

## **LEARNING OBJECTIVES FOR FRIDAY IMMERSIVE LEARNING MEDICAL SIMULATION (FILMS) (Linked to CP3 Curriculum)**

### **ASTHMA**

Define the classical features of asthma and outline common precipitants

Describe the morphology and pathological consequences of asthma.

Describe the clinical features of acute asthma and the blood gas abnormalities associated with acute severe asthma.

Describe the stepped approach to treatment of an acute asthma attack and create a management plan for a patient presenting with acute asthma

Describe the mechanisms of actions of the main drugs used to treat asthma.

Prescribing medications safely: Newly qualified doctors must be able to prescribe medications safely, appropriately, effectively and economically and be aware of the common causes and consequences of prescribing errors.

Write a safe and legal prescription, tailored to the specific needs of individual patients, using either paper or electronic systems and using decision support tools where necessary

### **CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)/EMPHYSEMA**

Describe the typical history of a patient with COPD including complications and clinical features of acute presentations

Describe a management plan for patients with stable COPD and for those presenting with an acute exacerbation of COPD

Describe and interpret relevant investigations in a patient with suspected COPD  
Discuss smoking cessation methods

Discuss the importance of monitored oxygen therapy in treatment and the indications for assisted ventilation, outlining how this is undertaken.

## **BURNS**

Identify type of burn.

Classify the depth of burn injury.

Describe and apply the rule of nines.

List the other management steps in the initial 24 hours following a burn injury, including general support, wound management, and antibiotics.

Discuss the management of a burn's patient after the first 24 hours including fluids, wound management, metabolic needs and rehabilitation.

Identify patients who require specialised burns centre management.

Describe a type of burn of < 10% that would require hospitalisation.

## **SKILLS IN BURNS ASSESSMENT**

Given the area of the burn and its depth, calculate the fluid resuscitation requirements for the first 24 hours.

Describe the necessary steps in the outpatient management of a patient with a small burn.

## **SHOCK**

List the clinical findings that characterize each kind of shock.

Name and briefly describe the monitoring techniques that help in the diagnosis and management of shock.

For each type of shock outline the general principles of fluid, pharmacological and surgical management as appropriate.

Define the effects of shock on the major organ systems: brain; heart; kidneys; gut; blood; lungs.

Interpret the results of such investigations, including imaging and the results of diagnostic procedures.

Recognize Patients presenting with shock, distinguishing between:

Hypovolaemia

Sepsis

Cardiogenic shock

Anaphylaxis

## **OVERDOSE/TOXICOLOGY**

Outline the general principles in the assessment and treatment of a patient who has taken an overdose.

Describe the clinical features, investigation and treatment of paracetamol overdose including the importance of monitoring of hepatic and renal function.

List the antidotes available to treat specific poisons, e.g., n-acetylcysteine for paracetamol, naloxone for opiates, flumazenil for benzodiazepines, glucagons for beta-blockers, sodium bicarbonate for tricyclic antidepressants

Describe Toxbase and the function of the National Poisons Information Services

Describe the features suggesting a high risk of suicide in a patient presenting with self-harm or overdose.

## GENERIC INTENDED LEARNING OUTCOMES

RECOGNITION OF THE CRITICALLY ILL PATIENT	
Describe the concept of the National Early Warning System score and the use of this tool to trigger senior review and / or admission of the patient to the augmented care areas (HDU/ICU).	
Make accurate observations of clinical phenomena and appropriate critical analysis of clinical data including patterns of deterioration as documented on observation charts	
Recognize Suspected severe sepsis	
Recognize Acute severe asthma	
Recognize Acute severe exacerbation of COPD	

MANAGEMENT OF THE CRITICALLY ILL PATIENT	
Synthesise a full assessment of the patient's problems and define the likely diagnosis or diagnoses	
Make clinical judgements and decisions, based on the available evidence, in conjunction with colleagues and as appropriate for your level of training and experience. This <b>will</b> include situations of uncertainty.	
Formulate a plan for investigation, treatment, management, and discharge, according to established principles and best evidence, in partnership with the patient, their carers, and other health professionals as appropriate.	
Describe the importance of appropriately timed reassessment of the patient (FROM SIM OUTCOMES)	
Escalate patient care to senior colleagues and be aware of the role of the MDT in transferring patients to higher levels of care. ICU	

<b>EMERGENCY MEDICINE</b>	
Describe the immediate assessment and management of acute presentations of the breathless patient including asthma, COPD and pulmonary oedema	
Describe the immediate assessment and management of acute presentations of severe sepsis	
Describe the immediate assessment and management of acute presentations of Anaphylaxis	

<b>PSYCHIATRY AND MENTAL HEALTH</b>	
Discuss the backgrounds to and presentation of patients who self-harm	
Describe the main aspects of a mental state examination in the setting of acute self-harm	
Describe the general approach to the management of patients who have taken an overdose (including main agents of overdose and antidotes etc.)	

### **Core Topics**

- Recognize patients presenting with shock, distinguishing between:
  - i. Hypo-volaemia
  - ii. Sepsis
  - iii. Cardiogenic shock
  - iv. Anaphylaxis
- Recognize suspected severe sepsis
- Recognize acute respiratory failure
- Recognize acute severe asthma
- Recognize acute severe exacerbation of COPD