

# EDUCATIONAL GOALS AND OBJECTIVES FOR ROTATIONS ON: GENERAL SURGERY WITH EMPHASIS ON GI SURGERY/FOREGUT AND ADVANCED MINIMALLY INVASIVE SURGERY AND ENDOCRINE SURGERY (GENERAL SURGERY-BLUE SURGERY SERVICE)

### Goal

The goal of the Blue Surgery Service is to continue overall objectives of general surgery with an emphasis on laparoscopy, foregut, upper endoscopy and endocrine surgery to develop the knowledge, skills, and attitudes necessary to evaluate, diagnose, treat, and manage general surgery patients in these areas. Objectives will be assessed in terms of clinical knowledge, interpersonal qualities, and operative skills though evaluations by faculty, peers, students and nursing staff.

Objectives for PGY-5 Residents: At the end of the rotation, PGY-5 residents will:

#### Patient Care

- Lead a team that cares for patients with core and advanced conditions in the SCORE curriculum.
  - o Achalasia
  - o Dysphagia
  - o Esophageal neoplasm-benign, malignant
  - Esophageal perforation—iatrogenic
  - o Gastroesophageal reflux/barrett's esophagus
  - o Hiatal hernias
  - o Mallory-weiss syndrome
  - Esophageal stricture
  - o Gastric adenocarcinoma
  - o Gastric bezoars and foreign bodies
  - Gastrointestinal bleeding—upper
  - o GIST and other gastric neoplasms
  - Peptic ulcer disease
  - Stress gastritis
  - o Aeordigestive tract foreign bodies
  - o Adrenal mass—incidental
  - o Hyperaldosteronism
  - o Hypercorisolism/Cushing
  - o Hyperparathyroidism
  - o Hypothyroidism
  - o Pheochromocytoma
  - Thyroid cancer
  - o Thyroid nodule

- o Thyroiditis
- MIS equipment and troubleshooting
- o Physiologic changes associated with pneumoperitoneum
- Principles and techniques of abdominal access
- o Esophageal caustic ingestion and foreign bodies
- Esophageal diverticula
- o Esophageal motility disorders other than achalasia
- o Esophageal perforation—spontaneous
- o Gastroparesis
- Postgastectomy syndromes
- o Adrenal cancer
- o Multiple endocrine neoplasias
- Parathyroid cancer
- Delegate appropriate clinical tasks to other health care team members.
- Recognize atypical presentations of a large number of surgical conditions.
- Lead a team while providing supervision in the evaluation and management of complex postoperative problems such as sepsis, systemic inflammatory response syndrome, and multiple system organ failure.
- Demonstrate proficiency in use of instruments and equipement required for essential operations, guides conduct of most operations and makes independent intraoperative decisions.
- Perform most of the core operations and have significant experience in the advanced operations.
  - Antireflux procedures
  - o Gastrectomy-partial, total
  - o Gastroduodenal perforation repair
  - o Gastrostomy
  - Vagotomy and drainage
  - o Esophagogastroduodenoscopy
  - o Parathyroidectomy
  - Thyroidectomy—partial, total
  - Cricopharyngeal myotomy with zenker's diverticulum—excision
  - o Esophageal perforation-repair, resection
  - o Esophagectomy/esophagogastrectomy
  - Heller esophagomyotomy
  - Paraesophageal hernia repair—laparoscopic, open
  - o Postgastrectomy syndromes—revisional procedures
  - o Adrenalectomy
  - Ultrasound of the thyroid
- Effectively guide other residents in core operations.

### Medical Knowledge

- Have a comprehensive knowledge of the varying patterns of presentation and alternative and adjuvant treatments for the core diseases in the SCORE curriculum, as well as make the diagnosis and provide initial care for the advanced diseases in the SCORE curriculum.
  - o Achalasia
  - o Dysphagia
  - o Esophageal neoplasm—benign, malignant
  - Esophageal perforation—iatrogenic
  - o Gastroesophageal reflux/barrett's esophagus
  - o Hiatal hernias
  - o Mallory-weiss syndrome
  - Esophageal stricture
  - o Gastric adenocarcinoma
  - o Gastric bezoars and foreign bodies
  - Gastrointestinal bleeding—upper
  - o GIST and other gastric neoplasms
  - o Peptic ulcer disease
  - Stress gastritis
  - o Aeordigestive tract foreign bodies
  - Adrenal mass—incidental
  - Hyperaldosteronism
  - o Hypercorisolism/Cushing
  - o Hyperparathyroidism
  - Hypothyroidism
  - o Pheochromocytoma
  - o Thyroid cancer
  - o Thyroid nodule
  - o Thyroiditis
  - MIS equipment and troubleshooting
  - o Physiologic changes associated with pneumoperitoneum
  - o Principles and techniques of abdominal access
  - Esophageal caustic ingestion and foreign bodies
  - Esophageal diverticula
  - o Esophageal motility disorders other than achalasia
  - Esophageal perforation—spontaneous
  - o Gastroparesis
  - o Postgastectomy syndromes
  - o Adrenal cancer
  - Multiple endocrine neoplasias

- Parathyroid cancer
- Have comprehensive level of knowledge of the operative steps, perioperative care, and postoperative complications for the core operations in the SCORE curriculum with a basic knowledge of many of the advanced operations.
  - Antireflux procedures
  - Gastrectomy—partial, total
  - o Gastroduodenal perforation repair
  - o Gastrostomy
  - Vagotomy and drainage
  - o Esophagogastroduodenoscopy
  - Parathyroidectomy
  - Thyroidectomy—partial, total
  - o Cricopharyngeal myotomy with zenker's diverticulum-excision
  - o Esophageal perforation-repair, resection
  - o Esophagectomy/esophagogastrectomy
  - Heller esophagomyotomy
  - Paraesophageal hernia repair—laparoscopic, open
  - o Postgastrectomy syndromes—revisional procedures
  - o Adrenalectomy
  - Ultrasound of the thyroid

# Practice-based Learning and Improvement

- Recognize teachable moments and readily and respectfully engage the learner.
- Be a highly effective teacher with an interactive educational style.
- Engage in constructive educational dialogue.
- Facilitate conferences and case discussions based on assimilation of evidence from the literature.
- Attend conferences including Morbidity and Mortality conference.
- Present and participate in multidisciplinary management of cancers, including Tumor Conference, GI Surgery Conference, and Pathology Review.
- Participate in local, regional, national activities including optional conferences and/or self-assessment programs.
- Demonstrate use of a system or process for keeping up with changes in the literature.
- Initiate assignments for other learners.
- Lead surgical skills experiences for students and residents and participate in skills curriculum development.
- Exhibit on-going self evaluation and improvement that includes reflection on practice, tracking and analyzing patient outcomes, integrating evidence-based practice guidelines, and identifying opportunities to make practice improvements.

- Discuss and/or demonstrate application of M&M and/or other QI conference conclusions to own patient care.
- Lead a QI activity relevant to patient care outcomes.
- Complete the requirements of the robotic curriculum.

### Professionalism

- Serve as a role model for ethical behavior.
- Positively influence others by assertively modeling professionalism.
- Consistently place the interest of patients ahead of self interests when appropriate.
- Promote a healthy work environment.
- Recognize and appropriately address personal health issues in other members of the care team.
- Be proactive in modifying schedule or intervening in other ways to assure that those caregivers under their supervision maintain personal wellness and do not compromise patient safety.
- Set an example for conference attendance, promptness, and attention to assigned tasks.

#### Interpersonal and Communication Skills

- Customize emotionally difficult information.
- Be capable of negotiating and managing conflict among patients and their families.
- Assume overall leadership of a health care team responsible for their patients while also seeking and valuing input from the members of the team.
- Negotiate and manage conflict among care providers.
- Take responsibility for ensuring that clear hand-offs are given at transitions of care.
- Be capable of leadership with unexpected events occur in the operating room.
- Be able to communicate effectively with the family when unexpected events occur in the operating room.

# Systems-based Practice

- Coordinate the activities of residents, nurses, social workers, and other health care professionals to provide optimal care to the patient at the time of discharge or transfer, and to provide post-discharge ambulatory care that is appropriate for the patient's particular needs.
- Participate in work groups or performance improvement teams designed to reduce errors and improve health outcomes.
- Understand the appropriate use of standardized approaches to care and participates in creating such protocols of care.