



SJMC Emergency Medicine Clerkship Passport

Name: _____

	Preceptor Initials			
	1	2	3	4
1. Perform four (4) fully observed patient encounters (by senior resident/attending)				
2. See two (2) of each of the following chief complaints:				
Altered mental status				
Abdominal pain				
Back pain				
Chest pain				
Dizziness/lightheadedness				
Eye complaint				
Febrile child (2-10yrs)				
Febrile infant (0-2yrs)				
Generalized weakness				
Headache				
Intoxication				
MSK complaint (excluding back pain)				
Shortness of breath				
Syncope				
Vaginal bleeding				
3. Perform at least two (2) of each of the following ultrasounds:				
Cardiac				
FAST				
Renal/Bladder				
RUQ/Biliary				
Thoracic				
4. Perform at least five (5) of the following procedures:				
12-lead ECG sticker placement				
CPR				
Foley catheter insertion				
Gastric tube exchange				
Incision and drainage				
Laceration repair				
Local wound care/dressing change				
OG/NG tube placement				
Set up IV tubing and fluids				
Splinting				
Successfully place an IV				
5. Observe/assist in the following (if able):				
Central line catheter placement				
Discuss and admit a patient to the hospitalist				
Procedural sedation				
Receive report from EMS				

Required

Not Required
(but encouraged)

No need to complete