

Postgraduate Education

Urology Residency Program – Rotation Plan

General Surgery Rotation - Foundations

CBD STAGE:	Transition to Discipline and Foundations
LENGTH OF	Four 4-week blocks (*1 block in TTD and 3 in F)
ROTATION:	
ROTATION OFFERED	Thunder Bay
AT:	

FOCUS OF THIS ROTATION

This rotation will provide residents with the opportunity to practice fundamental surgical skills and competencies that will help to solidify the competencies they must attain in the Surgical Foundations Program. The resident will gain experience in assessing and managing patients on the wards, the emergency department, and in the operating room.

Residents will be expected to participate in the activities of the general surgery department, such as attending offices and clinics, participating in procedures in the outpatient area as well as in the main operating room, participating in endoscopic procedures, assessing and managing inpatients, performing consultations on the ward and in the emergency room, and participating in call coverage.

EPAS FOR THIS ROTATION

The EPAS that should be prioritized in this rotation are those highlighted in green.

EPA Number	EPA Description
Surgical Foundations	
SF TTD 1	Performing the preoperative preparation of patients for basic surgical procedures
SF TTD 2	Recognizing and initiating early management for critically ill surgical patients
SF TTD 3	Documenting clinical encounters
SF TTD 4	Demonstrating handover technique
SF TTD 5	Demonstrating ability to function in the operating room

SF TTD 6	Suturing incisions
SF TTD 7	Managing tubes, drains and central lines
SF Foundations 1	Providing initial management for critically ill patients
SF Foundations 3	Providing initial management for trauma patients
SF Foundations 4	Providing risk assessment and management for preoperative patients in
	preparation for surgery
SF Foundations 5	Providing patient education and informed consent in preparation for surgical
	care
SF Foundations 6	Participating in surgical procedures
SF Foundations 7	Managing patients with an uncomplicated post-operative course
SF Foundations 8	Managing post-operative patients with complications
SF Foundations 9	Supervising junior learners in the clinical setting

EPA Objectives

The following are the objectives resident will be assessed on through the EPAs. These outline the expectations regarding the level of competence residents are required to demonstrate to achieve their EPAs, at this stage of training.

Note that the objectives in green font should be prioritized in this rotation.

CanMEDS ROLES LEGEND		
ME	Medical expert	
COM	Communicator	
COL	Collaborator	
HA	Health Advocate	
Р	Professional	
S	Scholar	
L	Leader	

Surgical Foundations

TTD1

ME 2.2 Elicit an accurate relevant history

COM 2.1 Conduct the interview in a patient-centred manner

ME 2.2 Perform a physical examination relevant to the presentation

ME 2.4 Develop an initial management plan for common patient presentations in surgical practice

P 1.1 Complete assigned responsibilities in a timely fashion

TTD2

- ME 2.2 Synthesize and interpret information from the clinical assessment
- COM 5.1 Organize information in appropriate sections within the medical record
- COM 5.1 Provide a clear plan for ongoing management
- P 1.1 Complete assigned responsibilities in a timely fashion

TTD3

- ME 2.2 Synthesize and interpret information from the clinical assessment
- COM 5.1 Organize information in appropriate sections within the medical record
- COM 5.1 Provide a clear plan for ongoing management
- P 1.1 Complete assigned responsibilities in a timely fashion

TTD4

- ME 5.2 Use structured handover tools and strategies to enhance patient safety
- ME 2.1 Identify patients at risk for sudden deterioration in clinical status
- COL 3.2 Summarize and prioritize patient issues providing rationale for key decisions
- COL 3.2 Communicate plans for ongoing management of patients, such as outstanding investigations and anticipated events or outcomes
- COL 3.2 Answer questions from the receiving physician(s) during transitions in care, clarifying issues as needed

TTD5

- ME 3.4 Demonstrate effective procedure preparation, including the use of a pre-procedure time-out or surgical safety checklist as appropriate
- ME 3.4 Hand-cleanse, gown and glove
- ME 3.4 Establish and maintain a sterile field
- ME 3.4 Maintain universal precautions
- COL 1.2 Demonstrate knowledge of the roles and responsibilities of all participants in the operating room

TTD6

- ME 3.4 Maintain sterile technique
- ME 3.4 Obtain appropriate assistance
- ME 3.4 Select and use suture materials
- ME 3.4 Use surgical instruments and equipment correctly and in a fluid manner
- ME 3.4 Assess the quality of the closure

TTD7

- ME 1.3 Apply knowledge of the different tubes, drains and lines used in the care of the surgical patient, the indications for their use and the risks associated with them
- ME 3.3 Determine the urgency with which various problems with in-situ tubes, drains and lines require intervention
- ME 3.4 Troubleshoot tubes and drains including insertion, unblocking, repositioning, removal or replacement

FOUNDATIONS 1

- ME 1.4 Perform the clinical assessment in a time-effective manner
- ME 1.4 Recognize urgent problems that may need the involvement of more experienced colleagues and seek their assistance
- ME 2.2 Develop a specific differential diagnosis relevant to the patient's presentation
- ME 2.2 Interpret common and simple investigational modalities
- ME 2.4 Develop and implement initial management plans for common problems in surgical practice
- ME 3.3 Consider urgency and potential for deterioration, in advocating for the timely execution of a procedure or therapy
- COM 5.1 Document the clinical encounter to adequately convey clinical reasoning and the rationale for decisions
- ME 4.1 Identify the need for and timing of consultation with another physician or health care professional

FOUNDATIONS 3

- ME 1.4 Perform the clinical assessment in a timely manner
- ME 1.4 Recognize urgent problems that may need the involvement of more experienced colleagues and seek their assistance
- ME 2.1 Iteratively establish priorities as the patient's situation evolves
- ME 3.3 Consider urgency and potential for deterioration, in advocating for the timely execution of a procedure or therapy
- ME 4.1 Establish plans for ongoing care, taking into account the patient's clinical state as well as available resources
- ME 4.1 Implement management to stabilize the patient prior to additional testing or transfer
- COL 1.1 Receive and appropriately respond to input from other health care professionals

FOUNDATIONS 4

- ME 1.4 Perform a focused clinical assessment that addresses all relevant issues
- ME 2.2 Select and/or interpret appropriate investigations and/or imaging with sufficient attention to clinical details
- ME 2.4 Develop and implement plans for preoperative optimization of patients
- ME 5.2 Use preoperative care pathways, as appropriate
- ME 2.4 Use appropriate prophylaxis
- ME 3.3 Consider urgency and potential for deterioration, in advocating for the timely execution of a procedure or therapy
- COL 1.2 Collaborate with other health care providers and all involved parties in booking the case including ICU, step down unit, or OR
- HA 1.3 Identify modifiable risk factors and promote health and wellness
- HA 1.3 Anticipate and advocate for the perioperative needs of patients belonging to vulnerable and marginalized populations

FOUNDATIONS 5

- ME 3.2 Describe a proposed surgical care plan to the patient/family, including its risks, expected outcomes and alternative treatments
- P 1.1 Disclose the role of surgical learners in the patient's procedure and care
- COM 3.1 Use plain language and avoid medical jargon
- COM 4.3 Answer questions from the patient and/or family
- COM 5.1 Document the consent discussion and its outcome

FOUNDATIONS 6

- ME 3.4 Set up, position and drape the patient for the procedure
- ME 1.3 Apply knowledge of anatomy, key landmarks, and the surgical procedure
- ME 3.4 Use surgical instruments and equipment correctly and in a fluid manner
- ME 3.4 Perform safe dissection of relevant structures and tissue layers with gentle tissue handling
- COL 1.2 Provide and/or use operative assistance effectively
- P 1.1 Work within personal limits, asking for help as needed
- COL 1.2 Work effectively with the OR team

FOUNDATIONS 7

- ME 1.4 Perform a focused clinical assessment that addresses all relevant issues
- ME 3.4 Perform wound surveillance and dressing care
- ME 4.1 Coordinate investigation, treatment, and follow-up plans when multiple physicians and healthcare professionals are involved

- ME 4.1 Develop and implement a plan for post-operative, immediate and/or long-term care
- COL 3.2 Communicate with the patient's primary health care professional about the patient's care
- COL 3.2 Summarize the patient's issues in the transfer summary, including plans to deal with the ongoing issues
- HA 1.2 Select patient education resources related to surgical practice
- HA 1.3 Anticipate and advocate for the perioperative needs of patients belonging to vulnerable and marginalized populations

Part B: Collaborative care

- COL 1.2 Demonstrate understanding of the roles and scopes of practice of other health care providers related to surgical practice
- COL 1.3 Integrate the patient's perspective and context into the collaborative care plan
- COL 2.1 Actively listen to and engage in interactions with collaborators
- COL 3.2 Arrange for the appropriate resources and health care assistance to be available for the surgical patient
- P 4.1 Regulate attention, emotions, thoughts, and behaviours while maintaining capacity to perform professional tasks

FOUNDATIONS 8

- ME 1.4 Perform a focused clinical assessment that addresses all relevant issues
- ME 1.4 Recognize urgent problems that may need the involvement of more experienced colleagues and seek their assistance
- ME 2.2 Develop a specific differential diagnosis relevant to the patient's presentation
- ME 2.2 Select and/or interpret appropriate investigations and/or imaging with sufficient attention to clinical details
- ME 3.3 Consider urgency and potential for deterioration, in advocating for the timely execution of a procedure or therapy
- ME 4.1 Implement a post-operative care plan for patients with a complicated post-operative course
- COM 5.1 Document the clinical encounter to adequately convey clinical reasoning and the rationale for decisions
- P 2.2 Demonstrate a commitment to patient safety and quality improvement through adherence to institutional policies and procedures, and clinical practice guidelines

FOUNDATIONS 9

- S 2.4 Identify the learning needs of a junior learner
- S 2.2 Create a positive learning environment

- S 2.3 Demonstrate an understanding of the role of appropriate supervision
- S 2.4 Plan learning activities appropriate to the level of the learner
- S 2.5 Provide written or oral feedback to other learners, faculty and other members of the team