

General Surgery: GI/Laparoscopy

Institution: Vanderbilt University Medical Center

Duration: 5 weeks

Supervising Physician: Jessica Ardila, MD

Contact Information: Jessica.ardila@vumc.org

Year of Training: PGY-2

Educational Objectives:

Introduction to Rotation:

We would like to welcome you to the GI/Laparoscopy Service and hope you will have a rewarding and educational experience. On the rotation, you will be exposed to a broad range of general surgery diagnoses and operative cases. The service's main areas of focus lie in laparoscopic treatment of foregut diseases and obesity, as well as in general GI disorders and both routine and complex hernia repair. Our goal is to help you gain experience and expertise in the treatment of a variety of general surgical disorders and hopefully cultivate an interest in our subspecialty. In addition to the faculty and their assistants, there are several other people that are vital to our division and to your experience on our service. These include administrative assistants, nurse practitioners, clinic nurses and our surgery scheduler among many others. All of these individuals are an integral part of our team. As such, please be courteous and considerate to all of them.

Patient Care and Procedural Skills:

- ✓ Mastery of basic instrumentation and suturing skills.
- ✓ Introduction to basic laparoscopic procedures such as cholecystectomy and diagnostic laparoscopy.
- ✓ Introduction to advanced laparoscopic skills including but not limited to suturing, hemostatic techniques, and dissection with such procedures as fundoplication, solid organ and bariatrics.
- ✓ Be able to perform basic inguinal and ventral/incisional herniorrhaphy.
- ✓ Be able to set up the equipment and initiate a laparoscopic procedure.
- ✓ Performs upper GI endoscopy in both outpatient and intra-operative settings.

Medical Knowledge:

- ✓ Development of a base of knowledge in pathophysiology and treatment options for general surgical diseases with an emphasis on gastrointestinal disorders such as: achalasia, GERD, and paraesophageal hernia.
- ✓ Be able to diagnose symptomatic cholecystitis, GERD, and morbid obesity and discuss the operative indications, alternatives, and controversies.
- ✓ Development of basic skills in interpreting patient history, physical examination and diagnostic testing of these diseases.
- ✓ Introduction to interpretation of radiologic studies such as GI fluoroscopy and CT scans.
- ✓ Interpretation of foregut diagnostic studies including but not limited to esophageal motility, pH studies and Gastric emptying studies.
- ✓ Improve knowledge of the anatomy of the anterior abdominal wall with respect to ileofemoral hernia repair.

Practice-Based Learning and Improvement

- ✓ Complete 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.
- ✓ Incorporate 3 hours of practice with a laparoscopic simulator focusing on knot-tying and use of non-dominant hand.

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.
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- ✓ Expected to help orient medical students and provide them support as needed for their roles and responsibilities throughout the rotation.
- ✓ Expected to teach level-appropriate skills to medical students (e.g. history and physical skills, postoperative patient care, knot-tying).
- ✓ Expected to provide timely feedback and assessments to the clerkship director and medical student supervisor as requested.

Professionalism

- ✓ 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 weekly.
- ✓ Be properly and professionally attired at all times while engaged in patient care.
- ✓ Be properly and professionally groomed at all times when 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.
- ✓ Remain compliant with all required training designated by the institution.

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.
- ✓ The resident should participate in a monthly quality improvement review of surgical complications.

Description of Clinical Experiences:

Specific daily responsibilities of the PGY-2 Resident include:

- ✓ Rounding with the resident team on service patients and consults
- ✓ Discussing and implementing daily patient care plans with the appropriate Attending surgeon
- ✓ Assisting junior resident with writing daily notes, as needed

- ✓ Participating in assigned operative cases and taking primary responsibility for immediate perioperative patient management
- ✓ Taking an active role in the education and development of medical students and junior residents

Description of Didactic Experiences:

Complex Hernia Conference: This conference is a multidisciplinary meeting held twice per month where complex hernia cases will be discussed and management strategies will be formed with experts of abdominal wall reconstructions. Conference is held on the 1st, 3rd and 5th Thursday of the month.

Bariatrics Didactics: This conference is held twice a month on the 2nd and 4th Thursday of the month virtually. During this conference the fellow or one of the residents will present a topic previously assigned regarding metabolic and bariatric surgery or foregut surgery. Some sessions will be used to discuss difficult cases or do journal club.

Esophageal Conference: This multidisciplinary conference discusses challenging cases with respect to esophageal and foregut pathology. This conference is a bi-weekly conference based on case load.

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: