Welcome to the Penn Ortho Trauma senior medical student rotation (Ortho 315). These guidelines are based on Entrustable Professional Activities (EPA’s - activities that you eventually will need to perform independently) and specific “competencies” that we want you to learn. These objectives are not meant to be rigid but to guide and facilitate your learning. They are also not meant to limit your learning—learn about complications and advanced topics (such as the relationship between stability and healing) as opportunities arise! At a basic level, please pay special attention to the Expectations section. Learning must be active and is your responsibility and that to be able to properly perform these EPAs, you will need to independently accumulate much cognitive knowledge. Remember that whereas your teachers (MDs, PAs, NPs) are philosophically responsible for your teaching, they are practically responsible for patient care first; and whereas you are philosophically responsible for great patient care, you are practically primarily responsible for acquiring the expected skills, knowledge and attitudes that will soon make you a physician. That said, our responsibility as your teachers will be to help provide you with the appropriate learning opportunities; if we are not achieving this, please discuss with me directly.

**EPA 1: History and Physical, Outpatient**

**Rapport with patient**
- Before you meet the patient - gather and understanding available information
- Entering and introductions - proper entry, proper introduction
- Non-verbal - appearance, physical behavior

**Interview / information gathering**
- Before you meet - as above
- Methods to obtain information - question style, affirmation/follow-up, questions, wrap up

**Examination**
- Before you examine – learn surface anatomy, functional anatomy, general methods, special tests

**> Expectations for learner**
- Perform H&P for ankle or knee joint injury, NPV and RPV/POV for each clinic with proper documentation starting Week 1
- Demonstrate and narrate corresponding joint examination on the MD, Week 1
- Perform integrated presentation with EPA 2/3 by Week 3
- Undergo observation by and feedback from PA or MD, if possible, by Week 3
EPA 2: Data Evaluation and Assessment

Laboratory evaluation
- Understand values that are of primary importance to orthopaedic trauma (eg, Ca, Vit D, PTH, ESR, CRP)
- Understand values that are of indirect importance to orthopaedic trauma (eg, Cr, HbA1c)
- Imaging evaluation
- Develop systematic format for fracture evaluation by radiograph
- Understand what the needed images are for an injury and study what is normal
- Integrate cross sectional and 3 dimensional imaging in fracture evaluation
- Articulate the details of evaluation as well as the summative evaluation of imaging results

Other studies
- Understand the role of other studies in the evaluation of fractures

> Expectations for learner
- Learn the role of lab / imaging studies in the evaluation of fractures by observation/listening and via self-learning, Week 1
- Practice the presentation of lab / imaging results on your own, Week 1
- Present image evaluation of fractures of the upper and lower extremities in clinic / consultation, Weeks 2-4
- Present lab/image evaluation as part of integrated summative evaluation with EPA 1/3 by Week 3

EPA 3: Consultative Evaluation, Inpatient/ED/TB

Same as EPA 1 but primary interaction with DNP or resident MD, with addition of following:
- Understand the role of urgency in evaluation and eventually treatment (EPA 4)

EPA 4: Provision of Treatment

Nonoperative
- Learn proper technique for forearm/wrist reduction and immobilization
- Learn proper technique for ankle/leg reduction and immobilization
- Learn proper technique for local anesthesia in the above injuries
- Learn proper utilization of stabilization techniques for elbow to shoulder injuries
- Learn proper utilization of stabilization techniques for knee to hip injuries including the application of traction pin
- Learn proper technique of aspiration/injection into a major joint
- Learn proper informed consent technique for anesthetic/reduction/immobilization

Operative
- Understand surgical indications for fractures of the ankle, tibial shaft, tibial plateau, femoral shaft, hip, distal radius, forearm, elbow, humeral shaft, proximal humerus, clavicle
- Understand rationale for timing / urgency of surgical care
- Learn the continuum of care from preoperative evaluation/planning, surgical decision-making, surgical steps and post operative care based on cases seen with the team
- Learn to anticipate surgical steps and function as an effective surgical assistant
- Learn proper sterile technique including prepping/draping, basic instrument manipulation, drilling/screw insertion, layered wound closure

> Expectations for learner
- Obtain consent for nonoperative procedure under direct MD supervision, any Week
- Administer local anesthetic under direct MD supervision, any Week
- Apply splint under direct MD supervision for ankle/forearm-wrist, any Week
- Perform minor procedure under direct MD supervision/assistance (joint aspiration/injection, suture minor wound, reduction of wrist or ankle), any Week
- Complete “preoperative plan” for a simple operative procedure, Week 2
- Demonstrate proper instrument handling to MD, Week 1
- Demonstrate drill and screw technique under direct MD supervision, Week 2-4
- Demonstrate wound suturing technique under direct MD supervision, Week 2-4
- Demonstrate portion of incision and dissection technique under direct MD supervision, Week 3-4

**EPA 5: Scholarly Communication & Professionalism**

Topical expertise
- Learn a patient-oriented subtopic in depth through textbook and review reading, supplemented with literature incorporation

Presentations skills
- Create a professional presentation to communicate expertise

Professionalism
- Understand importance of appropriate contextual behavior

> Expectations for learner
- Prepare and deliver a 5-10 minute presentation as expert consultant to your team and colleagues; identify case in Weeks 1-2, present in Week 4
- Demonstrate on-time, professional appearance (including white coat), professional deference to patient needs, professional deference to team goals, active and engaged learning

Sincerely,

Jaimo Ahn, MD, PhD