

Women's College Hospital Ambulatory Care – General Surgery Rotation Specific - Goals and Objectives

The Women's College Hospital ambulatory rotation is designed to provide general surgery residents with experience in ambulatory general surgery. The scope of activities in this rotation includes general surgery procedures such as hernia repair, laparoscopic cholecystectomy, and anorectal procedures. The resident will also take part in endocrine surgery – thyroid and parathyroid- as well as benign and malignant breast disease.

Medical Expert

By the end of the rotation the resident will be able to

Knowledge

1. Demonstrate knowledge of the principles and rationale for performing ambulatory surgical procedures, where ambulatory surgery is defined as any procedure for which the patient is admitted and discharged on the same day, regardless of type of anesthesia.
2. Discuss the principles and rationale for performing ambulatory surgery on selected patients, including:
 - i. Assessment of patient risk
 - ii. Patient selection
 - iii. Level of preparation for patients with co-morbid diseases
3. Complete a preoperative evaluation of a patient as a potential candidate for ambulatory surgery, including consideration of patient risks and treatment options.
4. Demonstrate competency in counseling patients and their families appropriately about ambulatory surgery and follow-up care, including obtaining informed consent after discussing the risks, benefits, and alternatives to the procedure.
5. Demonstrate competency in the preoperative preparation of a patient with co-morbid diseases for ambulatory surgery.
6. Demonstrate competency in the management of postoperative pain in the ambulatory setting.
7. Demonstrate competency in postoperative follow-up procedures, including methods for monitoring and managing complications.

OR and Clinical Skills

- i. Perform selected ambulatory surgical procedures independently, including:
 - Primary inguinal hernia repair – PGY3 and greater
 - Laparoscopic cholecystectomy – PGY3 or greater
 - Breast – Lumpectomy, Mastectomy, SLNB– PGY 3 or greater
 - Breast – ALND– PGY 4 or greater
 - Thyroid – Partial and Total Thyroidectomy, Parathyroidectomy – PGY4 or greater
 - Anorectal – hemorrhoidectomy, pilonidal abscess – PGY2 or greater
 - Endoscopy – OGD, flexible sigmoidoscopy, colonoscopy – PGY2 or greater
- ii. Demonstrate competency in pre-discharge examination
- iii. Prescribe necessary follow-up care, including:
 - Prescribing appropriate postoperative analgesia
 - Communicating instructions and expectations for follow-up, such as:
 - Pain level and location
 - Possible side-effects of medications
 - Level of activity and return to work
 - Wound care and potential problems
 - Timing of follow-up appointment
- iv. Arrange home care services and demonstrate knowledge of appropriate indications.

Communicator

By the end of the rotation the resident will be able to

1. Complete the pre-operative check list
2. Counsel patients and family with appropriate sensitivity regarding:
 - Disease entity (prognosis, treatment options, additional treatment)
 - Surgical issues
 - Operative risks (possible complications)
3. Demonstrate a sensitive and culturally appropriate style of communicating with patients and families.
4. Communicate with patients related to post-operative care and expectations related to:
 - Pain level and location
 - Possible side-effects of medications
 - Level of activity and return to work
 - Wound care and potential problems
 - Post-operative follow-up
5. Create concise, accurate and timely consultation notes and operative notes.

Collaborator

By the end of the rotation the resident will be able to

1. Effectively consult other physicians and health care professionals, especially those teams necessary for pre-operative assessment such as anesthesia and internal medicine.
2. Demonstrate competency in effective patient care delivery with other team members and as a member of the health care team.
3. Work in an interprofessional environment, collaborating effectively with other health care professionals including nursing, physiotherapy, social work and CCAC.

Manager

By the end of the rotation the resident will be able to

1. Make appropriate and efficient utilization of health care resources.
2. Demonstrate effective time management skills and punctuality.

Health Advocate

By the end of the rotation the resident will be able to

1. Discuss with patients the ways in which post-operative recovery can be optimized.
2. Promote the standard of care in the surgical management of the surgical diseases reflected above.

Scholar

By the end of the rotation the resident will be able to

1. Critically appraises relevant and current literature on ambulatory surgical care.
2. Demonstrates effective self-directed learning as demonstrated by reading around cases, asking questions, and recognizing the need for lifelong learning.

Professional

By the end of the rotation the resident will be able to

1. Demonstrate respect for colleagues, more junior trainees and other members of the health care team.
2. Demonstrate empathy, cultural sensitivity, honesty and compassion while performing high quality patient care.
3. Demonstrate insight into strengths and weaknesses and receive feedback appropriately.