OVERALL GOALS AND OBJECTIVES FOR EACH RESIDENT LEVEL
4th YEAR GENERAL SURGERY RESIDENT

CRITERIA FOR ADVANCEMENT TO PGY-5 YEAR:
Satisfactory completion of all rotations and fulfillment of all performance objectives listed above as judged by the Clinical Competency Committee’s consensus and concurrence of Program Director.

<table>
<thead>
<tr>
<th>PATIENT CARE</th>
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</thead>
<tbody>
<tr>
<td>GOALS</td>
</tr>
<tr>
<td>1. Build on the patient care knowledge and skills obtained as a PGY-3 resident to demonstrate a clearer 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 act as primary surgeon, as judged by the faculty.</td>
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<tr>
<td>2. Develop the ability to evaluate independently patients with problems in the realms of general and vascular surgery, trauma, renal and liver transplant, and pediatric surgery; to develop a management plan that is effectively communicated up and down the surgical hierarchy, and to assure implementation of this plan.</td>
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<tr>
<td>3. Develop the leadership, organizational and administrative skills required to manage a surgical service as acting “chief resident.”</td>
</tr>
</tbody>
</table>
## OVERALL GOALS AND OBJECTIVES FOR EACH RESIDENT LEVEL
### 4th YEAR GENERAL SURGERY RESIDENT

- **and laparoscopic operative skills and be capable of independently completing procedures learned in the PGY-1, PGY-2, and PGY-3 years.**
- **on services in which the resident serves as “acting chief” resident by supervising interns and junior residents and assuring efficient, safe, and cost-effective patient care.**

### MEDICAL KNOWLEDGE

<table>
<thead>
<tr>
<th>GOALS</th>
<th>OBJECTIVES</th>
<th>METHOD OF EVALUATION</th>
<th>TEACHING METHODS</th>
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</table>
| 1. Acquire the basic knowledge of conditions in the realm of head and neck surgery and transplant surgery to be able to assess patients in the outpatient and inpatient setting, develop an appropriate care plan, and perform basic operations under direct faculty supervision. | 1. Attend all weekly departmental grand rounds and resident conferences, and small groups.  
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 73 percent correct on the exam. | 1. Oral and written exams (rotation-specific).  
2. Resident and faculty assessment of teaching round presentations.  
3. Resident and faculty assessment of rotation-specific conference presentations.  
4. ABSITE examination performance.  
5. Global rating form assessments. | 1. Required weekly attendance at City-wide Grand Rounds and Resident Conference and site-specific Morbidity and Mortality Conference.  
2. Presentation at rotation-specific and weekly required Resident Conference as assigned.  
3. Required attendance and active participation in rotation-specific conferences and teaching rounds.  
4. Assigned readings for each rotation and for the year.  
5. Required weekly attendance and participation in small-group conferences. |
| 2. Achieve adequate knowledge of general, vascular, and pediatric surgical conditions to be able to evaluate and manage them independently. |                                                                                           |                                                                                    |                                                                                  |

### PRACTICE BASED LEARNING & IMPROVEMENT

<table>
<thead>
<tr>
<th>GOALS</th>
<th>OBJECTIVES</th>
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<th>TEACHING METHODS</th>
</tr>
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</table>
| 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. | 1. Demonstrate the ability to analyze your own decisions and performance; describe areas of deficiency and strategies for improvement every six months through discussion of PBL cases with advisor.  
2. Demonstrate the ability to facilitate | 1. Oral exams (rotation-specific).  
(1, 3)  
2. Teaching rounds. (1, 3)  
3. Rotation-specific conferences. (1, 3)  
4. Student evaluations. (2)  
5. Global rating forms. (1, 3) | 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. |
### OVERALL GOALS AND OBJECTIVES FOR EACH RESIDENT LEVEL

#### 4th YEAR GENERAL SURGERY RESIDENT

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<th>METHOD OF EVALUATION</th>
<th>TEACHING METHODS</th>
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</table>
| 3. Develop the skill to access electronically the current literature regarding your patients’ medical conditions and incorporate the information into your care of patients. | 3. Demonstrate the effective use of text and online literature to select treatment strategies. | 1. Medical Records reporting. (7)  
2. 360° evaluations by nurses, PA/NP, and ward clerks. (1-3)  
3. 360° evaluations by peers. (1, 3, 4)  
4. Monthly review of Surgical Operative Log by Program Director. (6)  
5. Evaluation of Residency Coordinator (7)  
6. Global rating forms. (1-5) | 1. Resident and faculty example.  
2. Institutional GME conferences and workshops.  
3. Resident Conferences. |
| 4. Critical case review: preparation and presentation to their advisor of at least one clinical case and one critical incident each six months. | | | |

### PROFESSIONALISM

<table>
<thead>
<tr>
<th>GOALS</th>
<th>OBJECTIVES</th>
<th>METHOD OF EVALUATION</th>
<th>TEACHING METHODS</th>
</tr>
</thead>
</table>
| 1. Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population. | 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. Develop administrative skill in preparation of the weekly M&M reports and presentations at conferences.  
6. Enter all cases in the Surgical Operative Log weekly on the ACGME site.  
7. Complete all dictations and other medical staff requirements as they are due, including duty hours reporting. | 1. Medical Records reporting. (7)  
2. 360° evaluations by nurses, PA/NP, and ward clerks. (1-3)  
3. 360° evaluations by peers. (1, 3, 4)  
4. Monthly review of Surgical Operative Log by Program Director. (6)  
5. Evaluation of Residency Coordinator (7)  
6. Global rating forms. (1-5) | 1. Resident and faculty example.  
2. Institutional GME conferences and workshops.  
3. Resident Conferences. |
# OVERALL GOALS AND OBJECTIVES FOR EACH RESIDENT LEVEL
## 4th YEAR GENERAL SURGERY RESIDENT

### SYSTEMS BASED PRACTICE

<table>
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<th>GOALS</th>
<th>OBJECTIVES</th>
<th>METHOD OF EVALUATION</th>
<th>TEACHING METHODS</th>
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</table>
| 1. Learn to work effectively with all other elements of the healthcare system to provide efficient, safe, thorough, and cost-effective care. | 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. | 1. Chart review. (1, 2)  
2. 360º evaluation by ward clerks and case managers. (2, 5)  
2. Participation in interdisciplinary rounds and care conferences.  
3. Attendance at outpatient clinic and faculty office hours. |

### INTERPERSONAL & COMMUNICATION SKILLS

<table>
<thead>
<tr>
<th>GOALS</th>
<th>OBJECTIVES</th>
<th>METHOD OF EVALUATION</th>
<th>TEACHING METHODS</th>
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</thead>
</table>
| 1. Develop proficiency in the management and leadership of a ward service, utilizing the cooperative skills of medical students, junior residents, nurses and ancillary personnel.  
2. Begin to formulate the skills required to manage a surgical service as senior resident at St. | 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 | 1. Teaching rounds, on-call performance as judged by chief residents, fellows, and faculty. (1-6)  
2. Performance evaluations by students. (1)  
3. 360º evaluations (nurses, ward clerks, PA/NP). (1, 2, 7)  
4. Chart review by faculty. (3) | 1. Teaching rounds.  
2. Resident and faculty example.  
<table>
<thead>
<tr>
<th>4th YEAR GENERAL SURGERY RESIDENT</th>
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<tbody>
<tr>
<td><strong>Vincent Hospital and on the</strong></td>
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<tr>
<td><strong>Trauma service at Emanuel</strong></td>
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<td><strong>Hospital.</strong></td>
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<tr>
<td>3. Effectively communicate care</td>
</tr>
<tr>
<td>plans to patients, families,</td>
</tr>
<tr>
<td>nurses, and other health care</td>
</tr>
<tr>
<td>personnel.</td>
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<tr>
<td>4. Teach students the basics of</td>
</tr>
<tr>
<td>preoperative and postoperative</td>
</tr>
<tr>
<td>care, writing orders and</td>
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<tr>
<td>progress notes.</td>
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<tr>
<td>5. Write orders and notes in a</td>
</tr>
<tr>
<td>complete and accurate fashion.</td>
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<tr>
<td>6. Respond promptly and</td>
</tr>
<tr>
<td>courteously to requests of staff;</td>
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<tr>
<td>answer pages promptly.</td>
</tr>
<tr>
<td>3. Demonstrate effective</td>
</tr>
<tr>
<td>documentation of practice</td>
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<tr>
<td>activities with proper</td>
</tr>
<tr>
<td>operative/procedure note</td>
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<tr>
<td>dictations, clinic visit dictation, discharge summary</td>
</tr>
<tr>
<td>dictations, daily progress notes</td>
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<tr>
<td>and event notes.</td>
</tr>
<tr>
<td>4. Demonstrate how to properly</td>
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<tr>
<td>consult a specialty service</td>
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<tr>
<td>(radiology, GI, PT, etc) by</td>
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<tr>
<td>correctly formulating the <strong>specific question</strong> to</td>
</tr>
<tr>
<td>be answered.</td>
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<tr>
<td>5. Present all patient and</td>
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<tr>
<td>conference material in a concise,</td>
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<tr>
<td>organized, logical and</td>
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<tr>
<td>knowledgeable manner.</td>
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<tr>
<td>6. Demonstrate the ability to</td>
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<tr>
<td>communicate information vital to</td>
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<tr>
<td>patient care to peers and</td>
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<tr>
<td>superiors in the surgical</td>
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<tr>
<td>hierarchy in a timely fashion.</td>
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<td>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.</td>
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<tr>
<td>5. Global rating forms. (1, 3, 5, 6, 7)</td>
</tr>
</tbody>
</table>