

Vascular Surgery (R3/R5)

Institution: NVAMC/WMC

Duration: 6-8 weeks

Supervising Physician: John Curci

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Year of Training: PGY 3/5

Educational Objectives:

The Vascular surgery rotation at the Nashville VA and WMC provides the PGY 3 and 5 residents with advanced training in the broad scope of surgical conditions and procedures in vascular surgery. Residents are an integral part of the care team, participating in pre-operative assessment, surgical procedures, and daily post-operative care. The PGY5 resident is the team leader, taking primary responsibility for the management of each patient on the vascular surgery service.

Practice-Based Learning and Improvement

Residents must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning. Residents are expected to develop skills and habits to be able to meet the following goals:

- ✓ Write an accurate, detailed, and legible preoperative assessment and counseling note on all patients for which he/she serves as surgeon of record.
- ✓ Enter a Brief Operative Note *immediately after an operation* for all procedures in which he/she is the primary surgeon.
- ✓ Prepare and deliver a formal, 30-minute presentation on an assigned topic in the weekly Vascular Conference.
- ✓ Utilize assigned journal articles as well as available textbook chapters and information technology (including PubMed search and literature review) to learn the principles of vascular surgery during the rotation.
- ✓ 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 resident should ensure that the attending is aware of the progress of all patients on the service.
- ✓ The resident should clearly, accurately, and respectfully communicate with nurses and other Hospital employees.
- ✓ The resident should clearly, accurately, and respectfully communicate with referring and consulting physicians, including residents.
- ✓ The resident should 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 resident should ensure that clear, concise, accurate, and timely medical records are maintained on all patients.
- ✓ The resident should 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

Residents must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Residents 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 sensitivity to issues of age, race, gender, and religion with patients, family, and members of the healthcare team.
- ✓ 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. Residents must enter the number of hours spent in the hospital into the tracking system within 24 hours of duty.
- ✓ 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 resident must notify the appropriate supervisor if he or she will be unable to be present.
- ✓ Remained compliant with all required training designated by the institution.

Patient Care:

Residents must be able to provide care that is compassionate, appropriate, and effective for the treatment of health problems and promotion of health.

- ✓ Residents will develop and execute patient care plans.
 - The resident should assume responsibility, in concert with attending supervision, for the care of all patients on the VA Medical Center Vascular Surgery Service.
 - The resident will assume responsibility for knowing the daily progress and plans of all patients on the service and work with the other residents on service.
 - When on call, the resident will inform the attending of any admissions and consults so that the attending can see the consult and sign the note within 24 hours of the consult or admission the VA Medical Center and as directed by Williamson Medical Center staff.
 - The resident will assume responsibility for notifying the attending physician about any patient who develops a new problem.
 - The PGY-5 resident will function as the supervising resident for the junior and mid-level residents on service. The junior and mid-level residents may evaluate initial consults and appropriately triage them to the vascular attending or PGY-5 resident as appropriate.
 - When not in the operating room or otherwise occupied at the VA Medical Center or WMC during the rotation, the R5 is responsible for knowing and appropriately triaging tasks and events of the patients on service.
- ✓ Under appropriate supervision, perform basic surgical procedure such as:
 - Balloon angioplasty and stenting of lower extremity arteries*
 - Carotid endarterectomy*
 - Catheter-based arteriography*
 - Femoropopliteal and femorodistal bypass*
 - Endovascular AAA Repair*
 - Open AAA Repair, retroperitoneal and trans-abdominal*

Systems-based practice

- ✓ The resident should be able to assess the risks and benefits of all options for treating patients with surgical illness.
- ✓ The resident should be able to summarize the financial costs, potential complications, and long-term expectations for planned procedures.
- ✓ The resident should recognize the differences between the three hospital systems in which he or she will participate: federal, university, and private.

- ✓ The resident should be able to determine the benefit of additional treatment by other services such as plastic surgery, interventional radiology, and orthopedics.
- ✓ The resident should be able to determine and convey to appropriate individuals the instruments and other materials necessary for all procedures.

Medical Knowledge

- ✓ The resident should be able to perform a detailed preoperative assessment of comorbid conditions in patients undergoing major vascular procedures to include the need for cardiac evaluation, interpretation of common cardiac function tests (EKG, perfusion scans, and other stress tests) and be able to utilize this information to plan the safest procedure with appropriate monitoring.
- ✓ The resident should interpret and correctly utilize vascular noninvasive tests including carotid duplex ultrasonography and venous duplex ultrasonography.
- ✓ The resident should demonstrate detailed knowledge about the angiographic anatomy of the upper and lower extremities, the abdominal aorta and its branches, the brachiocephalic vessels and their branches, the extracranial cervical arteries, and the major intracranial branches of the carotid arteries.
- ✓ The resident should understand the natural history of common vascular problems including but not limited to asymptomatic aneurysms, asymptomatic carotid stenosis, transient ischemic attacks, asymptomatic renal artery stenosis, intermittent claudication, rest pain, and tissue loss.
- ✓ The resident should be able to demonstrate detailed knowledge about the etiology, diagnosis, and treatment of the diabetic foot.
- ✓ The resident should demonstrate knowledge about the indications and outcomes for common vascular operations and endovascular procedures.
- ✓ Residents will participate in scheduled learning activities including:
 - Published journal articles as assigned
 - Weekly educational conferences
 - VA Vascular Conference, Wednesday 7:00 AM*
 - Division Vascular Conference, Thursday 7:00 AM*
 - Friday surgical conferences when not at Williamson Medical Center*

Description of Clinical Experiences:

Monday: WILLIAMSON. For the past year, the vascular fellow has been performing catheter-based arteriography at the VA, utilizing block time that was previously allotted to the resident service. As long as this is to continue, expectations will be that the PGY-5 resident be at Williamson Medical Center every Monday. The PGY-3 resident on service will round with the team on in-patients and be in communication with the PGY-5 resident. If there are add-on cases in addition to the angiograms, the goal should be to provide level-appropriate cases on these days with this schedule in mind.

Tuesday: VA MEDICAL CENTER. The PGY-5 is expected to be at the VA Medical Center. The PGY-3 resident on service will round with the team to transfer continuity.

Wednesday: VA MEDICAL CENTER. The PGY-5 resident is expected to be at the VA Medical Center, participating in conference and clinic. The PGY-3 resident is also expected to participate in conference and the beginning of clinic in order to maximize continuity.

Thursday: VA MEDICAL CENTER. The PGY-5 resident is expected to be at the VA Medical Center, participating in level-appropriate OR cases, rounding, and managing the team. The PGY-3 resident may participate in off-service cases.

Friday: WILLIAMSON. On Fridays, the vascular surgery service has OR time every other Friday.

As such, on Fridays when there is OR time, the PGY-5 resident can discuss this with the attending of the day and determine the appropriate level of resident for the cases.

On Fridays when there is no block OR time available, the PGY-5 resident is expected to be at the Williamson Medical Center, participating in level-appropriate OR cases.

The PGY-3 resident is expected to round with the team in the morning and be in communication with the PGY-5, but the PGY-3 resident is expected to cover Dr. Ken Sharp's General Surgery cases at Vanderbilt for educational experience.

Night Call:

The PGY-3 resident is expected to handle night calls on VA inpatients on Monday night and Tuesday night. The PGY-5 will act as a resource if needed for the PGY-3.

The PGY-5 resident is expected to handle night calls on VA inpatients at the VA Tuesday through Thursday night.

The PGY-5 resident is expected to remain in the VA and Vanderbilt call system as previously arranged, in order to maintain continuity with the fellow service and allow the fellows to continue a q3 call schedule. The PGY-5 resident will be available for evening call once or twice weekly at Vanderbilt.

Weekend Call: The PGY-5 resident will remain in the weekend call schedule on a q3 basis, equivalent but not more than the expected fellow call.

Description of Didactic Experiences:

Attend all scheduled education and conferences while on rotation.

Evaluation Process:

Faculty and senior residents will evaluate the performance of each resident using these goals and objectives. Each resident on the service will evaluate the rotation, the service, faculty and any senior residents also on the rotation.

Other Important Rotation Information: