

# Vascular Surgery Rotation

## 1. OVERVIEW

Residents spend three 4-week blocks in the PGY-4 years on this rotation concentrating on vascular surgery. It builds on vascular experience on the Red/Gold services and results in a basic competency in advanced vascular surgery.

This service functions at San Joaquin Community Hospital and Bakersfield Memorial Hospital. The goal of this rotation is to concentrate the experience and education of the resident for three months on the judgemental, psychomotor and technical skills required for the practice of general vascular surgery.

Our Associate Program Director, Dr. Javier Miro, leads this service.

## 2. GOALS

The major goals of this rotation are to:

- Demonstrate knowledge of the anatomy, physiology, and pathophysiology of the vascular system, including congenital and acquired diseases.
- Demonstrate the ability to surgically manage the preoperative, operative and postoperative care of patients with arterial, venous, and lymphatic disease.
  - a. Resident are expected to be involved in major vascular procedures including:
    - i. Carotid endarterectomy and endovascular stenting
    - ii. Major abdominal aortic surgery including abdominal aortic aneurysm, aortoiliac occlusive diseases, with endovascular experience.
    - iii. Major vascular reconstructive procedures including aortofemoral bypass, aortoiliac bypass, femoro-popliteal bypasses and femorodistal bypasses.
    - iv. Major endovascular procedures
    - v. Vena caval filter placement
    - vi. Venous reconstructive procedures including venous stasis diseases
  - b. Residents are expected to be involved in vascular assess procedures including all central venous assess, dialysis assess, arteriovenous fistulae and grafts.
- Demonstrate the appropriate use of invasive and non-invasive vascular diagnostic procedures

## 3. OBJECTIVES

- a. **Patient Care:** Upon completion of this rotation, residents will:
  - i. Develop independent skills in assessing vascular surgical patients and decision-making in such patients.
  - ii. Demonstrate and understand the knowledge and skill necessary to practice vascular surgery in the private practice environment.
  - iii. Demonstrate knowledge of all components of general vascular surgery and apply them appropriately to vascular surgical patients.
  - iv. Demonstrate an understanding of the principles of pre- and post-operative management of general vascular surgical patients.
  - v. Demonstrate appropriate use of invasive and non-invasive tests.
  
- b. **Medical Knowledge:** Upon completion of this rotation, residents will:
  - i. Demonstrate and understand the medical knowledge necessary in the practice of general vascular surgery in the private practice setting.
  - ii. Demonstrate the basic and advanced knowledge in caring for general vascular surgical patients.
  - iii. Demonstrate the ability to acquire medical knowledge and apply such knowledge to patient care.
  - iv. Demonstrate the ability to use information technology to increase medical knowledge base.
  
- c. **Practice-based learning:** Residents are expected to
  - i. Be able to evaluate own performance,
  - ii. Incorporate feedback into improvement activities;
  - iii. Effectively use technology to manage information for patient care and self-improvement.
  
- d. **Interpersonal and communication skills:** Residents are expected to:
  - i. Use effective listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills.
  - ii. Work effectively with others as a member of the OR team.
  
- e. **Professionalism:** Residents are expected to demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population. Resident is expected to:
  - i. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients that supercedes self-interest; accountability to patients, and a commitment to excellence and on-going professional development.
  - ii. Demonstrate a commitment to ethical principles pertaining to confidentiality of patient information and informed consent.
  - iii. Demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities.

- f. **Systems-based practice:** Residents are expected to:
  - i. Practice cost-effective health care and demonstrate knowledge of resource allocation that does not compromise quality of care
  - ii. Advocate for quality patient care and assist patients in dealing with the complexities of the OR experience.

#### **4. CLINICAL EXPERIENCE**

The residents participate in all aspects of surgical care including preoperative visits, operative procedures and post-operative care including post operative office visits, under the direct and indirect supervision of the faculty. Residents will be exposed to a concentrated experience in the practice of general vascular surgery.

#### **5. DIDACTIC EXPERIENCE**

Following a case-based reading approach, residents are expected to utilize resources for self-education which include vascular textbooks available in the medical library, bound medical and surgical journals in the medical library, and on-line searching capabilities maintained throughout the institution.

In addition, the resident on this rotation must return to the primary sponsoring institution, Kern Medical Center, every Wednesday afternoon to participate in all teaching activities including faculty lectures, board reviews, grandrounds and departmental M&M conferences. The resident is encouraged to present complications at this M&M meeting.

#### **6. RESPONSIBILITIES**

- a. **Decision making**  
Decisions are made directly under the supervision of the faculty staff
- b. **Planning**  
Planning for care is done on an ongoing basis with the faculty staff
- c. **Direct patient care**  
Patient care is performed directly with the faculty staff
- d. **Record keeping**  
Residents complete all pre-op history and physical form on patients the morning of surgery, under direction of the faculty staff. Operating notes are written or dictated by the faculty staff or by the resident under direct supervision by the faculty staff.
- e. **Order writing**  
Orders are generally written by the resident responsible for the care of the patient. Perioperative orders are written by the faculty staff or by the resident under direct supervision by the faculty staff.
- f. **Ongoing patient management**  
Patient management occurs in the medical office, in the hospital and in the outpatient surgery setting, all under the direct supervision of the faculty staff.

**7. SUPERVISION**

Residents are under direct and indirect supervision by the faculty staff at all times.

**8. SCHEDULE**

Monday through Friday, 7:00 am to 5:00 pm. Weekend rounds with faculty but will have one day off per week. Residents do not have to take night call but may need to be available to assist Dr. Miro when Dr.Miro is on call for vascular surgery for one week per month.

**9. DISTRIBUTION OF GOALS, OBJECTIVES**

Goals and objectives of this rotation are distributed at the beginning of the residency year to each resident. Copies are sent by email to each resident assigned to this rotation prior to the beginning of the rotation. Additional copies can be obtained in the surgery residency coordinator's office. The goals and objectives can also be assessed via the KMC surgery website:

[www.kmcsurgery.org](http://www.kmcsurgery.org)

**10. METHODS OF IMPLEMENTATION**

Goals and objectives are implemented through one on one precepting, faculty role modeling, reading materials, conferences as scheduled, and spontaneous and planned didactic sessions.

**11. VACATION**

Residents may schedule vacation with the approval from the associate program director, Dr. Javier Miro.

**12. CALL RESPONSIBILITIES**

Residents on this rotation typically are not scheduled to be on call. However, during one week per month when Dr. Miro is on call for vascular surgery, Dr. Miro may call the resident to assist in surgical cases at night as needed. This, however, will be kept to the minimum and only if the faculty determined that there is extraordinary learning opportunity.