

International Emergency Medicine



DEVELOPMENT OF AN INTERNATIONAL ELECTIVE IN AN EMERGENCY MEDICINE RESIDENCY

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Abstract—Background: There is a continued interest in global emergency medicine (EM) training, research, and clinical program development. There are many opportunities for “voluntourism” in medicine, but many of these experiences do not have standard goals and objectives. **Objective:** This article describes a rotation for EM residents from the United States to have a structured learning experience focusing on emergency medical settings in the prehospital phase (something often lacking in U.S. programs). **Discussion:** The authors discuss the structure of the training program, including goals, objectives, and core competencies. First-hand accounts of the training experience are also presented. **Conclusions:** Global training experiences can have clear benefits. Students go to places to “learn,” but can also “teach” at the same time. Setting goals and objectives helps to assure that students are gaining specific core competencies as part of the experience. Other global rotations would benefit from having a defined structure. © 2016 Elsevier Inc.

Keywords—international emergency medicine; prehospital care; international elective; residency training

INTRODUCTION

There has been surge in the number of global health training and volunteer opportunities for medical residents (1,2). This is true in emergency medicine (EM) as in other

specialties (2,3). Although these experiences are popular and thought to provide tangible benefit to the residents, they can lack formal structure. While it is important to facilitate the acquisition of intercultural competency, foster personal growth, and to provide enriched academic environments, measures should be employed to ensure that residents’ experiences are designed to increase the likelihood that meaningful results ensue (4). A recent study polled 126 Accreditation Council for Graduate Medical Education (ACGME)-accredited EM residency programs regarding international rotations. Eighty-eight (n = 111) of the programs queried responded with data on their international rotations (IRs). No program required IRs (0 of 111), but 101 programs (91%) offered IRs as an elective. Among the 101 programs with IRs, most (69%) did not have a predesignated site. Ten programs (9%) did not allow IRs. Overall, 80% of the responding programs had residents completing IRs (2). The purpose of this article is to describe a structured international experience for EM residents.

DISCUSSION

The University of California, San Diego (UC San Diego) in partnership with the Sistema de Atención Medica de Emergencias (SAME) in Buenos Aires, Argentina, has

developed a special rotation aimed at providing a structured learning experience that is coupled with residents' interest in international medicine. This rotation provides educational opportunities in many aspects of EM training, with a particular emphasis on emergency medical systems in the prehospital setting. The SAME Program will allow EM residents to expand their knowledge base, gain medical experience in varied settings, and gain perspective on the practice of EM outside of the United States. The principal learning activities, the physicians' tasks, the objectives, and the goals of the program are explained.

Principal Learning Activities

Learning activity	Implementation
Direct patient care	<ul style="list-style-type: none"> EM residents are assigned to work under the supervision of emergentologists (Emergency Medicine physicians) in the Sistema de Atencion Medica de Emergencias in Buenos Aires. EM residents will have the opportunity to participate in direct patient care including patient assessments, medical decision-making, procedures, and disposition of patients.
Didactic conferences and lectures	<ul style="list-style-type: none"> EM residents will attend educational sessions at SAME and the Facultad de Medicina UBA. EM residents will have the opportunity to take an active role in teaching at the Emergency Simulation Center at Facultad de Medicina UBA

EM = emergency medicine; UBA = Universidad de Buenos Aires.

Core Physician Tasks to be Developed

Physician task

- Interact with prehospital personnel and direct prehospital care of patients
- Provide emergency stabilization of prehospital patients
- Improve skills in targeted history and physical examination of prehospital patients
- Assess modifying factors in patient management
- Develop appropriate differential diagnoses, and diagnostic plans relevant to prehospital patients
- Provide correct therapeutic interventions in the prehospital setting
- Select proper cost-effective pharmacotherapy for prehospital patients
- Develop the skills of observation and reassessment to modify diagnostic and treatment plans
- Discuss with patients the prevention and education of their medical conditions

- Demonstrate accurate and complete chart documentation
- Begin to develop the skills of multitasking and team management for prehospital patients

Goals

1. Learn common organizational structures of the prehospital setting in Buenos Aires.
2. Learn the educational requirements and skill levels of various prehospital providers.
3. Learn principles of prehospital system operations.
4. Learn basic principles of disaster management.
5. Learn principles of prehospital triage and emergency medical care delivery in Buenos Aires.
6. Learn principles of priority dispatch.

Objectives

Upon completion of the rotation, the resident will be able to:

1. Understand the major components of prehospital systems.
2. Understand the specific components of the Buenos Aires prehospital system.
3. Participate as an observer or team member in ground and air medical transport systems.
4. Understand and observe the use of priority dispatching systems.
5. Discuss development of prehospital care protocols.
6. Discuss basic concepts of disaster management.
7. Describe common environmental, toxicological, and biological hazards encountered in the prehospital care setting, as well as injury prevention techniques.
8. Describe the differences between prehospital medicine in Argentina and the United States.

Emergency medical systems in Argentina have unique features in comparison to the United States. Much of the emergency care provided occurs outside of the hospital setting in the field. The ambulance system is also unique based on this difference. These features will allow residents from UCSD to gain an experience different from their emergency medical systems rotations in the UC San Diego Program.

The strengths of the SAME experience include:

- Large urban, international prehospital and disaster response system
- Unique experience for UCSD EM residents to actively participate in a prehospital system in which physician emergentologists staff ambulances and

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