

Resident Program Updates – Winter 2010
Dalhousie University Residents Program
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	Program Description
Protected Academic Learning (Half-day)	<ul style="list-style-type: none"> • Protected weekly half-day, which is very well attended, includes 2 1/2 hours of staff teaching and one hour of resident-to-resident teaching • Topics rotate on a two year schedule • Time is well protected on almost all services • Working on a way to get the higher quality teachers involved instead of everyone, and a way to ensure off service talks are helpful (ie surgical, radiology)
Call or Night-float system	<ul style="list-style-type: none"> • Big area of change for program • This year residency association negotiated a new contract mandating post-call at 9 am as a move to address patient safety concerns • Implemented a trial of night float system July 1st for R2s and above, in the PICU and on the wards. Mixed feedback; continuing for the year and then will be reassessed • Hope is to reduce number of post-call days on subspecialty rotations, which will be better for continuity • Starting 12 hour weekend shifts instead of 24 and home call for seniors when anaesthesia resident in the PICU.
Vascular Access (opportunities, vascular access team)	<ul style="list-style-type: none"> • No specific opportunities which is a down side of a program • In the NICU lots of opportunity on call if interested; anesthesia elective helpful if interested; other locations are less supportive and few opportunities to get away from other responsibilities
Resident Retreat (protected, in our out of hospital, length)	<ul style="list-style-type: none"> • Yearly protected time in the spring for an overnight event outside of town • Mandatory meeting to discuss program and concerns with the program in the afternoon, then evening and overnight are socializing and fun • In 2009, residents spent a night at cottages outside of Halifax and had some great bonding time
Advocacy Projects	<ul style="list-style-type: none"> • Residents sit on the IWK pediatric advocacy committee, which addresses everything from promoting

	<p>breast feeding in the hospital, supporting visiting speakers to present in the community about spanking children, to promoting apology legislation in the province</p> <ul style="list-style-type: none"> • Proposal prepared by one of the residents for a needs assessment for a teen STI clinic at the IWK; Few adolescent services at the IWK so wanted to offer a place for students to go with anonymity; Will be applied for the next CPS resident advocacy grant
International Electives	<ul style="list-style-type: none"> • International experiences can be set up by residents • Quite a bit of time available for these experiences in senior years • Example of past international electives: Cameroon, Uganda, Tanzania, Boston, Kuwait,
Rural Experiences	<ul style="list-style-type: none"> • Two residents spent time in Iqaluit, and many others rotated through small communities in the Maritimes • Residents are appreciative of all the great support with this at the IWK and received a great experience this year
Observed History and Physicals	<ul style="list-style-type: none"> • Occur every 6 months • Valuable support from staff with booking in extra patients and overall organization • Difficulties with variability of staff for official marking, so instituted changes whereby all staff discuss cases together after the exam; this provided more consistency this year
Resident Research (support, protected time, publications, presentations)	<ul style="list-style-type: none"> • Fantastic part of the program is a month-long academic skills course for first-year residents; call was decreased in order to attend daily 9-5 sessions on research, advocacy, and education • By the end of the month, residents are expected to have identified a mentor and a scholarly project.
Mock Codes (frequency, use of simulators)	<ul style="list-style-type: none"> • Weekly mock-codes with emergency physicians and emerg nurses, using a "Sim-baby" • Both Junior and Senior residents are encouraged to attend and run the mock code
Procedural Skills (workshops, opportunities)	<ul style="list-style-type: none"> • For the second year, we have had a successful session in the Dalhousie Skills lab, where were practiced central lines and chest tubes on mannequins • There are further opportunities to practice procedural skills on NICU, PICU, and emergency medicine rotations • Anaesthesia continues to be a popular elective
OTHER AREAS OF NOTE	<ul style="list-style-type: none"> • New initiative: Residency support groups which were created last year to give junior residents more opportunities for support and mentorship; groups consisting of a staff and residents in different years have been meeting to discuss residency, life, and just

	<p>have a great time.</p> <ul style="list-style-type: none">• New initiative: The “kudos board” was started last year as a way to show appreciation for a fellow resident who has done a good job; seeing your name on “kudos” after a tough day is a fantastic morale boost!• New initiative: Chiefs send out monthly “Evite” for call requests in advance of making the call schedules. Also send out weekly updates reminders by e-mail. Both these initiatives help with important requests and communication.
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