



# DIRECT ENTRY APPLICATION FOR EMERGENCY MEDICINE ADVANCED DIPLOMA (EMAD) ENTRY PATHWAY 3

## CRITERIA TO APPLY

This application for the Emergency Medicine Advanced Diploma (EMAD) Entry Pathway 3 is only available to:

- Fellows of the Royal Australian College of General Practitioners (RACGP), or
- Fellows of the Royal New Zealand College of General Practitioners (RNZCGP), or
- Fellows of the Australian College of Rural and Remote Medicine (ACRRM)

AND

- Who have successfully completed the RACGP Advanced Rural Skills Training (ARST) in Emergency Medicine or the ACRRM Advanced Specialised Training (AST) in Emergency Medicine,

AND

- Within the last five years, have worked at least two (2) FTE years in an Emergency Department of which at least three (3) months was undertaken in Australia or New Zealand.

To complete this application for the EMAD Entry Pathway 3 the applicant must meet the following requirements:

1. Have safely completed **AT LEAST 47 out of 58 (80%)** of the procedures listed in this Self-Assessment Checklist including ALL of the procedures marked as mandatory. The procedures must have been completed within the previous three years. The procedures may have been completed through either clinical practice or by simulation in a relevant course.
2. The Self-Assessment Checklist must be endorsed by a FACEM with whom the applicant has worked either directly or within a network, during the preceding three years. The endorser must be reasonably satisfied that the applicant can perform the self-assessed procedures at the level of an EMD graduate.
3. Signed endorsement by a FACEM with whom they have worked in the last three years (directly or within a network), of the applicant's knowledge of the EMC and EMD Curriculum. The endorser must be reasonably satisfied that the applicant:
  - a) Has the basic knowledge and skills in carrying out an initial focused assessment of an undifferentiated patient.
  - b) Has the knowledge and skills to manage and treat patients with common emergency presentations.
  - c) Has the basic knowledge and skills to deliver safe patient care in a modern emergency care system.
  - d) Has the fundamental knowledge and skills to stabilise critically ill and injured patients, as well as provide safe sedation for emergency procedures.



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- e) Has the knowledge and skills to independently manage and treat a range of higher complexity emergency presentations.
  - f) Has the knowledge, skills, and attributes to communicate and collaborate effectively with patients and families/whanau from different cultures, members of their local healthcare team, and clinicians from other services.
4. Provide current evidence of:
    - Advanced Life Support 2 (ALS2) certificate or equivalent for trainees based in New Zealand - ALS 2 workshops must be accredited by the Australian Resuscitation Council (ARC), and
    - Advanced Paediatric Life Support (APLS) and
    - Early Management of Severe Trauma (EMST) or Emergency Trauma Management (ETM).
  5. Provide evidence of completion of RACGP ARST or ACRRM AST in emergency medicine.
  6. Provide proof of currency of clinical practice. i.e. current CPD certificate.
  7. Provide evidence of Specialist Medical Practitioner documentation.
  8. Emergency Department experience.



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Applicant Details	
Given name(s)	
Family name	
AHPRA / MCNZ Registration Number:	
Address	
State	
Postcode	
Phone	
Email	
Have you previously registered with ACEM?	

**Category of Applicant:**

<input type="checkbox"/>	Fellow of ACRRM	Date Conferred: _____
<input type="checkbox"/>	Fellow of RACGP	Date Conferred: _____
<input type="checkbox"/>	Fellow of RNZCGP	Date Conferred: _____



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### Emergency Department Experience

Please complete the table below and provide evidence of your two (2) FTE years in an Emergency Department in the last five (5) years of which at least three (3) months needs to have been undertaken in Australia or New Zealand.

Evidence of this clinical experience **MUST** be provided with this application; for example, a term report or a letter of service on Hospital Letterhead from the relevant emergency department(s) or human resources department(s), including dates and FTE worked in emergency department(s).

Hospital	Position	Dates of employment	FTE (Full Time Equivalent) 0.0 – 1.0

### SUBMISSION:

Please return your completed application to [emcd@acem.org.au](mailto:emcd@acem.org.au).

Your application will be reviewed, and you will be notified of the outcome within two weeks from the date of submission.

If you have any questions regarding your application, please contact the College:

EMCD Training Team  
+61 3 8679 8872  
[emcd@acem.org.au](mailto:emcd@acem.org.au)



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Name of EMAD applicant: \_\_\_\_\_

Element	Procedure	Applicant to sign:	Endorser to sign:	Unable to assess
<b>Airway</b>	Insert oropharyngeal airway			
	Insert nasopharyngeal airway			
	Insert laryngeal mask			
	Basic airway manoeuvres			
	Use bag valve mask (both one and two handed) <b>(MANDATORY PROCEDURE)</b>			
<b>Analgesia/pain relief</b>	Intranasal analgesia (adult or paediatric)			
	Digital nerve block			
	Infiltration of local anaesthetic			
	Procedural sedation <b>(MANDATORY PROCEDURE)</b>			
	Femoral nerve block / fascia ilaca block			
<b>Musculo-skeletal</b>	Plaster upper limb* <b>(MANDATORY PROCEDURE)</b>			
	Plaster lower limb* <b>(MANDATORY PROCEDURE)</b>			
	Fracture or joint reduction - major/extremity <b>(MANDATORY PROCEDURE)</b>			
<b>Trauma</b>	Pelvic splinting / binder			
	Close wound with tissue adhesive			
	Suture wound <b>(MANDATORY PROCEDURE)</b>			
	C spine manoeuvre, including 3-person log roll <b>(MANDATORY PROCEDURE)</b>			
	Chest decompression			



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Name of EMAD applicant: \_\_\_\_\_

Element	Procedure	Applicant to sign:	Endorser to sign:	Unable to assess
Burns	Assess burn (size and depth)			
Wounds	Incision and drainage of abscess			
Cardiac	Safe defibrillation (adult or paediatric) <b>(MANDATORY PROCEDURE)</b>			
	Application of external pacemaker			
	Cardioversion			
Circulation	IV access - Large bore (16G or larger)			
	Intraosseous access			
	Arterial line insertion			
	Insertion of rapid infusion catheter (RIC)			
Neurology	Mini-mental state examination			
	Lumbar puncture <b>(MANDATORY PROCEDURE)</b>			
Psychiatric/ mental health	Manage acutely behaviourally disturbed patient			
Infectious disease	Joint aspiration			
Paediatrics	Appropriate basic airway techniques (on an infant)			
	Assess hydration			
	Teach use of spacer			
	Neonate resuscitation			



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Name of EMAD applicant: \_\_\_\_\_

Element	Procedure	Applicant to sign:	Endorser to sign:	Unable to assess
<b>Paediatrics</b>	CPR in the newly born			
	Neonate airway management, including use of: + airway suction + Bag ventilation + CPAP device			
	Bag ventilation			
	Endotracheal intubation			
	Laryngeal mask			
	Set up ventilator using initial settings			
	Septic screening procedure			
<b>Obstetrics and Gynaecological</b>	Speculum vaginal examination and visualisation of the cervical os			
	Assess foetal heartbeat in late pregnancy (foetal doppler)			
<b>Gastro- intestinal</b>	Insertion of nasogastric tube			
<b>Toxicology and Toxinology</b>	Pressure bandage with immobilisation (PBI)			
	Interpret ECG in a poisoned patient			
<b>Ophthalmological</b>	Removal of foreign body from eye			
<b>ENT</b>	Nasal packing			
	Chemical cautery of epistaxis			
<b>Resus</b>	Emergency intubation (e.g. RSI)			



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Name of EMAD applicant: \_\_\_\_\_

Element	Procedure	Applicant to sign:	Endorser to sign:	Unable to assess
<b>Resus</b>	Other endotracheal intubation (insertion of ETT)			
	Other airway procedure (either Insertion of laryngeal mask or endotracheal intubations)			
	Set up a ventilator for an adult in the ED			
	Non-invasive ventilation including BiPAP and CPAP*			
	Insertion of intercostal catheter			
	RSI plus set up ventilator ( <b>MANDATORY PROCEDURE</b> )			
<b>Other</b>	Insertion of urinary catheter			
	<b>Total number of Procedures assessed</b>	<b>/58</b>	<b>/58</b>	<b>/58</b>

I declare that I have safely completed the procedures indicated above in the last three years.

Signature of applicant \_\_\_\_\_ date: \_\_\_\_\_

Signature of endorser: \_\_\_\_\_ date: \_\_\_\_\_





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### ENDORSEMENT:

I confirm that I have worked with the applicant, directly or within a network, during the last three years and in this time observed this applicant in ED and believe them to be at procedural level of an EMD graduate. I have endorsed that at least 80% of the procedures as shown on the EMAD Direct Entry Pathway 3 Procedural Checklist have been completed to expected level, including all mandatory procedures.

In consideration of the Emergency Medicine Certificate and Diploma Curriculum content, I endorse:

1. That the applicant has the basic knowledge and skills in carrying out an initial focused assessment of an undifferentiated patient.
2. That the applicant has the knowledge and skills to manage and treat patients with common emergency presentations.
3. That the applicant has the basic knowledge and skills to deliver safe patient care in a modern emergency care system.
4. That the applicant has the fundamental knowledge and skills to stabilise critically ill and injured patients, as well as provide safe sedation for emergency procedures.
5. That the applicant has the knowledge and skills to independently manage and treat a range of higher complexity emergency presentations.
6. That the applicant has the knowledge, skills, and attributes to communicate and collaborate effectively with patients and families/whanau from different cultures, members of their local healthcare team, and clinicians from other services.

### ENDORSER DETAILS:

Name	
ACEM ID	
Hospital	
Position	

Endorser signature: \_\_\_\_\_

Date: \_\_\_\_\_



AUSTRALASIAN COLLEGE  
FOR EMERGENCY MEDICINE

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### APPLICATION DECLARATION:

I declare that the above information completed by me is true and correct, and I undertake to advise the College immediately should circumstances arise to alter any of the responses given.

Applicant signature: \_\_\_\_\_

Date: \_\_\_\_\_