Revised: 6/29/07 Reviewed 6/29/07

Rotation Title: OR Manager (Perioperative Medicine)

I. Definition: The OR manager rotation is a 1 to 3 month elective available in the CA-3 year for those residents choosing the advanced clinical tract. The elective focuses on developing skill in management of the perioperative aspects of anesthesia, including the preoperative evaluation and care, intraoperative care and postoperative management of the patient.

II. Curriculum: The service combines the clinical care and academic skills of patient care for preanesthesia testing, postanesthesia care unit (P ACU) and the anesthesia consultation service. All patient care is supervised by faculty with combined education and clinical supervision.

III. Performance Assessments:

A. Self Assessment
You (the resident) are to check off each criterion as the material is mastered. Self reflection on your own competencies is critical.

B. Faculty Assessment
Faculty will periodically review your self assessment and discuss their assessments of your competencies. The overall scores on the six competencies will be reported to you at least weekly.

C. Mentor Assessment
Your mentor should meet with you quarterly and review your entire portfolio. The mentor should report areas in which you have deficiencies (for your level of training). This report may be to you and/or to the program director as determined by your mentor.

IV. Competencies Assessed (Performance Criteria):

A. Patient Care: During the course of this rotation, the resident is expected to show increasing competency in each of the following …

1. Comprehensive preoperative assessment of the patient
2. Extraction of all relevant information from the electronic and paper records for preoperative testing
3. Ordering of appropriate preoperative testing
4. Presention of comprehensive anesthetic plans for multiple patients
5. The anesthesiology consult
6. Intraoperative skills including
   a. Placement and monitoring of central lines
   b. Placement and interpretation of TEE
   c. Preparation of the complex patient for surgery
   d. Supervision of medical students and CA-1 anesthesia residents
7. Comprehensive management of patients in the PACU including but not limited to …
   a. Recognition and treatment of common and rare PACU events
   b. Management of the hemodynamically unstable PACU patient
   c. Management of cardiorespiratory failure
   d. Neurologic care of the PACU patient
   e. Pain management in PACU
   f. Management of the pediatric patient

B. Medical Knowledge: During the course of this rotation, the resident is expected to show increasing competency in each of the following …

1. Pathophysiology of common and uncommon disease states, particularly those with implications on anesthetic care
2. Pharmacology of all anesthetic drugs
3. Pharmacology of non-anesthetic drugs which influence the administration of anesthesia
4. Knowledge of anatomy pertaining to regional as well as general anesthesia

The CA-3 resident on their perioperative medicine rotation shall be responsible for mastering all material listed in Appendix A. These will be assessed by written and oral examinations.

C. Practice Based Learning and Improvement: During the course of this rotation, the resident is expected to show increasing competency in each of the following …

1. Evaluating the results of anesthesia on patient care
2. The rapid access to medical records and pertinent literature

D. Interpersonal and Communication Skills: During the course of this rotation, the resident is expected to show increasing competency in each of the following …

1. Ensure the coordination of anesthesia personnel in running an efficient surgery schedule
2. Demonstrate skills in communicating patient issues with the surgical team
3. Demonstrate skills in anesthesiology consultation by communication with appropriate services and anesthesiology staff
4. Communicate acute events and complications to the appropriate staff anesthesiology and surgical service
5. Appropriately consult physicians in other health care systems as needed
6. Understand the management of external medical records
7. Understand all elements of electronic medical records

E. Professionalism: During the course of this rotation, the resident is expected to show increasing competency in each of the following …

1. Working with all personnel to help run the OR efficiency
2. Communicating with the patient so they feel their care is excellent
3. Being respectful of other physicians and health care workers
4. Demonstrating skill in dealing with the angry surgeon or angry patient
5. Setting examples for others by demonstrating teamwork
6. Maintaining confidentiality at all times
7. Demonstrate ethical skills in handling serious illness

F. Systems-Based Practice: During the course of this rotation, the resident is expected to show increasing competency in each of the following …

1. The benefit of an efficient OR to the health care system
2. The impact of PACU stay on the flow-through of patients in the hospital
3. The cost benefits of a timely preoperative evaluation

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Appendix A: Medical Knowledge expected to be mastered during CA-3 Perioperative Medicine Rotation

Lecture 46

Anesthetic Complications: Chronic Exposure and Temperature Considerations

1) Effects on Fertility
2) Teratogenicity
3) Carcinogenicity
4) Scavenging systems and requirements
5) Temperature Changes during Anesthesia
   a) hypothermia: etiology, prevention, treatment, complications (shivering, O_2 consumption), prognosis
   b) nonmalignant hyperthermia; complications, treatment

Lecture 50

Anesthesia at Altered Altitudes

1) Hyperbaric Oxygen and Anesthesia Care
2) High Altitude Anesthesia

Lecture 59

Obstructive Respiratory Disease

1) upper airway: congenital, infectious, neoplastic, traumatic, foreign body, obstructive sleep apnea
2) tracheobronchial: congenital, infectious, neoplastic, traumatic, foreign body
3) parenchymal: asthma, bronchitis, emphysema, lung abscess, bronchiectasis, cystic fibrosis, mediastinal masses

Lecture 60

Restrictive Respiratory Disease

1) neurologic: CNS depression, spinal cord dysfunction, peripheral nervous system
2) musculoskeletal: muscular, skeletal, obesity, chest trauma
3) parenchymal: atelectasis, pneumonia, interstitial pneumonitis, pulmonary fibrosis, respiratory distress syndrome (ARDS), bronchopulmonary dysplasia
4) pleural and mediastinal: pneumo-, hemo-, and chylothorax, pleural effusion, empyema, bronchopleural fistula
5) other: pain, abdominal distention

Lecture 63

Perioperative Management of Respiratory Disease

1) monitoring
2) choice of anesthesia
3) anesthetic techniques: nonpulmonary surgery, thoracic and pulmonary surgery, one-lung ventilation, lung transplantation, thorascopic surgery
4) postoperative care: pain management, respiratory therapy, ventilator support, extubation criteria
5) lung transplantation: anesthetic implications

Lecture 85

Peripheral Circulatory Failure

1) etiology, classification, pathophysiology
2) anesthetic management of patient in shock
3) sepsis, Systemic Inflammatory Response Syndrome (SIRS), multiple organ failure (MOF)

Lecture 157

Anesthesia for Ophthalmologic Surgery

1) retrobulbar and peribulbar block
2) open eye injuries

Lecture 159

Anesthesia for Trauma, Burn Management, Mass Casualty, Biological/Chemical Warfare

Lecture 162

Anesthesia for Radiologic Procedures

1) CT Scan: Anesthetic Implications/Management
2) MRI: Anesthetic Implications/Management
3) Anesthesia In Locations Outside The Operating Rooms