

Post Graduate Year 1 Rotations

Plastic Surgery and Gynecological Surgery

Patient Care

The PGY-1 Resident on the Plastic and GYN Surgery service should demonstrate the ability to:

- Evaluate pre-operative patients
- Manage ward/postoperative patients
- Prioritize patient acuity
- Manage ward emergencies (arrhythmia, hypoxia, myocardial infarct, shock, etc.)
- Plan discharge
- Perform the following procedures
 1. D&C
 2. Debridement
 3. Laceration repair, simple and complex
 4. Wound closure
 5. Excision of skin lesion
 6. Split thickness skin graft
 7. Pelvic examination

Medical Knowledge

The PGY-1 Resident on the Plastic and GYN Surgery service should understand:

- Basic Science principles (ex: metabolism, wound healing, vascular hemodynamics)
- General Medicine principles (ex: soft tissue infection, ectopic pregnancy, pelvic inflammatory disease)
- Plastic Surgery principles (ex: skin graft, wound VAC, rotation and free vascularized tissue flaps)

Practice Based Learning and Improvement

The PGY-1 Resident on the Plastic and GYN Surgery service should 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
- Teach medical students
- Attend Conference

Interpersonal and Communication Skills

The PGY-1 Resident on the Plastic and GYN Surgery service should demonstrate the ability to:

- Interact with Patient/Family
- Interact with Nursing staff
- Interact with Patient Resource Manager and Social Workers
- Interact with OR staff
- Interact with Consult Service
- Interact with Attendings
- Interact with Junior Housestaff
- Interact with Senior Housestaff

Professionalism

The PGY-1 Resident on the Plastic and GYN Surgery service should:

- Be receptive to feedback on performance
- Be attentive to ethical issues
- Be involved in end-of life discussions and decisions
- Be sensitive to gender, age, race, and cultural issues
- Demonstrate leadership

Systems Based Practice

The PGY-1 Resident on the Plastic and GYN Surgery service should:

- Be aware of cost-effective care issues
- Be sensitive to medical-legal issues
- Information technology/computer resources available

What to Expect from a Plastic Surgery rotation

Welcome to the plastic surgery service! This service is intended to give you exposure to basic principles and techniques in plastic surgery and will build upon core concepts in general surgery that will be sure to appear in your oral and written boards. Because we are a busy level 2 trauma center and referral center, you will gain firsthand knowledge of the diagnosis and treatment of facial fractures and injuries, chronic conditions of the hand as well as acute trauma, lower extremity reconstruction, microvascular surgery, breast reconstruction, burns, and the management and treatment of chronic wounds. I have made copies for you of basic principles in the management of trauma of the hand and face. In addition, there is a burn manual. You can get copies of this information from Jane Larkin in medical staff. You are expected to read and be prepared for questions on the material that I provide.

In order to get the most out of this rotation, it is imperative that you adhere to the following guidelines.

1. **Be prepared on your patients.** Have the following information ready for presentation on rounds. POD #, Antibiotic(s) and days of treatment, list of meds, pertinent physical exam, drain outputs, ins and outs, pertinent vitals, pertinent lab/micro results. Do not waste time during rounds! Have the information on hand so that we don't go back and forth to the computer.
2. We will round every day on every admitted patient and consult. If you are in conference, I expect the patients to be seen prior to morning conference and that you call me with any significant changes before going. Do not leave loose ends, especially with patients who are waiting for surgery. When you order a test, follow up on it. What was the result of the EKG, or CXR that you wrote for?
3. If your shift is up and it is time to go home, it is your responsibility to make sure that proper communication occurs between you and the oncoming physician. That means clear, accurate checkout and follow-up. When it comes to patient care, "I forgot," is an unacceptable response. If a patient is admitted to the service, ask yourself the following. Are they hemodynamically stable and trauma cleared? Have the appropriate services been consulted for medical clearance? Do they have psychiatric issues or consent/guardian/power of attorney issues? In the case of facial fractures, especially craniofacial, have ophthalmology and or neurosurgery been involved? This will avoid treatment delays and insure better care for the patient overall.
4. For scheduled cases, it is imperative that you have read about and understand the anatomy. I will make sure you know about the cases beforehand. Do you understand the surgical approach, what structures to avoid, where to place incisions, what suture to use, what sort of dressing or splint to put on? If I had a massive MI in the OR, could you take over and complete the surgery? Merely, "holding sticks" and writing post-op orders is a waste of your precious time. Be a part of the preoperative workup. Be present for patient markings if that is okay with the surgeon and patient. Actually read the films yourself. "The radiology report isn't available," is not an acceptable response. When the patient rolls into the OR, unless your finger is "on the aorta," I expect you to be physically in the room.
5. Make sure the inpatients that are scheduled for surgery are adequately prepped and ready the day prior. Is the consent signed? Is there blood available if indicated? Are the preoperative labs/films reviewed? Have anticoagulants been stopped?
6. If a dressing change is to be performed, have all the supplies ordered and present at the bedside to avoid wasting time on rounds.

7. READ, READ and READ some more. Do not expect to be spoon-fed. You are the primary person responsible for your own education.