Stanford University General Surgery Residency Program
Night Surgery Goals and Objectives for residents: R-1
Rotation Director: David Spain, MD

Description
The night rotation at Stanford Hospital offers a broad experience in the care of complex patients encompassing all sub-specialties of surgery.

Goals
The goal of the night rotation is to provide the R-1 house-staff the means to: Gain the knowledge and experience in the inpatient evaluation and management of surgery patients.

- Master the principles of perioperative assessment and management with the stratification of patient needs
- Understand and negotiate the care of multiple patients on multiple services in a comprehensive manner
- Become facile and comfortable with the assessment and management of surgery inpatients in the context of a systems based practice.

Objectives
The rotation has the following objectives:

- The intern will assess and manage patients on multiple services, peri-operatively, and in coordination with the night team structures with the primary team structure
- The intern will become facile at writing orders on patients on covered services and their coordinating care with the primary teams
- The intern will develop the skills in receiving and giving an effective transition of care signout in the I-PASS format. Characteristics of an effective transition of care will be learned, developed, practiced, and taught.
- The intern will gain knowledge of surgical care and protocols of multiple services through assigned learning modules and discussion of patient management with attending physicians, fellows, and senior residents and also by disease specific independent reading
- Interns can expect weekly teaching from members of the team, both at the bedside and informal sessions by fellow, senior residents and attendings. Weekly specialty specific modules will be assigned and pre and post test assessments will be expected to be done by the end of the rotation.
R-1 Night Service interns are evaluated in the milestones within the 6 core competencies (Medical knowledge, Patient care, Interpersonal communication skills, Professionalism, Practiced based learning and Systems based practice) using specific web-based evaluation forms. An outline of core competencies with rotation objectives, instructional activities, and evaluations is below.

### Specific goals and objectives for residents

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<th>GOALS</th>
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| **Knowledge:**  
  To acquire and apply knowledge of established and evolving basic and applied clinical sciences that relate to the care of surgery inpatients at night. | • Gain experience in physical examination, diagnostic imaging studies, peri-operative evaluation and risk assessment, peri-procedural management of deep venous thrombosis anticoagulation, and post-operative patient monitoring.  
• Be introduced to the utility and selected use of plain imaging, ultrasound, as well as CT and MR imaging of the abdomen and pelvis. | Ad hoc teaching by attending faculty, senior residents, and fellows  
Self directed disease specific independent reading | End of rotation evaluation by senior residents of the covered services [https://stanford.medhub.com](https://stanford.medhub.com)  
Pre- and Post- test assessment of weekly modules |
| **Patient Care:**  
  To provide compassionate, appropriate, and effective care to surgery in-patients. | • Evaluate and manage all inpatient surgery patients in conjunction with the specific team Senior Residents and Attending Surgeons.  
• Perform complete directed history and physical examinations on transfer patients nightly. Perform complete assessments and develop management schemes for surgery in-patients. Review all accompanying clinical and image-based information regarding patients with appropriate resident/faculty supervision | Receiving and giving and effective signout  
Discussion and report of assessment and management strategies with senior residents, fellows, and attendings | Orientation and debrief by senior residents of covered services  
End of rotation assessment of patient care ability. [https://stanford.medhub.com](https://stanford.medhub.com) |
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| **Effective Interpersonal and Communication skills:** Interns must communicate in a way that leads to effective information exchange of a patient care plan to patients, their families, covered service residents, fellows, and/or attendings. | • Coordinate patient care responsibilities including post-op checks, patient note writing, orders, computed requisitions, and hospital protocols.  
• Discusses significant peri-operative concerns with team & night time consultants.  
• Work effectively with nurses to communicate care plan. | Post-op checks on patients responsible for.  
Care of patients in the subacute and acute phases of their course | Weekly feedback by senior residents and end of month rotation evaluation by each service senior and attending (https://stanford.medhub.com) |
| **Practice based learning and improvement:** In order to improve patient care practices, residents must be able to critically evaluate their own performance as well as appraise and incorporate clinical scientific evidence. | • To become proficient at utilizing the unit personnel structure and service structure to care for patients at night.  
• Identify areas to improve upon and determine impact on recovery.  
• Use information technology to rapidly assimilate current medical literature as it relates to patient care. | Feedback from senior residents from covering services.  
Sign-out. | Weekly feedback by senior resident/attending and end of month rotation evaluation by each service senior and covering attendings (https://stanford.medhub.com) |
| **Professionalism:** Residents must show a commitment to professional responsibilities, adherence to ethical principles and sensitivity to diversity. | • Learn to manage complex patient problems specifically related to relaying information to families regarding unexpected outcomes in a quaternary care hospital.  
• Acts with sensitivity and responsiveness to patient’s culture, age, gender and disabilities.  
• Maintains accountability to patients, medical profession and society. | Sign-out interactions with interns and senior residents.  
Interactions with senior residents and attendings on services covered.  
Discussions with night trauma senior | Weekly feedback by fellow/senior resident/attending and monthly rotation evaluation by rotation lead (https://stanford.medhub.com) |
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<td>Core Competencies</td>
<td>• Become facile at assessment, risk stratification and treatment planning for complex surgical patients.</td>
<td>• Identify one quality improvement area of concern and develop a plan to address.</td>
<td>Review of project by rotation lead and implementation.</td>
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<td>• Learn to use care protocols and pathways to improve quality of care.</td>
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<td>End of rotation evaluation by rotation lead and senior residents of covered services.</td>
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<td>• Act as an organizational problem solver for patients.</td>
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<td>(<a href="https://stanford.medhub.com">https://stanford.medhub.com</a>)</td>
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<td>• Understands how efficient patient care enables the hospital to deliver a wide range of patient care.</td>
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<td>• Understands how care practice affects staffing and health care costs.</td>
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<td><strong>Systems-based Practice:</strong></td>
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<td>A resident must be able to demonstrate an awareness of and responsiveness to the system of health care and the ability to effectively call on system resources to provide optimal care.</td>
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