### Royal College of Physicians and Surgeons of Canada

# Inter-Institution Affiliation (IIA) Agreement for Offsite Location

**Definition:** This type of IIA applies when a Faculty/School of Medicine has a complete accredited residency program in a particular discipline, but wishes to have its residents rotate to another educational site, affiliated with a different university that <u>does not</u> have an accredited program in that discipline, for a portion of their training.

Name of Program:	Pediatric Emergency Medicine	
Home School:	Western University	
Receiving School:	New York City PCC - Toxicology	
Rotations/Experience required:	_1	
Specialty-specific requirement(s) (OTR/STR/CTR/SSA): (e.g. OTR 1.5)	OTR 2.1.1.24. Toxicology OTR 5.1.14. Toxicology/environmental procedures	
<b>Duration:</b> $\square$ Months:	□ Weeks:	⊠ Blocks: 1
Duration.   Months.	☐ Weeks.	☑ Blocks: 1
Number of residents per year (approximately): 1-2		

# **Description of rotation** (including major goals and objective of rotation) (to be completed by the home school)

### General Objectives:

- 1. To gain knowledge in the general principles of toxicology and to develop an approach to the management of the acutely poisoned patient.
- 2. To become familiar with the signs and symptoms of common and emerging toxins.
- 3. To develop a high level of comfort with the management of common overdoses and toxins.
- 4. To develop an understanding of the role a Poison Centre plays in the community.
- 5. To identify major ingestions based on age group.

To fulfill these objectives, the resident will:

- 1. Attend at the poison centre and participate in telephone consultation of reported poisonings.
- 2. Participate in teaching activities, both cased based and didactic.
- 3. Gain further knowledge by consolidating information by reading assigned textbook and literature.

## **Authorizations**

# Gurinder Sangha Program Director Print name Dr. Chris Watling Postgraduate Dean Print name Receiving School Receiving School Receiving School Program Director Program Director Print name Receiving School

Postgraduate Dean

Signature

Date

N/A for this centre

Postgraduate Dean

Print name