

<u>University of Illinois, Metropolitan Group Hospitals Program in</u> General Surgery

Rotation Title: Colorectal Surgery - Lutheran General Hospital

Level of Training: PGY I, PGY V

Faculty: Dr. L. Prasad, Dr. J. Park, Dr. S. Marecik, Dr. K. Kochar

Rotation Description:

This service embodies the basic curriculum of colorectal surgery. This rotation gives the resident extensive exposure to various laparoscopic, Robotic, and open colorectal cases. Attached goals and objectives will be covered largely through patient exposure and through didactic interaction between you and the teaching faculty. You are expected to augment your education with self study and discussion covering all attached goals and objectives in the written curriculum for residents. It is encouraged to use all the attached references to further augment your education.

Assessment:

Monitoring of the accomplishment of the stated objectives will be performed using the following methods:

- 1. 360 degree evaluation: End of rotation assessment of resident's performance with respect to the stated objectives by faculty, nurses, fellow residents, patients and medical students.
- 2. Case Logs: auditing of operative cases pertinent to the specialty in the

Surgical Operative Log.

3. Written Examination: Performance on the annual ABSITE examination, Gastrointestinal, Skin and Soft Tissue, thoracic and vascular systems section.

Surgical Skills Advancement:

The resident will exhibit surgical performance skills based on the following quidelines:

- 1. By the end of the rotation, have completed (per necessity) the OSAT/OSCA for the following procedures:
 - a. PGY I: Boot camp
 - b. PGY V: Open and laparoscopic Colectomies, Colonoscopies

COMPETENCY BASED GOALS AND OBJECTIVES

Medical Knowledge

PGY I Residents:

- Complete assigned reading in SCORE Curriculum as outlined both in SCORE website and outlined document on MGH website
- List the principles related to the evaluation and management of basic colorectal pathology including colorectal cancer, inflammatory bowel disease, and diverticulitis as well as common anorectal problems including, hemorrhoids, fissures, and fistulas.
- Initial evaluation, assessment and laboratory and diagnostic evaluation of patients with acute colorectal and anorectal problems in the inpatient and the emergency room setting.
- Identify and manage, under supervision, issues related to the pre-operative and
 post-operative care of patients with colorectal diseases. This includes the
 knowledge of the appropriate pre-operative work-up of patients with
 colorectal diseases and identification of possible complications during the
 post-operative period.
- Evaluate common colorectal presenting complaints in an outpatient setting including rectal bleeding, perianal pain, colorectal rectal cancer, and

colorectal cancer screening.

PGY V Residents:

- Complete assigned reading in SCORE Curriculum as outlined both in SCORE website and outlined document on MGH website.
- List the principles related to the diagnosis, management, and surgical treatment
 of colorectal and anorectal conditions including colorectal trauma, colorectal
 cancer, hereditary colorectal syndromes, complicated and uncomplicated
 diverticular disease, inflammatory bowel disease, perianal fissures, perianal
 abscesses, perianal fistulas, hemorrhoids, and pilonidal disease.
- Supervise junior residents and manage the clinical inpatient service under the supervision of the surgical attending.
- Evaluation, management, and surgical treatment of colorectal emergencies including postoperative complications, large and small bowel obstructions, lower gastrointestinal hemorrhage and perianal sepsis.
- Identify, manage, and treat issues related to pre-operative and post-operative care of patients with colorectal diseases. This includes the knowledge of the appropriate pre-operative work-up of patients with colorectal diseases and identification of possible complications during the post-operative period.
- Independently evaluate, manage, and develop operative plans for common colorectal presenting complaints in an outpatient setting including rectal bleeding, perianal pain, fecal incontinence, constipation, diarrhea, colorectal rectal cancer, and colorectal cancer screening.
- Complete readings in SCORE Curriculum pertinent to the rotation

PATIENT CARE

PGY I Residents:

- Conduct a thorough history and physical examination
- Assess and initiate treatment for patients with colorectal disease
- Recognize emergencies

PGY V Residents:

- Assess and treat seriously ill patients in the intensive care unit
- Assess and initiate treatment for patients with colorectal disease

- Recognize emergencies
- Demonstrate organization and leadership skills to expedite patients election, preoperative preparation, conduct of surgery and post-operative care

INTERPERSONAL AND COMMUNICATION SKILLS

PGY I Residents:

- Interact with fellow residents and the multidisciplinary team on the service
- Display a friendly disposition that is conducive to successful interaction with team members and patients
- Be able to handle and resolve conflict with patients
- Communicate treatment plans with patients and support staff
- Respond to patients and support staff questions in a positive manner
- Demonstrate proficient use of an electronic ordering system

PGY V Residents:

- Develop and apply effective communication strategies to effectively interact with critically ill patients and their families
- Educate and counsel patients on the service
- Gather essential information from patients; and accurately document patient encounters
- Interact with nurses, residents, attending surgeons, and ancillary staff to achieve the heath-related goals of the patient
- Provide good leadership to the junior residents on the service
- Refine communication techniques with attending physicians as well as junior residents and medical students.

PROFESSIONALISM

PGY I and V Residents:

- Relate as a team member with other residents from other departments
- Relate with all patients and support staff politely and with respect

- Respond to pages and consults in a timely manner
- Respond to criticism and correction with calm and attentive demeanor
- Demonstrate appropriate dress and decorum while on duty
- Handle all patient information confidentially and not discuss it in hallways or other public places
- Use and know the chain of command on the resident service
- Demonstrate kindness, empathy and maturity in the interrelationship with patients with routine surgical problems
- Demonstrate the ability to maintain composure in an emergency department environment
- Demonstrate the ability to maintain a mature relationship in the midst of adversity, especially, when family members and love ones learn about serious injuries to relatives
- Apply methods in resolving disagreements between patient relatives and members of the treating team
- Demonstrate the ability to calm the grieving relative

PRACTICE-BASED LEARNING AND IMPROVEMENT

PGY I Residents:

- Competence in anoscopy and rigid proctoscopy and proficiency in flexible sigmoidoscopy.
- Perform basic minor anorectal procedures including incision and drainage of perianal abscesses.
- First assist with abdominal cases including performing bowel anastomosis and constructing stomas.

PGY V Residents:

- Teach, guide and act as a role model for medical students
- Competency in performing diagnostic colonoscopy
- Perform and assist with basic and complex abdominal and pelvic colorectal procedures including small and large bowel resections and rectal resections such as low anterior resections, abdominoperineal resections, and restorative proctocolectomies.
- Perform complex laparoscopic procedures including colonic resections.
- Perform basic anorectal procedures including surgical hemorrhoidectomies, incision/drainage and treatment of acute and chronic pilonidal disease, and operative management of simple perianal fistulas.
- Supervise junior residents in basic anorectal procedures including incision and

drainage of abscesses and thrombosed hemorrhoids.

SYSTEMS-BASED PRACTICE

PGY I Residents:

- Interrelate with medical students and more senior residents as a team member when caring for patients with routine surgical problems.
- Be adept at being a supportive mid-level team player providing appropriate communications between the younger members and the more senior members

PGY V Residents:

- Utilize the expertise of other services and support personnel
- Demonstrate good patient advocacy skills
- Be adept in using the electronic medical record system, understanding its benefits and difficulties in its adoption
- Demonstrate adeptness with the resource usage in a capitated system wherein resources are not infinite and costs are not simply passed on to the consumer

READING MATERIALS:

Educational materials which will function as guides for resident education during this course include but are not limited to:

- The SCORE General Surgery Resident Curriculum Portal accessed at https://portal.surgicalcore.org/home
- 2. Schwartz's Principles of Surgery
- 3. Zollinger's Atlas of Surgical Operations
- 4. The Surgical Core Curriculum accessed via Access Surgery through the University of Illinois-Chicago website

OUTCOMES:

Outcomes for the various goals and procedures in this curriculum will be assessed along the following standards:

- 1. Superior: the resident exhibits conceptual understanding beyond that which is described in this bulletin, and practice performance which is at a standard for a resident at a more advanced PGY year.
- 2. Above-Average: the resident has shown understanding and performance that is above what is expected for the rotation.
- 3. Competent: the resident exhibits conceptual understanding and practice based performance standards that are minimal, for the appropriate PGY year, for advancing towards surgical practice.
- 4. In Need of Remediation: the resident has failed to grasp the basic concepts and practices necessary to advance past this rotation for the PGY year, and shows need of repeating or training augmentation.