

2ND YEAR SURGICAL RESIDENTS

1. Patient Care

a) Overall Competency Goals

- 1) Build on the patient care knowledge and skills obtained as a PGY-1 resident to demonstrate a clear progression in skill and knowledge that allows the resident to exercise greater responsibility in the management of surgical patients, as well as in the type of surgical cases he/she can perform as primary surgeon, as judged by the chief resident and staff.
- 2) Develop skills required to independently evaluate the surgical patient, establish criteria for admission, and manage a patient in the hospital environment, to include intensive care, as well as in the outpatient environment.
- 3) Develop management skills required to independently evaluate the surgical consult and trauma patient and develop a management plan that is effectively communicated to the next level in the surgical hierarchy. Assure implementation of this plan.
- 4) Develop the ability to assess and manage critically ill patients including pre- and postoperative stabilization and ICU care. This includes: trauma, sepsis, respiratory failure, renal failure, cardiac emergencies, airway management, ventilator management, and interpretation of Swan-Ganz catheter readings and ICP monitors.

b) Specific Learning Objectives

- 1) Given a set of signs and symptoms or a case scenario in general or vascular surgery, describe an appropriate management strategy including differential diagnosis, diagnostic tests, and whether inpatient or outpatient management is more appropriate.
- 2) Given a specific consultation request and case scenario in general or vascular surgery, describe an appropriate diagnostic and therapeutic approach to the problem.
- 3) Given a specific presentation of a trauma patient, describe an appropriate sequence of management steps.
- 4) Given a scenario of a critically ill patient in the ICU, describe in an organized, system-specific manner an appropriate care plan for that patient.
- 5) Demonstrate acquisition of satisfactory open and laparoscopic surgical skill in performing basic operations in general and vascular surgery such as laparoscopic cholecystectomy; small and large bowel obstruction; body wall hernias; central vein catheterization; insertion of Swan-Ganz catheter; arterial line placement; bronchoscopy; and tube thoracostomy.
- 6) Demonstrate the ability to care for surgical emergencies in the role of the surgical resident on call.

c) Teaching Methods (correspond to objectives in b)

- 1) Attendance in outpatient clinic and on call for the emergency room under direct supervision of senior residents and faculty.
- 2) Inpatient call for general and vascular surgical consultations under direct supervision of senior residents and faculty.
- 3a) ATLS course.

- 3b) Trauma rotation experience, under direct supervision of senior residents and faculty, with daily teaching and management rounds.
- 4) ICU rotation experience in primary care of critically ill patients under direct supervision of critical care fellows and faculty, with daily teaching and management rounds.
- 5a) Intraoperative teaching.
- 5b) Surgical skills laboratory and courses.
- 6) General and vascular surgical call under direct supervision of senior residents and faculty.

d) Evaluation Methods (numbers in parentheses refer to objective number in b) above)

- 1) Oral exams (rotation-specific). (1-4)
- 2) Teaching rounds. (1-4, 6)
- 3) Presentations in clinic. (1)
- 4) Rotation-specific conferences. (2-4)
- 5) ATLS examination. (3, 6)
- 6) Operative performance evaluations. (5)
- 7) Global rating forms. (1-6)

2. Medical Knowledge

a) Overall Competency Goals

- 1) Acquire the basic knowledge of general and vascular surgical conditions to be able to assess patients in the outpatient clinic, inpatient setting, and emergency room and develop an appropriate care plan.
- 2) Acquire the basic knowledge of surgical critical care principles to be able to assess critically ill patients and plan a course of treatment.
- 3) Acquire a basic knowledge in trauma care as presented in the ATLS course.

b) Specific Learning Objectives

- 1) Attend all weekly departmental grand rounds and resident conferences and achieve at minimum a 70% score on each week's resident conference test.
- 2) Demonstrate sufficient mastery of the assigned readings for each rotation that rotation-specific knowledge objectives are achieved.
- 3) Complete the ABSITE and score at or above the 30th percentile for PGY-2 residents nationally.

c) Teaching Methods

- 1) Required weekly attendance at City-wide Grand Rounds and Resident Conference and site-specific Morbidity and Mortality Conference.
- 2) Required attendance and active participation in rotation-specific conferences and teaching rounds.
- 3) Assigned readings for each rotation and for the year.
- 4) Weekly ABSITE tutorial.

d) Evaluation Methods

- 1) Oral and written exams (rotation-specific).
- 2) Teaching rounds.
- 3) Rotation-specific conferences.
- 4) ABSITE examination.

3. **Practice-Based Learning and Improvement**

a) **Overall Competency Goals**

- 1) Learn to apply information provided in rotation-specific and residency-wide reading and conferences to the care of your patients.
- 2) Develop the ability to teach and mentor medical students assigned to your service.
- 3) Develop the skill to access electronically the current literature regarding your patients' medical conditions and incorporate the information into your care of patients.

b) **Specific Learning Objectives**

- 1) Demonstrate the ability to analyze their own decisions and performance; describe areas of deficiency and strategies for improvement.
- 2) Demonstrate the ability to facilitate the learning of medical students.
- 3) Demonstrate the effective use of text and online literature to select treatment strategies.

c) **Teaching Methods**

- 1) Required weekly department conferences (Grand Rounds, Morbidity & Mortality, Resident Conference).
- 2) Weekly rotation-specific conferences.
- 3) Resident conference on critical appraisal of the literature.
- 4) Critical case review: preparation and presentation to their advisor of at least one clinical case and one critical incident each six months.

d) **Evaluation Methods (numbers in parentheses refer to objective number in b) above)**

- 1) Oral exams (rotation-specific). (1, 3)
- 2) Teaching rounds. (1, 3)
- 3) Rotation-specific conferences. (1, 3)
- 4) Student evaluations. (2)
- 6) Global rating forms.

4. **Interpersonal Skills and Communication**

a) **Overall Competency Goals**

- 1) Effectively communicate care plans to patients, families, nurses, and other health care personnel.
- 2) Teach students the basis of preoperative and postoperative care, writing orders and progress notes.
- 3) Write orders and notes in a complete and legible fashion.
- 4) Respond promptly and courteously to requests of staff; answer pages promptly.

b) Specific Learning Objectives

- 1) Demonstrate proficiency in the management and leadership of a ward service, utilizing the cooperative skills of medical students, nurses and ancillary personnel.
- 2) Demonstrate skills for appropriately counseling and educating patients and their families.
- 3) Demonstrate effective documentation of practice activities with proper operative/procedure note dictations, clinic visit dictations, discharge summary dictations, daily progress notes and event notes.
- 4) Demonstrate how to properly consult a specialty service (radiology, GI, PT, etc) by correctly formulating the *specific question* to be answered.
- 5) Present all patient and conference material in a concise, organized, logical and knowledgeable manner.
- 6) Demonstrate the ability to communicate information vital to patient care to peers and superiors in the surgical hierarchy in a timely fashion.
- 7) Demonstrate skill and sensitivity in giving bad news, such as telling families that their loved ones have died or are critically ill, and managing patients with a variety of challenging emotional states including severe grief, fear, intoxication, and psychosis.

c) Teaching Methods

- 1) Teaching rounds.
- 2) Resident and faculty example.
- 3) Service-specific teaching conferences.

d) Evaluation Methods (numbers in parentheses refer to objective number in b) above)

- 1) Teaching rounds. (1-6)
- 2) Performance evaluations by students. (1)
- 3) 360° evaluations (nurses, ward clerks). (1, 2)
- 4) Chart review by faculty. (3)

5. Professionalism

a) Overall Competency Goals

- 1) Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

b) Specific Learning Objectives

- 1) Demonstrate respectful, altruistic and ethically sound behavior with patients and all members of the healthcare team.
- 2) Treat each patient, regardless of social or other circumstances, with the same degree of respect you would afford to your own family members.
- 3) Demonstrate sensitivity to cultural, age, gender and disability issues with patients and all members of the healthcare team.
- 4) Demonstrate a commitment to continuity of patient care by rounding on your service's patients twice a day at minimum.
- 5) Enter all cases in the Surgical Operative Log weekly on the ACGME site.

6) Complete all dictations and other medical staff requirements as they are due, including duty hours reporting.

c) Teaching Methods

- 1) Resident and faculty example.
- 2) Institutional GME conferences and workshops.
- 3) Resident Conferences.

d) Evaluation Methods (numbers in parentheses refer to objective numbers in b) above)

- 1) Medical Records reporting. (6)
- 2) 360° evaluations by nurses and ward clerks. (1-3)
- 3) 360° peer evaluations. (4)
- 4) Monthly review of Surgical Operative Log by Program Director. (5)

6) Systems Based Practice

a) Overall Competency Goals

- 1) Learn to work effectively with all other elements of the healthcare system to provide efficient, safe, thorough, and cost-effective care.

b) Specific Learning Objectives

- 1) Demonstrate effective communication with referring physicians throughout the region, including appropriate cc's on all dictated documents.
- 2) Demonstrate skill in working with other disciplines while assessing and managing consults, emergency room patients, and critically ill patients so that efficient, safe, and effective care is facilitated.
- 3) Develop an understanding of community private practice during the community rotations.
- 4) Demonstrate effective time management and adherence to work hours regulations.
- 5) Demonstrate an understanding of the larger system of hospital care by participating in weekly multidisciplinary rounds on appropriate services.

c) Teaching Methods

- 1) Teaching rounds.
- 2) Participation in interdisciplinary rounds and care conferences.
- 3) Attendance at outpatient clinic and faculty office hours.

d) Evaluation Methods (numbers in parentheses refer to objective numbers in b) above)

- 1) Chart review. (1, 2)
- 2) 360° evaluation by ward clerks and case managers. (2, 5)
- 3) Review of duty hours compliance records. (4)

REQUIRED READINGS:

- 1) Chapters 15, 16, 18, 20, 22, 23, 29, 31, 34, 36, 38 in Schwartz's Principles of Surgery.
- 2) Marino PL. The ICU Book. 2nd Ed Baltimore: Williams and Wilkins, 1998.

- 3) Weekly reading assignments for Resident Conference.
- 4) Rotation-specific reading assignments.
- 5) Seminal articles in patient care (listed below and available online at Surgery website):

Steinbrook R. How best to ventilate? Trial design and patient safety in studies of the acute respiratory distress syndrome. NEJM 2003; 348: 1393-1401.

Sandham JD, et al. A randomized, controlled trial of the use of pulmonary-artery catheters in high-risk surgical patients. NEJM 2003; 348: 5-14.

Acute Respiratory Distress Syndrome Network. Ventilation with lower tidal volumes as compared with traditional tidal volumes for acute lung injury and the acute respiratory distress syndrome. NEJM 2000; 342: 1301-1308.

Rivers E, et al. Early goal-directed therapy in the treatment of severe sepsis and septic shock. NEJM 2001; 345: 1368-1377.

Bernard GR, et al. Efficacy and safety of recombinant human activated protein C for severe sepsis. NEJM 2001; 344: 699-709.

Cooper MS, Stewart PM. Corticosteroid insufficiency in acutely ill patients. NEJM 2003; 348: 727-734.

Herridge MS, et al. One-year outcomes in survivors of the acute respiratory distress syndrome. NEJM 2003; 348: 683-693.

CRITERIA FOR ADVANCEMENT TO PGY-3 YEAR:

- 1) Satisfactory completion of all rotations and fulfillment of all performance objectives listed above.