

ACCIDENT AND EMERGENCY POST

Overlap with Trauma and Orthopaedics Post

Relevant Section(s) of Curriculum: 7 Care of Acutely Ill People

What the trainee could get out of post:

Appreciation of important issues identified

1. Awareness of own limitations
2. Communication Issues
 - Liason with Other Services (Social Services – Social Work Standby, Emergency Services - Ambulance Service and Police)
 - With NHS Colleagues – GPs, NHS 24, Other specialities
 - With Relatives – Breaking Bad News – especially in acute situations where there is no pre-existing relationship, opportunity in supported environment with senior staff and nursing colleagues
3. **Medico-Legal Aspects** – Court appearances, Reports, Sudden Death, Note keeping eg ‘patient states that ...’, laceration v incised wound

Specific Knowledge and Skills

1. Principles of Triage
2. Management of Paediatric Cases - Child protection – awareness of injuries or features of history suggestive of NAI
 - Assessment of sick child
3. Psychiatry – Management of Angry/Aggressive Patients
 - Alcohol and Drug Intoxification
 - Overdose Management
4. Management of Elderly Patients and the particular challenges they pose
5. Minor Illness Exposure
6. Rashes – Acute presentations eg ‘viral rash’
7. Medical Presentations – ‘Collapse’ ? cause (who needs admitted, how assess)
 - Anaphylaxis
 - ‘Bleeders’ – Upper and Lower GI bleed
 - Chest Pain inc ECG Interpretation
 - SOB (Asthma, COPD)
 - LOC and Seizures
8. Surgical Presentations - Abdominal Pain
9. Trauma and Orthopaedics Cases – Head Injuries (How differentiate minor from serious, who needs further assessed, HI Advice, GCS)
 - Management of Hand Injuries and infections
 - Back Pain and Injury inc RED FLAGS
 - Whiplash/Neck injury
 - Joint examination
 - X ray indication eg Ottawa Ankle Rules

10. Resuscitation Skills

- 11. Wound, Sepsis and Burn Management**
- Minor injury
- Soft Tissue Injury inc Burns/Scalds
 - Tetanus Protocols
 - Infection inc Cellulitis (follow up, when to admit)
 - Practical Skills (I&D, Suturing, Steristrips, Glue, Dressings, Strapping)
 - Wound follow up – to appreciate normal healing

12. Pain Management**How:****LEARNING OPPORTUNITIES IN HOSPITAL SETTING**

1. **Seeing breadth of A&E attendances** – Major, Minor and Resuscitation Cases
2. **Clinics – Fracture and Return A&E** – to understand natural history of healing
3. **Resuscitation** – ALS Courses. Should reflect on a resuscitation case – successful or otherwise, to ‘debrief’. Take opportunity to lead a resuscitation (most likely would be looked on to take the lead in a practice situation – this gives the opportunity to do so in a supported environment)
4. **Case Based Discussion**
5. **Formal Teaching Sessions**