

Acting Internship Description

Campus: Fargo (Southeast)

Acting Internship Title: General Surgery Acting Internship

Location of Acting Internship: Sanford Health, Fargo, ND

Department: Surgery

Course Number: SURG 9298

Preceptor(s): All Southeast Campus Surgical Faculty

Period(s) offered: All

Number of students per period: 1-2

Course Prerequisites: Completion of Surgery Clerkship

Phase Available: ONLY Phase 3

Purpose: To provide advanced experience in surgery including continued acquisition of surgical knowledge and skills, and development of the ability to engage in entrustable professional activities at a resident level.

Objectives: After completing the acting internship, the student will be able to

1. Obtain a history and perform a physical exam.
EPA #1; Competency 3.1
2. Present the history and physical in a concise, well-organized format.
EPA #6; Competency 3.7
3. Form and prioritize a differential diagnosis. Select a working diagnosis.
EPA #2; Competency 3.3
4. Discuss orders and prescriptions and construct evidence-based management plans.
EPA #4; Competency 3.4, 3.8
5. Select screening and diagnostic studies and labs and interpret the results of these tests.
EPA #3; Competency 3.2, 3.3
6. Recognize patients who are critically ill or require emergent care and initiate the appropriate initial steps in that care. Reassess patients on an ongoing basis and adjust plan of care as appropriate.
EPA #10; Competency 3.5
7. Document the clinical encounter in a timely fashion.
EPA #5; Competency 3.7, 5.7
8. Communicate effectively with patients and their families regarding diagnoses and plans of care with respect for cultural and socioeconomic backgrounds.
Competency 3.9, 4.1
9. Work effectively as a member of the interprofessional healthcare team including giving and accepting patient handoffs at transitions of care.
EPA #8, #9; Competency 3.5, 7.5
10. Research a clinical question relating to patient care with appropriate evaluation of resources and use of evidence-based information.
EPA #7; Competency 1.6, 1.10, 2.7
11. Formulate or update an accurate problem list for patients under his or her care.
EPA # 5; Competency 3.3, 3.7

Specialty Specific Objectives: (These should be linked to EPAs and Year 4 Competencies which can be found at <https://med.und.edu/education-resources/phase3.html#Yr4O> under “Overview & Objectives”)

Please include any procedures the student will be expected to perform

11. Obtain informed consent for procedures. (EPA # 11; objective #6, 13)
12. Demonstrate advanced knowledge of various surgical procedures, including their indications, non-surgical alternatives and their expected outcomes (EPA # 3, EPA # 6, EPA #7; objective # 3, 4, 14)
13. Demonstrate an advanced understanding of the performance of various surgical procedures and participate actively in their performance (EPA # 9, EPA #12; objective #14)
14. Demonstrate a working knowledge of the preoperative preparation and postoperative management of surgical patients (EPA #12, EPA #10; objectives #7, 10)
15. Demonstrate a working knowledge of surgical pre techniques and basic surgical suturing and assisting, as well as patient safety protocols (EPA #12, EPA #13; objective #14)

Instructional Activities: During this elective, the student will:

1. Assume primary responsibility of his or her assigned patients under the supervision of an upper level resident or attending.
2. Performed supervised pre-operative surgical consultation on either an inpatient or outpatient basis.
3. Actively participate in the pre-operative work up of patients.
4. Participate in their patient’s procedures.
5. Perform supervised post-operative care of their patients, whether inpatient or outpatient.

Evaluation Methods: The preceptor will:

1. By direct observation evaluate the student’s ability to perform a complete history and physical pertinent to the AI specialty and present his or her findings. (objective #1, #2)
2. By direct observation or review of written work evaluate the student’s ability to form a complete differential diagnosis and select a working diagnosis. (objective #3, #12, #13)
3. By direct observation or verbal discussion evaluate the student’s formulation of patient management plans including those for patients requiring emergent management. (objective #4, #6, #13, #15)
4. By direct observation, verbal discussion or review of written work, evaluate the student’s selection and interpretation of screening and diagnostic laboratory tests. (objective #5, #15)
5. By direct observation evaluate the student’s documentation of clinical encounters. (objective #7, #11, #15)
6. By direct observation and via feedback from the healthcare team, patients, and families, evaluate the student’s communication skills including patient handoffs. (objective #8, #9, #11, #14, #15)
7. By review of written or verbal presentation made by the student evaluate the student’s use of evidence-based information to research a patient care question. (objective #10, #12, #13)

Include below the evaluation methods to be used for the specialty specific objectives. Link the evaluation method to the objective #.

8. Direct observation of student's performance in the operating room and in the performance of other procedures (objective #14)

9. Student will be observed and evaluated on obtaining informed consent (objective #11)

Assessment:

Evaluation methods #1-7 will be assessed using the Entrustability scale.

Level	Descriptor	Example
1	"I had to do"	Requires complete hands on guidance, did not do, or was not given the opportunity to do
2	"I had to talk them through"	Able to perform tasks but requires constant direction
3	"I had to prompt them from time to time"	Demonstrates some independence, but requires intermittent direction
4	"I need to be there in the room just in case"	Independence but unaware of risks and still requires supervision for safe practice
5	"I would not have needed to be there other than to fulfill regulatory requirements"	Complete independence, understand risks and performs safely, practice ready

**This scale was adapted from the Ottawa surgical competency operating room evaluation (O-SCORE): A tool to assess surgical competence. Acad Med. 2012; 87:1401-407.*

Please indicate below the method of assessment for the specialty specific evaluation methods.

- Entrustability scale will be used.

Please indicate who will be completing the assessment. If more than one preceptor, how will scores be compiled?

- The primary preceptor will be responsible for the assessment. At the discretion of the primary preceptor additional preceptors may be asked to comment.

Grading Criteria:

To receive honors, the student must: Perform at a level greater than 4.5 (average).

To pass the AI, the student must: Perform at a level greater than 2.0 up to 4.5 (average)

If the student does not pass, remediation will consist of: If a student fails an AI, the AI Director and campus dean will work with the student to form a written remediation plan (signed by all 3) that specifically addresses the competencies that the student did not meet during the rotation. A copy of this plan will be sent to Student Affairs. In order to pass the AI, the student will be required to meet the original passing requirements. A student may not receive honors on an AI that was initially failed.