

## **Surgical Intensive Care**

### **Year**

R-1

### **Location**

Miami Valley Hospital (MVH)

### **Duration**

1 Month

### **Faculty**

Harry L. Anderson, III, MD

### **Description**

The orthopaedic resident will develop expertise in the evaluation of the critically ill patient. The resident will demonstrate knowledge of the principles associated with the diagnosis and management of critically ill patients, including knowledge of simple and complex multiple organ system normalities and abnormalities. The resident will demonstrate the ability to appropriately diagnose and treat patients with interrelated system disorders in the intensive care unit. Call is on the General Surgery service and is dictated by the chief general surgery resident. All duty hour rules are to be followed.

### **Educational Objectives**

1. The resident will become proficient in diagnosis, evaluation and management of the complex surgical patient.
2. The resident will define and describe the role of the surgeon in the critical setting.
3. Identify and outline criteria for admitting patients to the intensive care unit (ICU).
4. Identify and outline criteria for discharging patients from the ICU.
5. Identify and explain the considerations surgeons must make when working with consultants in managing critical care situations.
6. Identify potential Organ, Tissue Donor candidates, as well as the hospital specific procedure for contacting families for potential donation.

### **Competencies**

#### **Patient Care**

Residents must be able to provide care that is compassionate, appropriate and effective for the treatment of health problems and the promotion of health. Residents are expected to:

- Communicate effectively and demonstrate caring and respectful behaviors when interacting with patients and their families.
- Gather essential and accurate information about the patient.
- Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment.
- Develop and carry out patient management plans, counsel and educate patients and their families.
- Use information technology to support patient care decisions and patient education.
- Provide healthcare services aimed at preventing health problems or maintaining health work with healthcare professionals, including those from other disciplines, to provide patient-focused care.
- Residents will attend daily rounds with senior surgical resident and attending staff.

- Residents will attend surgeries as assigned by senior surgical resident and attending staff and will participate in preoperative and postoperative care of all operative patients.
- Residents will participate in night call duties as assigned by surgical chief. Duty hour rules are to be followed.

### **Medical Knowledge**

Residents must demonstrate knowledge about established and evolving biomedical, clinical, and cognate sciences (e.g. epidemiological) and the application of this knowledge to patient care.

Residents are expected to:

- Demonstrate an investigatory and analytical thinking approach to clinical situations.
- Know and apply the basic and clinically-supportive sciences which are appropriate to general orthopaedic surgery.
- Residents will attend scheduled general surgery conferences.
- Residents will become knowledgeable in the interpretation of vascular studies as they pertain to surgical evaluation of a limb.

### **Interpersonal and Communication Skills**

Residents will at all times demonstrate behavior that is beyond reproach. Residents must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, patients' families and professional associates. Residents are expected to:

- Demonstrate honest, open, civil, and effective communication with patients, staff, and colleagues (medical students, residents, and attendings).
- Create and sustain a therapeutic and ethically sound relationship with patients.
- Use effective listening skills.
- Elicit and provide information using effective nonverbal, explanatory, questioning and *legible writing skills*.
- Work effectively with others as a member or leader of a healthcare team or other professional group.
- Review and interpret the relationships of physicians, nurses, and administrators in managing patients assigned to the ICU.

### **Professionalism**

Residents must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population. Residents are expected to:

- Demonstrate respect, compassion and integrity.
- Be responsive to the needs of patients, society and the profession.
- Be accountable to patients, society and the profession.
- Demonstrate a commitment to ethical principles pertaining to:
  - Provision or withholding of clinical care.
  - Confidentiality of patient information.
  - Informed consent.
  - Business practices.
- Demonstrate sensitivity and responsiveness to patient's culture, age, gender and disabilities.
- Summarize the following moral and ethical problems encountered in the ICU: need for organ donation and identification of potential donors; decisions about whom to resuscitate and to what degree; care for the mentally incapacitated or incompetent patient; dealing with a difficult family and futility of care; identifying and interacting with alternate religious/cultural beliefs.

### **Practice-Based Learning and Improvement**

Residents must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices. Residents are expected to:

- Analyze practice experience and perform practice-based improvement activities using a systematic methodology.
- Locate, appraise, and assimilate evidence from scientific studies related to their patient's health problems.
- Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness.
- Use information technology to manage information, access on-line medical information, and support their own education.
- Facilitate the learning of students and other healthcare professionals.
- Identify new modes of intensive care therapeutics by completing the following activities: predict and analyze the need for a new technology, formulate a plan for the institution of new technologies or therapeutics, critique and revise applicability of new technologies or therapeutics on a cost-to-benefit ratio.

### **System-Based Practice**

Residents must demonstrate an awareness of and responsiveness to the larger context and system of healthcare and the ability to effectively call on system resources to provide care that is of optimal value. Residents are expected to:

- Understand how their patient care and other professional practices affect other healthcare professionals, the healthcare organization, and the larger society and how these elements of the system affect their own practice.
- Know how types of medical practice and delivery systems differ from one another, including methods of controlling healthcare costs and allocating resources.
- Practice cost-effective healthcare and resource allocation that does not compromise quality of care.
- Advocate for quality patient care and assist patients in dealing with system complexities.
- Know how to partner with healthcare managers and healthcare providers to assess, coordinate and improve healthcare and know how these activities can affect system performance.
- Discuss the value of an interdisciplinary approach to healthcare for the critically ill, elderly surgical patient. Include consideration of these groups/disciplines, working together: surgery, nursing staff, family-friends as caregivers, physical therapy, medical consultants, pharmacy, religion, social work, hospital administration.

### **General Schedule**

- As dictated by the chief general surgery resident on the service.

### **Evaluation**

- Review goals and objectives with attendings at beginning of rotations.
- Mid-rotation review.
- End of rotation written evaluation turned into Peggy Baldwin (both attending and resident).