Goals - PGY1 - LL Acute Care

PGY 1 - LLUMC Acute Care

Goals:

Loma Linda University Medical Center will provide a learning environment for the care and management of the emergency surgery and trauma patient. Surgical basic science, including fluids and electrolytes, wound healing, and nutrition, will be emphasized. Clinically, residents will assess the patients emergently presenting to the emergency department for acute surgical problems and injuries, develop clinical judgment on managing these issues, and learn operative skills to address the problem. Careful postoperative care and follow up will be emphasized. Residents will develop cognitive and technical skills in dealing with complex, acutely ill patients.

Objectives:

Medical Knowledge

Describe the embryological development of the peritoneal cavity and the position of the abdominal viscera.

Diagram the anatomy of the abdomen including its viscera and anatomic spaces.

Describe the anatomy of the omentum and its role in responding to inflammatory processes.

Describe the treatment alternatives for the patient with an acute abdomen according to the specific etiology.

Outline the basic techniques of evaluation and resuscitation of trauma patients using the Advanced Trauma Life Support (ATLS) protocol.

Summarize basic critical care management principles.

Discuss wound care management in the emergency department and other settings, including management of drains and tubes inserted into various body cavities.

Explain the characteristics of basic surgical skill, including: sterile technique, incisions, wound closures, knot tying, handling of tissues and selection/use of operating instruments.

Consistently apply basic science principles to common clinical situations.

Ability to interpret radiographic findings, EKGs, laboratory data, and intravascular and intra-cranial monitoring systems.

Fundamentals of surgical nutrition including nutrition evaluation as well as routes of access, TPN, eternal nutrition, and nutritional supplements.

List etiologies for persistent high NGT output in the postoperative patient or patients with small bowel obstruction.

Evaluate and institute management of abdominal wound problems.
Describe the clinical presentation of a patient with abscesses, biliary disease, bowel obstructions, diverticulitis, hemorrhoids and fissures.

Draw the anatomy of the gallbladder, triangle of Calot, and hepatic artery.

Describe the risks associated with appendectomy, cholecystectomy and I&D of abscesses.

Develop an understanding of the principles of pre and post-surgical operative care for patients in the Acute Care rotation.

List at least seven etiologies for small bowel obstructions and ileuses.

List three of four causes of mesenteric ischemia.

Assist in closure of abdominal incisions and exhibit competency in suture technique.

Describe the important history and data to be taken prior to central line placement.

Be able to apply and remove all types of dressings.

Make and close a variety of incisions and tie knots using sterile technique.

Describe the management of glucose in the diabetic patient.

Describe the different ventilatory modalities.

Outline the different management options for hepatic, splenic, duodenal, colon and rectal injuries.

Outline the different management options for thoracic injuries.

Outline the different management options and access for the three retroperitoneal zones.

Outline the different diagnostic and treatment modalities for injuries of the three neck zones.

**Patient Care**

Establish basic proficiency in providing pre-operative and post-operative care (writes appropriate pre-op and post-op orders for floor patients, handles nursing calls appropriately, and manages most routine post-operative care with minimal intervention by supervisor).

Take an appropriate history to evaluate patients with general surgical issues to include:

a. A complete history of present illness

b. Presence of any co-morbidities

c. A review of social and family history impacting the present problem

d. A complete review of systems
Demonstrate an increasing level of skill in the physical examination of the general surgery patient with a special emphasis in recognition of the surgical abdomen.

Develop a proficiency in evaluation and interpretation of the different diagnostic modalities including: X-Rays, ultrasounds, CT scans, Contrast studies and MRIs.

Discuss treatment options, risks and potential complications of patients with general surgical issues.

Assist in the performance of general surgical and trauma procedures.

Demonstrate skill in basic surgical techniques, including:

- Knot tying
- Exposure and retraction
- Knowledge of instrumentation
- Incisions
- Closure of incisions
- Handling of graft material including mesh
- Establishing pneumoperitoneum
- Handling of laparoscopic instruments
- Handling of the laparoscopic camera

**Professionalism**

The resident should be receptive to feedback on performance, attentive to ethical issues and be involved in end-of-life discussions and decisions.

Understand the importance of honesty in the doctor-patient relationship and other medical interactions.

Treat each patient, regardless of social or other circumstances, with the same degree of respect you would afford to your own family members.

Learn how to participate in discussions and become an effective part of rounds, attending staff conference, etc.

Complete all assigned patient care tasks for which you are responsible or provide complete sign out to the on-call resident.

Maintain a presentable appearance that sets the standard for the hospital this includes but is not limited to adequate hygiene and appropriate dress. Scrubs should be worn only when operating or while on call.

Assist with families of critically injured/ill patients and guidance of families towards or through difficult decisions.

Demonstrate mentoring and positive role-modelling skills

**Systems-Based Practice**

Understand, review, and contribute to the refinement of clinical pathways
Understand the cost implications of medical decision-making

Partner with health care management to facilitate resource efficient utilization of the hospital resources.

Describe in general terms the benefits of clinical pathway implementation

Develop a cost-effective attitude toward patient management.

Develop an appreciation for the benefits of a multi-disciplinary approach to management of critically ill surgical patients.

Comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) regulations regarding patient privacy and confidentiality

**Practice Based Learning & Improvement**

Demonstrate the ability to:

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

Accept responsibility for all dimensions of routine patient management on the wards

Apply knowledge of scientific data and best practices to the care of the surgical patient

Facilitate learning of medical students and physician assistant students on the team.

Use the LLUMC library and databases on on-line resources to obtain up to date information and review recent advances in the care of the surgical patient.

Demonstrate a consistent pattern of responsible patient care and application of new knowledge to patient management.

Demonstrate a command and facility with onlin educational tools.

**Interpersonal & Communication Skills**

Work as effective team members

Cultivate a culture of mutual respect with members of nursing and support staff

Develop patterns of frequent and accurate communication with team members and attending staff

Gain an appreciation for both verbal and non verbal communication from patients and staff
Demonstrate consistent respectful interactions with members of nursing and support staff

Demonstrate consistent, accurate and timely communication with members of the surgical team

Demonstrate sensitivity and thoughtfulness to patients concerns, and anxieties.

The resident will demonstrate the ability to provide and request appropriate consultation from other medical specialists.