Project Medical Education
Glossary of Terms

Introduction:

As is true of all professions, medicine has its own “language.” A basic understanding of a few key terms and expressions in common use will facilitate your participation as a member of the medical team. The following glossary of terms is divided into six basic categories including: General, Personnel, Patient Care, Education, Equipment/Procedures and Hospital Units.

General:

UME (Undergraduate Medical Education) - Refers to years spent in medical school pursuing an MD or combined degree (e.g. MD/PhD, MD/MBA, MD/MPH).

GME (Graduate Medical Education) - Refers to the years of medical training after obtaining the MD degree.

CME (Continuing Medical Education) - Continuing medical education consists of educational activities which serve to maintain, develop, or increase the knowledge, skills, and professional performance. Following completion of training, doctors are required to earn CME credits to maintain medical licensure and hospital privileges.

Tertiary Care Medical Center - Generally refers to an academic center with broad access to specialized consultative care and advanced diagnostic/therapeutic modalities (e.g. comprehensive cancer care, organ transplantation, neonatal intensive care). Tertiary centers usually receive patients from a large catchment area and referral base. DHMC is the only tertiary care center in New Hampshire.

Personnel:

Medical Student - A student who has completed undergraduate education and is participating in a course of study culminating in the MD degree - typically four years in duration.

Resident - A physician who has received an MD degree and is now pursuing training in one of the core specialties (e.g., Anesthesiology, Internal Medicine, General Surgery, Obstetrics and Gynecology, Pediatrics).

Fellow - A physician who has completed residency training in a core specialty and is now pursuing more advanced subspecialty fellowship training (e.g., Cardiology, Gastroenterology, Palliative Care).

PGY (Post-Graduate Year) - A designation referring to the number of years a resident or fellow has spent in GME (e.g., a PGY-3 resident in Internal Medicine is in the third year of residency training in Internal Medicine).

Intern - An outdated term for a resident in the PGY-1 or first year of training after obtaining an MD degree.

Attending Physician - A fully-licensed specialist who has completed training in a residency, and frequently a subspecialty fellowship, and is now overseeing resident education and patient care.
**Hospitalist Physician** - An attending physician who only takes care of patients that are admitted to the hospital. They do not typically care for patients in the outpatient setting.

**Patient Care:**

**On Call** - Refers to an overnight shift where one team is responsible for admissions to the hospital and overnight coverage for a 16-24 hour time period.

**Night Float** - A resident physician who starts clinical duties in the early evening and covers patient care responsibilities overnight. The night float resident signs out in the morning, goes home to sleep, then returns the next evening to do the same. Night float typically covers for 5-6 nights in a row.

**Hand Over** - Verbal or written transfer of patient information to the next team that will be caring for a particular patient or group of patients.

**Morning Report** - Residents coming off overnight call/night float meet in the AM with an attending physician and the daytime team to discuss patient issues or changes that arose overnight.

**Work Hours** – ACGME Work Hour rules limit the total amount of time a resident or fellow can engage in patient care and educational activities. Work Hour rules also ensure enough time between shifts to allow for adequate rest.

**Pre-op** - The act of performing a patient history and physical examine in preparation for surgery.

**Post-op** - The evaluation of a patient following a surgical procedure, typically within 24 hours of the procedure.

**Op note** – Documentation in the electronic record regarding the details of a surgical procedure.

**Discharge Summary** - The document that summarizes the hospital course for any given patient and is required upon discharge.

**Time Out** - A period of time when all members of the surgical/procedural team participate in the positive identification of the patient, confirm the intended procedure, visualize of the marked site of the procedure, and discuss any safety issues prior to proceeding with the procedure. All team members present are expected to STOP what they are doing and actively participate in the Time Out.

**Code Blue** - A term referring to the cardiopulmonary arrest of a patient. The “Code Blue Team” is composed of a group of physicians, nurses and a respiratory therapist who respond to a code blue page 24/7 anywhere within the medical center.

**Education:**

**Rounds** - The act of seeing patients in the in-patient setting. A clinical care team that may be composed of an attending physician, residents and/or fellows, medical students, nurses, pharmacists, respiratory care practitioners and/or physical therapists who are visiting and evaluating each of the patients under the care of that particular team.

**Attending Rounds** - Physicians and medical students from the above group break out for small group teaching. This term also can refer to the “rounds” definition above as opposed to “work rounds” where the attending physician may or may not be present.
**Grand Rounds** - Refers to a weekly conference where a distinguished guest speaker or a member of the faculty presents on a particular topic of interest.

**M & M Conference (Morbidity & Mortality)** - A departmental venue where cases are discussed confidentially with an eye towards improving patient care and discussing areas for improvement.

**Equipment/Procedures:**

- **IV Catheter** - A small plastic catheter placed in a vein to facilitate the administration of fluids or medications.

- **PICC Line** - An intravenous catheter placed in the arm that is longer than the usual IV and remains in place for a longer period of time.

- **Central Line** - An intravenous catheter placed in the jugular (neck) or subclavian (chest) vein. Used when arm access is limited or insufficient for the safe administration of a particular medication.

- **Arterial Line** - A catheter placed in an artery to allow continuous monitoring of the blood pressure.

- **Intubate** - Placement of a plastic breathing tube (endotracheal tube) in the windpipe of a patient who requires ventilatory support.

- **Ventilator** - A machine that delivers oxygen-enriched air via an endotracheal tube to assist a patient with breathing.

**Hospital Units:**

- **ICU** - A unit in which critically ill medical and surgical patients are cared for.

- **CCU** - The Coronary Care Unit cares for high acuity patients with cardiac disease/events.

- **CTICU** - Patients are cared for in the Cardiothoracic ICU following major heart or lung surgery.

- **PACU** - The Post-Anesthesia Care Unit cares for the majority of patients in the immediate postoperative period that will remain in the hospital following surgery.

- **PICU** - The Pediatric Intensive Care Unit cares for seriously ill children who are not newborns.

- **NICU** - Neonatal Intensive Care Unit cares for newborn babies with significant medical or surgical problems.

- **Same Day Surgery Unit** – The unit caring for patients presenting for elective surgery/procedures either as an inpatient or outpatient (i.e. going home following their procedure).

- **Endoscopy Suite** - The area where colonoscopies, upper GI endoscopies and bronchoscopies are performed.