Since we are about to begin the new academic year, I would like to send all faculty and residents an update on the medical student curriculum and structure of the surgical clerkships. Clerkships will retain their structure for incoming third year students during the 2015-2016 academic year. However, second year students will be joining clinical rotations in early 2016.

**Core Surgery Students (Class of 2017):**

- Third year students spend 5 weeks on *one general surgery service*. They will be assigned to one of the following rotations: Portland: **Blue, Red, EGS, Gold, Green, St. Vincent, or PVAMC; Statewide: Bend, Eugene, Grants Pass, Redmond, Salem, and Coos Bay**. Students rotating at OHSU may elect to experience a week on the university vascular surgery service. These students will be off their regular service for a week.
- Students participate in required didactics or orientation on Mondays and an exam on the last day of the course. Orientation or didactics may be moved to Tuesday or Wednesday on holiday weeks. These courses run until 1630 on Mondays. Please be sure that students are excused by 1700 on the Thursday prior to the exam.
- Students will have a mandatory weekly meeting with their preceptor for approximately 1 hour. At this meeting, the student will be presenting patients that they have seen while on rotation. They will also receive advice on the student seminar presented to their peers.
- In regards to team duties, the students should be assigned 2 to 4 patients (or however many they can handle appropriately) to follow consistently. They should be able to provide the team with SOAP information on morning rounds, etc. The expectation is that the student should be able to handle more patients by the latter half of the rotation.
- Night Float Call: Third year students rotating at OHSU and the PVAMC will perform their call duties with consecutive nights of call. During their call week, students will leave their primary service and return the following week. Students rotating off campus will take call with either their assigned resident or attending. The call is designed for students to actively participate in consults, trauma resuscitations, and operations.
- Required course evaluations:
  - A midterm evaluation must be filled out during the third week of rotation.
  - At the end of the surgical clerkship, you will also be asked to complete an evaluation on Medhub regarding the students’ clinical and professionalism performance.

**Core Surgery Students (Class of 2018):**

- Students will begin their new curriculum in February 2016. Students will have a 4 week continuous experience in surgery as part of the new curriculum. Didactics, lecture, and the final exam will be separated from this rotation. Therefore, the actual number of clinical days will remain identical.
- The class size is increasing and we are currently investigating new sites and rotations for the incoming class. More details on intersession lectures and orientations will be available soon.

**Two week Courses (third and fourth year students):**

- Students will have the opportunity to take several two week elective courses throughout their third and fourth year. We have developed several specialty courses including Cardiac, Thoracic, Pediatric, and Vascular. These courses are intended to provide and introduction to specialties for
students early on in their clinical course. For two week courses, final grades are required within 10 days of the completion of the rotation.

Fourth Year Students (class of 2016):

- Fourth year students spend 4 weeks on a second surgical discipline, ideally serving in the capacity of “sub-intern”. Our goal is to have students be integrally involved in all phases of patient care (pre-op, intra-op, and post-op)
- They are required to take one night of call approximately every fourth night.
- All evaluations of fourth year students will be submitted through the Medhub system and are due within 10 days of rotation completion.
- Visiting students may also enroll in these fourth year courses.

We currently require more faculty to help with medical student teaching. These roles are described below and are eligible for education hours of credit.

- **Preceptor** (up to 5 education hours per student) – mentor two to three students during a five week rotation. You will meet weekly with the students (as noted above) and evaluate their progress, case presentations, and their student seminar. Most preceptors participate in two rotations in a year.
- **Lecturers** (one education hour) – give a presentation on a topic. Please contact us regarding the topic. We have made efforts to transition to a case based interactive lecture format. These lectures usually take place on Mondays. (If there is a holiday, it may occur on either Tuesday or Wednesday.)
- **Suture skills lab instructors**. Guide students in open and laparoscopic skills labs. We have various opportunities with students during every year of medical school.
- **Surgical Specialty College Coach** – coach a group of students. This position involves meeting with students at intervals and advising them on scheduling, studying, research activities, careers, and life balance. This position is funded with salary support through the school of medicine.

*If you are interested in helping in these areas, please contact Marci Jo Carlton carltonm@ohsu.edu.*

Successes and ongoing challenges:

Evaluations have indicated that students appreciate the rich educational environment provided by our faculty and residents. We have seen a continued interest in careers in general surgery. Many students have changed their career choices directly after completion of our rotation. While we have enjoyed success in encouraging careers, our clerkship still faces challenges. Keep these tips in mind during clerkship activities:

- Some students continue to report inadequate service specific orientation. Try to conduct an orientation on the day to day schedule of your specific service. A 20-30 second morning or evening “huddle” can help outline their schedule each day. (e.g. AM clinic, afternoon lap chole, etc.)
- A minority of students continue to report mistreatment during the rotation. Please keep in mind professional behavior and refrain from derogatory comments regarding patients, staff, and other services.
- Students value timely feedback. I encourage them to be proactive. Try to schedule brief sessions each week to work on specific actionable feedback.

Thank you for your continued dedication to student education,

Laszlo Kiraly MD FACS
Associate Professor of Surgery
Surgery Clerkship Director
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Oregon Health & Science University
Core Surgical Rotation
(Surgery 720)

OREGON HEALTH & SCIENCE UNIVERSITY

CLERKSHIP OBJECTIVES

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Professor and Chairman
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Marci Jo Carlton
Medical Student Coordinator
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Updated 5/2015
Patient Care and Procedure Skills:

1. Perform a focused history and physical on patients with varied surgical diagnoses in the inpatient and outpatient setting.
2. Be able to review a chart, and present an accurate history and physical to an attending or resident.
3. Identify preoperative issues in patients who are candidates for surgery.
4. Write succinct, accurate clinic and ward notes or history and physicals on patients.
5. Be observed by faculty in the evaluation of at least one patient.
6. Witness and participate in the process of informed consent for a surgical procedure.
7. Evaluate a new patient and independently construct a differential of surgical diagnoses.
8. Use the electronic medical record to obtain accurate information required for patient care on a daily basis.
9. Interpret diagnostic imaging independently and review the films with a radiologist.
10. Evaluate a patient with surgical diagnoses in the following categories:
    a. Wound or abdominal wall diagnosis
    b. GI case. (Gastric bypass, bowel resection, bowel obstruction, etc.)
    c. Cancer diagnosis
    d. Inflammatory disease or acute peritonitis. (pancreatitis, inflammatory bowel disease, appendicitis, cholecystitis, etc.)
11. Essential skills. By completion of the rotation, students should be able to perform the following skills independently:
    a. Tie a two-handed knot
    b. Instrument tie
    c. Removes sutures and staples
    d. Sterile technique and operating room protocol knowledge. View and scrub in multiple operations each week.
    e. Recognize proper and improper healing and signs of wound infection.
    f. Participate in care of an open wound.
    g. Recognize infections which require surgery.
    h. Understand the workup of postoperative fever.
    i. Write admission orders
    j. Urethral catheterization
    k. Aid with wound closure in OR.
12. Recommended skills:
    a. Nasogastric tube insertion
    b. Wound drain removal
    c. Peripheral venous catheterization
    d. Blood sampling, arterial and venous
Medical Knowledge

1. Know the normal anatomy and physiology of topics covered in manual of surgical knowledge objectives.
2. Describe the stages and cellular mechanisms of wound healing.
3. Understand the pathophysiology of diseases covered in the manual of surgical knowledge objectives.
4. Know and understand the tolerated doses and side effects of local anesthetics.
5. Understand the tolerated doses and side effects of common medications used during general anesthesia.
6. Describe the indications for antibiotics in the prophylaxis of surgical infections.
7. Understand the utility, limitations, and risks of imaging and laboratory tests for the diagnosis of acute surgical disorders.
8. Understand and use data from primary clinical trials to support decisions on patient care.
9. Critically evaluate literature in developing decisions for patient care. Educate peers on selected topics using primary literature.

Practice-Based Learning and Improvement

1. Utilize feedback sessions with residents and faculty to improve performance throughout the rotation.
2. Present formal history and physicals to attending preceptor. Gain feedback and improve presentations throughout the rotation. Formulate plans of care with appropriate literature and data.
3. Utilize web based modules to gain in depth knowledge on key subjects. (WISE-MD)

Interpersonal and Communication Skills

1. Follow patients daily in the inpatient setting. Discuss concerns with patients on a daily basis. Communicate the plan of care to patients and their families.
2. Participate and witness team sign out. Aid in updating the patient list.
3. Present daily progress of patients to health care team.
4. Create educational presentations on select topics for the health care team and peers.
5. Discuss patient concerns with RNs and CNAs on a daily basis.

Professionalism

1. Recognize the challenges of end of life decision making in the acute setting.
2. Demonstrate empathy and compassion in the care of acutely ill patients.
3. Complete assignments in a timely manner. Attend conferences, rounds, and operations in a timely fashion.
4. Wear appropriate attire.
5. Follow through on patient care throughout rotation.

Systems-Based Practice

1. Work with multi-disciplinary teams to deliver optimal care to patients. Call consults and share details and plans with other specialty teams.