

Orientation Manual

Medical Student Clerkship

Surgery 300A

1. Introduction

Welcome to Surgical Core Clerkship 300A rotation. Each student will be an integral member of the surgical team. You will spend many hours learning surgical principles and you will develop an appreciation for the surgeon's role in multidisciplinary medical care. The faculty are committed to providing a strong educational experience for you. Because general surgery covers a broad spectrum of diseases, the majority of the rotation will be spent on general surgical services. We hope that each student will accomplish the following educational goals:

- a) Obtain and accurately record pertinent, detailed histories.
- b) Perform and record accurate physical examinations with concentration on pertinent findings.
- c) Recognize common surgical problems and discuss differential diagnosis.
- d) Proceed with a logical work-up using necessary diagnostic tests.
- e) Discuss common treatments for disease under study. If more than one method of treatment is available, students should be able to discuss the advantages/disadvantages and outcome of each treatment option.
- f) Understanding the pathophysiology of common surgical disease processes and recognize common surgical pathologic slides.
- g) Learn basic principles of sterile procedures and basic operating room conduct. Understand the preoperative planning required to prepare patients for surgery. Develop skills in postoperative care of patients.
- h) Learn basic manual skills such as surgical knot tying, simple suturing techniques, venipuncture, IV insertion, and arterial blood gas sample acquisition.
- i) Participate in outpatient follow-up of surgical patients.

2. Hospital Sites and Staff

Surgical core clerkship includes four teaching hospitals. Stanford and the Palo Alto VA Hospital System are the two Dean's Hospitals. These hospitals are approximately 10 minutes drive from each other. Kaiser Santa Clara Hospital and Santa Clara Valley County Hospital are two teaching affiliated hospitals located approximately 30 minutes away from the Stanford Campus. The names of the site directors and directors of the core clerkship are included for you. These surgery faculty are responsible for the core clerkship at their hospitals. You can go to each of them if you have any questions or problems. If problems are not resolved on site, please contact the Director of the Surgical Clerkship, Dr. Sherry Wren.

Surgery 300A Clerkship Director---Dr. Sherry Wren @ 852-3461

Stanford Hospital

Site Director --- Dr. Myriam Curet: (650) 723-8603

Palo Alto Veterans Hospital Systems

Site Director --- Dr. Sherry Wren: (650) 852-3461

Kaiser Santa Clara Hospital

Site Director --- Dr. Ron Ilano: (408) 236-4832

Santa Clara Valley County Hospital

Site Director --- Dr. Greg Adams: (408) 885-6060

3) Rotation Assignments

Each student will spend one four week rotation at either Stanford Hospital or VA Hospital. The second four week rotation is spent at Kaiser or Santa Clara Valley Hospital. The number of students assigned to each hospital/service is primarily determined by the total number of students taking the core clerkship during one 8 week period. The assignments are random. However, we have made attempts to assign students to one "busy" rotation and one less "busy" rotation based on feedback from former students. Students may switch their assigned total rotation block (8 week period) on the first day of the orientation. Special requests may be made to the clerkship coordinator at least one week prior to beginning of clerkship. The assignments are as follows:

Stanford Rotations - Helpful Hints

Stanford White Service

Faculty: Drs. [Dirbas](#), Johnson, Norton, Wapnir, and Jeffrey

Stanford Red Service

Faculty: Drs. Curet, Shelton, Welton, Morton

Stanford Gold Service

Faculty: Drs. Greco, Cannon, Marks, [So](#), Trollope, Whang

Stanford Pediatric Surgery

Faculty: Drs. Albanese, Krummel, and Sylvester, Dutta, Butler, and Hartman

Stanford Transplant Surgery

Faculty: Drs. Esquivel, Bonham, Busque, Millan, and Salvatierra

Stanford Vascular Surgery

Faculty: Drs. Zarins, Olcott, J. Harris

Stanford Trauma Service

Faculty: Drs. Spain, Dicker, Brundage, Bronk, Gregg

[Palo Alto Veteran's Administration Hospital - Helpful Hints](#)

PAVAMC Vascular Surgery

Faculty: Drs. [Dalman](#) and Coogan

PAVAMC General Surgery

Faculty: Drs. Wren, Safadi and Yang

[Kaiser Santa Clara Hospital - Helpful Hints](#)

Kaiser Santa Clara Hospital

Faculty: Drs. McClenathon, Sullivan, Chavas, Bloom, Bitar, Dabadghav, Stevenson, Hill and Ilano, Choi, Faruqi, Hwang, Keddington, Kim, Kikinos

[Santa Clara Valley Hospital - Helpful Hints](#)

Santa Clara Valley Hospital

Faculty: Drs. Sherck, Cahill, Oakes, Shatney, Adams, Garland and Allo

4) Ward Activities:

Each hospital service will have a unique structure. We have included questions that new third year students frequently ask. Site directors will go into more detail about the specifics of their surgical service on the [first day of the rotation](#). Note: Please page the chief resident prior to your first day of each rotation to determine the time and location of rounds.

1. What is a surgical team?

Most teams include a PGY-5 or Chief Resident as the team leader. You may be assigned a team with a Senior Resident who is PGY-3 or 4. In addition, there are junior residents PGY-1 or 2 with whom you will share most of the call nights. The chief or senior residents are immediately responsible for patient and OR assignments.

2. How many patients should I admit and/or follow?

In general, you should admit and follow two to three new patient per week. You should pick patients that will have an operative procedure. You should also have 10-15 patient encounters in the clinic per week. If you feel you have too much or too little responsibility, please communicate this to the Chief Resident. Unresolved issues should be promptly addressed with the site directors.

3. What are my responsibilities on patient rounds?

During the week, there are morning and afternoon rounds where the entire surgical team sees and reports on each patient. You should have the following necessary information for each patient that you are following: patient vital signs, maximal temperature, intake and output of all drains and fluids, inspection of wounds, and recent labs. It is important to present any changes in the patient's condition. It will be necessary for you to "pre-round" on your patients. You may be required to give a brief patient history for rounds, so be prepared with a list of medications, past medical history, etc. If you will not be present for morning or afternoon rounds, please transmit any information to your junior residents (i.e. lab, x-ray results). This is a very important responsibility.

4. When do I write progress notes and orders?

Immediately after morning rounds. You are expected to scrub on OR cases daily. The senior or chief resident should assign cases to each of you the night before.

5. What are my responsibilities on call nights?

Call at every site will be every fourth night, going home at 11pm. As a rule, you will spend most of your time with the junior resident seeing consults, doing procedures, and admitting patients. Please make yourself available to the junior housestaff. Please speak to your chief site director if you feel that your responsibilities are too heavy.

5) Operating Room

Your attendance is expected in the OR when your service is operating. The OR is the arena where integration of the pre-operative work-up is done. You will be able to feel and observe normal and abnormal anatomy. It is here that you can see if your pre-operative assessment was correct. Each student should scrub on cases that they have followed or admitted. Faculty will expect you to know the patient's current and past medical history, indication for the operation, surgical anatomy, and pathophysiology. Some of the operations may last longer than you are used to standing. If you feel uncomfortable, wait for a calm moment and ask to be excused. We can often get a replacement if you let us know ahead of time. You should be able to write post-operative orders with your resident/faculty supervision. The faculty encourages you to observe operations on patients that you may not directly follow. If your service is not busy, we encourage you to

observe patient operations on other services. You will be excused from the OR for lectures.

6) Outpatient Clinics

Clinics allow for students to devote attention to new, long-term follow-up, and post-operative patients. Because of the number of patients that need to be seen, you should allot no more than 20 minutes to obtain a history and examine a patient. All patients must be seen with faculty and/or a senior resident. Clinic notes must be written on all patients and countersigned by senior staff. Each site director will provide you with the time and location of clinics that you are expected to attend. You will be excused from clinic for lectures or if you are in the OR.

7) Lectures/Conferences

A [calendar of mandatory lectures and conferences](#) is available on the Surgery Clerkship website. Please refer to it for updates throughout the rotation. Most of the lectures will be directed by one faculty member. A [list of topics](#) to be discussed will be given to you. Every Wednesday and Friday morning from 7-9am, a faculty member will present a case and expect that you have read about the topic. PLEASE READ THE APPROPRIATE CHAPTERS PRIOR TO ATTENDING THE DIDACTIC SESSION. Professor Rounds will have each student present an interesting case with a question and answer format. The students should prepare a small handout about each topic for distribution at their session. You are expected to attend Tuesday morning Grand Rounds held at 7:00 am. If you are rotating at Stanford or VA, please attend M&M at 7:00 am on Monday morning. These core clerkship lectures and conferences are mandatory and take priority over onsite conferences. Each site director will have additional conference schedules for you. Out of courtesy for the faculty, you should be prompt. Lectures take priority over rounds, ward duties, and OR.

8) Educational Resources

The most common complaint that faculty hear is, "I am so busy that I do not have time to read" or "I am so tired....." It is true, you will be busy and you will be tired, but your knowledge base will be expanded by reading during evenings, weekends, and during slow periods on weekdays. We would encourage you to purchase or borrow at least one surgical text for the duration of the rotation.

Recommended Surgical Texts:

"Essentials of General Surgery" Peter Lawrence, Editor.
"Surgery - NMS Series" Jarrell & Carabusi, Editor
"Current Surgical Diagnosis and Treatment: (Lange Series)" 11th Edition, revised
September 2002; Lawrence W. Way.

Other Resources:

[So You Want To Be a Surgeon](#) On-line version of the book
[Websurg.com](#) WebSurg - World Electronic Book of Surgery
[MD Consult](#)
Sabiston "Textbook of Surgery"
Greenfield "Essentials of Surgery; Scientific Principles and Practice"

9) Evaluation and Feedback

One area that faculty may need your help is on [your evaluation](#). I would encourage each student to ask faculty members that you have worked closely with and/or the site directors to give you feedback about your performance. I would suggest that you initiate the conversation mid-way into the four week rotation. In this way, if there are deficiencies, you will have time to correct them. If you are having a particular difficulty with residents, students or other faculty, please let the site director know early on.

10) Good luck and have fun !!

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