



Department of Orthopaedics and Rehabilitation

Rotation-Specific Objectives for Resident Education	
Rotation:	Foot & Ankle
Resident Year-In-Training:	PGY3

Attending Physicians

1. James Meeker, MD

Orthopedic Surgeon, ABOS Board Eligible
Fellowship: Foot & Ankle, Trauma

2. Bettricia Otto, DPM

Podiatrist, ABPS Board Certified in forefoot surgery, board eligible in rearfoot surgery

Specific Objectives for the Foot and Ankle Rotation Service

By the end of the foot and ankle rotation, the resident will know and be able to:

1. Workup and present a patient with a foot/ankle problem specifying the working diagnosis, additional studies to confirm or change the diagnosis, the treatment alternatives and expected outcome. This includes demonstrating the ability to take a detailed history and perform an accurate foot and ankle exam.
2. Recognize and take into account the lower extremity angular and rotational alignment, foot type, footwear, relevant biomechanics, and lifestyle.
3. Prescribe an appropriate orthotics/prosthetics and shoe wear modifications.
4. Describe the natural history of the patient's problem if untreated, treated non-operatively and treated operatively.
5. Describe appropriate nonoperative and operative treatment of the diabetic foot.
6. Correctly assist and apply dressings, splints, and casts for protecting injuries and postoperative conditions.
7. Perform local anesthesia to include: ankle, metatarsal and digital blocks; field local infiltration; joint injection for pain localization.
8. Demonstrate pre-op readiness by specifying the following for each case:
 - Surgical indications and goals
 - Incision, approach relevant anatomy and step-by-step procedure
 - Three-dimensional considerations
 - Expected difficulties and potential pitfalls
 - Contingency plans
 - Criteria of acceptable result

9. Perform and assist surgical procedures for common foot and ankle problems: hammertoe, bunions, tendon xfers, ankle subtalar and single joint fusions, excision of OCD's, osteotomies, ankle ligament reconstruction, removal of hardware, diabetic foot.
10. List the equipment needed for all the basic procedures and demonstrate the ability to correctly review the completeness of this equipment before starting a procedure.
11. Demonstrate attention to detail in followup for postoperative patients.
12. Recognize the postop foot/ankle in trouble.
13. Demonstrate the ability to recognize and initiate treatment of complications
14. Critique foot and ankle literature at the department and foot/ankle journal clubs.

Foot and Ankle Rotation - Specific Objectives

At OHSU, the orthopaedic residents work primarily with one full-time university-based foot and ankle orthopaedic surgeon. Additional direct experience will occur with the podiatrist.

Current Rotation: 1 resident (PGY3) spends 10 weeks dedicated to the Foot&Ankle service. This rotation encompasses a 5-day week. Each resident spends time (10-20% or 0.5-1 days/week) dedicated to service-related educational activity and self-study (e.g. preparing conferences, review cases records, independent study and research investigations).

Current Rotation Schedule

Monday: OR
Tuesday: Clinic
Wednesday: OR
Thursday: Clinic
Friday: Clinic AM, OR PM

Interpersonal and Communications Skills

Residents will, at all times, demonstrate behavior that is beyond reproach. Residents must be able to demonstrate interpersonal and communications skills that result in effective information exchange and teaming with patients, patient's families, and professional associates. Residents are expected to:

- Demonstrate honest, open, civil, and effective communication with patients, staff, and colleagues (medical students, residents & attendings).
- Create and sustain a therapeutic and ethically sound relationship with patients
- Use effective listening skills Elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills
- Work effectively with others as a member or leader of a health care team or other professional group

Practice-Based Learning and Improvement

Residents must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices. Residents are expected to:

- Analyze practice experience and perform practice-based improvement activities using a systematic methodology.
- Locate, appraise, and assimilate evidence from scientific studies related to their patients' health problems.
- Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness.
- Use information technology to manage information, access on-line medical information, and support their own education.
- Facilitate the learning of students and other healthcare professionals.

Professionalism

Residents must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population. Residents are expected to:

- Demonstrate respect, compassion, and integrity
- A responsiveness to the needs of patients and society that supercedes self-interest
- Accountability to patients, society, and the profession
- Commitment to excellence and on-going professional development
- Demonstrate a commitment to ethical principles pertaining to:
 - Provision or withholding of clinical care,
 - Confidentiality of patient information
 - Informed consent
 - Business practices
- Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities

Systems-Based Practice

Residents must demonstrate an awareness of and responsiveness to the larger context and system of healthcare and the ability to effectively call on system resources to provide care that is of optimal value. Residents are expected to:

- Understand how their patient care and other professional practices affect other health care professionals, the health care organization, and the larger society and how these elements of the system affect their own practice
- Know how types of medical practice and delivery systems differ from one another, including methods of controlling health care costs and allocating resources
- Practice cost-effective health care and resource allocation that does not compromise quality of care

- Advocate for quality patient care and assist patients in dealing with system complexities
- Know how to partner with health care managers and health care providers to assess, coordinate, and improve health care and know how these activities can affect system performance

Medical Knowledge

Residents must demonstrate knowledge about established and evolving biomedical, clinical, and cognate (e.g. epidemiological) sciences and the application of this knowledge to patient care. Residents are expected to:

- Demonstrate an investigatory and analytic thinking approach to clinical situations
- Know and apply the basic and clinically supportive sciences which are appropriate to foot and ankle surgery

Patient Care

Residents must be able to provide care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Residents are expected to:

- Communicate effectively and demonstrate caring and respectful behaviors when interacting with patients and their families
- Gather essential and accurate information about the patient
- Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment.
- Develop and carry out patient management plans, counsel and educate patients and their families.
- Use information technology to support patient care decisions and patient education.
- Perform competently all invasive procedures considered essential in foot and ankle practice.
- Provide health care services aimed at preventing health problems or maintaining health work with health care professionals, including those from other disciplines, to provide patient-focused care.

Reading and Reference List

International Journal of Foot and Ankle Surgery
Surgery of the Foot and Ankle - Mann/Coughlin
OKU - Foot and Ankle
Functional Reconstruction/Foot and Ankle - Hansen
Disorder of the Foot and Ankle - Jahss
Foot and Ankle Disorders - Myerson
 Modified from Fred Lippert - *Orthopaedic Educator's Course*