

Block Diagram Tips and Recommendations Review Committee for Emergency Medicine

When evaluating a program, it is very important for Review Committee to understand how the curriculum is arranged and how it meets the curricular requirements as demonstrated by the block diagram. The block diagram should provide information on the type, location, rotation length, and variety of rotations for each year of the educational program.

The block diagram:

- is not the resident's call schedule.
- should not include individual resident names.
- should not reflect blocks specifically assigned to vacation.

The following is a guide to help programs clearly document their curriculum on the block diagram.

Recommended method of entry:

1. Enter all emergency medicine blocks first.
 2. Enter all pediatric blocks second (start with the pediatric emergency medicine rotation if one exists).
 3. Enter critical care rotations third (start with the pediatric intensive care unit (PICU) rotation if that exists for academic year being represented).
 4. Enter all other rotations last.
- Calculate the percentage of emergency medicine rotations, which should be greater than 60 percent (Program Requirement IV.C.4.d). Remember emergency ultrasound can count toward the 60 percent, but **emergency medical services does not**.
 - Number of emergency medicine blocks: 26
 - Percentage of emergency medicine rotations: 67 percent
 - If the number of pediatric rotations (Program Requirement IV.C.4.b) is less than five blocks, use the longitudinal pediatric conversion calculation:
 - Multiply the number of general emergency department months or four-week blocks by the percent of pediatric patients.
 - For example, if 15 percent of patients are pediatric and the resident spends 20 months in the emergency department (i.e., $20 \text{ months} \times .15 = 3$ or the equivalent of three months), the resident would need two additional months of dedicated pediatric experiences). For this example, Site 1 has a pediatric volume of 15 percent.
 - Four pediatric blocks per Schedule + $23 \times 0.15 = 3.45$ longitudinal pediatric blocks = 7.45 total months of pediatric experience
 - Answer the following questions related to the critical care experience (Program Requirement IV.C.4.a):

- Are the critical care rotations occurring in a critical care unit (e.g., medical intensive care unit (MICU), intensive care unit (ICU), surgical intensive care unit (SICU))?
- Are there four months of dedicated critical care experiences, including critical care of infants and children (PICU, neonatal intensive care unit (NICU))?
- Do at least two of these months occur at the PGY-2 level or above?

General Tips:

- Split months can be challenging to count. Unless otherwise indicated, a 50/50 split is assumed.
- Critical care rotations must occur in critical care units, not in the emergency department.
- Ensure that the site # corresponds to the numbering of the participating sites.
- Be sure there is a key at the bottom of the diagram to define abbreviations and any other relevant explanations/clarifications.

PGY-1

Block	1	2	3	4	5	6	7	8	9	10	11	12	13
Site #	1	1	1	1	1	1	1	3	3	4	1	1	1
Rotation Name	EM	EM	EM	EM	EM	EM	EM	PEM	PICU	Trauma	ICU	EMS	Cards
% Training	100	100	100	100	100	100	100	100	100	100	100	100	100
% Research													

PGY-2

Block	1	2	3	4	5	6	7	8	9	10	11	12	13
Site #	1	1	1	1	1	2	2	1	3	1	1	2	1
Rotation Name	EM	EM	EM	EM	EM	EM	EM	EM	PEM	MICU	SICU	ENT/ Ophth	Elect
% Training	100	100	100	100	100	100	100	100	100	100	100	50/50	100
% Research													

PGY-3

Block	1	2	3	4	5	6	7	8	9	10	11	12	13
Site #	1	1	1	1	1	1	1	1	3	1	1	1	1
Rotation Name	EM	EM	EM	EM	EM	EM	EM	EM	PEM	MICU	Ortho	Elect	Admin
% Training	100	100	100	100	100	100	100	100	100	100	100	100	100
% Research													

Elective Options: Emergency Medicine, Ultrasound, Anesthesia, Palliative Care, Research electives

Key:

Admin = Administrative Duties	ENT/Ophth = Ophthalmology – Head and Neck Surgery
Cards = Cardiology	MICU = Medical Intensive Care Unit
EM = Emergency Medicine	PEM = Pediatric Emergency Medicine
Elect = Elective	Ortho = Orthopaedic Surgery
EMS = Emergency Medical Services	SICU = Surgical Intensive Care Unit