

Welcome to the GI Surgery rotation! Glad to have you join our team. You'll find attached is an intern orientation that I hope is helpful for you. Our bariatric & our antireflux surgeries are protocolized. I also have attached our bariatric surgery/MIS protocols. All these items are in our shared drive also for further reference. Of course, I am happy to answer any questions. We do have a couple of specialized surgeries that have already preprinted patient instructions such as Stretta, LINX, & the Orbera intragastric balloon. The Orbera Intragastric balloon protocol is under the bariatrics file in our shared drive.

A few housekeeping items...

We have the two teams GIS1 & GIS2, they are split up by attending not facility (you'll see we cover mainly 2 facilities but also have some off sites). Please keep the patients on the appropriate list by attending & not facility (it has to do with your residency).

We have very specific notes to use for both in & outpatient, please use the ones that are indicated on the orientation sheet. These notes guide you to meet all necessary SCIP guidelines & billing criteria. In our bariatric patients (outpatient visits) please utilize the smartset, within that encounter search "bariatric" in the smart set tab & it comes up, it will guide you to the appropriate notes, tests, labs, etc.

Medical students in clinic are not able to be an author for a new consult or follow up patient due to billing purposes. The medical student can of course interview, examine & present the patient, may even write a word document. However, an intern or resident must be the originating author.

Please use our minimally invasive order sets as these guide you also. We also have a standard general surgery order set for the typical gen surg patient (postop).

We have common discharge instructions available as a smart text, in the patient discharge instructions in the search box type in "LL gsurg" and you'll see options as you scroll down for our common postop discharge instructions. We have them for cholecystectomy, hernia repairs, complex discharges, simple discharge, hemorrhoidectomy, and lap band explant.

A discharge summary must be done along with a progress note on the day of discharge. There is a way to do otherwise; however, our attendings do not know or use the attestation needed to allow that. Other teams may, but for this team, a dc summary & progress note is to be done on day of discharge

Please be sure to place all patients who are discharged onto our discharge list. You may need to make a new one for that month. Look for the "discharge patient list" folder in our shared drive

The GIS Chief Resident is the administrative chief for our service. The GIS Chief Resident is responsible for coordinating & scheduling the residents among the various cases & attending clinics through the week. We can be pretty busy working with 10 surgeons among various campuses, so this helps quite a bit with everyone knowing where they need to be. This should be done & sent out to the whole team by Sunday of that week.

Our shared drive has a wealth of information and a good resource for some of our complex patients. Feel free to snoop around in it. There is an attending schedule file which has who is on call for our bariatric call & weekend rounding. The attending schedule is in the shared drive.

Looking forward to working & meeting with you all!

Warmly,
Dr. Yung