

## Curriculum Guidance for ACCS Doctors in Critical Care at the Royal Infirmary of Edinburgh

You will be allocated an educational supervisor on commencement of your attachment to critical care, and should aim to meet during the first two weeks. The goals of this document are to summarise what you need to achieve in terms of work place based assessments (WPBAs) to comply with your curriculum needs. It should be used in conjunction with the full ACCS curriculum document.

Any questions relating to your training can be directed to your educational supervisor, or one of the following consultants who have specific educational roles: Dr Alistair Gibson (Faculty Tutor), Dr Oliver Robinson (Deputy Faculty Tutor), Dr Neil Young (ICM TPD) or Dr Monika Beatty (Regional Advisor in Intensive Care Medicine).

The table from the ACCS supervisors' educational handbook sums up what you need to achieve during your critical care attachment in terms of WPBAs:

<u>Intensive Care Medicine</u>		
Yes	No	
Formative assessments in 2 Major Presentations (Unless all agreed already)		
• CMP1 Anaphylaxis		
• CMP2 Cardio-respiratory arrest		
• CMP3 Major Trauma		
• CMP4 Septic patient (ideally assessed in ICM)		
• CMP5 Shocked patient		
• CMP6 Unconscious patient		
CT1 - Formative assessment of any Acute Presentations – <i>not mandatory</i>		
CT2 - Formative assessment of Acute Presentations – any and all not covered in AM/EM posts in CT1, total 20/38 by end of CT2		
Formative assessment of 13 practical procedures as DOPS (may be assessed as Mini CEX or CbD if indicated), including:		
• ICM 1 Peripheral venous cannulation		
• ICM 2 Arterial cannulation		
• ICM 3 ABG sampling & interpretation		
• ICM 4 Central venous cannulation		
• ICM 5 Connection to ventilator		
• ICM 6 Safe use of drugs to facilitate mechanical ventilation		
• ICM 7 Monitoring respiratory function		
• ICM 8 Managing the patient fighting the ventilator		
• ICM 9 Safe use of vasoactive drugs and electrolytes		
• ICM 10 Fluid challenge in an acutely unwell patient (CbD)		
• ICM 11 Accidental displacement ETT / tracheostomy		
• Plus 2 other DOPS		

In summary you need to complete WPBAs demonstrating:

- The 11 ICM competencies outlined above plus two further DOPS.
- Formative assessment in two of the major presentations outlined above, one of which must be sepsis. These can be assessed by a range of WPBAs.
- The minimum WPBAs for a 6 month block are: 2 x DOPS, 2 x ICM-CEX, 2 x CBD, 2 x ACAT
- You should also complete an MSF during your attachment.

ACCS curriculum summary.

Produced by Neil Young, Alistair Gibson and Monika Beatty, July 2017, updated July 2020