## Vanderbilt University Medical Center Emergency General Surgery Service

Surgical Residency Rotation and Curriculum

### UNIT 2 PHYSIOLOGY

#### **UNIT OBJECTIVES:**

- 1. Demonstrate knowledge of normal and disturbed human physiology causing surgical diseases.
- 2. Demonstrate knowledge of the effects of age, as reflected in the newborn, infants, children, and the elderly, on the physiologic functions of the major organ systems.
- 3. Apply physiological knowledge to the clinical and operative management of surgical diseases.

### COMPETENCY-BASED KNOWLEDGE OBJECTIVES:

- 1. Describe concepts of normal physiology, including:
  - a. Fluid mechanics and dynamics
  - b. Hemostasis, coagulation, thrombogenesis, fibrinolysis, DIC
  - c. Wound healing and systemic inflammatory response syndrome
  - d. Response to sepsis, and septic shock
- 2. In each of the above systems, identify physiologic variations in geriatric, pediatric, immunosuppressed, and pregnant patients.
- 3. Indicate the normal values of commonly applied clinical tests.
- 4. Describe the applications of physiologic principles to surgical monitoring and therapy, including the following approaches:
  - a. Application of Swan-Ganz catheters
  - b. Ventilator management
  - c. Renal function studies & indication for renal replacement therapy
  - d. Interpretation of SMA-17 results
  - e. Interpretation of a nutritional profile
- 5. Describe how aging affects the tests listed in the section immediately above.
- 6. Describe the abnormal physiology of complex diseases or entities such as:
  - a. Cardiac failure
- f. Intestinal obstruction
- b. Renal failure
- g. Malnutrition
- c. Pulmonary failure
- h. Cardiopulmonary bypass
- d. Immunosuppression
- i. Advanced age
- e. Malignancy

## **COMPETENCY-BASED PERFORMANCE OBJECTIVES:**

- 1. Interpret laboratory tests and clinical findings based upon physiologic concepts.
- 2. Manage patients with surgical illnesses and/or major physiologic disruptions such as:
  - a. Liver failure
  - b. Malnutrition
  - c. Renal dysfunction

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- d. Hemorrhage
- e. Cardiopulmonary failure
- f. Electrolyte imbalance
- g. Endocrine disorders such as hypo/hyperthyroidism, pheochromocytoma, adrenal cortical hyper/hypofunction, and their effects on Emergency Surgery
- h. Sepsis
- i. Shock
- j. Immunosuppression
- k. Diabetes
- 1. Advanced age.
- 3. Adapt treatment plans to reflect physiologic variations in pediatric, geriatric, and pregnant patients.
- 4. Utilize clinical findings, laboratory tests, and hemodynamic measurements to alter patient physiology.
- 5. Adjust treatment plans in response to abnormal physiologic values.
- 6. Identify and formulate treatment plans for real and potential nutritional therapy.
- 7. Interpret hemodynamic monitoring and adjust treatment to restore homeostasis:
  - a. Insert and maintain arterial venous and central lines.
  - b. Monitor catheters.
- 8. Solve problems interfering with normal hemostasis.
- 9. Delineate weaning parameters.