

R2 GOALS AND OBJECTIVES

Loma Linda ACS Service will provide a learning environment for the care and management of acute care surgery and trauma patients. Surgical basic science, including fluid and electrolytes, wound healing, nutrition and postoperative management, will be emphasized. Clinically, residents will assess the patients in the Emergency Department and on the floor for acute surgical problems and injuries, develop clinical judgment on managing these issues, and learn operative skills to address the problem. Careful postoperative and post-trauma care and follow up will be emphasized. Residents will develop cognitive and technical skills in dealing with complex, acutely ill patients.

Medical Knowledge

<https://www.east.org/education/practice-management-guidelines>

1. Describe the initial management and resuscitation of a trauma patient
2. Discuss various aspects of Trauma Prevention and Intervention
3. Discuss post-operative and post-trauma need for rehabilitation
4. Discuss management of critically ill patients including multisystem organ failure
5. Describe the diagnosis and management of the patient with an acute abdomen according to the specific etiology
6. Evaluate and treat soft tissue infections and discuss management of subsequent wounds
7. Describe the clinical presentation of a patient with abscesses, biliary disease, bowel obstructions, diverticulitis, appendicitis, hemorrhoids and fissures
8. Describe the risks associated with appendectomy, cholecystectomy and I/D of abscesses including postoperative complications
9. Develop an understanding of the principles of pre and post-surgical operative care for patients on the Acute Care Surgery Service
10. Fundamentals of surgical nutrition including nutrition evaluation as well as routes of access, TPN, enteral nutrition and nutritional supplements
11. Discuss venous thromboembolism prophylaxis and management of deep venous thrombosis or pulmonary embolism
12. Discuss etiology and management of bowel obstructions and ileus
13. List the causes of mesenteric ischemia
14. d

Demonstrate knowledge in the diagnosis and initial management of:

15. Traumatic Brain Injury
 - a. ICP management
16. Cervical Spine Clearance
17. Penetrating Neck Trauma
18. Geriatric Trauma
19. Blunt Cerebrovascular Injury
20. Trauma Resuscitation

21. Thoracic Trauma
 - a. Diaphragmatic Injuries
 - b. Hemothorax
 - c. Pneumothorax
 - d. Pulmonary Contusions
 - e. Rib fractures and rib fixation
22. Resuscitative Thoracotomy
23. Blunt Cardiac Trauma
24. FAST exam
25. Pediatric Trauma
26. Trauma in Pregnancy
27. Spinal Cord Injury
28. Abdominal Trauma
 - a. Colonic Injuries
 - b. Hepatic Injuries
 - c. Pancreatic Injuries
 - d. Splenic Injuries
29. Trauma Prevention and Intervention
30. Nutritional Support in the Trauma Patient
31. Venous Thromboembolism
32. Penetrating Arterial Trauma
33. Orthopaedic Injuries
 - a. Pelvic Fractures

Procedural:

1. Arterial lines
2. Central lines
3. Interosseous line
4. Tube Thoracostomy
5. Demonstrate knowledge in steps and conduct during a surgical procedure
6. Have clear indications for surgical intervention vs non-operative management pathway

Patient Care

Coordinate efficient transfer of the surgical and trauma patients from the emergency department to the operating room

Learn to interact professionally and productively with consulting physicians and communicating with those services

Develop the skills necessary to lead the evaluation of a trauma or acutely ill surgical patient in the emergency department setting

After completing a thorough history and physical examination, develop competent assessment and plans for patient care

Accurately interpret different diagnostic modalities including: x-rays, ultrasounds, CT scans, contrast studies and MRIs

Discuss treatment options, risks and potential complication of patient with general surgical issues

Become proficient in the assistant surgeon's role in the performance of general surgical and laparoscopic procedures

Demonstrate knowledge in steps and conduct during major surgical procedures

Have an understanding of when it is not appropriate to operate

Have a clear indication when to adopt non-operative management pathways for the trauma patient and know when to abandon the non-operative management pathway

Professionalism

The resident should be receptive to feedback on performance, attentive to ethical issues and be involved in end-of-life discussions and decisions

Understand the importance of honesty in the doctor-patient relationship and other medical interactions

Treat each patient, regardless of social or other circumstances, with the same degree of respect you would afford to your own family members

Learn how to participate in discussion and become an effective part of rounds, attending staff conference, etc.

Complete all assigned patient care tasks for which you are responsible or provide complete sign out to the on-call resident

Maintain a presentable appearance that sets the standard for the hospital this includes but is not limited to adequate hygiene and appropriate dress

Assist with families of critically injure/ill patients and guidance of families towards or through difficult decisions.

Demonstrate mentoring and positive role-modeling skills

Take a leading role in directing the weekly educational conferences involving medical students and junior residents.

System-Based Practice

Understand, review and contribute to the refinement of clinical pathways

Understand the cost implications of medical decision-making

Partner with health care management to facilitate resource efficient utilization of hospital resources

Describe in general terms the benefits of clinical pathway implementation

Develop a cost-effective attitude toward patient management

Make meaningful contributions to the multi-disciplinary approach to management of critically ill surgical patients

Comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) regulations regarding patient privacy and confidentiality.

Practice-Based Learning & Improvement

Demonstrate the ability to:

Evaluate published literature in critically acclaimed journals and texts

Apply clinical trials data to patient management

Participate in academic and clinical discussions

Accept responsibility for all dimensions of routine patient management on the wards

Apply knowledge of scientific data and best practices to the care of the surgical patient

Facilitate learning of medical students and physician assistant students on the team

Use the LLUMC library and database on-line resources to obtain up to date information and review recent advance in the care of the surgical patient

Demonstrate a consistent pattern of responsible patient care and application of new knowledge to patient management

Demonstrate a command and facility with online educational tools

Interpersonal and Communication Skills

Work as effective team members

Cultivate a culture of mutual respect with members of nursing, support staff, and other specialties

Develop patterns of frequent and accurate communication with team members and attending staff

Gain and appreciation for both verbal and non verbal communication from patients and staff

Demonstrate consistent respectful interactions with members of nursing and support staff

Demonstrate consistent, accurate and timely communication with members of the surgical team

Demonstrate sensitivity and thoughtfulness to patient concerns and anxieties

The resident will demonstrate the ability to provide and request appropriate consultation from other medical specialists.