



### Educational Goals and Objectives for Rotations on: General Surgery/Acute Care Surgery/ Consult Service (General Surgery-Red Surgery Service)

#### Goal

The goal of the Red Surgery Service is to develop the knowledge, skills, and attitudes necessary to evaluate, diagnose, and manage the general surgical patient with emphasis on the acute care surgery patient. This is comprised of general surgery, emergency general surgery, complex tertiary surgical cases, complex re-operative surgical cases, or patients in shock states from acute surgical illness.

Objectives for PGY-1: At the end of the PGY-1, residents will:

Patient Care

- Participate in the evaluation, diagnosis, and development of the peri-operative management plan for complex tertiary and re-operative general surgery and emergency surgery patients, as well as elective general surgery patients, and be given graded responsibilities in the perioperative and operative management of these patients.
- Evaluate patients with surgical and non-surgical disease.
- Conduct preoperative assessment of surgical patients.
- Participate in the physiologic management of patients with acute and chronic pancreatitis, pancreatic fistulas, entero-cutaneous fistulas, severe sepsis and septic shock secondary to surgical infection, and manage the derangements that occur throughout the course of these complex tertiary patients.
- Perform operative procedures that may include the management of the re-operative abdomen, complex recurrent hernia with loss of domain that may require complex abdominal wall reconstruction, with attending supervision per the Resident Supervision Policy. The type of case and level of responsibility in each case will be determined by the level and the experience of the resident.
- Participate in the resuscitation of acutely ill surgical patients with graded responsibilities to help improve the skills needed for early resuscitation and management.
- Participate in the management of physiologic problems that occur in the acutely ill surgical patient throughout their course of illness.
- Perform operative procedures which may include: cricothyroidotomy, tracheostomy, gastrostomy, jejunostomy, herniorrhaphy, appendectomy, amputation, and laparoscopy with attending supervision per the Resident Supervision Policy. The type of case and level of responsibility in each case will be determined by the level and the experience of the resident.
- Gain experience suturing of simple and complex skin lacerations.
- Develop knowledge and skills in the principles of pre-operative assessment, operative intervention, and follow-up in patients presenting with a wide variety of surgical diseases.
- Learn the principles of resuscitation, rapid diagnosis, interpretation of clinical findings, laboratory values, and radiologic results in the emergency department setting.





- Formulate a management plan based upon patient assessment, laboratory studies, and diagnostic test results. Assist in carrying out the management plan.
- Attend and participate in at least 2 clinic sessions per week.
- Attend and present service patients at Morbidity and Mortality conference.
- Attend and present service patients at weekly Tumor Board.
- Attend, participate, and present at service specific Thursday afternoon didactic conferences.
- Perform minor out-patient procedures that are frequently done in the clinic area.

## Medical Knowledge

- Medical knowledge about established and evolving biomedical, clinical and cognate \*e.g. epidemiological and social behavioral) sciences and the application of this knowledge to patient care.
- Develop an understanding of pathophysiology and associated physical and radiologic findings in the acutely ill or traumatized patient.
- Become knowledgeable in the physiology of pre- and post-operative care, including management of fluid and electrolytes, nutrition and wound healing.
- Learn knowledge and skills associated with being involved in the acute and critical care phase of patient management with attending supervision and graduated responsibility per resident supervision policy.
- Develop a knowledgebase including the etiologic and pathologic basis of various disease processes as well as the physiologic basis of fluid and electrolytes, wound healing, nutrition, and organ function (cardiac, pulmonary, renal, gastrointestinal, and endocrine).
- Attend conferences including morning report, Morbidity and Mortality conference, Surgical Grand Rounds, and service-specific conferences.

# Practice-based Learning and Improvement

- Assimilate scientific evidence into patient care.
- Recognize the need for improvement in one's own medical knowledge, surgical skills, and patient care.
- Participate in Journal Club.
- Participate in Morbidity and Mortality conference

### Professionalism

- Participate in the evaluation of patients requiring emergency department consultation.
- Learn the "team concept" of acute care surgery.
- Conduct himself/herself respectfully, altruistically, and ethically.
- Practice patient- and family-centered care.
- Demonstrate sensitivity to family, cultural, ethnic, age, gender, and community issues during interactions with patients, families, and members of the healthcare team.



### Interpersonal and Communication Skills

- Participate in the evaluation of patients requiring emergency department consultation.
- Be the primary presenters of all emergency department treat-and-release patients.
- Present patients in a logical and concise manner.
- Effectively listen to patients and families.
- Communicate effectively with patients and families, avoiding technical terms and jargon.
- Demonstrate effective communication in counseling patients for surgery.
- Learn to communicate "good" or "bad" news to patients and family.
- Learn to communicate and function effectively and appropriately with a surgical team.
- Demonstrate effective communication when discussing new consults with referring physician in clinic and on the wards.
- Maintain orderly electronic medical records and transfer notes.
- Practice effective and efficient sign-outs to on-call residents.

## Systems-based Practice

- Recognize the roles and responsibilities of the surgeon in relation to those of physicians and surgeons in other disciplines and specialties, pathologists, nurses, anesthesiologists, advance nurse practitioners, physician assistants, pharmacists, and administration.
- Evaluate surgical disease with attention to various diagnostic tests and modalities that are used to define the type and extent of the pathology, which will determine the need of surgical intervention.