

Surgery Goals and Objectives

Medical Knowledge

The resident should be able to:

1. Discuss the evaluation, and management for the following scenarios:
 - a. Aortic aneurysm.
 - b. Appendicitis
 - c. Bowel obstruction
 - d. Colon cancer
 - e. Diverticular disease
 - f. Breast masses
 - g. Hernias
 - h. Gastric bypass
 - i. Nissen fundoplication
 - j. Gallbladder disease
 - k. Peripheral vascular disease
 - l. GI hemorrhage
 - m. Wound dehiscence
 - n. Hemorrhoids
 - o. Stomach/esophageal cancer
 - p. Pancreatic cancer
 - q. Inflammatory bowel disease
 - r. Ruptured viscus
 - s. Anal fissure, fistula, perianal abscess

Patient Care

The resident should be able to:

1. Give oral and written presentations to attendings in an organized, concise, accurate manner that include differential diagnoses and management plans.
2. Demonstrate principles of patient autonomy, confidentiality, and informed consent.
3. Develop and demonstrate ability to work in an organized, efficient manner in assessing and triaging patients according to urgency.
4. Appropriately use and interpret lab, x-ray, CT, and angiography in patient care.
5. Develop and demonstrate ability to work in an organized, efficient manner in assessing and triaging patients according to urgency and recognize surgical emergencies.
6. Demonstrate competency in the following skills and procedures with surgical supervision:
 - a. First assist on surgeries.
 - b. Clinical assessment including H & P, lab and x-ray evaluation with differential of key signs and symptoms of surgical patients/conditions.
 - c. Preoperative assessment: surgical risks, co-morbid conditions, antibiotic prophylaxis, and patient preparation.
 - d. Intraoperative care: asepsis, fluid management, patient monitoring.
 - e. Postoperative care: fluids, nutrition, wound care, pain control, dressings, suctions and drains.
 - f. Complications: fever/workup, hemorrhage, pneumonia, ileus, infection.
 - g. Paracentesis, suturing/wound closure, Foley catheter placement, I & D cysts/abscesses, NG insertion (if available).
 - h. Endoscopy (if available).
 - i. Fine needle aspirations, lipoma removal, marsupialization of fistulas, hemorrhoid banding (if available).

Interpersonal Communication Skills

The resident should be able to:

1. Effectively communicate with attendings and other healthcare members as a team in coordinating comprehensive surgical healthcare.
2. Effectively communicate medical decisions and recommendations to colleagues and patients.
3. Discuss and demonstrate strategies to discuss sensitive subjects with patients.
4. Demonstrate effective, compassionate and empathetic communication with patients and families while considering psychosocial, economic, and cultural issues of care.

Systems-based Practice

The resident should be able to:

1. Demonstrate effective, compassionate and empathetic communication with patients and families while considering psychosocial, economic, and cultural issues of care.
2. Utilize ancillary services to provide cost-effective and economically appropriate medical treatments.

Practice-based Learning and Improvement

The resident should be able to:

1. Appraise and assimilate scientific evidence to guide improvement in patient care.
2. Incorporate formative evaluation feedback into daily practice.
3. Use information technology to optimize learning.

Professionalism

The resident should be able to:

1. Present themselves professionally in regards to dress, punctuality, and interactions with patients, families, and all medical care providers.
2. Demonstrate compassion, integrity, and respect for others.
3. Demonstrate respect for patient privacy and autonomy.
4. Apply the principles of medical ethics to decision making.

Resident

Faculty

Date