twr Zebra | CHM Twr Tiger | CHM Twr Eleph

ient: TYUS, AARON | WR: 2 | Total: 10 | Avg LOS: 1:22 | Filter: <None>



Bed	LOS	PreBed	Comm	Name	Rg	Comment/Dispo	Doc	SEP	Res	RN	Lab	Consult	RN	Rv	Events	RT	Meds	Inpt	Ok
Triage	0:06			TYUS, A		xzebra													
Triage	0:04			DACE, A		xzebra													
Tiger 1	0:26			JAVOID, A		AG		het	PT										
Tiger 2	0:11			ROOKE, B		xAG			ZB										
Tiger 3	0:51			DAVIS, K		xAG		het	MH		2/0								
Tiger 4	4:14			ZANDER, J		lr		NK	AG		4/3								
Tiger 5	0:55			PEREZ, G		AG			PT										
Tiger 6	3:34	tc1700		SAUCEDO, O		556-1 ready @ 1		NK	KB		19/1								Com
Tiger 7	3:53			WEST, K				NK	KA										
Tiger 8	0:36	P		PONKE, E		AG			DB										



Level 1 - Highest Acuity



Level 2



Level 3



Level 4



Level 5 - Lowest Acuity

H&P

- Label and complete the details in the left column of the pink H&P sheet
- Keep your H&P focused
- Staff all patients with the attending and/or fellow
- Re-assess the patient & vital signs

DISTURB

Event Code: _____
 History: Patient Present Caretaker Other _____
 Chief Complaint: _____

HISTORY OF PRESENT ILLNESS (Location, duration, timing, associated symptoms, quality, modifying factors, context, severity)

REVIEW OF SYSTEMS (1-16)

1. **Constitutional**: NEG Fever Chills Body Ache
 Weakness Weight Δ T 41 Other _____

2. **Eyes**: NEG Vision Δ Pain Discharge Red Other _____

3. **EARS**: NEG Pain Ear ringing Discharge Hearing Δ Balance
 Congestion Loud Pain Sore throat Pain
 Swallowing problems Swollen glands Other _____

4. **CV**: NEG Chest pain Heart racing Dizziness Syncope
 Fatigue Other _____

5. **Respiratory**: NEG SOB SOB Cough productive
 wheezing wheeze stridor Other _____

6. **GI**: NEG P.O intake Appetite _____
 Nausea Vomiting color Frequency of x/d
 Diarrhea color/character Frequency of x/d
 Abdominal pain location Other _____

7. **GU**: NEG UT Urination Pain Color Δ
 Bleeding LMP _____ Penile/Vaginal discharge
 Sexual Activity Other _____

8. **Musculoskeletal**: NEG Pain Swelling Deformity Limp
 Inflammation I RNDM Other _____

9. **Skin**: NEG Rash color/location Scars _____

10. **Nails**: NEG HA Activity Δ Morph Δ T 41 Behavior Δ
 Sensation LOC Δ Sensation Δ Other _____

11. **Psych**: NEG Mood Δ Behavior Δ Suicidal Thoughts
 Violent actions Other _____

12. **Endocrine**: NEG Weight Δ Temperature
 sweating Secondary sexual changes Other _____

13. **Immunologic**: NEG Bleeding Bruising Swollen glands
 Other _____

14. **Allergic/Immunologic**: NEG Reaction to: foods/drugs
 environment Other _____

Past, Family & Social History

Past Medical: _____
 PCP: _____
 Major/Chronic Illnesses: _____

High History:
 Geni: _____
 BW: _____
 Compl: _____

Family History:
 Sudden death
 Inherited Dis:
 Asthma
 SCA

Social History:
 Smoke: _____
 School/day care: _____
 Smoke detector: _____

PHYSICAL EXAM

Vital Signs: T _____ ° C/R/T/A _____
 WT _____ HR _____ RR _____ BP _____ S_{at} _____

Constitutional
 Demographics: Age _____ Race _____ Sex _____
 Vital signs: T _____ HR _____ RR _____
 WT _____ S_{at} _____ BP _____

Level of consciousness:
 alert, lucid, playful, lethargic, good eye contact
 comatose, irritable, obtuse, delirious, flaccid, floppy

Hydration status: _____

Neurological: Oriented x3 affect: none/trace
 N/A

Head: NC AT large, tension AF, C O B D
 N/A

Eyes: ICL sclera injected, scler. PERLA TB normal abduction, saccadic
 Fundi: _____

Ears: TB TM red bulging immovable no landmarks cerumen B/L
 N/A

Nose: mucous green yellow white mucous flaring FI present N/A
 N/A

Throat/Mouth: injected ulcerations vesicles none or dry
 N/A tonsils? diverting tonsillar exudate

Neck: supple neckal rigidity meningismus normal JVP
 N/A no lymphadenopathy

CVS: RR good peripheral pulses heart sounds normal
 N/A sup R2L no murmurs no gallop

Respiratory: clear rates wheeze diminished crackles rhales
 N/A hyperinflation retractions R, B, S, JAD

Abd: flat soft non-tender + BS no hepatomegaly
 N/A distended guarding pain masses/tenderness

Rectal: N/A stool absent hard, sick Guaiac: negative occult
 N/A

GU: penis _____ scrotum _____
 N/A penile _____ testis _____ adnexa _____

Musculoskeletal: ROM normal vascular refill normal tone tender
 N/A joint swelling/tenderness Laxation

Skin: normal petechiae bruising warm dry capillary refill
 N/A diaper rash scab desquamation

Neurological: orientation strength reflexes sensation Babinski
 N/A no meningeal signs CN B XII

Head/neck/face/neck: nodes present gross neck, white
 N/A

Other: _____

ADMISSIONS

Triage	0:04		DACE, A	xzebra		het	PT						
Tiger 1	0:26		JAVOID, A		AG		ZE						
Tiger 2	0:11		ROOKE, B		xAG		MH	2/0					
Tiger 3	0:51		DAVIS, K		xAG	het	AG	4/3					
Tiger 4	4:14		ZANDER, J		lr	NK	PT						
Tiger 5	0:55		PEREZ, G				PT						
Tiger 6	3:34	tc1700	SAUCEDO, O		556-1 ready @ 1!	NK	KB	19/1					
Tiger 7	3:53		WEST, K			NK	KA						
Tiger 8	0:36	P	PONKE, E		AG		DB						

1. Call **Bed Coordinator** (313) 745-5805
2. Place **Admission Order**
 - OBS or FULL
 - indicate name of the attending physician on the order
3. When bed has been assigned – **call & staff** the patient with the floor team resident
4. When patient is ready to be transported - place **Communication Order** indicating name of floor team and last name of physician who you staffed the patient with

DISCHARGES

- Label, Sign & Fill out the back of the **pink** H&P sheet
 - Diagnosis
 - Time Discharged
 - Medications
 - Diet
 - Activity
 - Return to School
 - Follow Up
 - Return to ED
- Place **ED Discharge** order in computer unless otherwise instructed by attending

The image shows a medical form titled "MEDICAL DECISION MAKING" and "Pediatric Emergency Department Provider Record". Several fields are circled in red to indicate important information to be filled out:

- LABEL** (top right)
- Final Impression / Diagnosis:** (1, 2, 3)
- Disposition:** Home, Transfer, Adult
- Resuscitation Note:** (Time, Status)
- Hand-off Report (ED) #1:** (Time, Person Accepting)
- Hand-off Report (Floor) #2:** (Time, Person Accepting)
- Continuing Care / Discharge Instructions:**
 - Med:
 - Diet:
 - Activity:
 - Return to school/day care/work:
- Follow-up:**
- Return to ED if:**
- Resident Signature, Date/Time, and Resident Print Name:**

IMAGES

- **ALL** outside **images** need to be uploaded to PACS regardless of whether a report is provided
- If an outside report is provided – order **Dx Interp** in EMR
- Include a copy of the **outside report** when you give the CD to Radiology


CONSULTS






1. Page and speak with consulting service
2. Order consult as “**consult to pediatric ____**”

Allergies: No Known Medication Allergies

DOB:03/08/2017

No XDocs

Search: 

     Folder:

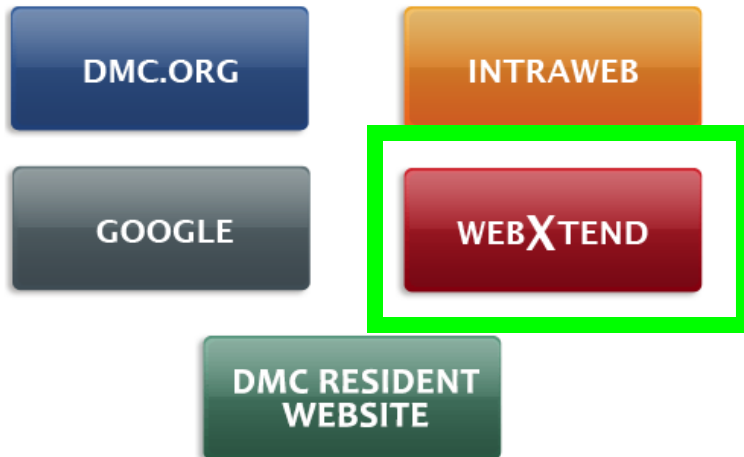
Consult to Pediatric Adolescent Medicine
Consult to Pediatric Art Therapy
Consult to Pediatric Audiology
Consult to Pediatric Cardiac Transplant
Consult to Pediatric Cardiology
Consult to Pediatric Cardiovascular Surgery
Consult to Pediatric Child Life
Consult to Pediatric Critical Care
Consult To Pediatric Endocrinology
Consult to Pediatric ENT
Consult to Pediatric Gastroenterology
Consult to Pediatric Genetics
[Consult to Pediatric GI](#)
Consult to Pediatric Hematology/Oncology
Consult to Pediatric Immunology
Consult to Pediatric Infectious Disease

Consult to Pediatrics - Routine
Consult to Pediatrics - STAT
Consult to PEDS ENT Nurse
Consult to Peds Palliative Care
PEDS Consult to General Surgery
PEDS Consult to Sickle Cell Psychologist
Consult to Radiology Special Procedures



PAGING CONSULTANTS

- Option #1: WebXtend



A screenshot of a web application interface. The top section is titled 'Directory Search' and includes links for 'My Rights' and 'About'. Below this are two tabs: 'Basic Search' and 'Advanced Search'. The 'Basic Search' tab is active, showing input fields for Name, Location, Job Title, and Department. There are also input fields for Dial Number and Pager Id. A 'Search' button is located at the bottom right of this section. The bottom section is titled 'On-Call Schedule Search' and includes a text input field with the value 'cardio|'. Below the input field is a list of search results: 'CARDIOLOGY CHM INPATIENT', 'CARDIOLOGY CHM OUTSIDE CONSULTS', and 'CARDIOLOGY HUH-DRH'. To the right of the list are two buttons: 'View Month' and 'On-Call Now'. A green arrow points to the 'On-Call Now' button.


- Option #2: Dial **122** then enter the **pager ID#** then enter your callback **phone number#** and hang-up





TRAUMA CODES








- Trauma
 - Use the **CHM - Trauma Order Set**
 - Order consults in EMR for all consulting services that participate in code

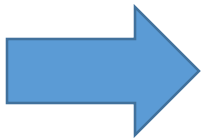
Allergies: No Known Medication Allergies DOB:03/08/2017

No XDocs

Search:  Type:

    Folder:

-  **Trauma Code**
- Trauma Equipment Bedside
-  Trauma Hemorrhagic Transfusion Labs-SGH
-  Trauma Panel - CHM
- [Trauma Team Activation Evaluation](#)
- Trauma Team Activation Full
- Trauma Team Activation Partial
- Trauma/Family
- Trauma/No Family
- Bedside Trauma Equipment
-  Traumatic Brain Injury with high ICP - PICU
-  Limb Loss Risk Trauma PEDS ORTHO
-  PEDS ED - RSI Trauma
-  Peds Gen Surg - Trauma



MEDICATION & PRESCRIPTIONS

- Rx
 - Weight based dosing
 - No motrin for children <6m
 - **Always ask a family if a child takes pills or liquid**
- DEA/NPI Numbers
 - Write your **DEA & NPI** numbers on every prescription
 - **SIGN** all prescriptions
- Inpatient pharmacy questions → (313) 745-5277

DICTIONATION/DRAGON

- If you do not have a dictation number
 - Contact Kaleena Richardson
Krichard5@dmc.org (313) 993-7976 and include your **username** and contact information in the email
- Problem with a **specific** dictation
 - Contact the Dictation Operator (313) 745-5070
M-F 9a-4p
- Dictation shortcuts and procedure templates can be found on the website

CHAPERONE

- Chaperones (resident/nurse/attending/fellow) are required for all sensitive exams:
 - Genital
 - Breast
 - Assault
 - Suspected NAT

MISC

- Translation Services

- MARTI – video interpreter in Lion supply closet
- All phones offer translation service – code #5701
- **Please document and dictate the translator ID#**

- Bathroom Code 6817*

- Supply Cabinet/Room Codes 6817*

- Patient Room Supply Cabinet 1234*

- Angelfish (Psych) Door Code 13579*

ULTRASOUND

- There are **2** US machines in the ED currently (Lion & Elephant pods)
- FAST **ALL** trauma codes
- Collect “patient information” before scanning
 - scan the patient’s ID
 - enter your name
 - enter the attending’s name

RESEARCH

- There are many active research projects in the ED
- We need your help to **identify** & **enroll** patients
- Check out the **research presentation** on the website for details

We hope you have a great
rotation at CHM!

