PGY - 2

MEDICAL KNOWLEDGE

Atherosclerosis:
a. Acquire a basic understanding of the concepts and theories dealing with etiology and pathophysiology (high shear stress, low shear stress, response to injury, clinical risk factors)
b. Develop an appreciation for the incidence of atherosclerosis in the US Veteran population including clinical risk factors and vascular beds involved (cerebrovascular, coronary, visceral, aortic and lower extremity)
c. Know preoperative medical management effective in prevention of perioperative MI (beta-blockers, statins, aspirin)

Diabetes mellitus
a. Learn proper clinical classification
b. Learn the clinical pattern and presentation of the common complications associated with diabetes (retinopathy, nephropathy, neuropathy)
c. Develop an effective method for perioperative blood glucose control and insulin dosing

Venous disease
a. Learn (or review) lower extremity venous anatomy
b. Learn the etiology of venous thrombosis (Virchow’s triad)
c. Learn management of DVT (heparin to warfarin and duration)
d. Develop an understanding of the complexities of chronic venous insufficiency (etiology, pathophysiology, management)
e. Know the numerous strategies utilized for prevention of post-op DVT
f. know the well recognized conditions potentially causing hypercoagulability (cancer, anti-thrombin III, protein C, protein S, factor V Leiden, lupus anticoagulant, antiphospholipid antibody)
g. have a basic understanding of lower extremity chronic venous insufficiency (etiology, pathophysiology, management)
Aneurysm disease
a. Acquire a basic understanding of the concepts and theories dealing with etiology and natural history
b. Learn the definition and the common anatomic locations for aneurysm disease

Limb salvage surgery
a. Learn basic patient evaluation skills (pulse exam, bedside ABIs, evaluation for neuropathy and pedal sepsis)
b. Learn to interpret noninvasive vascular lab exam (lower extremity PAE)
c. Learn lower extremity arterial anatomy and accurately interpret aortogram with run-off

Carotid surgery
a. Know the natural history of symptomatic carotid artery stenosis
b. Review arterial anatomy and be able to interpret an arch aortogram
c. Know how to interpret a carotid duplex exam

Claudication
a. Fully appreciate the natural history of patients with Claudication (predictive of MI more than amputation)
b. Have an understanding of the lower extremity treadmill exam and be able to offer a hemodynamic explanation for why the ABI drops in claudicators

Lower extremity amputations
a. Become familiar with the frequently performed types of lower extremity amputation (toe, metatarsal head resection, TMA, below-knee, above-knee) allowing for a full Appreciation of the functional impact on the patient including rehab requirements
b. Learn surgical technique for the various types of lower extremity amputation including patient positioning and use of “the bump”

Dialysis access surgery
a. Learn the deranged hemodynamics associated with A-V fistula
b. Learn the proper upper extremity vascular evaluation (pulse exam, arm BPs, vein mapping)
c. Review upper extremity venous and arterial anatomy

Mesenteric ischemia
a. Learn (or review) mesenteric arterial anatomy
b. Interpret AP and lateral aortogram including major visceral branch anatomy and pathology
c. Learn clinical presentation and initial management of patients with acute and chronic mesenteric ischemia
PATIENT CARE

Identify and successfully modify clinical risk factors for atherosclerosis in the VA patient population (smoking, hyperlipidemia, hypertension, hyperglycemia, diet, exercise, stress)

Demonstrate an understanding of the clinical strategy for management of diabetic foot infections (cultures, antibiotics, wound debridement including timing and methods of debridement, orthotics)

Demonstrate an understanding of the clinical strategy for prevention of diabetic foot ulcers (patient education, blood glucose control, proper foot gear through prosthetics)

Employ an effective method for perioperative blood glucose control and insulin dosing

Acquire clinical skills for successful management of patient with lower extremity venous ulcer (debridement, wound care, antibiotics, elevation, compression therapy)

Know and utilize current methods for prevention of contrast dye nephropathy (sodium bicarb, Mucomyst)

Understand how to prioritize and plan the surgical management of pedal sepsis including timing of operative debridement (urgent/elective), delayed closure techniques, and selected use of guillotine foot amputation.

Manage pre, intra, and post-operative care issues in the patient population on chronic hemodialysis.

PROFESSIONALISM

Learn to communicate clearly, effectively and compassionately with patients, family, team members and staff
Understand the principles of efficient and accurate medical communication for sign outs and hand offs

Learn to place patients reactions to illness within their larger social and cultural Backgrounds

Learn the principles of informed patient decision making

Respect patient confidentiality

Demonstrate consistent, clear communication with patients and families

Demonstrate composure and equanimity under stress

Demonstrate a spirit of helpfulness

Demonstrate the ability to carefully and thoughtfully describe operative procedures to patients.

INTERPERSONAL AND 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.

PRACTICE-BASED LEARNING
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 VA library, 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 teaching efforts with medical students and physician assistant Students

Demonstrate a command and facility with on line educational tools.

SYSTEM-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 VA hospital resources

Describe in general terms the benefits of clinical pathway implementation

Demonstrate consistency in working with healthcare management personnel in discharge planning