

# Colon and Rectal Surgery Fellowship

**Institution:** Vanderbilt Medical Center

**Duration:** 1 year

**Supervising Physician:** Molly Ford

**Contact Information:** 615-343-4612

**Year of Training:** Fellow

## Educational Objectives:

### Introduction

The Colon and Rectal Surgery Fellowship allows for education from both inpatient and outpatient surgical evaluation and care. There are 7 attending surgeons, 1 outpatient Nurse Practitioner, and 2 inpatient Nurse Practitioners. There are additional learners including a general surgery Chief Resident, general surgery third year Resident, and general surgery and preliminary Interns that rotate on the service as well as medical students. Colorectal is divided into two service lines (Purple team and Blue team) allowing for the Fellow to lead one team and the Chief Resident to lead the other to provide appropriate division of patient care and operative experience. The Fellow will be exposed to the gamut of colon and rectal diagnoses and will be able to gain knowledge of these disease processes through patient care, discussion, conferences, and rounds. The Fellow is the leader of their team and responsible for the daily coordination of each team member. They are to formulate all plans on patient care, both inpatients and consults, then communicate the daily plan to the attending for approval or amendment.

### Medical Knowledge

- ✓ Comprehensive knowledge of the surgical treatment of colon and rectal disease processes including the indications, contraindications, surgical options, and complications
- ✓ Comprehensive knowledge of complex anorectal disease processes and the possible methods of treatment
- ✓ Comprehensive knowledge of the diagnosis and management of the complications of surgical treatment of colon and rectal disease
- ✓ Comprehensive knowledge of the anatomy, pathology, and pathophysiology of the colon, rectum and anus
- ✓ Understands pathophysiology, treatment, surgical options and possible complications related to the treatment of IBD
- ✓ Understand pathophysiology, treatment, surgical options and possible complications related to the treatment of diverticular disease
- ✓ Clear understanding of pathophysiology, staging, surgical treatment options, and possible complications related to colon, rectal and anal cancer

### Patient Care and Procedural Skills

- ✓ Ability to perform a complete assessment and render a plan for patients with the following disease processes:
  - Anal Cancer
  - Anal fissure
  - Anal fistula
  - Colon cancer
  - Crohn's disease
  - Diverticular disease
  - Fecal incontinence
  - Hemorrhoids
  - Inherited colon and rectal cancer syndromes
  - Perirectal abscess
  - Precancerous anal lesions (AIN)
  - Precancerous polyps of the colon
  - Rectal Cancer
  - Rectal prolapse
  - Ulcerative colitis
- ✓ Ability to educate patients and referring providers on their disease process and treatment options
- ✓ Competency in both laparoscopic and open colon and rectal resections
- ✓ Competency in performing a proper oncologic resection
- ✓ Ability to perform advanced procedures for inflammatory bowel disease
- ✓ Ability to perform a colonoscopy with polypectomy
- ✓ Exhibit communication to colleagues including attending surgeons, that ensures appropriate handoff of care and

appropriate escalation of care as indicated.

### **Practice-Based Learning and Improvement**

- ✓ Write an accurate, detailed, and legible preoperative assessment and counseling note on all patients for which he/she serves as surgeon of record.
- ✓ Utilize assigned journal articles as well as available textbook chapters and information technology (including PubMed search and literature review)
- ✓ Participate in the education of patients, families, students, residents, and other health professionals.
- ✓ Incorporate formative evaluation feedback into daily practice.

### **Interpersonal and Communication Skills**

- ✓ The Fellow will ensure that the attending is aware of the progress of all patients on the service.
- ✓ The Fellow will demonstrate clear, accurate, and respectful communication with nurses and other Hospital employees.
- ✓ The Fellow will clearly, accurately, and respectfully communicate with referring and consulting physicians, including residents.
- ✓ The Fellow will clearly, accurately, and respectfully communicate with patients and appropriate members with their families about identified disease processes (including complications), the expected courses, operative findings, and operative procedures.
- ✓ The Fellow will ensure that clear, concise, accurate, and timely medical records are maintained on all patients.
- ✓ The Fellow will be able to clearly and accurately teach medical students and junior residents about the procedures performed on this rotation when qualified to do so by hospital and program policy.

### **Professionalism**

**Fellows must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Fellows must:**

- ✓ Demonstrate compassion, integrity, and respect for others.
- ✓ Demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.
- ✓ Demonstrate respect for patient privacy and autonomy.
- ✓ Remain honest with all individuals at all times in conveying issues of patient care.
- ✓ Respond to the needs of the patient above one's own needs and desires.
- ✓ Maintain high standards of ethical behavior in all professional activities.
- ✓ Demonstrate a commitment to the continuity of patient care to carrying out professional responsibilities or through assuring that those responsibilities are fully and accurately conveyed others acting in his/her stead.
- ✓ Understand the institutional policy on duty hours and remain compliant with all duty hour regulations. Fellows must enter the number of hours spent in the hospital at least weekly.
- ✓ Be properly and professionally attired at all times while engaged in patient care.
- ✓ At all times treat patients, families, and all members of the healthcare team with respect.
- ✓ Reliably be present in prearranged places at prearranged times except when actively engaged in the treatment of a medical or surgical emergency. The Fellow must notify the appropriate supervisor if he or she will be unable to be present.
- ✓ Remain compliant with all required training designated by the institution.

### **Systems-based practice**

- ✓ The Fellow will be able to assess the risks and benefits of all options for treating patients with surgical illness.
- ✓ The Fellow will be able to understand the basics of coding and accurately reflect visits in the encounter information.
- ✓ The Fellow will be able to determine the benefit of additional treatment by other services such as plastic surgery, interventional radiology, and orthopedics.
- ✓ The Fellow will be able to determine and convey to appropriate individuals the instruments and other materials necessary for all procedures.

## Description of Clinical Experiences:

Specific daily responsibilities of the Colon and Rectal Surgery Fellow include:

- ✓ Lead team rounds in the morning.
- ✓ Communicate inpatient assessment and plan with the attending each morning prior to the OR
- ✓ Attend assigned clinics and OR cases
- ✓ Follow up on evolution of patient care during the day and notify attending as indicated
- ✓ Oversee evaluation and communication of all consults with attending
- ✓ Work with the chief resident on the service to make the weekly schedule assignments for residents and medical students
- ✓ Participate in the education of the residents, and medical students
- ✓ Prepare for OR cases with a comprehensive understanding of the patient, disease process, and procedure
- ✓ Coordinate weekly CRS didactic conference

## Description of Didactic Experiences:

Tuesday:

GI solid tumor board (optional) – weekly multidisciplinary conference (7-8am)

Wednesday:

General surgery morbidity and mortality – weekly (6:30-7:30am)

Thursday:

Colorectal surgery didactic conference -weekly colorectal specific topics (7:15-8am)

Colorectal multidisciplinary conference – every other week patient care conference (8-9am)

Colorectal/Inflammatory bowel GI conference – once a month patient care conference (8-9am)

Colorectal Journal club – once a month (8-9am)

Colorectal specific morbidity and mortality – once a quarter (8-9am)

Friday:

General surgery grand rounds (7-8am)

## Evaluation Process:

Faculty will evaluate the performance of the Fellow using these goals and objectives. The Fellow and each Resident on the service will evaluate the rotation, the service, and the faculty.

## Other Important Rotation Information: