

Stanford University General Surgery Residency Program
White Surgery Goals and Objectives for Residents: R-3
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Description

The Breast Surgery rotation at Stanford Hospital and Stanford Cancer Center offers a broad experience in the care of patients with diseases of the breast.

Goals

The goal of the Breast Surgery rotation is to provide the R-3 resident the means to :

- Develop exceptional knowledge, skill and experience in the evaluation and management of outpatient and inpatients with routine and complex breast disease and breast cancer
- Master the principles of outpatient workups, multidisciplinary evaluations including genetic counseling, perioperative assessment and risk stratification.
- Refine procedural and operative skills commonly required in the care of these patients, such as breast biopsies, core and fine needle biopsies, breast ultrasound, mastectomies, sentinel node biopsies and nodal dissections but also develop expertise in oncoplastic techniques including total skin-sparing mastectomies and chest wall resections
- Experience and understand the multifaceted aspects of complex reconstructive procedures in the context of patient's stage of disease and prognosis.
- Lead and manage the day-to-day function of a highly specialized service including interactions with fellow, residents, nurses and students

Objectives

The Breast Surgery R-3 rotation has the following objectives:

- The R-3 serves as Chief resident on this service and has primary responsibility for the management of all inpatients on the service in conjunction with the attendings.
- The R-3 resident functions as main decision maker, assuming direct responsibility for the day-to-day care of patients on the service and coordinating care with other services as needed. The R-3 also serves as the first consultant for the intern and. He or she will develop leadership skills in the management and guidance of in/outpatient surgical teams, supervising and educating junior residents and students.
- The R-3 resident gains knowledge of breast surgical oncologic care through discussion in clinic and in the operating room as well as on rounds with the attending physician and also by independent reading. This knowledge base includes understanding the epidemiology, inherited genetic predisposition to breast cancer, the role of adjuvant treatments and the role of surgery in this continuum of care.

- The R-3 resident will gain advanced operative skills through pre-operative reading and preparation and by direct intra-operative teaching from the Breast Surgery Attending.
- R-3 residents can expect frequent teaching from members of the Breast Surgery team including attendings. The R-3 resident and attendings will function together very closely in the OR, in the outpatient setting and during daily rounding sessions.
- R-3 resident is the true leader on the team, and should be able to run the entire service with the intern, nurses, and medical students. At the end of the rotation the R-3 resident should be able to diagnose, delineate a clinical plan, preoperative assess, perform the operative procedure and manage the patient postoperatively, identifying and managing complications that may arise.

R-3 residents are evaluated in 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

GOALS Core Competencies	R-3 OBJECTIVES	INSTRUCTIONAL ACTIVITIES	EVALUATION
<p>Knowledge: To acquire and apply knowledge of established and evolving basic and applied clinical sciences that relate to the practice of breast disease and breast surgery</p>	<ol style="list-style-type: none"> 1. Perform benign and oncologic surgical procedures as appropriate on designated patients. 2. Gain experience in physical examination, diagnostic imaging studies, pre-operative evaluation and risk assessment, peri-procedural management of deep venous thrombosis anticoagulation, and post-operative patient monitoring. 3. Develop expertise in the understanding and interpretation of mammography, ultrasound and MR imaging of the breast 	<p>Teaching by attending faculty, senior residents, and fellows</p> <p>Independent reading Daily Conferences Daily inpatient rounds with an attending surgeon or fellow</p>	<p>Weekly feedback by other residents and nurses as well as the Breast Surgery attendings and 2 month rotation evaluation by each Breast Surgery attending (https://stanford.medhub.com)</p>

<p>Patient Care: To provide compassionate, appropriate, and effective care to vascular patients.</p>	<ol style="list-style-type: none"> 1. Evaluate and manage all inpatient Breast surgical oncology patients in conjunction with junior resident and fellow or Attending Surgeon. 2. Perform complete directed history and physical examinations on Breast surgery clinic patients 2-4 days per week, review all accompanying clinical and image-based information regarding patients with appropriate resident/faculty supervision 	<p>Twice daily rounds with the Breast Surgery Team and Daily inpatient rounds with an attending surgeon(s) Pre-operative and post-operative monitoring of other residents and students Teaching during rounds and conferences. providing feedback to the others on White Team</p>	<p>Weekly feedback by other residents and nurses as well as the Breast surgery attendings and 2 month rotation evaluation by each Breast Surgery attending (https://stanford.medhub.com)</p>
<p>Effective Interpersonal and Communication skills: Residents must communicate in a way that leads to effective information exchange of a vascular surgery care plan to patients, their families, and professional associates.</p>	<ol style="list-style-type: none"> 1. Instruct interns and medical students on basic surgical techniques and help instruct in the simulator. 2. Deliver teaching sessions for interns and students either before or after rounds on a weekly basis. 3. Provide family members an update of patient's condition. 4. Discusses significant perioperative concerns with team & consultants. 5. Works effectively with team members (attending, interns and fellow) to communicate care plan and discuss with attendings 	<p>Twice daily rounds with the Breast Surgery Team and daily rounds with the surgery attendings</p>	<p>Weekly feedback by other residents and nurses as well as the Breast surgery attendings and 2 month rotation evaluation by each Breast Surgery attending (https://stanford.medhub.com)</p>

<p>Practice based learning and improvement: In order to improve patient care practices, R-3 residents must be able to critically evaluate their own performance as well as appraise and incorporate clinical scientific evidence.</p>	<ol style="list-style-type: none"> 1. Serve as team leader as the PGY-3 Chief Surgery resident on the team. Manage inpatient census, reporting requirements, team schedules, daily clinical assignment, patient management tasks and conference in conjunction with the fellow. 2. To become proficient using the Goodman Surgical Simulator for fine-needle and core-needle breast biopsies as well as ultrasound-guided. 2. Identify complications and determine impact on recovery. 3. Use information technology to rapidly assimilate current medical literature as it relates to patient care 	<p>Twice daily rounds with the Breast Surgery Team and daily rounds with the surgery attendings</p>	<p>Weekly feedback by other residents and nurses as well as the Breast surgery attendings and 2 month rotation evaluation by each Breast Surgery attending (https://stanford.medhub.com)</p>
<p>Systems-based Practice: R-3 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.</p>	<ol style="list-style-type: none"> 1. Be introduced to outpatient assessment, risk stratification and surgical planning for breast surgical procedures 2. Learn to use care protocols and pathways to improve quality of care 3. Act as an organizational problem solver for patients 4. Understands how efficient patient care enables the hospital to deliver a wide range of patient care. 5. Understands how care practice affects staffing and health care costs 	<p>Twice daily rounds with the Breast Surgery Team and daily rounds with the surgery attendings</p>	<p>Weekly feedback by other residents and nurses as well as the Breasts surgery attendings and 2 month rotation evaluation by each White Surgery attending (https://stanford.medhub.com)</p>

<p>Professionalism: R-3 residents must show a commitment to professional responsibilities, adherence to ethical principles, and sensitivity to diversity.</p>	<ol style="list-style-type: none"> 1. Learn to manage complex patient problems and interact with families regarding unexpected outcomes. Learn to interact with a wide range of patients. 2. Learn to interact with multiple subspecialty groups in consultation as well as multi-disciplinary conferences 3. Displays appropriate demeanor, even in adverse or stressful situations 4. Acts with sensitivity and responsiveness to patient’s culture, age, gender, and disabilities 	<p>Twice daily rounds with the Breast Surgery Team and daily rounds with the surgery attendings</p>	<p>Weekly feedback by other residents and nurses as well as the Breast surgery attendings and 2 month rotation evaluation by each White Surgery attending (https://stanford.medhub.com)</p>
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