# General Surgery Elective – VIS-AIC Kijabe Hospital

Institution: Kijabe Hospital

Duration: 4 weeks

Supervising Physician: Erik Hansen

### Contact Information: hanerik@gmail.com

### Year of Training: PGY-3 or PGY-4

### Educational Objectives:

#### Introduction

AIC Kijabe Hospital, located in Kijabe, Kenya, one hour outside Nairobi, is a tertiary-care facility with training programs in nursing, anesthesia, surgery (general, pediatrics, and pediatric neurosurgery), family medicine, and other areas of health care. The goals of this international rotation are:

- To gain a perspective on global surgery as a vital aspect of public health and its role in attaining the Millennium Development Goals, particularly goals 3, 4, and 5\*;
- To acquire experiential knowledge about the provision of surgical care in a low-income environment and demonstrate a logical and appropriate clinical approach to the care of patients, utilizing local resources
- To recognize that lessons learned during the 4-week rotation can be integrated into practice when the resident returns to the US

Specific objectives are competency-based.

#### Patient Care and Procedural Skills:

This is a general surgery rotation that offers a cross-cultural experience in caring for a population that tends to be younger than US health populations, presentation may be later, and many are indigent.

- ✓ Knowledge base should include the essentials of both inpatient and outpatient diagnosis and work up of all major general surgery problems in its broadest sense.
- ✓ The general surgical principles should include the evaluation and treatment of patients in all the areas of general surgery with an emphasis on trauma; late presentation of other surgical problems is common.
- ✓ The resident s requested to take advantage of opportunities to learn from the ob-gyn, anesthesia, orthopedic, neurosurgery, and other surgical services as well as community health and primary care.
- ✓ The resident will be able to provide surgical exposure to many different organ systems through open and minimally invasive approaches

#### Medical Knowledge:

- Knowledge should include the ability to work through diagnostic and therapeutic pathways in a resourcechallenged system.
- ✓ The resident should observe and, when appropriate or if invited, participate in discussions about various operative and non-operative options and techniques in the treatment of the general surgical patient.
- Experiences with specialty surgery, ob-gyn, and primary care patients are essential components of the rotation as they provide maternal and child health aspects of care.
- ✓ The resident should learn about controversy and the risks and benefits of operative vs. non-operative treatment for the various disorders encountered.
- ✓ There should be an extensive knowledge of surgical exposure of all general surgical systems (open and minimally invasive).
- ✓ A primary goal of AICKH is the training of Kenyan surgeons; therefore, the Vanderbilt residents will be observers, assistants, and teachers unless the Kenyan residents are not available for operative procedures.
- ✓ The skills required include experience with general surgical anatomy, pathology, and the understanding of intraoperative decision-making.
- Each resident will have clinic experiences to ensure an understanding of the issues of continuity of care for patients who may have financial and logistical issues related to follow-up including limited personal resources, transportation difficulties, and residing long distances from the hospital.

#### Practice-based Learning and Improvement:

Self-reflection is a vital aspect of this rotation as the resident works in an environment very different from the medical environment of a US academic medical center.

The resident is required to keep a journal to record impressions, observations, and lessons learned from this experience.

- The resident is encouraged to appreciate, learn from, and hopefully incorporate some of the interpersonal and medical practices observed in the AIC Kijabe Hospital into the resident's relationships and practice on the return to the US.
- ✓ Performing clinical diagnosis in settings where diagnostic studies are limited will be challenging.
- ✓ Physical examination skills should be honed and improved.

#### Interpersonal and Communication Skills:

A constant attitude of respect for every staff member and patient and patient family member is imperative. Developing rapport and gaining the confidence of the faculty, staff, and resident-colleagues as well as the patient and family members is vital and accomplishing these through the barriers of language and culture may be challenging but is possible.

- ✓ All communication and interpersonal relations should be guided by principles of cultural sensitivity and appropriateness.
- Understanding that communications in any cross-cultural situation may require a thoughtful approach, the resident is expected to make every effort to speak clearly and ask follow-up questions to be certain communications is taking place.
- ✓ The English spoken in Kenya will have pronunciation differences from American English and the resident should keep this in mind in every communications encounter with staff or even with patients via translators.
- Expected to participate in routine educational activities to junior residents and students when requested (such as teaching on rounds, chalk-talks, knot-tying, etc.)
- ✓ Expected to provide timely feedback and assessments when requested

#### Professionalism:

- Culturally sensitive care and support should be provided to the patients and families with respect shown to all the hospital staff.
- ✓ The resident will be an observer-learner and will participate by invitation in the clinical and educational activities.
- ✓ The resident should motivate and teach the junior house officers by example and interaction, attend all conferences, and be willing to teach or present if asked.
- ✓ The resident should leverage their knowledge of systems-based practices and adapt them to a low-resource setting
- ✓ The resident is a guest of the AIC Kijabe Hospital surgical service and is expected to abide by all codes of dress and conduct.

#### Systems-based Practice:

- Acquires knowledge about the relationship of the tertiary-care facility in a low-income country to rural clinics and district hospitals--a vital aspect of this rotation.
- ✓ Observes how a faith-based institution works cooperatively with the governmental system as well as with nongovernmental agencies such as PEPFAR.
- ✓ Appreciates the issues raised by resource-challenged management of surgical problems in the out-patient and in-patient setting in a tertiary-care facility that may be many hours or even days distant from the patients home or support system.
- ✓ Learns how the most accessible facility in a low-income country is asked to handle every type of medical disease or emergency regardless of its capabilities or resources and the challenges of referral.

### **Description of Clinical Experiences:**

Specific daily responsibilities of the PGY-1 Resident include:

- ✓ Rounding with the hospital team on service patients and consults
- ✓ Discussing and implementing daily patient care plans when appropriate
- ✓ Assisting with dressing changes and complex wound care
- ✓ Participating in assigned operative cases and assisting with perioperative patient management when requested

# **Description of Didactic Experiences:**

Attend all scheduled education and conferences while on rotation.

# **Evaluation Process:**

Supervising faculty will evaluate the performance of each resident using these goals and objectives as the foundation through the New Innovations system within the Vanderbilt IT structure. In turn, each resident will evaluate the rotation and supervising faculty through New Innovations

# **Other Important Rotation Information:**