EM education at University Hospital of Mirebalais, Haiti

Developing Emergency Medicine: Beyond the curricular science

Keegan Checkett MD
Residency Co-Director, Emergency Medicine, University Hospital, Mirebalais, Haiti
Assistant Professor, Director of International Emergency Medicine, University of Chicago, USA
Trauma and emergency care as development priorities
Emergency Care

- Timely
- Skilled
- Accessible
Education as a means to developing emergency care

- Sustainable
- Adaptable
- Recognizable
Creating a curriculum

- Didactic education
- Clinical training
- Evaluation
- Assessment
Internal Medicine

- Linear thinking
- Fixed care schedule
- Gentlemanly practice
Emergency Medicine
The fifth curricular element in EM

culture

ˈkəlCHər/

a: the customary beliefs, social forms, and material traits of a social group; also: the characteristic features of everyday existence shared by people in a place or time

b: the set of shared attitudes, values, goals, and practices that characterizes an institution

c: the set of values, conventions, or social practices associated with a particular field

d: the integrated pattern of human knowledge, belief, and behavior that depends upon the capacity for learning and transmitting knowledge to succeeding generations

Immersion course

- Rite of passage
- Sense of identity
- Feeling of affiliation
- Development of community
- Distribution of key symbols
Results

- Camaraderie and team
- Responsibility and purpose
- Multi-tasking and triage behaviors
- Resilience
- Desire to replicate at other sites
Take-home points

- Emergency Medicine requires more than textbooks.
- Attention to trainees’ needs, and adaptability, are key in developing and implementing education programs.
- Long-term support as trainees become teachers engenders permanent change.
Questions?

kcheckett@pih.org