Core Surgical Rotation
(Surgery 720)

OREGON HEALTH & SCIENCE UNIVERSITY

TEACHING PLAN

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I. Introduction

This is a five week course in clinical surgery. The material presented, and the manner in which it is taught, have been designed to include the “core” material in surgery that should be known to all physicians. In order to make most efficient use of the time available, it has been necessary to design a highly structured curriculum. The schedules on the following pages are the result of this need and of a desire to bring you and your instructors together in regular learning situations.

II. Assumptions

The student has learned normal anatomy, is familiar with normal physiology, and knows the pathology of the common disease to be covered during the course. He/she understands normal nutrition, the metabolic responses to stress and injury, and normal wound healing.

III. Methods

1. Patient Evaluation and Management

Each student will be assigned to one five-week block rotation based on their preference list. The rotations include general surgery and surgical oncology. The students will evaluate patients in the outpatient setting as well as take part in their operations and follow them post-operatively in both the inpatient and outpatient settings.

2. Patient Work-ups/Presentations

Each student should complete a minimum of one full work-up per week and present the patient to their preceptor at a time arranged convenient to the student(s) and preceptor. In most cases, the patient will be inpatient to allow adequate time for work-up. An outpatient with a straightforward problem, such as breast lump, hernia, or gallbladder disease, may also be appropriate for work-up in clinic if it does not interfere with the flow of patients in the clinic. The student is encouraged to seek as much variety as possible in the work-ups and to emphasize patients with common rather than esoteric problems.

The patient will be presented to the preceptor along with the work-up submitted for evaluation. The work-up should include the standard sections as well as a brief plan of management, discussion of the diagnosis and plan, and should cite at least two primary references (not textbook) appropriate for the patient’s chief problem. The student will be responsible for reading about the patient’s problem in sufficient degree to participate in a give-and-take discussion with the preceptor when the case is presented.

3. Teaching Sessions

Teaching sessions are scheduled on Mondays from 8:45-4:30 to cover what the faculty considers to be the most important or common topics and problems in surgery. Some lectures have been recorded on video and viewing these is the student’s responsibility unless covered in a live lecture. The student is expected to have read the appropriate background material before the class, as several of the sessions are interactive, problem-solving sessions rather than lectures. The faculty in charge of the session may survey the students’ degree of preparation at any time. Students have two hours of group or individual study time built into their lecture days.
4. Teaching Rounds

The students will attend Surgical Department Grand Rounds and Morbidity and Mortality Review weekly when available. In these conferences they can obtain up-to-the-minute information and gain insight into the peer review process as well as learn about complications in surgical patients and why they occur.

5. Student-Led Seminar

Each student will research and present a portion of one teaching session during the last two weeks of the course in the block from 0845-1630. The student is responsible, with the guidance of his/her preceptor, for a 15 minute PowerPoint presentation on a specific topic. A list of acceptable topics will be available prior to the start of the rotation. Research on the topic should include not only texts, but also search of the primary literature using computer searching techniques. A bibliography should be included for the rest of the class at the time of presentation.

6. Wise-MD Modules

All OHSU medical students will have access to topic modules using the Wise-MD system. Students will be expected to complete all of the assigned modules. Completion of all modules will count towards 5% of the total student grade. A portion of the final exam questions will be based on the WISE-MD modules. An information sheet with required modules and instructions can be found on Sakai.

7. Call

Students will be required to take five nights of call with at least one night being a weekend night (Friday or Saturday). At OHSU and the VA, call will be a continuous week and will include at least one Friday or Saturday night over the five weeks. At sites off OHSU campus, call will be either “in-house” or home call. Please see the call information document for details.

IV. Assessment

Students will be assessed on their performance during the clinical rotation, the case presentations, seminar presentations, Wise MD, and a multiple choice and essay exam given on the last day of the course. The multiple choice exam will be the NBME surgery “shelf” exam. The essay exams will require clinical problem-solving as well as factual knowledge. Direct observation will be used for assessments of performance including knowledge, skills, and attitudes. The clinical assessments will also encompass problem-solving ability, ability to act and learn independently, and improvement during the course.

V. Grading

Grading will be based on clinical evaluation (35%), multiple choice exam (35%), seminar evaluation (10%), preceptor evaluation (15%), and WiseMD modules (5%). A total score of at least 85 points is required for an Honors grade, 79 points for a Near Honors grade, and 60 points is required for a Satisfactory grade. A score below 60 points will result in a failing grade and will require remediation. In order to be eligible for honors, you must score at least 73 on your exam. You MUST obtain the exact number of points to obtain the above grades. Higher grades will not be awarded for missing grades by even fractions of a point. However, one essay question, worth up to two points is also available. These bonus points will be applied toward either your exam points or your final points, but not both. Should you miss the grade cutoff by fractions of a point, we do make a note of this on your Dean’s Letter. A score of 59
must be obtained on the exam in order to pass the rotation. Students not obtaining a passing score on the exam or the rotation will need to complete a remedial plan.

VI. Required Reading

Lawrence, Peter F (ed), **Essentials of General Surgery**, Williams & Wilkins

The advantages of this text are that it matches the objectives of the course, is short and readable, and is designed specifically for a surgery clerkship for medical students. The disadvantage is that it does not include chapters on anesthesia, plastic surgery, cardiothoracic surgery, urology, and orthopedics. This text should serve as a basis for studying general surgery topics during the rotation.

*On reserve in the library.*

VII. Recommended References


   This excellent current book includes both a basic science review as well as clinical information in each chapter. It is very complete and has the most recent date of publication. This text is recommended for reference and is not realistic for “cover to cover” reading during the 5 week rotation.

   *In reference section of the library.*

2. Doherty, Gerard, **Current Surgical Diagnosis and Treatment**, McGraw-Hill Medical,

   The advantages of this text are that it is more complete, with chapters in subject areas not included in the Lawrence text. However, it is more difficult to match the reading specifically to the course objectives. This text is useful for studying specific topics in depth.

   *In reference section of the library.*
Fourth Year Student Surgical Rotations (Surgery 709)

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I. Introduction

The student will spend four weeks on a surgical service functioning as a part of the ward team and taking call (no more frequently than every third night). Students will be expected to participate fully in every aspect of the team’s activities. They will function as a sub-intern and will be expected to be pro-active in their learning.

II. Prerequisite

The student must have successfully completed Surgery 720. Surgery Sub-Specialty should be taken as a senior. Juniors may take the course only with permission obtained from the course director.

III. Goals

The general course goals and the instructional techniques employed to gain them are as follows:

1. To learn the principles of preoperative and postoperative care through direct involvement with care of patients.

2. To observe correlations between the clinical presentation and findings at surgery through direct participation in the operating room.

3. To improve skills and efficiency in the care of patients through direct responsibility for patients as an acting intern.

4. To improve interactive skills with other healthcare professionals by working as an integral member of a surgical team.

IV. Assumptions

The student has learned normal anatomy, is familiar with normal physiology, and knows the pathology of the common diseases to be covered during the course. They should understand normal nutrition, the metabolic responses to stress and injury, and normal wound healing. They should know how to do two-handed knots and have some experience with one-handed knots. They can independently scrub in for a case. They are able to take a History and Physical, contemplate a diagnosis, present the patient for review, and follow the patient through care.

V. Assessment and Grades

Students will be assessed by the faculty and residents on the rotating service. The grade will be based on the student’s clinical performance including knowledge, skills, and attitudes. There will be no common course examination at the end of the course. Services may individually require oral and/or written examinations, formal presentations, or papers at their discretion. The individual services may choose to base the grades partially on required examinations or presentations as noted above. Students can expect to receive completed grades within 5 weeks of completion of the rotation.
VI. Electives

Students may choose from the following list of services:

- Abdominal Organ Transplantation – OHSU
- Burns/General Surgery – Emanuel
- Cardiothoracic Surgery – OHSU
- Colorectal Surgery - Kaiser
- General Surgery – OHSU (Blue, Red, Green), VAMC, St. Vincent
- General Surgery Rural – Coos Bay, Eugene, Gold Beach, Grants Pass
- Minimally Invasive Surgery - Providence
- Pediatric Surgery – OHSU
- Plastic and Reconstructive Surgery – OHSU, VAMC
- Surgery Preceptorship – OHSU
- Surgery Research – OHSU
- Surgical ICU – OHSU, VAMC
- Surgical Nutrition – OHSU
- Surgical Oncology - OHSU
- Transition to Surgical Internship - OHSU
- Trauma – Emanuel
- Trauma ICU - OHSU
- Vascular Surgery – OHSU, VAMC