

Stanford University General Surgery Residency Program
Surgical Oncology I Surgery goals and objectives for residents: R-1
Rotation Director: Jeffrey Norton, MD

Description

The Surgical Oncology I rotation at Stanford Hospital offers a broad experience in the care of complex upper abdominal oncological surgery patients, endocrine tumors and sarcomas.

Goals

The goal of the Surgical Oncology I rotation is to help the interns:

- Develop knowledge and experience in the inpatient and outpatient evaluation and management of patients with manifestations of upper abdominal gastrointestinal cancer, endocrine tumors and sarcoma.
- Master principles of peri-operative assessment and risk stratification of various cancer patients
- Refine procedural skills commonly required in the care of surgical oncology patients.
- Experience and understand the day-to-day function of a complex inpatient surgical service.

Objectives

The rotation has the following objectives:

- The Surgical Oncology I intern functions as a trusted primary member of the team assuming direct responsibility for the day-to-day care and writing all orders on patients on the service and coordinating care with other services that may be consulting.
- The intern gains knowledge of surgical care through discussion on rounds with the attending physician and chief resident and also by independent reading.
- The intern will participate in daily conferences discussing deaths and complications on Monday, Grand Rounds topics and Core Course on Tuesday, Gastrointestinal Tumor Board on Wednesday, preoperative conference on Thursday and Sarcoma Conference on Friday. Interns can expect to present and discuss cases at the GI tumor board, preoperative conference and sarcoma conference.

Interns can expect daily teaching from members of the Surgical Oncology I, both at the bedside and in informal sessions from junior and chief residents, fellows, and attendings. Interns will take overnight call as directed by the program and are expected to manage the patients with consultation as needed with the on-call senior resident/fellow and either the responsible or on-call attending.

Interns 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-1 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 surgical oncology and endocrine surgery</p>	<ol style="list-style-type: none"> 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. Be introduced to ultrasonic imaging of the thyroid, CT and MR imaging of the upper abdomen and retroperitoneum 	<p>Teaching by attending faculty, senior residents, and fellows</p> <p>Independent reading</p> <p>Daily Conferences</p> <p>Daily inpatient rounds with an attending surgeon</p>	<p>Weekly feedback by fellows/chief resident/attending and Rotation evaluation by each Surgical Oncology I attending.</p> <p>Monthly written assessment of knowledge. (https://stanford.medhub.com)</p>
<p>Patient Care: To provide compassionate, appropriate, and effective care to surgical oncology and endocrine surgery patients.</p>	<ol style="list-style-type: none"> Evaluate and manage all inpatient Surgical Oncology I patients in conjunction with a junior resident, Chief Resident and Attending Surgeon. Perform complete directed history and physical examinations on Surgical Oncology I surgery clinic patients 2-4 days per week depending on volume, review all accompanying clinical and image-based information regarding patients with appropriate resident/faculty supervision 	<p>Twice daily rounds with the Surgical Oncology I Team and Daily inpatient rounds with an attending surgeon</p>	<p>Weekly feedback by fellow/chief resident/attending and Rotation evaluation by each Surgical Oncology I attending</p> <p>Monthly written assessment of patient care ability. (https://stanford.medhub.com)</p>

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<p>Effective Interpersonal and Communication skills: Interns must communicate in a way that leads to effective information exchange of a surgical oncology care plan to patients, their families, and professional associates.</p>	<ol style="list-style-type: none"> 1. Instruct medical students on routine floor responsibilities including rounding, patient note writing, orders, computed requisitions, and hospital protocols. 2. Discusses significant peri-operative concerns with team & consultants. 3. Work effectively with nurses to communicate care plan 	<p>Twice daily rounds with the Surgical Oncology I Team Daily inpatient rounds with an attending surgeon.</p>	<p>Weekly feedback by fellow/chief resident/attending and monthly rotation evaluation by each Surgical Oncology I attending (https://stanford.medhub.com)</p>

<p>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.</p>	<ol style="list-style-type: none"> 1. To become proficient using the Goodman Surgical Simulator for basic general surgery procedures. 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 Surgical Oncology I Team and attending surgeon</p> <p>Daily Conferences</p>	<p>Weekly feedback by fellow/chief resident/attending and Rotation evaluation by each Surgical Oncology I attending (https://stanford.medhub.com)</p>

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<p>Systems-based Practice: 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</p>	<ol style="list-style-type: none"> 1. Be introduced to outpatient assessment, risk stratification and surgical planning for complex surgical oncology procedures 2. Learn to use care protocols and pathways to improve quality of care 	<p>Twice daily rounds with the Surgical Oncology I Team and attending surge</p>	<p>Weekly feedback by fellow/chief resident/attending and Rotation evaluation by each Surgical Oncology I attending (https://stanford.medhub.com)</p>

<p>Professionalism: Residents must show a commitment to professional responsibilities, adherence to ethical principles, and sensitivity to diversity.</p>	<p>1. Learn to manage complex patient problems specifically related to relating information to families regarding unexpected outcomes in a quaternary care hospital 2. Learn to interact with a wide range of patient age ranges,.</p>	<p>Twice daily rounds with the Surgical Oncology I Team and attending surgeon Daily conferences especially Tumor</p>	<p>Weekly feedback by fellow/chief resident/attending and Rotation evaluation by each Surgical Oncology I attending (https://stanford.medhub.com)</p>
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<p>resources to provide optimal care.</p>	<p>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>		
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	<p>3. Learn to interact with multiple subspecialty groups in consultation as well as multi-disciplinary conferences</p> <p>4. Displays appropriate demeanor, even in adverse situations</p> <p>5. Acts with sensitivity and responsiveness to patient's culture, age, gender, and disabilities</p>	<p>Boards that are multidisciplinary.</p>	
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