# MARSHALL UNIVERSITY SCHOOL OF MEDICINE SURGERY RESIDENCY TRAINING PROGRAM

LETTER OF AGREEMENT FOR THE COOPERATIVE TRAINING OF RESIDENTS/FELLOWS FROM MARSHALL UNIVERSITY JOAN C. EDWARDS SCHOOL OF MEDICINE (MUSOM), AND VETERANS' ADMINISTRATION MEDICAL CENTER ([VAMC] Participating Site).

This letter of agreement is an educational statement that sets forth the relationship between MUSOM and VAMC. This statement of educational purpose is not intended to supersede or change any current contracts and institutional affiliation agreements between the institutions.

This Program Letter of Agreement is effective from **October 1, 2024**, and will remain in effect for ten (10) years, unless updated, changed, or terminated as set forth herein. All such changes, unless otherwise indicated must be approved in writing by all parties.

## Persons Responsible for Education and Supervision at VAMC

At MUSOM:

Paul Bown, MD, Program Director

At VAMC:

Timothy D. Canterbury, M.D., Site Director and all current MUSOM Surgery Faculty Members (Exhibit A) which may change due to resignation or the addition of new faculty members

#### Responsibilities

The MUSOM SURGERY faculty at the VAMC must provide appropriate supervision of residents/fellows in patient care activities and maintain a learning environment conducive to educating the residents/fellows in the AOA/ACGME competency areas. The Faculty must evaluate Resident/Fellows performance in a timely manner during each rotation or similar educational assignment and document this evaluation at completion of the assignment.

## 2. Content and Duration of the Educational Experiences

The content of the educational experiences has been developed according to AOA/ACGME Residency/Fellowship Program Requirements and are delineated in the attached goals and objectives for each rotation. See Exhibit B.

The Program Director, Paul Bown, MD is ultimately responsible for the content and conduct of the educational activities at all sites, including VAMC. The MUSOM Program Director/VAMC Site Director and the faculty are responsible for the day-to-day activities of the Residents/Fellows to ensure that the outlined goals and objectives are met during the course of the educational experiences.

Rotations may be up to 3 months for senior residents, but generally rotations are a month (s) in duration for junior residents.

The day-to-day supervision and oversight of Resident/Fellow activities will be determined by the specialty service where they are assigned. The Program Coordinator, is responsible for oversight of some Resident/Fellow activities, including coordination of evaluations, arrangement of conferences, sick leave and annual leave as mandated by MUSOM.

#### 3. Assignments

In accordance with the Affiliation Agreement between MUSOM and VAMC, MUSOM will provide to VAMC, the name of the Resident(s)/Fellow(s) assigned to the site, the service they will be training on and other relevant information.

## 4. Responsibility for supervision and evaluation of residents

Resident/Fellows will be expected to behave as peers to the Faculty but be supervised in all their activities commensurate with the complexity of care being given and the Resident/Fellow own abilities and level of training. Such activities include, but are not limited to the following:

- Patient care in clinics, inpatient wards and emergencies
- Conferences and lectures
- Interactions with administrative staff and nursing personnel
- Diagnostic and therapeutic procedures
- Intensive Care unit or Ward patient care

The evaluation form will be developed and administered by the Surgery Residency Program. Residents will be given the opportunity to evaluate the teaching faculty, clinical rotation and VAMC at the conclusion of the assignment.

## 5. Policies and Procedures for Education

During assignments at VAMC, Residents/Fellows will be under the general direction of MUSOM's Graduate Medical Education Committee's and the Surgery Residency Program's Policy and Procedure Manual as well as the policies and procedures of VAMC, including but not limited to, policies related to patient confidentiality, patient safety, medical records.

## 6. Authorized Signatures

## Veterans' Administration Medical Center

tim canterbury	march 6, 2025
Timothy Canterbury, MD Site Director	Date
NA SU Digitally signed by NA SU Date: 2025.03.10 09:59:51 -04'00'	
Na Su, MD Chief of Staff	Date
JEFFREY NIMMO Date: 2025.03.10 11:47:27 -04'00'	
J. Brian Nimmo, MS Medical Center Director	Date
MUSOM	
Paul Bown, MD Program Director	10/16/24 Date
Paulette Wehner, MD DIO & Vice Dean for Education	10 20 24 Date
David Gozal, MD Dean & Vice President of Health Affairs	10/22/24 Date

## Exhibit A: List of Faculty Members

Timothy Canterbury, MD, Site Director

Martin Kassan, MD

Stephen King, MD

James Martin, MD

Rebecca Wolfer, MD

# Exhibit B. Goals and Objectives



General Surgery Residency

# Rotation Goals & Objectives

Reviewed & Approved by the Education Sub-Committee & PEC on May 13, 2024.

Approved by the Education Sub-Committee & PEC on June 12, 2023.

#### **General Surgery Rotation**

#### **Facility**

Huntington Veterans Administration Medical Center

#### **PGY-1 Clinical Duties**

- Review and perform milestones for promotion.
- Exposure to General Surgery.

#### **PGY-1 Administrative Duties**

- See Handbook.
- Complete rotation evaluation at the completion of the rotation.

#### **PGY-1 Rotation Curriculum**

Review and complete all assigned SCORE modules and guizzes.

#### General Surgery – Huntington Veterans Administration Medical Center

#### **Core Competencies**

#### **Patient Care**

#### Goals:

- Provide trainee with an opportunity to become proficient in the preoperative care of surgical
  patients that may or may not require surgery.
- Provide appropriate and effective peri-operative and post-operative care of surgical patients.
- Develop proficiency in basic surgical technical skills including both minor procedures and operations appropriate for intern level experience.

- Evaluate pre-operative patients with complex GI issues (ex: hepatobiliary, colo-rectal, upper and lower GI), and oncologic surgical processes.
- Manage ward/postoperative patients.
- Prioritize patient acuity.
- Manage ward emergencies (arrhythmia, hypoxia, shock, etc.).
- Prioritize clinical responsibilities.
- Plan discharge.
- Facility to acquire pertinent information from patients and other sources in a timely manner.
- General understanding of immunological principles.
- Demonstrate caring and respectful behaviors when interacting with patients and/or their families.
- Incorporate patient preferences in making decisions about diagnostic and therapeutic interventions.

- Demonstrate manual dexterity appropriate for a first-year resident.
- Develop patient care plans appropriate for PGY-1 resident and discuss with senior level resident and/or attending.
- Execute treatment plans.
- Gather essential and accurate information about patients.
- Evaluate patients with surgical indications and present a differential diagnosis to senior level resident and/or attending.
- Compare laparoscopic versus open procedures for each case.
- Develop an understanding about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment.
- In less complex cases, may develop and carry out patient management plans as discussed with the chief resident and/or attending.
- Demonstrate an understanding of the indications and contraindications for various medications used in preparation or in the performance of procedures.
- Assist with the overall care of patients with the team of residents and students.
- Participate in daily rounds, outpatient clinics, and resident teaching conferences.

#### Medical Knowledge

#### Goals:

- Know the pathophysiologic and pharmacologic basis for the diseases treated and operations performed.
- Recognize the morbidity and mortality associated with the diseases treated and operations performed.
- Utilize web-based resources, journals, surgical texts, ACS Curriculum, SCORE, Fundamentals
  of Surgery and other materials for detailed clinical and/or basic science information related
  to patient care.

- Possess a basic understanding of surgical pathophysiology, pharmacology, physiology, and interpretation of hemodynamic data.
- Formulate, implement, and understand a diagnostic and treatment plan for common abdominal surgical conditions based upon GI and hepatobiliary published evidence.
- Be able to individualize that plan based upon co-morbidities.
- Have a full understanding of preoperative risk assessment and mitigation to include cardiac risk, pulmonary disability, vascular disease, infection prophylaxis and anticoagulation.
- Have a working knowledge of patient regimen and medication reconciliation for surgical patients to avoid drug interaction or undue disruption of regimen.
- Demonstrate a working knowledge of the natural history of common general surgery conditions and the logic of modifying that history by timely intervention.

- Demonstrate a working knowledge of transfusion, electrolyte management and surgical nutrition to include TPN.
- Have a command of concepts of laparoscopic surgery including indications, patient response, instrumentation, logistics and post-operative considerations.
- Recognize and initiate management for common surgical complications including oliguria, hypotension, hypertension, chest pain, wound infection, sepsis, and electrolyte abnormalities.
- Demonstrate a working knowledge of pain management to include recognition of implications of pain, analgesics, narcotics, adjunctive measures and PCA.
- Evaluate by astute history and physical examination and prepare treatment plan for the following specific conditions:
  - o inguinal hernia (asymptomatic, symptomatic, irreducible, incarcerated)
  - o hemorrhoids grade 1-3
  - o anal fissure
  - o fistula-in-ano
  - o cholelithiasis (asymptomatic and symptomatic)
  - acute and chronic cholecystitis
  - o acute abdomen
  - pancreatitis
  - o small bowel obstruction
  - appendicitis
  - diverticulitis
  - GI hemorrhage
- Competence in the use of ophthalmoscope, otoscope, stethoscope, laryngoscope, Doppler, anoscope.
- Ability to interpret laboratory tests including electrolytes, liver function, nutritional assessment, common endocrine testing, renal function, coagulation, blood gases.
- Ability to interpret ECG.
- Ability to interpret abdominal series, abdominal CT, chest x-ray and to understand the radiology report on these studies and on ultrasound studies.
- Ability to apply ATLS and ACLS credentials.

#### Practice-Based Learning and Improvement

#### Goals:

- Develop insight to identify own strengths and weaknesses and set learning goals.
- Evaluate published literature in critically acclaimed journals to continuously improve patient care.
- Apply clinical data to patients on the surgical oncology team.

- Evaluate published literature in critically acclaimed journals and texts.
- Apply clinical trials data to patient management.

- Develop a general understanding of statistics to include confidence interval, power of the statistics, and p value.
- Participate in academic and clinical discussions on daily rounds and at weekly conferences.
- A commitment to read and research about every patient in your sphere to include text, computer literature search, conferences and questioning of other members of the team.
- An understanding of study design.
- An understanding of the levels of confidence or evidence in published material.
- Manage information technology appropriately to manage information, access on-line resources and support personal education.
- Receive and utilize constructive criticism to make improvements.
- Recognize strengths and build upon them.
- Explore scientific literature concerning patient management questions.
- Define the concepts of "best practice" and "evidence-based medicine."

#### **Interpersonal and Communication Skills**

#### Goals:

- Deliver patient information to consulting physicians, patients, their families, and other health care professionals that are effective, accurate and complete.
- Effectively interact and communicate with multidisciplinary teams to deliver optimal patient care.
- Participate in daily rounds.

- Cultivate ethical and appropriate patient relationships.
- Display/reflect empathy and compassion for all patients.
- Develop effective listening skills, including observing nonverbal clues and using explanatory questioning.
- Develop effective, complete, and accurate note writing skills for documentation in the EMR.
- Clearly, accurately, and succinctly present pertinent information to faculty and senior residents regarding newly admitted patients.
- Clearly and respectfully communicate with patients and appropriate members of their families about identified disease processes (including complications), the expected courses, operative findings, and operative procedures with assistance from upper-level residents.
- Execute effective and thorough patient hand-off/sign out.
- Appraise the senior resident of all progress of all patients and alert them of any new problems on the service.
- Clearly, accurately, and respectfully communicate with nurses and other hospital employees, referring and consulting physicians, including residents.
- Maintain clear, concise, accurate, and timely medical records including (but not limited to) admission history and physical examination notes, consultation notes, progress notes, written and verbal orders, operative notes, and discharge summaries.

- Model effective communication techniques to medical students and exhibit proper interpersonal skills when interacting with patients, their families, and other health care providers.
- Ensure that all student notes are accurate, reflect a proper plan, and are countersigned by a physician each day.
- Enter all procedures and operative cases in which he/she is the surgeon of record into the system database within 24 hours of completing the procedure or operation.
- Dictate an accurate and descriptive narration of the operative procedure in which he/she is the primary surgeon within 24 hours.

#### Professionalism

#### Goals:

- Interact with patients and families in a professional manner.
- Maintain high ethical behavior in all professional activities.
- Take personal responsibility for actions and decisions regarding patients.
- Exhibit knowledge of and utilize privacy policies, informed consent, business, and medical ethics.
- Know and follow institutional behavior policies (i.e., sexual harassment, etc.).
- Exhibit professionalism through timely completion of required administrative responsibilities (evaluations, recording hours, chart documentation, medical record dictations, etc.).
- Interact with colleagues, ancillary staff, and administrative personnel in a professional manner.

- Place the needs of the patient above all the needs or desires of oneself.
- Receive and utilize feedback on performance to improve outcomes.
- Identify ethical issues and apply standards of ethical care and behavior.
- Participate in end-of-life discussions and decisions with senior level residents and/or attendings.
- Exhibit sensitivity to gender, age, race, and cultural issues
- Model ethical and professional behavior in clinical setting by example.
- Display leadership qualities that can be cultivated over the course of training.
- Practice proper and professional grooming at all times, including appropriate attire.
- Attend to administrative responsibilities in a timely manner.
- Complete timely medical records and dictations.
- Answer pages promptly and professionally.
- Enter cases into ACGME Operative Log.
- Enter duty hours weekly.
- Complete all evaluations of faculty and program and peers in a timely manner.

#### **Systems-Based Practice**

#### Goals:

- Coordinate patient care within the health care system.
- Recognize system issues to reduce errors in patient care management.
- Understand the impact system resources have on patient outcomes.
- Develop understanding of billing and finances.
- Provide optimal patient care by utilizing resources available throughout the system.
- Interact with other specialties referring patients to the general surgery service.

- Appropriately utilize, in a timely and cost-efficient manner, ancillary services including social services, discharge planning, physical therapy, nutrition services, pharmacy, and physician extenders.
- Outline the financial costs, the risks and benefits of the proposed diagnostic studies and therapeutic procedures.
- Determine and convey to appropriate individuals the instruments and other materials necessary for all procedures.
- Justify all diagnostic tests ordered, including laboratory studies, and document when needed.
- Appreciate the continuity between clinic and hospital-based care.
- Practice cost-effective and appropriate preoperative evaluation and postoperative follow up.
- Recognize resource allocation issues.
- Exhibit sensitivity to medical-legal issues.
- Utilize hospital information technology to provide cost-effective and optimal patient care.
- Seek out assistance in identifying additional resources to maximize outcomes for patients.
- Participate in multidisciplinary discussions to elicit system resources to reduce errors and improve patient care.
- Participate in identifying system errors and implementing potential systems solutions.

#### **Assessment Methods**

#### Patient Care:

- New Innovations evaluations by faculty
- New Innovations evaluations by peers
- Weekly attending rounds

#### Medical Knowledge:

- Annual ABSITE
- New Innovations evaluations by faculty
- New Innovations evaluations by peers
- Mock oral exams
- Weekly attending rounds

#### Practice-Based Learning and Improvement:

- New Innovations evaluations by faculty
- New Innovations evaluations by peers
- Weekly M&M conference
- Weekly attending rounds
- Journal Club

#### Professionalism:

- 360 evaluations by inpatient and outpatient clinical and administrative staff and medical students
- New Innovations evaluations by faculty
- New Innovations evaluations by peers

#### **Interpersonal and Communication Skills:**

- 360 evaluations by inpatient and outpatient clinical and administrative staff and medical students
- New Innovations evaluations by faculty
- New Innovations evaluations by peers
- Mock oral exams

#### **Systems-Based Practice:**

- Weekly M&M conference
- Trauma peer review conference

#### **Curriculums:**

- SCORE
- TrueLearn question bank
- Surgery Residency curriculum

#### **General Surgery Rotation**

#### Facility

Huntington Veterans Administration Medical Center

#### **PGY-2 Clinical Duties**

- Review and perform milestones for promotion.
- Exposure to General Surgery.
- Supervision of PGY-1 residents.

#### **PGY-2 Administrative Duties**

- See Handbook.
- Complete rotation evaluation at the completion of the rotation.
- Obtain completed CAMEO and Operative Assessment from attending at end of rotation.

#### **PGY-2 Rotation Curriculum**

Review and complete all assigned SCORE modules and guizzes.

#### General Surgery – Huntington Veterans Administration Medical Center

#### **Core Competencies**

#### **Patient Care**

#### Goals:

- Provide trainee with an opportunity to become proficient in the preoperative care of surgical
  patients that may or may not require surgery.
- Provide appropriate and effective peri-operative and post-operative care for surgical patients.
- Develop proficiency in basic surgical technical skills including both minor procedures and operations appropriate for intern level experience.

- Evaluate pre-operative patients with complex GI issues (ex: Hepatobiliary, colo-rectal, upper, and lower GI), and oncologic surgical processes.
- Manage ward/postoperative patients.
- Prioritize patient acuity.
- Manage ward emergencies (arrhythmia, hypoxia, shock, etc.).
- Prioritize clinical responsibilities.
- Plan discharge.

- Facility to acquire pertinent information from patients and other sources in a timely manner.
- General understanding of immunological principles.
- Demonstrate caring and respectful behaviors when interacting with patients and/or their families.
- Incorporate patient preferences in making decisions about diagnostic and therapeutic interventions.
- Demonstrate manual dexterity appropriate for a first-year resident.
- Develop patient care plans appropriate for PGY-1 residents and discuss with senior level resident and/or attending.
- Execute treatment plans.
- Gather essential and accurate information about patients.
- Evaluate patients with surgical indications and present a differential diagnosis to senior level resident and/or attending.
- Compare laparoscopic versus open procedures for each case.
- Develop an understanding about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment.
- In less complex cases, may develop and carry out patient management plans as discussed with the chief resident and/or attending.
- Demonstrate an understanding of the indications and contraindications for various medications used in preparation or in the performance of procedures.
- Assist with the overall care of patients with the team of residents and students.
- Participate in daily rounds, outpatient clinics, and resident teaching conferences.

#### Medical Knowledge

#### Goals:

- Know the pathophysiologic and pharmacologic basis for the diseases treated and operations performed.
- Recognize the morbidity and mortality associated with the diseases treated and operations performed.
- Utilize web-based resources, journals, surgical texts, ACS Curriculum, SCORE, Fundamentals
  of Surgery, and other materials for detailed clinical and/or basic science information relative
  to patient care.

- Possess a basic understanding of surgical pathophysiology, pharmacology, physiology, and interpretation of hemodynamic data.
- Formulate, implement, and understand a diagnostic and treatment plan for common abdominal surgical conditions based upon GI and hepatobiliary published evidence.
- Be able to individualize that plan based upon co-morbidities.

- Have a full understanding of preoperative risk assessment and mitigation to include cardiac risk, pulmonary disability, vascular disease, infection prophylaxis and anticoagulation.
- Have a working knowledge of patient regimen and medication reconciliation for surgical patients to avoid drug interaction or undue disruption of regimen.
- Demonstrate a working knowledge of the natural history of common general surgery conditions and the logic of modifying that history by timely intervention.
- Demonstrate a working knowledge of transfusion, electrolyte management and surgical nutrition to include TPN.
- Have a command of concepts of laparoscopic surgery including indications, patient response, instrumentation, logistics and post-operative considerations.
- Recognize and initiate management for common surgical complications including oliguria, hypotension, hypertension, chest pain, wound infection, sepsis, and electrolyte abnormalities.
- Demonstrate a working knowledge of pain management to include recognition of implications of pain, analgesics, narcotics, adjunctive measures and PCA.
- Evaluate by astute history and physical examination and prepare treatment plan for the following specific conditions:
  - o inguinal hernia (asymptomatic, symptomatic, irreducible, incarcerated)
  - hemorrhoids grade 1-3
  - anal fissure
  - o fistula-in-ano
  - cholelithiasis (asymptomatic and symptomatic)
  - acute and chronic cholecystitis
  - acute abdomen
  - pancreatitis
  - small bowel obstruction
  - appendicitis
  - diverticulitis
  - GI hemorrhage
- Competence in the use of ophthalmoscope, otoscope, stethoscope, laryngoscope, Doppler, and anoscope.
- Ability to interpret laboratory tests including electrolytes, liver function, nutritional
  assessment, common endocrine testing, renal function, coagulation, blood gases. Ability to
  interpret ECG. Ability to interpret abdominal series, abdominal CT, chest x-ray and to
  understand the radiology report on these studies and on ultrasound studies.
- Ability to apply ATLS and ACLS credentials.

#### Practice-Based Learning and Improvement

#### <u>Goals:</u>

- Develop insight to identify their strengths and weaknesses and set learning goals.
- Evaluate published literature in critically acclaimed journals to continuously improve patient care.
- Apply clinical data to patients on the surgical oncology team.

#### Objectives:

- Evaluate published literature in critically acclaimed journals and texts.
- Apply clinical trials data to patient management.
- Develop a general understanding of statistics to include confidence interval, power of the statistics, and p value.
- Participate in academic and clinical discussions on daily rounds and at weekly conferences.
- A commitment to read and research about every patient in your sphere to include text, computer literature search, conferences and questioning of other members of the team.
- An understanding of study design.
- An understanding of the levels of confidence or evidence in published material.
- Manage information technology appropriately to manage information, access on-line resources and support personal education.
- Receive and utilize constructive criticism to make improvements.
- Recognize strengths and build upon them.
- Explore scientific literature concerning patient management questions.
- Define the concepts of "best practice" and "evidence-based medicine."

#### **Interpersonal and Communication Skills**

#### Goals:

- Deliver patient information to consulting physicians, patients, their families, and other health care professionals that are effective, accurate and complete.
- Effectively interact and communicate with multidisciplinary teams to deliver optimal patient care.
- Participate in daily rounds.

- Cultivate ethical and appropriate patient relationships.
- Display/reflect empathy and compassion for all patients.
- Develop effective listening skills, including observing nonverbal clues and using explanatory questioning.
- Develop effective, complete, and accurate note writing skills for documentation in the EMR.
- Clearly, accurately, and succinctly present pertinent information to faculty and senior residents regarding newly admitted patients.
- Clearly and respectfully communicate with patients and appropriate members of their families about identified disease processes (including complications), the expected courses, operative findings, and operative procedures with assistance from upper-level residents.
- Execute effective and thorough patient hand-off/sign out.
- Appraise the senior resident of all progress of all patients and alert them of any new problems on the service.
- Clearly, accurately, and respectfully communicate with nurses and other hospital employees,

referring and consulting physicians, including residents.

- Maintain clear, concise, accurate, and timely medical records including (but not limited to) admission history and physical examination notes, consultation notes, progress notes, written and verbal orders, operative notes, and discharge summaries.
- Model effective communication techniques to medical students and exhibit proper interpersonal skills when interacting with patients, their families, and other health care providers.
- Ensure that all student notes are accurate, reflect a proper plan, and are countersigned by a physician each day.
- Enter all procedures and operative cases in which he/she is the surgeon of record into the system database within 24 hours of completing the procedure or operation.
- Dictate an accurate and descriptive narration of the operative procedure in which he/she is the primary surgeon within 24 hours.

#### **Professionalism**

#### Goals:

- Interact with patients and families in a professional manner.
- Maintain high ethical behavior in all professional activities.
- Take personal responsibility for actions and decisions regarding patients.
- Exhibit knowledge of and utilize privacy policies, informed consent, business, and medical ethics.
- Know and follow institutional behavior policies (i.e., Sexual harassment, etc.).
- Exhibit professionalism through timely completion of required administrative responsibilities (evaluations, recording hours, chart documentation, medical record dictations, etc.).
- Interact with colleagues, ancillary staff, and administrative personnel in a professional manner.

- Place the needs of the patient above all the needs or desires of oneself.
- Receive and utilize feedback on performance to improve outcomes.
- Identify ethical issues and apply standards of ethical care and behavior.
- Participate in end-of-life discussions and decisions with senior level residents and/or attendings.
- Exhibit sensitivity to gender, age, race, and cultural issues.
- Model ethical and professional behavior in clinical setting by example.
- Display leadership qualities that can be cultivated over the course of training.
- Practice proper and professional grooming at all times, including appropriate attire.
- Attend to administrative responsibilities in a timely manner:
- Complete timely medical records and dictations.
- Answer pages promptly and professionally.

- Enter cases into ACGME Operative Log.
- Enter duty hours weekly.
- Complete all evaluations of faculty and program and peers in a timely manner.

#### **Systems-Based Practice**

#### Goals:

- Coordinate patient care within the health care system.
- Recognize system issues to reduce errors in patient care management.
- Understand the impact system resources have on patient outcomes.
- Develop understanding of billing and finances.
- Provide optimal patient care by utilizing resources available throughout the system.
- Interact with other specialties referring patients to the general surgery service.

- Appropriately utilize, in a timely and cost-efficient manner, ancillary services including social services, discharge planning, physical therapy, nutrition services, pharmacy, and physician extenders.
- Outline the financial costs, the risks and benefits of the proposed diagnostic studies and therapeutic procedures.
- Determine and convey to appropriate individuals the instruments and other materials necessary for all procedures.
- Justify all diagnostic tests ordered, including laboratory studies, and document when needed.
- Appreciate the continuity between clinic and hospital-based care.
- Practice cost-effective and appropriate preoperative evaluation and postoperative follow up.
- Recognize resource allocation issues.
- Exhibit sensitivity to medical-legal issues.
- Utilize hospital information technology to provide cost-effective and optimal patient care.
- Seek assistance in identifying additional resources to maximize outcomes for patients. Participate in multidisciplinary discussions to elicit system resources to reduce errors and improve patient care.
- Participate in identifying system errors and implementing potential systems solutions.

#### **Assessment Methods**

#### Patient Care:

- New Innovations evaluations by faculty
- New Innovations evaluations by peers
- · Weekly attending rounds

#### Medical Knowledge:

- Annual ABSITE
- New Innovations evaluations by faculty
- New Innovations evaluations by peers
- Mock oral exams
- Weekly attending rounds

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

- New Innovations evaluations by faculty
- New Innovations evaluations by peers
- Weekly M&M conference
- · Weekly attending rounds
- Journal Club

#### Professionalism:

- 360 evaluations by inpatient and outpatient clinical and administrative staff and medical students
- New Innovations evaluations by faculty
- New Innovations evaluations by peers

#### **Interpersonal and Communication Skills:**

- 360 evaluations by inpatient and outpatient clinical and administrative staff and medical students
- New Innovations evaluations by faculty
- New Innovations evaluations by peers
- Mock oral exams

#### **Systems-Based Practice:**

- Weekly M&M conference
- Trauma peer review conference

#### <u>Curriculums:</u>

- SCORE
- TrueLearn question bank
- Surgery Residency curriculum

#### General Surgery, Chief Rotation

#### Facility

Huntington Veterans Administration Medical Center

#### **PGY-4 Clinical Duties**

- Exposure to Complex General Surgery.
- Attend clinic.
- Direct every aspect of clinical care, including pre- and post-operative management, and staff patients with attendings daily.
- Coordinate and lead the clinical education of fellow residents and medical students on the team.
- Take the lead in the technical aspects of operations and direct operative decision-making under the
  direct supervision of attending surgeons, refining their surgical skills and judgment to prepare for a life
  of independent practice.

#### **PGY-4 Administrative Duties**

- See Handbook.
- Fourth-year residents act as chief on all services, leading the team in every aspect.
- Complete rotation evaluation at the completion of the rotation.
- Obtain completed CAMEO and operative assessment from attending at end of rotation.
- Fulfill all administrative responsibilities of the service to ensure the team functions smoothly by coordinating schedules to ensure all clinics and operating rooms are staffed, while guaranteeing that all ACGME and duty-hour restrictions are met.
- Prepare and present M&M lists each Wednesday at Morbidity and Mortality Conference.

#### **PGY-4 Rotation Curriculum**

- Review and complete all assigned SCORE modules and guizzes.
- Participate in assigned mock oral exams.
- Begin reviewing program provided Pass Machine curriculum for Qualifying Exam.

## General Surgery, Chief - Huntington Veterans Administration Medical Center

#### **Core Competencies**

#### Patient Care

#### <u>Goals:</u>

- Formulate accurate decisions about General Surgery patients that may or may not require surgery.
- Gather essential and accurate information about patients.
- Provide trainee with an opportunity to participate in pre-operative, peri-operative and post-operative care for the trauma patient.

#### Objectives:

- Evaluate general surgery patients and report to chief level resident and or attending with a differential diagnosis and comprehensive plan for the care of the patient.
- Coordinate with junior level residents and ER staff the work required.
- Take a complete history and physical examination.
- Gathers essential and accurate information about patients.
- Identify non-verbal communications in interview with patients.
- Actively listen to patients and or families when interviewing patients.
- Incorporate patients' preferences in therapeutic intervention.
- Prioritize patient acuity.
- Lead in decisions regarding appropriate triage of patients.
- Prioritize clinical responsibilities.
- Accurately and succinctly, convey the assessment of the patient to chief residents and attending surgical staff.
- Know Advanced Cardiac Life Support protocols.
- Exhibit caring and respectful behaviors when interacting with patients and/or their families.
- Formulate management plans for diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment.
- Know the policies and procedures in working with the services and carry out patient care management plans for general surgery and critically ill patients.
- Know the indications and contraindications for various medications used in the preparation and performance of procedures.
- Assist chief resident and/or attending in the overall care of patients for the team of residents and students.
- Assist chief resident and/or attending with all essential medical and invasive procedures.
- Participate in coordinating with health care professionals, including those from other disciplines, to care of the critically ill patient to provide Patient-focused care.
- Participate in patient management in surgery wards, operating room, and outpatient clinic.
- Develop competence in interpretation of radiologic studies such as abdominal films, chest x-rays, CT scans, and other appropriate radiological studies.
- Participate in the work-up and assist with plan to handle any possible abdominal crises.
- Participate in diagnosis and therapeutic plan for patients sustaining multi-system organ failure.
- Deliver a medical opinion to another surgical or non-surgical colleague about a patient.
- Know, follow, and execute the evidence based, established critical care protocols.

#### Medical Knowledge

#### Goals:

 Know the specific algorithms for initial treatment and subsequent management of complex general surgery patients.

- Know the indication for operative and non-operative therapy in the general surgery patients.
- Utilize web-based resources, journals, surgical texts, SCORE, and other materials for detailed clinical and/or basic science information relative to patient care.

- Identify and discuss primary surgical literature in an evaluative-based manner.
- Assess patients, formulate a differential diagnosis, and order appropriate workup for patients.
- Outline the basics of the multimodality treatment of general surgery patients.
- Provide timely surgical assessment and operative management of the patient with an acute general surgical problem.
- Define the categories of shock based upon type and explain the etiology and pathophysiology of each type of shock: Cardiogenic, Hypovolemic, Septic.
- Recognize and treat cardiac tamponade and tension pneumothorax.
- Formulate and implement a diagnostic and treatment plan for critically ill patients and present findings to appropriate attending physician.
- Know policies and procedures for multi-disciplinary care of the surgical and/or critical care patient.
- Exhibit knowledge of surgical infections, complications of acute surgical disease, and surgical management.
- Identify and discuss surgical literature in areas of general surgery and critical care.
- Incorporate basic medical knowledge to daily patient care.
- Evaluate and demonstrate knowledge of pertinent scientific information.
- Exhibit knowledge base sufficient to teach medical students on the service.
- Integrate surgical continuity of care principles into the total care plan for general surgical and critically ill patients.
- Identify the significance of the natural history of surgical disease, the consequence of surgical care (both positive and negative), and the influence of continuity of care upon surgical outcomes.
- Demonstrate an understanding of:
  - Basic science principles
    - Ex: metabolism, wound healing
  - General Surgery principles
    - Ex: acute abdomen
  - General Medicine principles
    - Ex: infectious disease
  - Critical Care subjects
    - Ex: ARDS, SIRS, acid/base
  - Pharmacologic principles
    - Ex: antibiotic management
  - Radiographic studies
    - Indications and interpretation

- Attend the following mandatory conferences:
  - Departmental Grand Rounds
  - Weekly resident didactic sessions
  - Journal Club
  - Mortality and Morbidity Case Conference
  - Trauma Conferences

#### Practice-Based Learning and Improvement

#### Goals:

- Develop insight to identify their strengths and weaknesses and set learning goals.
- Learn the basic principles of biostatistics, study design, and epidemiology.
- Evaluate published literature in critically acclaimed journals.

#### Objectives:

- Receive and utilize constructive criticism to make improvements.
- Recognize strengths and build upon them.
- Identify weaknesses and set learning goals.
- Explore scientific literature concerning patient management questions.
- Define the concepts of "best practice" and "evidence-based medicine."
- Utilize technology and medical informatics in day-to-day patient care.
- Review current literature to gain insight into practices using quality improvement through review of cases at M&M conferences.
- Recognize the principles of biostatistics, study design, and epidemiology.
- Complete weekly reading assignments related to resident education.
- Analyze practice-based improvement activities using a systematic methodology.
- Obtains and uses information about their population of patients and the larger population from which patients are drawn.
- Facilitates the learning of medical students.
- Exhibit and recognize the importance of lifelong learning in surgical practice.

#### **Interpersonal and Communication Skills**

#### Goals:

- Deliver patient information to consulting physicians, patients, their families, and other health care professionals that is effective, accurate and complete.
- Effectively interact and communicate with multidisciplinary teams to deliver optimal patient care.
- Participate in daily rounds.

#### Objectives:

 Collegially interact with surgical faculty as well as the various consulting medical teams and emergency department physicians and staff.

- Cultivate ethical and appropriate patient relationships.
- Display/reflect empathy and compassion for all patients.
- Develop effective listening skills, including observing nonverbal clues and using explanatory questioning.
- Clearly, accurately, and succinctly present pertinent information to faculty and senior residents regarding newly admitted patients.
- Clearly and respectfully communicate with patients and appropriate members of their families about identified disease processes (including complications), the expected courses, operative findings, and operative procedures with assistance from upper-level residents.
- Execute effective and thorough patient hand-off/sign out.
- Appraise the team (junior residents) of all progress of all patients and alert them of any new problems on the service.
- Clearly, accurately, and respectfully communicate with nurses and other hospital employees, referring and consulting physicians, including residents.
- Maintain clear, concise, accurate, and timely medical records including (but not limited to) admission history and physical examination notes, consultation notes, progress notes, written and verbal orders, operative notes, and discharge summaries.
- Develop effective, complete, and accurate note writing skills to document patient care in EMR.
- Model effective communication techniques to medical students and exhibit proper interpersonal skills when interacting with patients, their families, and other health care providers.
- Ensure that all student notes are accurate, reflect a proper plan, and are countersigned by a physician each day.
- Enter all procedures and operative cases in which he/she is the surgeon of record into the system database within 24 hours of completing the procedure or operation.
- Dictate an accurate and descriptive narration of the operative procedure in which he/she is the primary surgeon within 24 hours.

#### **Professionalism**

#### Goals:

- Interact with patients and families in a professional manner.
- Maintain high ethical behavior in all professional activities.
- Take personal responsibility for actions and decisions regarding patients.
- Exhibit knowledge of and utilize privacy policies, informed consent, business, and medical ethics.
- Follow institutional behavior policies (i.e., Sexual harassment, etc.).
- Exhibit professionalism through timely completion of required administrative responsibilities (evaluations, recording hours, chart documentation, medical record dictations, etc.).
- Interact with colleagues, ancillary staff, and administrative personnel in a professional manner.

- Place the needs of the patient above all the needs or desires of oneself.
- Receive and utilize feedback on performance to improve outcomes.
- Identify ethical issues and apply standards of ethical care and behavior.
- Participate in end-of-life discussions and decisions with senior level residents and/or attendings.
- Exhibit sensitivity to gender, age, race, and cultural issues.
- Model ethical and professional behavior in clinical setting by example.
- Display leadership qualities that can be cultivated over the course of training.
- Practice proper and professional grooming at all times, including appropriate attire.
- Attend to administrative responsibilities in a timely manner.
- Complete timely medical records and dictations.
- Answer pages promptly and professionally.
- Enter cases in the ACGME Operative Log.
- Enter duty hours weekly.

#### **Systems-Based Practice**

#### Goals:

- Demonstrate an awareness of and responsiveness to the larger context and system of health care.
- Coordinate patient care within the health care system.
- Participate in multidisciplinary discussions to elicit system resources to reduce errors and improve patient care.
- Provide optimal patient care by utilizing resources available throughout the system.
- Understand the impact system resources have on patient outcomes.
- Develop understanding of coding, billing, and finances.
- Participate in identifying system errors and implementing potential systems solutions.

- Appropriately utilize, in a timely and cost-efficient manner, ancillary services including social services, discharge planning, physical therapy, nutrition services, pharmacy, and physician extenders.
- Outline the financial costs, the risks and benefits of the proposed diagnostic studies and therapeutic procedures.
- Determine and convey to appropriate individuals the instruments and other materials necessary for all procedures.
- Justify all diagnostic tests ordered, including laboratory studies, and document when needed.
- Appreciate the continuity between clinic and hospital-based care.
- Practice cost-effective and appropriate preoperative evaluation and postoperative follow up.
- Recognize resource allocation issues.
- Exhibit sensitivity to medical-legal issues.

- Utilize hospital information technology to provide cost-effective and optimal patient care.
- Seek assistance in identifying additional resources to maximize outcomes for patients.
- Participate in inter-disciplinary conversations to understand problematic system issues.
- Participate in root cause analysis to understand solutions that address the problems.

#### **Assessment Methods**

#### Patient Care:

- New Innovations evaluations by faculty
- New Innovations evaluations by peers
- · Weekly attending rounds

#### Medical Knowledge:

- Annual ABSITE
- New Innovations evaluations by faculty
- New Innovations evaluations by peers
- Mock oral exams
- Weekly attending rounds

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

- New Innovations evaluations by faculty
- New Innovations evaluations by peers
- Weekly M&M conference
- Weekly attending rounds
- Journal Club

#### Professionalism:

- 360 evaluations by inpatient and outpatient clinical and administrative staff and medical students
- New Innovations evaluations by faculty
- New Innovations evaluations by peers

#### **Interpersonal and Communication Skills:**

- 360 evaluations by inpatient and outpatient clinical and administrative staff and medical students
- New Innovations evaluations by faculty
- New Innovations evaluations by peers
- Mock oral exams

#### Systems-Based Practice:

- Weekly M&M conference
- Trauma peer review conference

#### Curriculums:

- SCORE
- TrueLearn question bank
- Surgery Residency curriculum