

Postgraduate Education

Urology Residency Program – Rotation Plan

Junior Trauma Rotation - Foundations

CBD STAGE:	Foundations
LENGTH OF	Two 4-week blocks
ROTATION:	
ROTATION OFFERED	Thunder Bay
AT:	

FOCUS OF THIS ROTATION

The goal of this rotation is to provide the residents with experience and expertise in the assessment and management of minor or major trauma patient in the emergency department. In addition, residents will participate in the surgical treatment of the multiple injured patients by attending the surgery for any traumatized patient admitted during the on-call period, under the supervision of the on-call urologist.

EPAS FOR THIS ROTATION

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

EPA Number	EPA Description
Surgical Foundations	
TTD 3	Documenting clinical encounters
TTD 4	Demonstrating handover technique
TTD 5	Demonstrating ability to function in the operating room
TTD 6	Suturing incisions
TTD 7	Managing tubes, drains and central lines
F 1	Providing initial management for critically ill patients
F 2	Inserting central venous lines
F 3	Providing initial management for trauma patients
F 4	Providing risk assessment and management for preoperative patients in
	preparation for surgery
F 5	Providing patient education and informed consent in preparation for surgical
	care

F 6	Participating in surgical procedures
F 7	Managing patients with an uncomplicated post-operative course
F 8	Managing post-operative patients with complications
F 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	
НА	Health Advocate	
Р	Professional	
S	Scholar	
L	Leader	

Surgical Foundations

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

- ME 3.1 Determine the appropriate site for line insertion
- ME 3.4 Set up, position and drape the patient for the procedure
- ME 3.4 Prepare and cleanse the procedural site
- ME 3.4 Maintain universal precautions
- ME 3.4 Perform the insertion of a central venous line, using ultrasound guidance as appropriate

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
- COM 3.1 Convey information about the post-operative care and issues, immediate and long-term, clearly and accurately
- 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

- 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

- 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

- 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