This service exposes the third and first year residents to a broad spectrum of general surgery with specific emphasis on emergency presentations, critical care, and surgical problems presenting at night. Residents will be available for ER presentations, new admissions, and in house consultation/ intervention with surgical patients on other services to evaluate clinical changes, perform urgent or emergent procedures, or provide support in whatever manner necessary.

**General Goals and Objectives**

**Patient Care**
Residents must be able to provide patient 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 their patients.
- Make informed decisions about diagnostic and therapeutic interventions based on patients 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 medical and invasive procedures considered essential for the area of 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.

**Medical Knowledge**
Residents must demonstrate 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. 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 their discipline.

**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.
- Obtain and use information about their own population of patients and the larger population from which their patients are drawn.
- 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 health care professionals.

**Interpersonal and Communication Skills**
Residents must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients’ families, and professional associates. Residents are expected to:

- Create and sustain a therapeutic and ethically sound relationship with patients.
- Use effective listening skills and 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.

**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 which supersedes self-interest; accountability to patients, society, and the profession; and a commitment to excellence and on-going professional development
- Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality or patient information informed consent, and business practices
- Demonstrate sensitivity and responsiveness to patients’ culture, age, gender, and disabilities

**Systems-Based Practice**
Residents must demonstrate and awareness of and responsiveness to the larger context and system of health care 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 patient 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

**Specific Goals, Objectives & Responsibilities**

**First Year Resident**

**Goals:**

- Obtain experience in the initial evaluation, operative, and perioperative care of general surgery patients with specific emphasis on new admissions, acute problems, and emergencies.
- Develop cognitive skills commensurate with level of training specifically in the area of surgical critical care and evaluation of acute problems.
- Develop skills in interpretation of radiology data relating to surgical patient care.
- Develop technical skills commensurate with level of training.
- Develop surgical judgment commensurate with level of training.
- Begin or make progress on research assignments.

**Objectives**

**Cognitive Skills**

- Assist in Trauma if needed
- Perform thorough History & Physical
- Responsible for evaluation of ER patients when surgical consultation has been requested.
- Responsible for in-house hospital consultations.
- Responsible for evaluation of patients with acute changes or problems on other teaching panel surgical patients.
- Responsible for management of complicated surgical critical care patients with attending as back up.
- Develop skills of triage and time management.
- Confirm clinical suspicion with pathology by following patient through initial evaluation through operative intervention
- Total responsibility for perioperative management of patients until transfer to scheduled service with attending as backup.
- Provide appropriate transfer of patient to scheduled service.

**Technical Skills**

- Become proficient in procedures to include placement of arterial catheter, central venous catheter, and lumen dialysis catheter, Swan-Gantz catheter, chest tube insertion, endoscopy for acute problems.
- Perform procedures as necessary for the evaluation and management of critically ill surgical patients.
- Perform as primary surgeon for minor and major operations depending on ability.
• Provide working interpretation of radiology data with follow up confirmation of findings by radiologist in the evaluation and management of surgical patients. This will include interpretation of CXR, Abdominal series x-rays, CA contrast studies, CT scans of the head, chest, abdomen, pelvis, and angiography.
• Develop enough skill in interpretation of radiology data to be able to intervene without radiologist's interpretation when necessary.

**Surgical Judgment**

• Evaluate patients with urgent problems determining differential diagnosis, appropriate diagnostic and laboratory studies, and appropriate initial and extended therapy.
• Develop a working diagnosis and proceed with evaluation and initial treatment plan of acute and critical surgical patients.
• In-depth knowledge of surgical anatomy for the procedures being performed.
• In-depth knowledge of the indications, contraindications, risks, and alternatives of the procedures being performed.

**Third Year Resident**

**Goals:**

• Obtain experience in the initial evaluation, operative, and perioperative care of general surgery patients with specific emphasis on new admissions, acute problems, and emergencies.
• Develop cognitive skills commensurate with level of training specifically in the area of surgical critical care and evaluation of acute problems.
• Develop skills in interpretation of radiology data relating to surgical patient care.
• Develop technical skills commensurate with level of training.
• Develop surgical judgment commensurate with level of training.
• Begin or make progress on research assignments.

**Objectives**

**Cognitive Skills**

• In charge of making sure service runs smoothly
• Perform thorough History & Physical
• Responsible for evaluation of ER patients when surgical consultation has been requested.
• Responsible for in-house hospital consultations.
• Responsible for evaluation of patients with acute changes or problems on other teaching panel surgical patients.
• Responsible for management of complicated surgical critical care patients with attending as back up.
• Develop skills of triage and time management.
• Confirm clinical suspicion with pathology by following patient through initial evaluation through operative intervention
• Total responsibility for perioperative management of patients until transfer to scheduled service with attending as backup.
• Provide appropriate transfer of patient to scheduled service.

**Technical Skills**

• Review radiology films with the first year resident to increase their skills in interpretation of this data
• Become proficient in procedures to include placement of arterial catheter, central venous catheter, and lumen dialysis catheter, Swan-Gantz catheter, chest tube insertion, endoscopy for acute problems.
• Perform procedures as necessary for the evaluation and management of critically ill surgical patients.
• Perform as primary surgeon for minor and major operations depending on ability.
• Provide working interpretation of radiology data with follow up confirmation of findings by radiologist in the evaluation and management of surgical patients. This will include interpretation of CXR, Abdominal series x-rays, CA contrast studies, CT scans of the head, chest, abdomen, pelvis, and angiography.
• Develop enough skill in interpretation of radiology data to be able to intervene without radiologist's interpretation when necessary.

**Surgical Judgment**

• Evaluate patients with urgent problems determining differential diagnosis, appropriate diagnostic and laboratory studies, and appropriate initial and extended therapy.
• Develop a working diagnosis and proceed with evaluation and initial treatment plan of acute and critical surgical patients.
• In-depth knowledge of surgical anatomy for the procedures being performed.
• In-depth knowledge of the indications, contraindications, risks, and alternatives of the procedures being performed.