



**COLLEGE OF MEDICINE
AND LIFE SCIENCES**

THE UNIVERSITY OF TOLEDO

Emergency Medicine Student Handbook

Table of Contents

Table of Contents		1
Contact Information		2
About the Emergency Department		3
About the EM Residency		3
Core Faculty and EM Residents		4-9
Intro, Student Conduct and Accommodations		10
Rotation Requirements, Goals and Objectives		10
Orientation		10
Attendance, Shifts and Ride-Along		11
Dress Code, Equipment, and Logging		12
Evaluations		12
Patient Flow		12-13
Charting and Order Entry		14
Interview Season and Schedule		14
Learning Environment, Student Mistreatment and Professionalism		15
Tips for Success		15
Curriculum		15
EM Checklist		16
Grading Protocol		17



COLLEGE OF MEDICINE AND LIFE SCIENCES

THE UNIVERSITY OF TOLEDO

Emergency Medicine Clerkship Student Handbook

Contact Information

Jean-Paul Amegee
Clerkship Director, Emergency Medicine
419.383.6523 (office)
419.383.2044
JeanPaul.Amegee@utoledo.edu

Missy Johnson
Clerkship Coordinator, Emergency Medicine
419.383.6375 (office)
419.383.2044 (fax)
Melissa.Johnson@utoledo.edu

Mohamad Moussa, MD, RDMS
Program Director, Emergency Medicine Residency
419.291.8140 (TTH Office)
419.383.6369 (UTMC Office)
Mohamad.Moussa@utoledo.edu

Lauren Monus
Program Coordinator, Emergency Medicine Residency
419.291.8154 (TTH Office)
419.383.6369 (UTMC Office)
Lauren.Monus@utoledo.edu

About the Emergency Department (ED) at The University of Toledo Medical Center:

The University of Toledo Medical Center offers emergency health and trauma services 24-hours-a-day, 7-days-a-week to patients in the Toledo area. Our team of board-certified emergency physicians, trauma surgeons, registered nurses and other specially trained staff provides immediate treatment of any medical or surgical emergency.

Designated a Level III Trauma Center by the American College of Surgeons, our program meets national standards that recognize our ability to provide prompt assessment, resuscitation, emergency care, surgery, intensive care and stabilization of injured patients. Our emergency medicine and trauma teams are certified in Advanced Trauma Life Support.

About the Emergency Department (ED) at Promedica Toledo Hospital

We're your Level I Trauma Center. Severe injuries, the kind that threaten life or limb, require swift and specialized treatment. We're one of only 14 Level I Trauma Centers in all of Ohio. Being awarded the highest national recognition that a trauma center can obtain confirms that you're in a place equipped to handle the most critical injuries. Among other requirements for a Level I Trauma Center, we offer 24/7 access to medical staff and surgeons who are specially trained in trauma care.

We are a pediatric Level II Trauma Center and ProMedica Toledo Children's Hospital has a dedicated children's ER. Doctors are trained in pediatrics and emergency care, and our nursing staff is trained in pediatrics and Pediatric Advanced Life Support.

We have a dedicated area for victims of assault, domestic violence, child and elder abuse, and sexual assault. You can be sure that compassionate medical attention and your privacy are our top priorities.

About The University of Toledo Emergency Medicine Residency:

Our goal is to train and develop the best emergency medicine physicians by effectively and efficiently addressing the needs of our patients. This training is supported by a robust and diverse faculty each of whom offer a necessary component of this training. This program employs the most modern and advanced technological tools to teach our residents emergency patient care including a state-of-the art simulation center, point-of-care ultrasound, and patient safety mechanisms. The combination of The University of Toledo and Promedica health system creates opportunities for our emergency medicine residents to take care of many patients with critical medical conditions such as sepsis, trauma, and cardiovascular conditions.

The UT emergency medicine residents develop an immediate sense of ownership of their residency and strengthen their academic experience through friendship and comradery. We ensure they have opportunities to travel to Emergency Medicine academic conferences together and participate in local activities to support their well-being. Importantly, we believe it is valuable to focus on their clinical and academic education from day one to ensure their success as future Board Certified Emergency Medicine Physicians.

Students interested in pursuing residency in Emergency Medicine are encouraged to meet with the Residency Director.

FACULTY:



Stephen Grider, DO, FACOEP, FACEP

Department Chair

Residency: Pontiac Osteopathic Hospital, Pontiac, MI



Mohamad Moussa, MD, RDMS

Program Director

Medical Degree: University of Toledo College of Medicine

Residency: Henry Ford Hospital, Detroit, MI



Shaza Aouthmany, MD

Associate Program Director, Clerkship Director

Medical Degree: University of Toledo College of Medicine

Residency: University of Toledo, Toledo, OH



Alisa Roberts, DO, FACEP, FAEMS

Assistant Program Director, Director of Disaster Medicine

Medical Degree: Kirksville College of Osteopathic Medicine, Kirksville, MO

Residency: St. Vincent's Mercy Medical Center, Toledo, OH



Justin Pollock, MD, FACEP

Ultrasound Director

Medical Degree: Wayne State University

Residency: St. Vincent's Mercy Medical Center, Toledo, OH



Mike Mattin, MD

Medical Director Toledo/Toledo Children's Emergency Dept

Medical Degree: Medical College of Ohio

Residency: St. Vincent's Mercy Medical Center, Toledo, OH



Russ Johnson, DO

Medical Degree: Ohio University College of Osteopathic Medicine

Residency: St. Vincent's Mercy Medical Center, Toledo, OH



Michael Guinness, MD, FACEP, FRCP(C)

Medical Degree: University of Toronto, Toronto, Canada

Family Medicine Residency: University of Toronto

Emergency Medicine Residency: St. Vincent's/Toledo Hospital. Toledo, OH



Allen Williams, MD

Medical Degree: Wayne State University School of Medicine

Residency: Mount Carmel Mercy Hospital, Detroit, MI



Luke Bisoski, MD

Medical Degree: Wayne State University School of Medicine

Residency: Sinai Grace Hospital

In additional to our core faculty, we have over 40 faculty members involved in lectures, conference, simulation through the academic affiliation with Promedica and Emergency Physicians of Northwest Ohio.

Emergency Medicine Residents

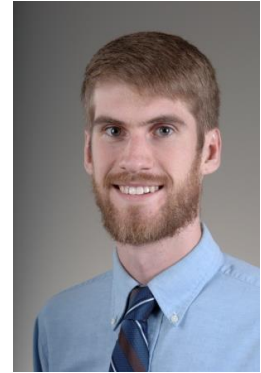
PGY-3: CLASS OF 2020



Susan Akapo, D.O.
Medical School: Ohio
University



Suha Alshambari, M.D.
Medical School: Umm Al-qura
University



Nicolas Deluga, M.D.
Medical School: Ohio State
University



Ryan Johnston, M.D.
Medical School: University of
Toledo



Fenil Kholwadwala M.D.
Academic Chief Resident
Medical School: University of
New Mexico



Mecca Madhun, D.O.
Medical School: Ohio
University



Kathleen Rocco, M.D.
**Administrative Chief
Resident**
Medical School: Indiana
University



De ante' Russ, M.D.
Medical School: University of
Toledo

PGY-2: CLASS OF 2021



Mark Bustillo, D.O.
Medical School: Ohio
University



Robert Dohar, M.D.
Medical School: Northeast
Ohio University



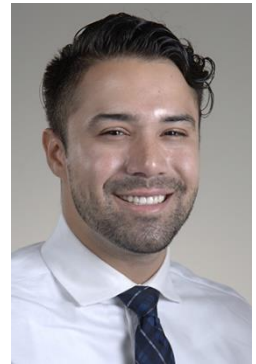
Doman Ghadeer, M.D.
Medical School: King
Abdulaziz University



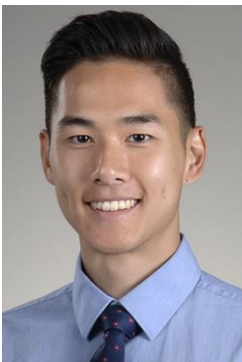
Tymon Horn, D.O.
Medical School: Michigan
State University



Eyad Jaara, M.D.
Medical School: University
of Toledo



Jamil Khan, M.D.
Medical School: Medical
College of Wisconsin



Alex Lu, M.D.
Medical
School: University of
Toledo



Omaid Tariq, M.D.
Medical School: University
of Toledo

PGY-1: CLASS OF 2022



Jack Anliker, M.D.
Medical School: Indiana
University



Naveed Hoda, M.D.
Medical School: Wayne
State University



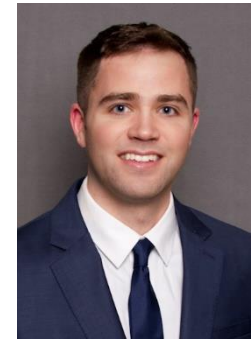
Alexandra Lekson, M.D.
Medical School: University
of Toledo



Haley Mehalik, D.O.
Medical School: Ohio
University



Kayla Morrison, D.O.
Medical School: Michigan
State University



Shayne Rodgers, D.O.
Medical School: Michigan
State University



**Mariah Truscinski,
M.D.**
Medical School:
University of Toledo



Edmond Younes, M.D.
Medical School: Wayne
State University

Introduction:

We would like to welcome you to your EM rotation! You will find your rotation with us beneficial to your educational expectations regardless of what specialty you are considering. The ED at UTMC sees a wide variety of complaints and we have an extremely diverse patient population. The ED serves many different roles throughout our community. It is our hope that the information included in the Student Handbook will help provide you with all the information that you need to complete a successful rotation. If at any time you have any questions or concerns, do not hesitate to contact any member of our staff.

Medical Student Conduct

In accordance with The [Student Code of Conduct Policy, Policy Number 3364-30-04](#), students of The University of Toledo and its affiliates are to conduct themselves in the utmost professional manner. This includes conduct between students, interactions with faculty, staff, patients, visitors and the general public. Students are expected to review the policy prior to starting their Emergency Medicine rotation.

Students Requiring Special Accommodations

<https://www.utoledo.edu/offices/student-disability-services/>

Rotation Requirements, Goals and Objectives

The Emergency Medicine Curriculum can be located at: <http://www.utoledo.edu/med/md/curriculum/> Students rotating in Emergency Medicine are required to read the curriculum prior to the start of the rotation. The curriculum sites list all pre-requisites, recommendations and requirements during your rotation. Grading guidelines are also indicated. Detailed grading rubrics are included in the handbook. Students with any questions on the grading scale should contact either the Program Director or Clerkship Coordinator.

Orientation

Orientation will be held the first day of the rotation immediately following simulation or residency conference, dependent on the start date. Students will attend HEC training (electronic charting), provided a tour of the department, and shown the location of the scrub machines.

Attendance

Students are required to report directly to the ED on the days they are scheduled. Students will work directly with the attending physicians and residents (consisting of EM and off service residents). You are expected to arrive 5-10 minutes prior to the start of your shift to get settled in and promptly start at your scheduled time. Because we work in shifts versus doing rounds you are not required to log your hours in MedEd. Students should stop seeing patients 15 minutes prior to the end of their shift allowing them time to complete charting, orders, selecting co-signing physicians and report off.

Tardiness: Students who are going to be late for their shift are expected to contact the ED and Clerkship Coordinator. Also, students who are tardy will be expected to stay over to make up the amount of time they were late. Absences: Students who will miss an assigned shift or any mandatory educational sessions are expected to email Clerkship Coordinator prior to the absence. Students are required to complete an excused absence form and submit it to Clerkship Coordinator prior to the absence (if applicable). Absences must be approved by the Program Director or Clerkship Coordinator **PRIOR** to the absence. All absences (even excused) **MUST** be made up. If a student fails or refuses to make up missed shifts, the students' final grade will be adjusted and a professionalism report filed with the Dean. Any and all missed clinical shifts or education sessions must be made up before the end date of the students' registration. There will be no exceptions to this rule.

Didactics, Rega Rounds and EM Residency Conference

Students are required to attend didactic sessions (Sim Lab) throughout the Emergency Medicine Rotation (Mondays from 8:30a-12:00 in the Simulation Center, IISC, Center for Creative Education Bldg, 2nd floor). There is an attendance sheet for students to sign in to receive credit. Failure to sign-in constitutes as forfeit of those points towards the final grade. Students are also required to attend their scheduled Rega Rounds session (Rega Rounds are in the ED on Tuesdays from 07:00-11:00). Dr. Rega keeps attendance and failure to report or attend your scheduled Rounds will result in forfeit of those points towards your final grade and a Professionalism Report being filed with the Dean. If EM Residency Conference is on your schedule, you are expected to attend. Conference is held on Tuesdays (except in July) from 08:00-13:00 1st floor, IISC, Center for Creative Education Bldg OR @ TTH 3rd Floor Jobst – Ottawa Room

EMS Ride-Along

First responders are responsible for pre-hospital care and stabilization prior to a patient reaching the Emergency Department. Ride Alongs are a great educational experience for all students, particularly those interested in Emergency Medicine. EMS shifts are part of the student requirements and are coordinated through Clerkship Coordinator and The Toledo Fire Department based on rig availability, departmental volume and number of student learners for each month. Students are required to arrive at the designated location for their ride along 15 minutes before the start of their shift. PLEASE NOTE: Your EMS Ride Along is **STRICTLY** an observership and under no circumstances should students practice invasive clinical skills in the field. If you have any questions contact Clerkship Coordinator prior to your ride along. Students are required to obtain and sign the required paperwork from Clerkship Coordinator to be completed two weeks prior to their rotation. Students should be advised that they are required to provide the EMS staff an evaluation form at the end of their shift to receive credit. Students must also have the fire house staff initial their time in and time out. The station that you are stationed at eats meals together paid for by the fire house. If you would like to eat what they provide students are expected to donate \$10.00 towards their meals (to include lunch and dinner). If the student chooses not to partake in the meal they are eating students are allowed to pack meals.

Dress Code

The dress code for your EM rotation is University of Toledo provided scrubs. All students will wear their lab coats and have their name badge displayed above the waist with their picture and name showing. Visiting students will be provided with access to UT scrub machines and provided with a UT picture ID. Visiting students will wear their home institutions lab coat. Students may also wear professional attire including their lab coat. Dress code for EMS ride along shifts is khaki or dark pants (no jeans or scrubs) and a dark colored polo shirt. Boots or sturdy shoes must be worn (no flip flops, Crocs, Birkenstocks, or sandals).

Equipment

Students are required to provide their own stethoscope, pen light, paper and pen. We do not stock any extra supplies. Students reporting for a shift without any of the above listed supplies will be sent home to obtain these and are expected and required to return.

Patient and Procedure Logs

We do *not* require that patients and procedures are logged using MedEd. PA students will document procedure logs in E-Value as required. Visiting students will use their home institutions documentation process. Verification of completed procedures is documented on your Procedure Check-Off list (will be given to you at orientation) and required to be completed and turned into the Clerkship Coordinator. This will be done before grades are calculated.

Evaluations

Students will be evaluated by all practitioners (residents, off service residents, NP's, PA's and attending physicians) during each shift. Daily and weekly evaluations are to be placed in the Academic box located on the Clerkship Coordinator's desk OR in the ED @ UTMC & TTH. In order for the student to complete evaluations on the faculty and staff you are required to fill out the attending physician listing and resident listing in MEDed. All evaluations must be completed before a final grade and evaluation can be submitted.

Patient Flow in the ED

Patients arrive one of three ways to our ED; by private transportation (drove themselves, brought by family or friends, or public transportation), by squad, or by Life Flight. Patients arriving by squad are either taken to triage or directly to a room dependent on their chief complaint, with higher acuity going directly to a room and lower acuity being directed to triage. Flight patients will always go directly to a room, to the Cath Lab, the Intensive Care Unit, or the OR.

Patient triage is a vital step in the flow of patients in the Emergency Department. When a patient arrives they are registered then sent to triage for a skilled and detailed nursing assessment. Patients complaining of SOB and chest pain bypass this step and are routed directly to a room and the attending physician will complete the initial assessment. All other patients are asked detailed questions pertaining to their complaints. From here the nurse will assign a triage level to the patient. Our triage level is based on a number based and color coded system, outlined below:

Patient Acuity	Primary Assignment	Secondary Assignment's (Students)	Supervising Physician
Level 1-Critical-Blue	EM resident	MS3, MS4 or PA	Attending physician
Level 2- Emergent-Red	EM resident	MS3, MS4 or PA	Attending physician
Level 3-Urgent-Yellow	Any resident, MS 3 or MS 4, PA student, or mid-level provider	MS3, MS4 or PA	Attending physician
Level 4-Non-Urgent-Green	Any resident, MS 3 or MS 4, PA student, or mid-level provider	MS3, MS4 or PA	Attending physician
Level 5-Minor-No color	Any resident, MS 3 or MS 4, PA student, or mid-level provider	MS3, MS4 or PA	Attending physician

ed	Name	NAIR	HIPAA	CC	EDRN	EDMD	LOS	RN	SEC	Tech	Lab	XR	CT	IMG	Resp	Location
09A	HECINFANT, ON						94:19:13									
TS01	HEOER, KENN						42:01:14	To Do	Done	To Do	YI				Pend	
XR01	HECCHILD, FOU			MVA			38:13:35	To Do		To Do						
10A	TESTEIGHT, HE			Abdominal	ABIGAIL		103:23:5	To Do	Done	Done						
11A	MORRIS, ONE			Chest Pain		MORRIS	97:22:28	To Do	To Do	To Do			Done		EKG C	
11A	MORRIS, THREE			Abdominal		MORRIS	105:15:0	To Do		To Do						
12A	EDMD, TWELVE			Blood in uri	CHERY		97:21:21	To Do	To Do	To Do						
13A	MORRIS, TWO			Wound /lac		MORRIS	105:15:0	To Do	To Do	To Do			Done		EKG D	
14A	PORTAL, PREST			Abdominal	CHERY		09:51									

Patients with triage levels of 1 (blue), 2 (red), and 3 (yellow) are placed in rooms 1-13, with those having the potential of being an ICU patient and trauma patients being placed in rooms 10, 11A, 11B or 12. Patients with a triage level of 4 (green) and 5 (no color) will be placed in rooms 13-25. During certain times throughout the day patients of any triage level will be placed in rooms 1-16, with rooms 10-12 being held for high acuity patients, ICU, and trauma patients. Please note that room assignments are flexible and do not always follow the above criteria.

Patients with a triage level of 1-3 are managed directly by the attending physician. And those with a triage level of 4-5 are managed directly by the Physician Assistant or Nurse Practitioner on shift. Occasionally depending on coverage in the department Physician Assistants and Nurse Practitioners will assist the attending on duty with all triage levels, with the exception of triage Level 1 (critical, light blue).

In the event of an incoming trauma, only two (2) students are allowed in at a time. Trauma cases are extremely fast paced and the room gets packed and busy so limiting the amount of students per case is necessary. Once a student has completed their trauma requirement, the next set of students will be assigned to the following trauma and so forth. The same assignment guidelines apply to cardiac arrests. In the event that we have limited students (less than 6 per rotation), students are encouraged to get as much exposure as they would like, depending on the approval from the attending physician or senior resident.

Students are encouraged to sign up for patients based on the patient requirements they have left to fulfill. Once a student has completed their requirement for each diagnosis and procedure, students who have not completed that requirement will get the next patient. Once all diagnoses and procedures have been completed by each student patient assignment is a lottery system. There will be no instances when there are patients in the ED and students do not have a patient assignment.

Charting

Students are required to chart all patient encounters in the EMR regardless of level of training. All student charting is to be done as a free text note. Before the start of the rotation students should obtain an h&p notebook from the Clerkship Coordinator. Students will enter the information they receive from the patient on the notebook and then also as a free text note. You must present your patients to the attending and/or resident that you are covering the patient with PRIOR to charting. Students must also ALWAYS select a cosigning attending physician for all charts. No exceptions.

Order Entry

Students are expected to enter patient orders. This includes laboratory studies, imaging studies, medications, and diagnostic testing. Once orders are entered students should notify the attending/resident for review. Once reviewed the practitioner will co-sign the orders entered.

Interview Season

During interview season it may be necessary for MS4's to schedule interviews during your rotation with us. Please provide us with as much notice as possible in regards to your interviews. We will need the date(s) that you will be gone and the location. We will make every effort to accommodate your interview schedule without you forfeiting your spot in the rotation. If you have questions or concerns please contact the Program Director or Program Coordinator.

Schedule

During your Emergency Medicine rotation we will utilize a third party scheduling software for scheduling and time off tracking. Students should monitor their [Rockets.utoledo.edu](mailto:Rockets@utoledo.edu) email daily for emails from the coordinator and the software for login instructions. Once the schedule is published there will be no changes made unless done so through a trade.

Learning Environment, Student Mistreatment and Professionalism

Professionalism or mistreatment issues can also be reported to any Block or Clerkship Director/Coordinator as well as the Dean's Office. Cards with contact information are available from Clerkship Coordinators.

[Website available for anonymous reporting of professionalism issues](#)

Professionalism: Core attributes of Professionalism:

- Altruism
- Accountability
- Excellence
- Duty
- Honor and integrity
- Respect

Selected Institutional Policies Related to the Learning Environment Applicable to the College of Medicine and Life Sciences:

- [Learning Environment and Faculty Professionalism Policy](#) (Policy # 364-81-04-018-00)
- [Professionalism and Standards of Conduct/Disciplinary Actions and Due Process/Appeals](#) (Policy # 3364-81-04-017-02)
- [Sexual Harassment and other forms of Harassment](#) (Policy 3364-50-01)

Tips for Success:

- Utilize your resources. If you have questions ask someone! The ER staff are more than willing to help you learn and succeed, you just have to ask
- If problems arise during your rotation meet with the Clerkship Coordinator or Director. A majority of the time most problems are due to simple miscommunication
- Know what you are capable of and more importantly what you are NOT capable of, ask for help before it's too late
- Be willing to learn
- Be punctual and proactive
- Present your patients before charting (present to the EM resident first, then to the attending)
- Follow through. With everything
- Be professional with everyone you encounter in the ED. A simple smile can make a huge difference
- GU and pelvic exams must be chaperoned by an attending physician or staff member of the same sex as the patient

CURRICULUM

Clerkship Website – Curriculum

<https://www.utoledo.edu/med/md/curriculum/curriculum4/index.html>

Emergency Medicine Checklist

Once the schedule is released, no changes will be made. Students who need additional days off other than the dates submitted will need to do this through a switch with final approval needed from either the Clerkship Director or the Clerkship Coordinator. Schedule requests must be turned in at least 30 days prior to the start of the rotation. Requested dates are not a guarantee.

Didactics are held every Monday from 08:00 to 12:00 in the Simulation Center. Attendance is **MANDATORY** the first day of the rotation. Students must sign in on the attendance sheet to receive credit.

At the end of each shift students are required to check out with the attending(s) and resident(s) on duty. You are required to sign out on your patients in the EMR. To do this, go to Review in the EMR and select the appropriate co-signing physician. Residents are not to be selected in this step, only the attending physician.

Student Daily Checklist

1. Physically see all of your patients to ascertain how they are doing and to update them.
2. Check all labs, x-rays, and other studies ordered.
3. Insure that you have completed all of your documentation, including, HPI, PMH, PSH, Medications, SH, FH,ROS, and PE. Also procedure notes should be done.
4. Double check to make sure that you have selected a CO-SIGNING MD. No chart should read as the medical student or resident was the primary practitioner.
5. Sign out any incomplete patients to a comparable level provider.
6. Ask the attending physician for permission to leave prior to departing the ED.

GRADING PROCEDURE:

MS3,MS4,AI	
Clinical Evaluations	50%
NBME	30%
Mock Code Exam	20%

Clinical Evaluation consists of clinical skills and class participation, professionalism (behavior, daily preparation, attendance and interdisciplinary communication)

Physician Assistant Students & Visiting Students	
Clinical Evaluations	50%
EM Test	30%
Mock Code Exam	20%

Clinical Evaluation consists of clinical skills and class participation, professionalism (behavior, daily preparation, attendance and interdisciplinary communication)

How Grades are Determined

- Daily Evaluations
- NBME OR Test
- Mock Code Exam
- Procedure Log – **Must be Complete!** Volunteer for every procedure; IV's, Foley's, NG's, etc.
 - If Procedure Log is **not** complete, you **must** give an explanation why it is not complete.
 - If Procedure Log is **not** complete and **no** reasonable explanation given, it will then count against your final grade.
- Must have Nursing Procedure Shift Eval, Procedure Log, EMS Eval, and all daily evaluations to coordinator no later than 1 week after rotation ends.
 - If **not** received within 1 week, your grade will be "Incomplete" until received, and could possibly result in a lower grade.

