

Student _____
Dates of Rotation _____

Emergency Medicine Rotation Task Sheet

OBJECTIVES

OBSERVED/ASSISTED

- | | |
|--|---------------|
| 1. Orientation to Emergency Department | _____ / _____ |
| 2. Triage | |
| a. assessment | _____ / _____ |
| b. vital signs | _____ / _____ |
| 3. Treatments | |
| a. MVA | _____ / _____ |
| b. orthopedic injuries | _____ / _____ |
| c. pediatric conditions | _____ / _____ |
| d. lacerations | _____ / _____ |
| e. cardiac conditions | _____ / _____ |
| f. respiratory distress | _____ / _____ |
| g. head/neck injuries | _____ / _____ |
| h. allergic reactions | _____ / _____ |
| i. medical conditions | _____ / _____ |
| 4. Acute care | |
| a. trauma | _____ / _____ |
| b. cardiac/respiratory arrest | _____ / _____ |
| 5. Special Procedures | |
| a. EENT | _____ / _____ |
| b. Obstetrics | _____ / _____ |
| c. Radiography | _____ / _____ |
| d. Laboratory | _____ / _____ |
| e. magnetic resonance imaging | _____ / _____ |

Mentor Signature

Date