

It is the sole responsibility of the student to check AIMS for schedule updates on a daily basis!

**Northeast Ohio Medical University
College of Medicine**

Surgery Clerkship, SURG-83002
5 Credit Hours
Course Syllabus
AY 2020-21

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COURSE DESCRIPTION

General Description

The Northeast Ohio Medical University College of Medicine M3 Surgery Clerkship is a five week clinical rotation. This core curriculum is designed to develop clinical competence, foster appropriate attitudes toward professional responsibility as a physician and to introduce the student to the specialty of Surgery. The emphasis will be on the surgeon's method and approach to the care of the patient. Both cognitive and non-cognitive learning will be primarily patient oriented.

Course Type

This course is solely a College of Medicine Course for M3 students taking place at medical facilities under the supervision of clinical site supervisors and their designated staff.

Course Enrollment Requirements

Successful completion of M1 and M2 years of study.

Trainings	Screenings	Immunizations
HIPPA BLS OSHA ACLS Responsible Conduct of Research Human Subjects Research	Criminal Background Check Toxicology Screen TB Test	Hepatitis B, MMR, Tdap, Varicella (required upon matriculation) Flu shot

COURSE SCHEDULE

Clerkship schedules will be made available to the students on the first day of each clerkship. For reporting instructions, refer to Site Information resource on AIMS.

Conferences and Morning Report

Students are required to attend morning report and formal teaching conferences along with the house staff and attending physicians. Clerkship Site Director's teaching conferences, which can take the form of lectures, or other teaching activities will be in addition to formal teaching conferences.

Ambulatory Experience

Students will spend time in outpatient clinics as well as in private offices of surgeons.

Call and Work Hours

Call schedules may vary by clerkship teaching site. Students are not to be assigned call more than once every fourth night. Saturday and Sunday call will vary by rotation site. At the beginning of each clerkship, the Clerkship Site Director will assign call schedules and provide information regarding student responsibilities, sleeping facilities and meal reimbursements (if provided). Students on call must be available as required at all times.

All 5-week clerkships will schedule one half day of independent study time during the last weeks of the clerkship. This time can be used to make up missed clinical assignments from

earlier in the clerkship, enrichment activities chosen by the student, or time to prepare for the upcoming shelf.

In compliance with guidelines established by the Liaison Committee on Medical Education (LCME) and in accordance with the NEOMED Curriculum Contact Hours Policy, students will not be required to work longer hours than residents.

COURSE ADMINISTRATION

Dr. Drazen Petrinc is Clinical Experiential Director for the Surgery Clerkship and in collaboration with Dr. David Sperling, Senior Director of Clinical Experiential Learning, and Dr. Susan Nofziger, Director of M3 Clinical Experiences, provides oversight for the clerkship. In his role as Clinical Experiential Director, Dr. Petrinc is responsible for ensuring that implementation of the Surgery Clerkship curriculum is comparable across all teaching sites.



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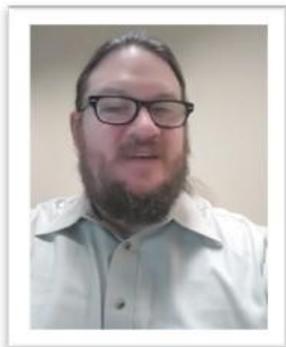


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Course Coordinator



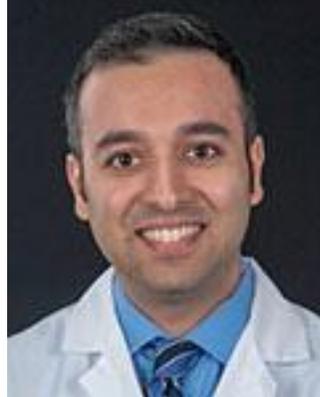
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Hospital Sites and Clerkship Site Directors

The facilities for clinical instruction in surgery are those institutions and residency training programs that have committed themselves to the Northeast Ohio Medical University College of Medicine for participation in the undergraduate training of the NEOMED students.



Joseph A. Saadey, M.D.
Aultman Hospital



Noaman Ali, MD
Cleveland Clinic Akron General

Katherine Kelly, MD
Louis Stokes Cleveland VA
Medical Center



Tiffany Marchand, MD
Mercy Health,
St. Elizabeth Youngstown
Hospital



Constance P. Cashen, D.O.
Mercy Health, St. Vincent
Medical Center
(Toledo)



Kirby L. Sweitzer, M.D.
Mercy Medical Center
(Canton)



Kevin El-Hayek, M.D.

Metro Health System



Peter DeVito, M.D.

Trumbull Regional Medical Center



John Bach, M.D.

Riverside Methodist Hospital



Drazen Petrinec, M.D.

Summa Health System,
Akron City Hospital



Rick Gemma, DO, FACOS

Western Reserve Hospital

Orientation

The clerkship begins with orientation focusing on clerkship goals and objectives, student responsibilities, schedules and assessment methods. Students will be provided information on relevant hospital policies and procedures, personnel contact information, meal allowances (if provided) and parking. The orientation will include instruction on the risks of infection, techniques for reducing the spread of infection and site-specific hospital protocol to be followed in the event of exposure to an infectious or environment hazard or other injury.

First Day Reporting

First day reporting information varies by clinical site. Please see the AIMS M3 site for first day reporting information.

COURSE OBJECTIVES

Educational Program Objectives are consistent across all seven clerkships and are aligned with NEOMED's overall program objectives. Throughout the clerkships, students will continue to learn and refine skills, knowledge, attitudes and professional behavior to move towards demonstrating entrustable behaviors. These competencies form the basis for the Student Performance Evaluation that is used to assess student performance in all clerkships.

Students will:

1. Provide general and preventative care for a diverse inpatient and outpatient surgical patient population in a variety of health care settings including routine technical procedures commonly required on a surgical service while applying basic sterile technique.
2. Demonstrate empathetic, honest and bi-directional communication with patients and families.
3. Gather patient information in a hypothesis-directed manner and perform an accurate physical examination.
4. Demonstrate clear, effective and complete communication with the interprofessional health care team in both written and verbal forms.
5. Develop a differential diagnosis with appropriate prioritization and recommended diagnostic testing.
6. Generate an assessment and management plan and reasoning for the plan by applying their medical knowledge of clinical disorders including life-threatening, surgical emergencies, post-operative complications and treatment options to ameliorate suffering and to provide support and care for the terminally ill.
7. Apply knowledge of evidence-based medicine to answer patient care related questions.
8. Formulate individual learning goals based on personal strengths and limitations, respond appropriately to feedback and seek help when needed.
9. Display professional behavior and a commitment to ethical principles including respecting patient autonomy and responding to patient needs that supersedes self-interest.

Course Sequence and Links with College of Medicine Program Courses

This course immerses students in the clinical setting after their first two foundational years of medical education. This course introduces students to multiple medical disciplines in the clinical and simulated setting which prepares them for selecting electives in their M4 year.

Instructional Methods/Learning Strategies

A variety of learning strategies will be used during the clerkship to help students achieve their goals. Strategies include but are not limited to:

- Patient encounters (inpatient, private office, clinics, hospice centers)
- Web-based tools: GIBLIB
- Teaching rounds
- Small group discussions
- Conferences and lectures
- Core educational lecture videos
- Web-based clinical modules (WISE-MD)
- Practice-based Learning and Improvement (PBLI) Project

- Textbooks

Organized reading and study materials will be available to support learning about assigned subjects and surgical problems of assigned patients, and to prepare for comprehensive written examinations. This source material will include enumeration of concepts to be learned and specific details pertinent to these concepts. These materials will be supplemented by conferences and lectures that may include oral quiz sessions covering the assigned topics and by selective patient assignments appropriate to the curriculum plan.

The net effect of the several avenues of implementation is to provide a framework designed to help the student acquire the knowledge of selected surgical subjects, to appreciate the pathophysiology involved, to use the scientific method of problem solving, to develop proficiency in selected basic skill, and to develop a professional attitude of responsibility and empathy toward patients. A significant advantage of this overall approach is early development of the capabilities and habits which will support each medical student in a life-long study of medicine.

Pathway Articulation

Not applicable.

Academic Integrated Management System (AIMS)

The online learning and collaboration system, Academic Integrated Management System (AIMS), will be used in M3 to post clerkship educational materials including, but not limited to, course and clerkship syllabi, day one reporting instructions, clerkship materials and core curriculum lecture videos. The web address for AIMS is: <https://aims.neomed.edu/portal>. It is the sole responsibility of the student to check for updates on a daily basis.

A separate subpage has been created for each clerkship on the M3 Clerkships Site. Students are expected to refer to these materials to become knowledgeable of the requirements, details of preparation and scheduling of NEOMED activities for each clerkship.

COURSE GRADE

Final Grade Determination

Assignment/Assessment	% of Final	Grade Criteria*	Type of Feedback	Date Scheduled/Due
Student Performance Evaluation <ul style="list-style-type: none"> • Patient Care • Interpersonal and Communication Skills • Knowledge for Practice • Practice-Based-Learning and Improvement • Systems-Based Practice Collaboration • Professionalism 	50%	Behavioral anchors for each rating in each competency element and the formula for final rating/grade available in appendix or link	Rubric with Narrative Feedback	Feedback is recorded throughout the clerkship via student evaluation forms. The Clinical Grade will be generated at the conclusion of the course by the clerkship site director submitted to for final review and grade assignment to the Clinical Experience Director.
Clinical Skills Experience Portfolio (CSEP)	0%	Satisfactory Completion required	Checklist of required activities	Mid-course and end of rotation meeting with Site Director
National Board of Medical Examiners (NBME) subject exam	50%	See Table below	Numerical score and Fail, Pass or Pass with Commendation	Last Friday of the course
Total Course	N/A			

*A copy of Student Performance Evaluation with grading criteria as well as Competency Objectives are posted under Clerkship Overview on AIMS

National Board of Medical Examiners Subject Examination

The National Board of Medical Examiners (NBME) subject examination is the final written examination for each clerkship except Emergency Medicine. It will be administered at the NEOMED Rootstown Campus, virtually by NEOMED or at designated Prometric Center in Toledo and Columbus area the last day of each clerkship. For additional details, see academic policy titled

“Administration of Examinations at Remote Sites” in the Compass. Reporting time and location for each examination administered on NEOMED’s campus is posted on AIMS. Following is a summary of expected performance. The subject examination score is an equated percent correct score that represents mastery of the content domain assessed by the examination. Cut lines are based on the most recent recommendations of the National Board of Medical Examiners. Hofstee Compromise recommended passing score is used for minimum passing score. Minimum Pass with Commendation score is set at the 70th percentile nationally within Hofstee Compromise range of acceptable minimum honors scores.

NBME Subject Exam

Subject Examination	Failing Range	Passing Range	Pass with Commendation Range
Family Medicine	≤ 60	61-79	≥ 80
Internal Medicine	≤ 58	59-79	≥ 80
Obstetrics/Gynecology	≤ 66	67-81	≥ 82
Pediatrics	≤ 58	59-82	≥ 83
Psychiatry	≤ 68	69-85	≥ 86
Surgery	≤ 59	60-78	≥ 79

Practice-Based Learning and Improvement (PBLI) Project

Students are required to complete a self-directed Practice-based Learning and Improvement (PBLI) Project specific to each clerkship (except Emergency Medicine). PBLI is important because physicians should monitor the quality of their own work, improve their work and keep up with developments in medicine. PBLI is based on the belief that physicians should be leaders in making change rather than reacting to changes made by others and the belief that positive changes in one’s own practice behavior can have positive effects on large systems. Specific examples include: increasing preventive care, improving chronic disease management and enhancing patient safety. See the Clerkship Guide for additional details on PBLI.

The goals of the project are to:

- investigate and evaluate patient care practices,
- appraise and assimilate scientific evidence, and
- improve patient care practices

For each clerkship (except Emergency Medicine), students will be required to:

- Formulate a focused clinical question directly related to a current patient care situation
- Complete the PPICO for the clinical question
- Conduct a literature search to answer the question
- Evaluate the literature selection for relevance to the question, and reliability and validity of the article
- Make a formal presentation of the case, clinical question, search process and findings
- Upload the clinical question, in the form of a properly stated clinical question, and article citation,

using a proper standard citation format, to the designated AIMS site

Clinical Skill Experience Portfolio (CSEP)

The Clinical Skills Experience Portfolio (CSEP) is an electronic checklist of clinical experiences developed for the clerkship and designed for students to use to track their progress in developing knowledge and skill in the following areas:

- Diagnoses/Symptoms/Clinical Scenarios
- Physical Examinations
- Procedures/Technical Skills
- Additional Clinical Activities
- Additional Learning Activities

All items listed on the CSEP are required; i.e., students must document exposure to all of the listed experiences. Students are required to review their CSEP with the Clerkship Site Director at both the midpoint and the end of the clerkship. Instructions for accessing and entering data into CSEP in OASIS are under Clerkship Overview on AIMS.

Surgery CSEP

1. Abdominal pain
2. Appendicitis
3. Cholecystitis
4. Diverticulitis
5. Hernia
6. Peripheral arterial disease
7. Post-operative fever
8. Solid organ malignancy (e.g. breast, colon)
9. Trauma

PHYSICAL EXAM:

10. Abdominal exam (PS)

PROCEDURES/TECHNICAL SKILLS:

11. Abdominal incision (O)
12. Appendectomy (O)
13. Cholecystectomy (open or laparoscopic) (O)
14. Endoscopy (O)
15. Exploratory laparotomy (O)
16. Foley catheter placement (O)
17. Hernia repair (O)
18. Intubation (O)
19. Laceration repair/suturing (PS)
20. Sterile technique including prepping and draping sterile field (PS)
21. Sutures/staples removal (PS)

ADDITIONAL CLINICAL ACTIVITIES

22. Document admission orders
23. Observe informed consent
24. Complete two observed H and Ps

ADDITIONAL LEARNING ACTIVITIES

1. Develop and submit rotation personal goals by end of Week One.
2. Review progress on personal goals midway and submit progress by end of clerkship.
3. Complete SURG NBME subject practice exam prior to mid-point and share results with site director.
4. Complete mid-course feedback session with site director
5. Complete four required Wise-MD cases: Burn Management, Pediatric Hernia, Pediatric Pyloric Stenosis, Trauma Resuscitation and others as required to ensure experience with all the diagnoses listed under the "diagnosis" section of the CSEP.
6. Review Core Educational Lecture Videos on AIMS as required to ensure experience with all diagnoses listed under the "diagnosis" section of the CSEP not covered by Wise-MD cases or clinical exposure.
7. Complete PBLI presentation.
8. Primary contact with at least 25 patients.

Formative and Mid-course Feedback

The Surgery Clerkship places emphasis on providing students with continuous feedback on their knowledge, skills and attitudes. Your Student Performance Evaluation will reflect the feedback provided to you throughout the rotation. A mid-rotation meeting may be scheduled around the middle of the clerkship for you to:

- discuss your performance based on the assessment forms completed by faculty during the week of the rotation and a self-assessment of your performance,
- review clinical progress via your Clinical Skills Experience Portfolio,
- plan activities for the week to match your learning objectives, and
- address any problems or concerns.

An end-of-rotation meeting will be scheduled to:

- discuss your performance since mid-rotation,
- review your Clinical Skills Experience Portfolio,
- review clerkship objectives and your initial learning plan to assess if and how all objectives were met, and
- review your feedback forms.

Narrative Feedback

Summative feedback will be provided on the Student Performance Evaluation by Site Directors.

Course Remediation

Guidelines specified in the *Compass* will be followed. Remediation is a privilege. Students are not guaranteed the opportunity to remediate. Student professionalism, for example, or lack thereof, may be factored into the decision to offer remediation.

Remediation Process: Remediation forms must be signed by the Director of M3 Clinical Experiences. It is the responsibility of the Director of M3 Clinical Experiences in conjunction with the specialty Clinical Experiential Director to oversee and guide the remediation process to assure consistency with the policy.

Remedial Actions Failed NBME subject exam only:

- For the first failed NBME exam only, initial clerkship grade of “incomplete” will appear on your official transcript.
- One initial failed subject examination will not trigger a CAPP referral, even in the context of aggregate performance concerns. Student must retake subject examination (refer to NBME and Remediation Schedule for specifics). You will receive a remediation contract via e-mail.

The dates of administration for subject examination retakes have been predetermined so that students do not retake an examination at the same time as they are participating in another clerkship.

- After successful retake of the subject exam, the highest overall grade for the clerkship will be “Pass”. A passing grade will replace the “incomplete” grade on the transcript.
- If the student fails the retake exam, the “incomplete” will be replaced with a “fail” that will remain visible on the official transcript. This would be considered a failed remediation that would then trigger a CAPP review.
- Any subsequent subject exam failure that results in a clerkship grade of “fail” will remain visible on the official transcript.

Failed Practice-Based Learning and Improvement (PBLI) project only:

- Student must repeat project with new topic in same specialty discipline as the failed project.
- Project remediation must occur within next clerkship cycle of same discipline.
- Student must contact the Course Director to schedule remediation presentation.
- The Course Director will notify student’s present Clerkship Site Director of need for student to be excused from the current clerkship/elective for up to ½ day, the time of which must be made-up.

Failed competency or “Below Expectations” rating in five or more individual items or “Below Expectations” in professionalism items on Student Performance Evaluation (SPE).

- Student must repeat clerkship in its entirety including the subject exam. The highest grade for a repeated clerkship is “Pass”.
- Repetition of clerkship will be scheduled by the College of Medicine /and Enrollment Services.
- Exception: Failure of Practice-Based Learning and Improvement Core Competency due only to failure of project only. In this case, remediation is as described above.

*Exception: Aggregate professionalism or performance concerns may result in referral to the Committee on Academic and Professional Progress (CAPP) rather than remediation.

Standards set forth by CAPP will supersede the Course Director’s intention to allow the student to remediate (i.e., a student who rises to the level of meeting with CAPP must first meet with this committee before being permitted to proceed with remediation plans).

CAPP Standards for Unsatisfactory Performance and Academic Action:

CAPP standards in the *Compass* are not limited to but include the following for referral to CAPP:

- Aggregate performance and/or professionalism concerns

- Failure of multiple subject exams
- Failure of any remediation
- Failure of a repeated clerkship

COURSE TEXTBOOKS AND INSTRUCTIONAL RESOURCES

Required Textbooks and Resources

Reading during the clerkship should include both textbooks and journal literature. Students should read about specific problems encountered with their own patients, as well as subjects of general importance in surgery. Specific reading assignments from both text and the periodic literature may be required at the discretion of the Clerkship Site Director or other designees.

The required textbook for the clerkship are:

Lawrence, PF, et al. (2012) Essentials of General Surgery. 5th Edition. Philadelphia: Lippincott Williams and Wilkins.

Lawrence, PF, et al. (2006) Essentials of Surgical Specialties. 3rd Edition. Philadelphia: Lippincott Williams and Wilkins. (2 Book Package)

AQUIFER WISE-MD MODULES

WISE-MD modules are intended to be a transition from didactic presentation of information to the self-directed learning format students will need to develop and follow in a lifelong study of medicine. Students are encouraged to access the Aquifer website and to complete all modules especially those in areas where students have had minimal clinical exposure. Students are **required** to complete the **modules listed in bold** in the following table.

Aquifer WISE-MD Case Modules		
(modules indicated in bold type are required)		
Abdominal Aortic Aneurysms	Adrenal Adenoma	Anorectal Disease
Appendicitis	Bariatric	Bowel Obstruction
Breast Cancer	Burn Management	Carotid Stenosis
Cholecystitis	Colon Cancer	Diverticulitis
Hypercalcemia	Inguinal Hernia	Lung Cancer
Pancreatitis	Pediatric Hernia	Pediatric Pyloric Stenosis
Skin Cancer	Thyroid Nodule	Trauma Resuscitation

Aquifer WISE-MD Skills Modules		
Best Practices	Epidural Placement Technique	Foley Catheter Placement
Surgical Instruments	Suturing and Instrument Tie	Two Handed Knot Tie
Ultrasound Basic Principles	Ultrasound: ABI	Ultrasound: Abdominal Aortic Aneurysm
Ultrasound: Breast	Ultrasound: Carotid Artery	Ultrasound: Cholelithiasis / Cholecystitis
Ultrasound: E-Fast Exam	Ultrasound: For Vascular Access	Ultrasound: Thyroid
Ultrasound: Venous		

Aquifer Registration and Log-in Instructions

Following are the instructions to gain access to the cases for first time users*:

1. Go to: https://www.meduapp.com/users/sign_in
2. Enter your institutional e-mail under “Need to Register?” option

Need to Register?

Enter your institutional email

Register

3. Click “Register” button.
4. An email will be sent to you. Follow the instructions in the email to set up your account.

***You only need to register once with Aquifer to access Family Medicine, Internal Medicine, Pediatrics and Surgery (WISE-MD) modules. Separate registration is not required.**

Recommended Textbooks and Resources

For more comprehensive information, the following textbooks are recommended:

Mann, B. (2009) Surgery A Competency-Based Companion. 1st Edition. Saunders, an imprint

of Elsevier Inc.

University of Cincinnati Residents, et al. (2008) The Mont Reid Surgical Handbook. 6th Edition. Elsevier Health Sciences.

NBME Practice Subject Examination

For the Surgery Clerkship, students are required to purchase and complete the practice subject examination prior to their mid-clerkship meeting with their site directors, and to prepare to share the results during the meeting. Surgery Practice Exam is part of Clinical Science Mastery Series and can be purchased by logging into NBME Self-Assessment Services

<https://nsas.nbme.org/home> We strongly recommend taking the second practice test at least one week prior to the subject examination for self-assessment purposes and insight into how to focus study in the final week (or more) of the clerkship.

NBME Subject Examination Preparation Tips

Consider using study tips for NBME shelf exams put together by NEOMED students in the Class of 2018 <https://1drv.ms/u/s!A1AkB8gcPGSxhmvNZO39gNF4MoZ6>

Core Educational Lecture Videos on AIMS

In order to broaden the student's knowledge and understanding of the scope of surgical practice, a core lecture video series has been developed by the faculty that includes common topics in both general surgery as well as the specialties and subspecialties. As proactive learners, students are encouraged to set a timetable for viewing the lectures during the course of the clerkship. The lectures are intended to help students gain insight into the practice of surgery and to prepare for their CSA and National Board subject examination.

To access the lecture video series, log on to AIMS and go to the M3 CLERKSHIPS site. The tab for the "Core Educational Lecture Videos" is located in the left sidebar.

Surgery Clerkship – Core Educational Lecture Videos	
Hernias	Rashid A. Abdu, M.D.
Acute Abdominal Pain	D. James Smith, M.D.
Acute and Perioperative Pain Management	Kyle D. Tipton, M.D.
Aneurysms	Jason R. Delatore, M.D.
Bariatric Surgery	John G. Zografakis, M.D.
Cardiac Disease	John C. Cardone, M.D.

Central Venous Catheter Complications Parts I to III	Guest Presenter
Diagnosis and Management of Benign Breast Disease	Nancy L. Gantt, M.D.
Diagnosis and Management of Malignant Breast Disease	Nancy L. Gantt, M.D.
Diseases of the Genitourinary System	Mark A. Memo, D.O.
Evolution of Laparoscopic Surgery	Michael S. Kavic, M.D.
Fire Prevention in the OR	Guest Presenter
Fractures – The Fundamentals	Thomas S. Boniface, M.D.
General Urologic Problems	Daniel J. Ricchiuti, M.D.
Gastrointestinal (GI) Bleeding	Costas H. Kefalas, M.D.
Hepatobiliary Disease	Brian T. Jones, M.D.
on-Melanoma Skin Cancers	Michael K. Obeng, M.D.
Parenteral Nutrition	Vincent W. Vanek, M.D.
Peripheral Arterial Occlusive Disease	Drazen P. Petrinic, M.D.
Practice Based Learning and Improvement Project	John D. Sutton, M.D.
Pulmonary Embolism	Robert DeMarco, M.D.
Introduction to Asepsis and Sterile Technique	Guest Presenter
Shock	William F. Fallon, M.D.
Thyroid and Parathyroid Surgery	Mark C. Horattas, M.D.
Writing Brief Operative Notes and Surgical Orders	David N. Linz, M.D.

Self-Directed Educational Resources

Listed below are website links to educational resources that contain high quality materials for the self-directed student learner (last accessed March 8, 2017).

AUA National Medical Student Curriculum

<http://www.auanet.org/education/auauniversity/medical-student-education/medical-student-curriculum>

Surgery 101: free I-Tunes downloadable podcasts on general surgery and specialty topics:

<https://itunes.apple.com/ca/podcast/surgery-101/id293184847>

YouTube video surgical technique references:

Surgical Positioning, Prepping and Draping DVD sample clip:

<http://www.youtube.com/watch?v=VB1ufcUCr6c&feature=related>

Introduction to Asepsis DVD Sample clip:

<http://www.youtube.com/watch?v=QEcX9FBRnr8&feature=related>

Basic Surgical Skills by the Royal College of Surgeons

<https://www.youtube.com/>

Make sure to review the PCC Resources prior to starting

1. Surgical Infection Society(SIS): Sterile Technique
<https://www.youtube.com/watch?v=R8eQ9T0CZNw>
2. ACS/ASE Simulation Surgical Skills Curriculum Primer
3. [Surgery Clerkship 101: The OR Essentials](#)

COURSE POLICIES & PROCEDURES

Students should refer to the NEOMED Policy Portal for a full list of Clerkship

Course Policies (<https://www.neomed.edu/policies/>) and the NEOMED Compass, 2020-2021, for further details.

1. Attendance and Time Off Clerkships

Attendance guidelines for all sessions are set forth in NEOMED’s policy

Attendance at Instructional Sessions (available at:

<https://www.neomed.edu/3349-ac-418-attendance-at-instructional-sessions/>).

Reason for Absence	Person(s) to Notify	When to Notify	Required Forms and Documentation
Emergency (e.g, flat tire, emergent health problem)	<ul style="list-style-type: none"> • Clinical Site - Clerkship/Elective Site Director and Coordinator* • Rootstown courses – Course Director and Curriculum Coordinator 	As soon as circumstances allow	Submit absence notification form available at https://www.neomed.edu/studentsservice/forms/ after you have discussed make-up plans with course/clerkship/elective site director.

<p>Personal Illness</p>	<ul style="list-style-type: none"> • Clinical Site - Clerkship/Elective Site Director and Coordinator* • Rootstown courses – Course Director and Curriculum Coordinator 	<p>ASAP when you realize you are sick and will not be able to attend</p>	
<p>Health care appointment for yourself or to accompany a family member</p> <p><i>You do NOT need to state the reason for or type of health care appointment.</i></p>	<ul style="list-style-type: none"> • Clinical Site - Clerkship/Elective Site Director and Coordinator* • Rootstown courses – Course Director and Curriculum Coordinator 	<p>With as much lead time as possible, preferably BEFORE clerkship/elective begins</p>	
<p>Presentation at Conference or fulfill a professional obligation.</p>	<p>College of Medicine using <u>College of Medicine Professional Conference/Obligation Request Form</u></p>	<p><u>At least six (6) weeks in advance of conference/professional obligation</u></p>	<p><u>College of Medicine Professional Conference/Obligation Request Form</u> along with evidence of acceptance to present at a professional conference or fulfill a professional obligation.</p> <p>→ THE PROCESS DOES NOT END once you have submitted the above form. DO NOT MAKE TRAVEL PLANS.</p> <ol style="list-style-type: none"> 1. The COM will send written confirmation to let you know your request was received. Follow-up instructions will be provided. 2. Check with course director/clinical site director to determine if you can be excused from the curriculum; 3. if excused, submit an absence notification form (https://www.neomed.edu/studentservices/forms/) after discussing make-up plans with course/clerkship/elective director.

Religious Holiday Observation	College of Medicine. Submit “Request for religious holiday observation” form (College of Medicine)	By July 1 – 5:00 pm <ul style="list-style-type: none"> Holidays falling between July 2 and December 31 By November 1 – 5:00 pm <p>Holidays falling between January 1 – June 30.</p>	Submit “Request for religious holiday observation” form (College of Medicine) → THE PROCESS DOES NOT END here. <ol style="list-style-type: none"> The COM will send written confirmation to let you know your request was received and date(s) verified. Follow-up instructions will be provided. Check with course director/clinical site director to determine if you can be excused from the curriculum; if excused, submit an absence notification form (https://www.neomed.edu/student-services/forms/) after discussing make-up plans with course/clerkship/elective director.
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* information for course/clerkship site directors and coordinators can be found on AIMS.

1. Curriculum Contact Hours

In compliance with guidelines established by the Liaison Committee on Medical Education (LCME) and in accordance with the NEOMED Curriculum Contact Hours Policy, students will not be required to work longer hours than residents. <https://www.neomed.edu/3349-ac-409-curriculum-contact-hours/>

2. Clinical Supervision & Safety

In accordance with LCME requirements, students should be appropriately supervised in learning situations that involve patient care and the activities supervised should be within the scope of practice of the supervising health care professional. <https://www.neomed.edu/3349-ac-408-clinical-supervision/>

- Follow OSHA guidelines
- Follow appropriate patient safety procedures (handwashing, mask, gloves as appropriate)
- Follow safety guidelines as directed by the clinical site
- Recognize a potentially aggressive patient
 - history of aggression, mental health issue, drug or alcohol withdrawal, physical sign of anger or agitation
- If you are in doubt, err on the side of caution
 - take a chaperone (fellow student or nurse, security)
- Defusing the situation
 - listen, speak softly, acknowledge the concern, keep space between you and the patient, have an exit

3. Grade Dispute

Grade Dispute guidelines are set forth in NEOMED’s College of Medicine policy Grade Dispute (available at: <https://www.neomed.edu/3349-ac-405-grade-dispute/>). A Grade Dispute is a formal

request to change a Final Grade based on: 1) arithmetic, procedural or clerical error, 2) arbitrariness and capriciousness or 3) prejudice. Only Final Grades may be disputed. If a student disagrees with his/her Final Grade for a clerkship, the student must first discuss the matter with the Clerkship Site Director assigning the grade within five (5) working days of posting of the Student Performance Evaluation, as well as notify, in writing M3-M4GradeDispute@neomed.edu regarding the intent. Please refer to the policy for additional details on grade disputes.

4. Mistreatment

Any issues or concerns regarding the clerkship, house staff, personnel, patient availability, etc., should be addressed to the Clerkship Site Director. Issues or concerns should be addressed as quickly as possible to foster early resolution. Every student has the right to learn in a professional atmosphere. Any issues or concerns regarding the course, course faculty and staff, etc., should be addressed to the Course Director or the Director of M3 Clinical Experiences. Concerns regarding misconduct also may be reported confidentially or anonymously using the Inappropriate Behavior Reporting Form found at <https://www.neomed.edu/studentservices/forms/> Students who feel they have been harassed or discriminated against should discuss the matter with their faculty advisor, the Director of Student Wellness and Counseling, or the Chief Student Affairs Officer.

5. Professionalism

Academic Misconduct: NEOMED students sign and are held to the “Expectations of Student Conduct and Professional Behavior” and must abide by all student policies contained within *The Compass*. Included within these expectations are policies regarding students’ academic conduct. NEOMED students are expected to comply with the following academic standards and to report any violations to the Office of Student Affairs. Failure to do so may result in referral and review by either CAPP or the Student Conduct Council.

In accordance with the NEOMED policy on proper attire as stated in the *Compass*, students are required to dress appropriately and professionally for all clinical activities. The hospitals and their academic departments reserve the right to determine appropriate attire for their sites and may impose additional requirements.

6. Shadowing

No shadowing is permitted during M3 clerkships.

Appendices

Appendix A. Focused Surgical History and Physical Examination Outline

Date/time

CC:

HPI: 45 yo Caucasian male presenting with abdominal pain...

Pain: "COLDERIPPP"

Character, Onset, Location, Duration, Exacerbation, Radiation, Intensity (X/10),
Palliation, pO association, Previous history of...

- Associated ROS; SOB/CP, nausea, emesis (duration, #, hematemesis, coffee grounds, bilious), current abdominal pain, BM (melena, hematochezia, constipation, diarrhea, color, last BM/flatus), urine output (dysuria, hematuria, decreased UO), fever, chills, nightsweats, weight loss (how much, time period, trying to lose wt), history of prior EGD or colonoscopy (findings, physician, when). (Include GI/GU ROS).

PMHx:

PSHx: dates, operations, surgeon, findings

Meds: ask about anticoagulants, homeopathic

agents Allergies:

FHx: complete cancer history, familial diseases

SHx: occupation, lives with, where, recreational drugs, ETOH

ROS: Those not mentioned in HPI

Physical Examination:

VS: including Ht/Wt or

BMI General:

HEENT:

CV: including peripheral

pulses

Pulmonary/Chest/Breast

exam:

Abdomen:

Rectal exam:

Ext/Musculoskeletal:

Neuro:

Labs/Radiology/Cultures:

Assessment/Plan: (include differential diagnosis)

Appendix B. Surgical Admission Orders Mnemonic Outline

“ADCVAAN DIIMLS”

Admit (date/time, to specific physician, team, bed type)

Diagnosis

Condition

Vital signs qX hours

Allergies

Activity

Nursing (dressing changes, tubes, drains, positioning, etc.)

Diet/Nutritional support/calorie counts

IV fluid

Intake/Output

Medications (drug, dose, route, frequency, hold orders)

VTE prophylaxis

Analgesics

Antibiotics

Routine “Home” medications

Labs

Special (procedures, X-rays, consults, physician notification)

Appendix C. Pre-Operative Note/Checklist/Orders Outline

Date/time

Preoperative diagnosis/pathology report

Procedure planned

Surgeon

Labs

EKG

CXR/other imaging studies

Informed consent

Anesthesia evaluation

Type and screen/cross

VTE prophylaxis

Prophylactic antibiotics

Appendix D. Operative Note Outline

Date/time Procedure Operative findings

Attending surgeon

Assistant/resident surgeons Anesthesia

EBL

IV fluids Crystalloid Blood products

Urine output

Specimens removed Tubes/drains/packs/catheters

Complications

Disposition

Diagram procedure if appropriate

Last modified 07.28.2020

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