Glossary of Terms for Fellowship and Primary Examinations

The definitions of terms that follow are intended as an aid to trainees preparing to sit an ACEM examination. They are provided as a guide only and trainees are advised to always consider the specific clinical scenario and question being asked when determining their answer.

DEFINITIONS

Assessment: evaluation of the patient by obtaining a history, performing a physical examination and undertaking appropriately prioritised investigations.

Disposition: discharge from the ED including discharge planning, patient transfer/retrieval to another hospital site, admission to the hospital inpatient wards, or any other departure destination (e.g. patient's home, residential care facility, correctional facility etc.)

Initial assessment: a rapid evaluation (history and examination) completed when first seeing a patient leading to a differential diagnosis, choice of investigations and initial interventions.

Initial interventions: highest priority specific treatments, required during or immediately after the initial assessment of a patient.

Investigations: any form of relevant investigation relevant to the situation. Continuous measurement of gases (e.g. ETCO2) are considered as monitoring, not as an investigation.

Management: interventions including resuscitation and treatment (including procedures) and disposition.

Procedure: an intervention which involves manipulation, invasion of or application of other therapeutic effects on the patient's body (e.g. electrical current). Description and/or operation of any specific equipment required for the procedure is expected to be provided.

Resuscitation: time-critical treatments performed in a critically ill or injured patient which may include investigations immediately available without the patient leaving the resuscitation room.

Treatment: interventions aimed at treating the patient's symptoms, injuries or illness. These may include but are not limited to administration of therapeutic agents (e.g. drugs, fluids and gases), physical aids (e.g. splints), body positioning, including procedures as outlined above (e.g. thoracostomy, ascitic tap etc).

COMMON PHRASES

Key decisions/topic: the most important decisions/topics.

Patient safety: a list of factors which may contribute to error, or prevention of error, in patient care.

Risk stratification: the process of predicting which patients have the greatest likelihood of a specific outcome.

Most common/relevant/important: the expected answer includes some responses that are required to achieve full marks.

COMMON VERBS

Analyse: provide a structured description of an investigation result or image (e.g. clinical photo, ECG, or medical imaging scan), highlighting the most significant findings

Calculate: provide a result after insertion of appropriate values into a formula

Interpret: provide conclusion/s after analysing an investigation result or image

List: provide the requested number of answers, where each answer should be no more than a few words long

Outline: provide a logical framework in which all key decisions/topics are covered (not used in written exam formats)

State: provide the requested number of answers, where each answer should be no more than a phrase or short sentence.

Examinations Subcommittee

March 2018