HAP22 Observational Medicine

An Emergency Physician should be expert in the care of certain patient groups beyond the first four hours, who are cared for in the Observation Ward/Clinical Decision Unit.

Knowledge	Assessment Methods	GMP Domains
Know which patients will benefit from being cared for in an observational setting: Those who are clinically well but without a clear diagnosis – e.g. headache, abdominal pain,	E, C, Mi, ACAT	1
 elderly patient who has fallen Those that have been risk stratified as low risk but require further observation and limited investigation e.g. chest pain, syncope Those patients who are recovering but not sufficiently well to be discharged e.g. post-procedure, post-ictal, post-overdose 		
Requires knowledge of the typical clinical courses over the first 24 hours for a range of clinical conditions and their risk stratification	E, C, Mi, ACAT	1
Knowledge and ability to anticipate, recognise and manage possible adverse outcomes	E, C, Mi, ACAT	1
Knowledge of the diagnostic pathways and the range of diagnostic tests to be used and their interpretation	E, C, Mi, ACAT	1
Skills		
Work closely with diagnostic services to achieve a timely diagnosis	Mi, C, D	1
Work closely with multi-disciplinary teams to ensure best care e.g. the elderly and those with mental health problems	Mi, C	1
Be able to formulate an appropriate individual management plan, based on best evidence (e.g. Nice head injury guidelines) for clinical conditions	Mi, C, D	1
Behaviour		
Undertake ward rounds in a timely and efficient manner	ACAT, C, Mi	3
Carefully review patients provide a diagnosis and appropriate follow-up	ACAT, C, Mi	3, 4