

**The Jane R. Perlman Fellowship Program
Nurse Practitioner and Physician Assistant Fellowship in Emergency Medicine**

Topic (Module): Endocrine and Infectious Disease
Length: 4 weeks

** All content areas include supervised clinical experiences in the main ED or Fast Track areas. In addition, all fellows will attend Resident Conference on Trauma (4 hours) during this module. Fellows will have 40 total hours each week inclusive of didactic, clinical and lab experiences.*

| Objective | Content | Methodology | Instructor | Time | Evaluation |
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| 1. List common endocrine emergencies seen in the ED 2. Describe the pathophysiology of DM, thyroid disease, adrenal and pituitary disorders 3. Outline the common signs and symptoms of endocrine emergencies in the ED 4. Interpret labs results relating to endocrine disorders 5. Develop a treatment plan for a patient presenting with an endocrine emergency | Endocrine: I. Diabetes Type I and II II. DKA and hyperosmolar coma III. Alcoholic Ketoacidosis IV. Thyroid storm and Thyrotoxicosis V. Adrenal Crisis and Insufficiency VI. Disorders related to pituitary dysfunction | Lecture Discussion Handouts | M. Riboh | 2 hrs | Simulation and written evaluation |

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| <p>1. Discuss common dermatologic infections seen in the ED 2. Formulate diagnostic and treatment plan for dermatologic infections</p> <p>3. Describe the pathophysiology of HIV/AIDS 4. List AIDS determining criteria 5. Discuss current treatment and counseling for patients with HIV/AIDS 6. Evaluate patient with HIV/AIDS and be able to formulate treatment plan related to ED presentation</p> <p>7. Describe presentation, signs and symptoms of GC, Chlamydia, BV, trichomonas, and other STDs 8. Order and interpret diagnostic labs for these</p> | <p>TBD</p> | <p>Lecture Discussion Simulations Video</p> | <p>Ali Ruiz</p> <p>Kristin Keglowitz-Baker</p> <p>KKB</p> | <p>4 hours</p> <p>2 hrs</p> <p>1-2 hrs</p> | <p>Simulation and written evaluation</p> |
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| infections 9. Select appropriate treatment plan for each STD based on common resistance patterns | | | | | |
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