



Emergency Department
Queens Medical Centre
Nottingham University Hospitals



Placement Handbook

Contents

Welcome	1
Staff in the Emergency Department	2
Scrubs of ED	4
Map of ED	5
Information on clinical areas in ED	6
Digital Resources	9
Hints and Tips	10
Clerking pro-forma	11

Welcome

Welcome to your placement in the Emergency Department (ED). The department provides an excellent opportunity for you to learn new skills and see a vast quantity of patients arriving with different presentations. The field of emergency medicine is based on the knowledge and skills required for the prevention, diagnosis and management of acute and urgent aspects of illness and injury affecting patients of all age groups with a full spectrum of undifferentiated physical and behavioural disorders.

The purpose of this booklet is to provide you with information about the department and staff that will aid your learning and help you to navigate the department.

During your placement you must adhere to the trust's dress code at all times ensuring that your appearance projects a professional image and is smart, clean and safe for yourself and patients. More information can be found in the uniform policy . http://nuhnet/nuh_documents/Documents/Dress%20Code%20and%20Uniform%20Policy.docx

Your bags, drinks and food must not be taken into clinical areas but instead stored in the lockers within MEC or in the ED changing rooms. The staff room for your breaks during your placement is located up the stairs from the door by resus.

Throughout the placement you may come into contact with sharps, blood or bodily fluids. If there is a contamination issue from any of these things, it should be reported to the senior member of staff responsible for that area. You will be required to fill in an incident form and if necessary receive support from the senior nurse and occupational health.

It is worth noting that on a Thursday morning (usually about 9am) there is a fire alarm test which should only last for a few seconds. If there is a real alarm don't panic you will be told what to do by a senior member of the team you are working in. If you would like more information on the fire alarm system it can be found on the intranet.

If you are unable to attend any of your placement days due to sickness etc. then please get in touch with Amy Gibson as soon as possible.

If you have any problems or questions the key people to contact are:

1. Amy Gibson, Undergraduate Coordinator. Amy.gibson@nuh.nhs.uk Ext 80295 (based in MEC)
2. Rebecca Raven, Medical Education Coordinator. Rebecca.raven@nuh.nhs.uk (DREEM)
3. Andrew Beckham, Teaching Fellow. Andrew.Beckham@nuh.nhs.uk Ext 87965 (DREEM)

We do hope that you enjoy your time here.

Staff in the Emergency Department

There are a broad range of staff in the ED that all have a vast quantity of knowledge. They will all be happy to assist you during your placement and aid you in your learning.

Purple Scrubs – DREEM Educators and Researchers

The ED education and research team wear purple scrubs so that they can be easily distinguished from other members of staff in ED. The team includes a variety of nurse educators, teaching fellows and ACPs. Please approach these people if you need to ask any questions, they are always happy to help.

Black Scrubs – ED Consultants

Consultants wear black scrubs. They are usually allocated to be in charge of a clinical area i.e. UTU, MU or Resus. It's always a good idea to introduce yourself to whoever is in charge of the area where you are working and discuss your learning needs for the day.

Dark Green Scrubs (Olive) – ED Registrars

The registrars are of clinical grade ST4-7 and work in all areas of the department. They will often be delivering your teaching sessions and will be good to work alongside if possible.

Light Grey Scrubs – Doctors

The junior doctors of the department of clinical grade F1, F2, CT1-3 work across the department and are also learning, but are always happy to help where they can.

Dark Grey Scrubs (Charcoal) – ACP (Advanced Clinical Practitioner)

The ACP team have a thorough and well-structured method of taking histories and examining patients. They are very knowledgeable and senior in the department and are always good to work alongside if possible; they work in all areas of the department.

Light Blue Scrubs – ENP (Emergency Nurse Practitioner)

ENPs much like the ACP team are very knowledgeable and have a well-structured system of taking histories and examining injured patients. Their main priority is to assess, investigate, treat and refer (or discharge) patients with limb problems or injuries to the head, face and neck with defined protocols.

Blue Uniform Scrubs (Light-band 5, Royal-band 6, Navy-Band7) all with white trim – Nurses

There is usually a band 6 nurse in charge of a clinical area, so when you start in the area introduce yourself and they will be able to direct you to the best team members that can aid your learning. The nurses in the department can teach you many varying skills from applying dressings to use of the equipment found around the department. Many nurses cannulate patients and will be happy to supervise you and show you where blood taking equipment can be located in the different clinical areas.

Dark Green Uniform with a white trim – CSW (Clinical Support Worker)

The CSW team work in all areas of the department. Their role is to undertake initial investigations of patients including observations, ECGs, cannulation and venepuncture, urinalysis, bladder scans. Some are also skilled in wound care and plastering. If you are looking to work on your venepuncture and cannulation skills these are the people to see.

Light Green Uniform with a white trim – EDA (Emergency Department Assistant)

EDAs perform many different tasks within ED including patient transport and portering tasks, , clerical work on reception/booking in desks and delivery of direct patient care in all areas of the department. . Some have taken on advanced roles including cannulation and performing ECGs.

Navy Blue shirt with green spots – ED Flow co-ordinator

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The flow co-ordinators work to expedite patient's flow and progress during their time in ED. This includes liaising with nursing and clinician teams, chasing investigations, speciality teams and wards.

Blue Polo Top – Play Specialist (Paediatrics only)

The play specialists work with paediatric patients, mainly in the paediatric area of the department but can be in resus with a paediatric patient. They provide distraction therapy to children to allow them to cope with invasive procedures.

Burgundy Scrubs – IDT (Integrated Discharge Team)

The discharge team work mainly with older or disabled patients; they aid their return to their own homes and arrange for ongoing care. They assess the patient's mobility and ensure that they will be safe to return to their own home.

Blue & White striped top – ED Physio team

Physiotherapists in ED work alongside the ENPs to deal with minor injuries. They also treat patients that have presented with soft tissue injuries or bony injuries.

Locums and visiting specialities wear a variety of other uniforms

Scrubs of ED



Purple scrub
DREAM/ Research



Black scrub
Consultants



Dark Green (olive) scrub
Registrars



Light Grey scrub
Doctors



Dark Grey Charcoal scrub
ACPs



Light blue scrub
ENPs



Lightblue scrub with
white trim
Band 5 Nurses



Royal blue scrub with
white trim
Band 6 Nurses



Navy blue scrub with
white trim
Band 7 Nurses



Dark Green scrub with
white trim
CSWs



Light Green scrub with
white trim
EDAs



Blue Polo Top
Play Specialist

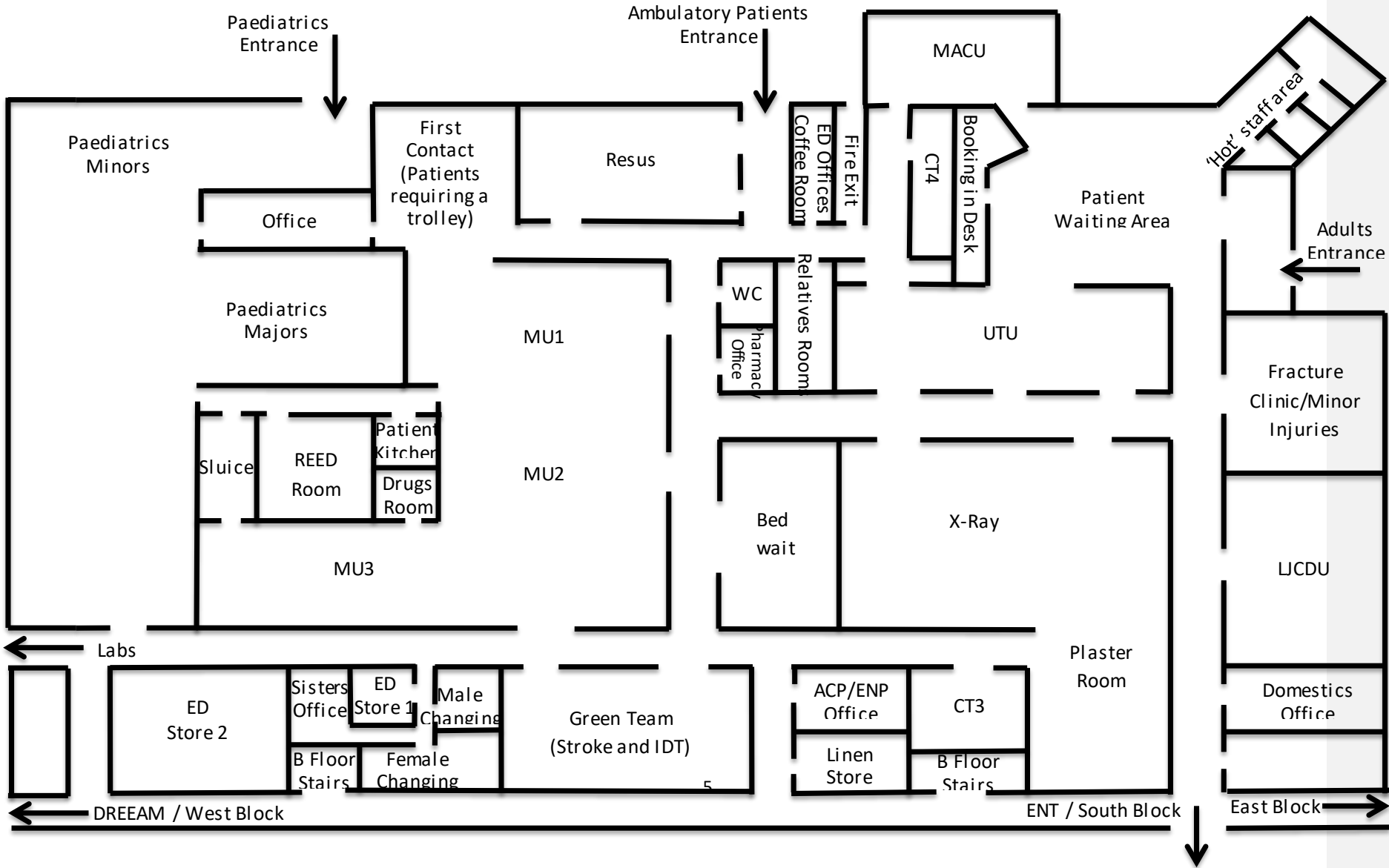


Burgundy Scrubs
IDT



Blue and white striped
top
Physios

Map of the Emergency Department



Information on Clinical Areas in ED

The ED is divided into 7 main clinical areas and 3 non clinical areas. These are:

Clinical areas:

Resuscitation
Majors Unit (MU)
Urgent Treatment Unit (UTU)
Fracture Clinic/Minor Injuries
Lyn Jarrett Clinical Decisions Unit (LJCDU)
Paediatrics

Non Clinical areas

DREEM
Reed Room
Staff room

Resuscitation

Also known as 'Resus'; where patients with severe life threatening injuries or illnesses are treated and cared for. This is a good area for you to practise venepuncture & cannulation as well as ECGs and advanced life support (ALS) measures. Patients who arrive in this area of the department usually come via ambulance. Some examples of cases in resus are:

- Cardiac problems (eg MI, arrhythmia)
- Severe Breathlessness (eg Life threatening asthma, exacerbation of COAD)
- Shock (eg Sepsis, Anaphylaxis)
- Major Trauma (eg High Impact RTC, Penetrating injury)
- The unconscious patient (eg Head injury, intoxication, seizures)
- Cardiac arrest

There are 9 patient bays in resus:

Bays 1 and 2 are high dependency bays equipped with a mobile x-ray machine, defibrillator and ventilators. This is where the patients who are the most unwell can be found.

Bay 3 is a paediatric trauma high dependency bay; like bays 1 and 2 it has a mobile x-ray machine, defibrillator and ventilators but is equipped with paediatric equipment to deal with high dependency children that present to the department.

Bays 4 to 9 have airway, breathing and circulatory support equipment and multi-function monitoring systems to deal with critically unwell patients.

Majors Unit (MU)

The majors unit is for patients who are not in immediately life threatening situations but are too unwell to be seen in UTU. They will most likely be on a trolley either for patient comfort or to ease assessment.

There are 30 cubicles in MU and this is split into 3 teams. Each team has a number of nurses working with doctors and ACPs to assess patients. When you're working in this area attach yourself to a team and introduce yourself to everyone, especially the team leaders. It is an ideal place to take histories, examine patients and present to medical staff.

Urgent Treatment Unit (UTU)

UTU is one of the busiest areas in the department and is at the front of the emergency department. Patients in UTU are ambulatory and need to be well enough to sit in the chairs in the waiting area before assessment and whilst awaiting investigations or treatments.

There is a treatment cubicle in the area equipped for procedures such as wound management / suturing, joint aspiration, local anaesthetic nerve blocks and incision and drainage of minor abscesses.

Minor Injuries

Minor injuries are seen in the Green team area at the back of the department. The team normally consists of ENPs and Physios. Fractures and soft tissue injuries in stable patients can be managed here.

'Hot' Covid Isolation area

This is currently next to UTU but flexes depending on demand. You will not need, or be asked to go into this area – please do not enter it.

Lyn Jarrett Clinical Decision Unit (LJCDU)

Stable (and generally ambulatory) patients are admitted to LJCDU from ED when there is a period of observation required or investigation results are pending. Patients can stay on this 'ward' for up to 12 hours before either being admitted to the hospital or discharged. The area is staffed by nurses and either an ACP or Dr at all times.

Paediatrics

This is where children and young adults aged 16 and under are assessed and treated for a wide range of conditions. The area is divided into a minors and majors area, much like the adults equivalent in ED the minor's area is seeing things such as soft tissue injuries and fractured limbs with the majors area seeing presentations such as abdominal pains and difficulty in breathing. Remember that the most severe illnesses are treated in bay 3 of the resuscitation area.

DREAM

This is a self-contained area at the back of ED on the west block corridor; it is the central location for a majority of teaching and simulations that occur within ED. The area is staffed by a range of specialities including Drs, Nurses, ACPs, CSWs, EDAs and administrative staff. If you have any questions about things in ED these are the best people to contact.

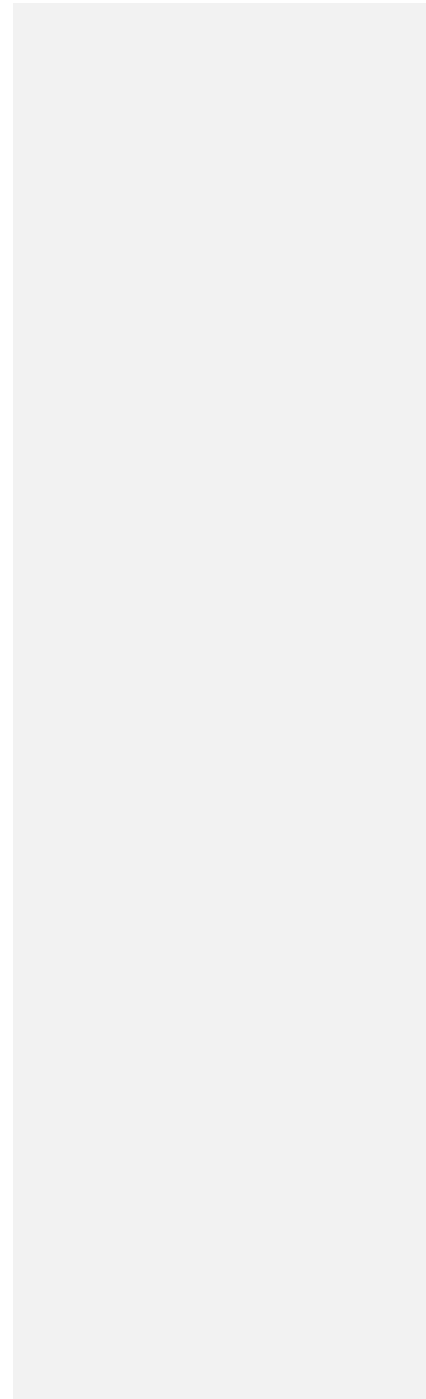
The area also houses the research team for ED and ITU; they have always got multiple research studies happening. If you wish to be involved or want to know more about any of their studies they are always happy to talk to people about them

REED Room

| This room is located at the back of MU and is a small area used for ad hoc* teaching in the department, you may have some sessions delivered in here.

Staff Room

The entrance to this room is located next to the doors for resus and is used by all the staff on shift in ED. You are welcome to use the facilities in here and leave your coat/bag if you decide not to use the lockers in DREEM but please remember to keep valuables, such as your phone, on your person.



Digital Resources

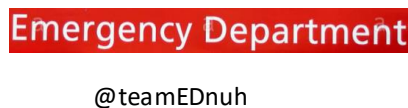
Website

DREEM website (DREEM.ac.uk) has a dedicated CP3 page with links to key resources linking your curriculum to the teaching in ED.

Social Media

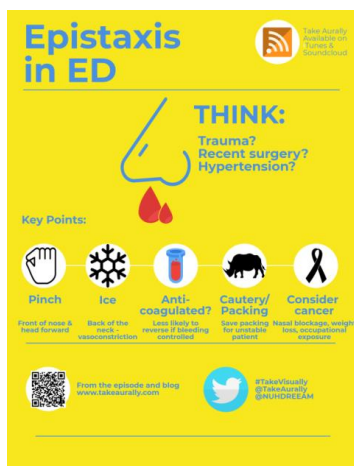
Both DREEM and ED use social media to promote different things and to communicate events with staff. We ask that when you are at NUH you adhere to the social media policy yourselves by not violating the privacy of the others such as patients and colleagues or by bringing the organisation into disrepute or by placing the trust in a position of liability. The trust's social media policy can be found here. http://nuhnet/nuh_documents/Documents/Social%20Media%20Policy.doc

The Emergency Department and DREEM social media accounts are:



Recommended Resources

There are a lot of different books and websites that you can look at and read that may help you learn during this placement. To try and make this a little easier than searching through the web, one of our previous teaching fellows has created an online resource for podcasts and infographics that will be of great benefit to you during the placement. The website can be accessed via www.takeaurally.com.



Useful Hints and Tips

- ED is very often an extremely busy environment so staff may not be able to take time out to teach you. The majority of your teaching that you receive on the shop floor will be on an ad hoc basis so you should make the most of all the opportunities you get, asking as many questions as you need to.
- The nursing staff have a vast wealth of knowledge and skills. If there is anything you want to know about the general running of the department they are the best people to approach.
- This is a teaching hospital and everyone is used to having students around the department, so don't be afraid to ask anything. If you don't ask people things they will assume that you already know what you're doing.
- Some of the Drs and ACPs you are working with may take a patient's ECG or X-ray and ask you to interpret it. This isn't a test but a learning opportunity. Ask them how they learned to interpret and if they have any tips on how to improve your skills.
- If you feel comfortable offer your help in taking bloods, putting up an IV bag and documenting notes; the staff will be grateful for your help and integration.
- If you find yourself at a loose end (which you shouldn't in ED), familiarise yourself with the kind of equipment that is available in the different areas and where it can be found, you never know you may be asked to go and get something. There are also lots of different protocols in ED for patients presenting with different symptoms/conditions and the systematic approach that is used to treat them. Have a look through these to try and get an understanding of how specific groups are cared for using evidence based medicine.
- DREEAM has computers and a working area available for you to use during your time here. All the computers have access to Medway if you are unable to access one in a clinical area. Trust computers hold a large quantity of secure and confidential information so please ensure you have locked or logged out of the computer when you are stepping away from it.
- Always introduce yourself to the nurse and consultant in charge of the area you are working in and the staff that are in the team you're working in, they will be able to recommend patients to see or if there is anything interesting in the area at the time.
- Morning clinical shifts start at 07.30am, and begin with a Prebrief in DREEAM 1. Please be on time so the consultant is aware of your presence and can allocate you to a team. This will help you to feel part of the team for your shift.

CHAMPS Clerking Pro-forma

Use this structured clerking sheet to help you get the most of your experience. This sheet takes you through some key steps in learning medicine and clinical reasoning skills. You can fill this in and bring it to any case based teaching sessions you have.

Do **not** write any patient identifiers on the sheet.

Age: **Male / Female**

Presenting Complaint:

History of presenting complaint:

1) SOCRATES

2) Cardinal Symptoms

3) Systems review

Allergies (Include the reaction to the allergen i.e. rash from penicillin):

Medications:

Name	Route and Dose	Student info only column
		What is the drug for? Could it be causing symptoms?

Past Medical History:

Medical

Surgical

Trauma

Obstetric

Family History

Social History:

Patient Examination:

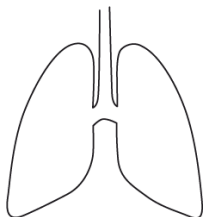
Vital Signs:

BP **HR** **RR** **Temp**
SpO2 on (Specify air/what oxygen)
AVPU

General Appearances:

Cardio Vascular:

Respiratory:



Abdominal:

Any other relevant examination (eg Neurology):

Initial Investigations:

- ECG:

- Blood results:

- Imaging:

- Any Other:

Differential Diagnosis/Problems List:

Management Plan: