

## MTU Objectives

Your 4-week time on the MTU is an opportunity to manage and care for patients who are acutely unwell with a variety of medical presentations

The average length of stay for a patient on the MTU is about one week. You will be able to manage many patients from start to finish during their stay in hospital, giving you the exposure to a variety of disease presentations and many aspects of acute care.

### The MTU admits:

1. Complex patients who have multiple comorbidities  
As the populations ages, the management of all these comorbidities is a skill you will be expected to learn as a physician.
2. Diagnostic dilemmas
3. Acutely unstable medical patients that require frequent assessments and or follow up of labs on a day-to-day basis

### Examples of common clinical scenarios are:

Anemia, thrombocytopenia, or pancytopenia  
Hypoxic respiratory failure: due to cardiac or respiratory etiology  
Hypercapneic respiratory failure  
Mixed respiratory failure  
Diabetic Ketoacidosis and the triggers of DKA  
Altered LOC / Delirium  
Acute GI bleeds  
HTNsive emergencies  
Sepsis due to many different causes  
Acute Kidney Injury  
Electrolyte disturbances like (hyponatremia, hypernatremia, hypercalcemia, hyperkalemia)  
Cirrhosis, new diagnosis and management of complications  
Acute liver failure  
Seizures  
Strokes  
Substance use disorders  
Auto-immune conditions (SLE, RA, vasculitis)

Malignancies and associated complications (chemo or radiation induced)

As a clinical clerk on the MTU you will be expected to:

Admit patients from emergency completing a detailed history, physical exam, reviewing past medical history and meds, current investigations and initiation of management and further investigations for their presenting issues.

Be responsible for 3-5 MTU ward patients and provide daily assessments, initiate investigations, and ongoing treatment of their active issues, while communicating that plan through daily ward notes and rounds with your MTU team

When on call respond to pages and ward requests in a timely manner and initiate assessments and initial management \*(within your level of experience)

Document your assessments through Connect Care and write admission notes, progress notes, hand-over notes, and hospital course (which helps with discharge summaries) on your patients.

Generate familiarity with medications, their indications, their complications, and the importance of medication reconciliation during admission and discharge. Appreciate how some medications can lead to complications due to drug-drug interactions, and or require adjustments in conditions such as acute kidney injury, chronic kidney disease or chronic liver disease, and or the elderly patient.

Understand allied health, the resources available in hospital, how to access them and their involvement in patient care to support seamless discharges and support while patients are in hospital.

Understand when consultation is needed or required to subspecialists, surgical specialties or transfer to a less acute service like the general medical unit or hospitalist service.

Please also refer to Thriving on IM for support around Admission notes and tips and tricks for planning your typical day.

In addition, The MTU short snappers are a good resource for quick approaches.