### General Surgery – Colon and Rectal

**Institution:** Vanderbilt University Medical Center  
**Duration:** 4 weeks  
**Supervising Physician:** Dr. Molly Ford  
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**Year of Training:** PGY-1

#### Educational Objectives:

**Introduction**  
The rotation on the Colon and Rectal Surgery service allows for both inpatient and outpatient surgical evaluation and care. There are 5 attending surgeons, 2 outpatient Nurse Practitioners, and 1 inpatient Nurse Practitioner. On a 4-week rotation, the resident will be exposed to many of the diagnoses we treat and will be able to gain knowledge of these disease processes through patient care, discussion, conferences, and rounds.

**Patient Care and Procedural Skills:**
- Performs a complete and accurate history and physical examination, including a pertinent review of systems with regard to colon and rectal disease entities.
- Tie a two-handed square knot
- Be able to perform a hemorrhoid rubberband ligation, hemorrhoidectomy, internal lateral sphincterotomy and incision and drainage of peri-rectal abscess

**Medical Knowledge:**
- Basic fundamentals of the pathophysiology, clinical presentation, and natural history of common colon and rectal disease entities (colorectal cancer, inflammatory bowel disease, diverticular disease, hemorrhoids, perirectal infections, fissures, fistulas).
- Basic knowledge of diagnostic tests (indications, contraindications, and timing) utilized in the work-up of patients with colon and rectal disease processes.
- Basic knowledge of perioperative management including bowel preparations (what type and when to use them), peri-operative fluid management, and appropriate post-operative orders for both abdominal and anorectal cases.
- Basic knowledge of the anatomy related to the colon and the anus (blood supply, innervation, spatial relationship to surrounding structures).
- Demonstrates clear concept of pathophysiology, work-up and appropriate treatment for colon and rectal cancer
- Clear understanding of anatomy related to the colon and rectum

**Practice-Based Learning and Improvement**
- Write an accurate, detailed, and legible preoperative assessment and counseling note on all patients for which he/she serves as surgeon of record.
- Utilize assigned journal articles as well as available textbook chapters and information technology (including PubMed search and literature review)
- Participate in the education of patients, families, students, residents, and other health professionals.
- Incorporate formative evaluation feedback into daily practice.

**Interpersonal and Communication Skills**
- The resident should ensure that the attending is aware of the progress of all patients on the service.
- The resident should clearly, accurately, and respectfully communicate with nurses and other Hospital employees.
- The resident should clearly, accurately, and respectfully communicate with referring and consulting physicians, including residents.
- The resident should clearly, accurately, and respectfully communicate with patients and appropriate members with their families about identified disease processes (including complications), the expected courses, operative findings, and operative procedures.
- The resident should ensure that clear, concise, accurate, and timely medical records are maintained on all patients.
- The resident should be able to clearly and accurately teach medical students and junior residents about the procedures performed on this rotation when qualified to do so by hospital and program policy.
Expected to help orient medical students and provide them support as needed for their roles and responsibilities throughout the rotation.

Expected to teach level-appropriate skills to medical students (e.g. history and physical skills, postoperative patient care, knot-tying).

Expected to provide timely feedback and assessments to the clerkship director and medical student supervisor as requested.

Professionalism
Residents must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Residents must:

- Demonstrate compassion, integrity, and respect for others.
- Demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.
- Demonstrate sensitivity to issues of age, race, gender, and religion with patients, family, and members of the healthcare team.
- Demonstrate respect for patient privacy and autonomy.
- Remain honest with all individuals at all times in conveying issues of patient care.
- Respond to the needs of the patient above one's own needs and desires.
- Maintain high standards of ethical behavior in all professional activities.
- Demonstrate a commitment to the continuity of patient care to carrying out professional responsibilities or through assuring that those responsibilities are fully and accurately conveyed others acting in his/her stead.
- Understand the institutional policy on duty hours and remain compliant with all duty hour regulations.
- Residents must enter the number of hours spent in the hospital into the tracking system weekly.
- Be properly and professionally attired at all times while engaged in patient care.
- Be properly and professionally groomed at all times when engaged in patient care.
- At all times treat patients, families, and all members of the healthcare team with respect.
- Reliably be present in prearranged places at prearranged times except when actively engaged in the treatment of a medical or surgical emergency. The resident must notify the appropriate supervisor if he or she will be unable to be present.
- Remain compliant with all required training designated by the institution.

Systems-based practice
- The resident should be able to assess the risks and benefits of all options for treating patients with surgical illness.
- The resident should be able to summarize the financial costs, potential complications, and long-term expectations for planned procedures.
- The resident should recognize the differences between the three hospital systems in which he or she will participate: federal, university, and private.
- The resident should be able to determine the benefit of additional treatment by other services such as plastic surgery, interventional radiology, and orthopedics.
- The resident should be able to determine and convey to appropriate individuals the instruments and other materials necessary for all procedures.

Description of Clinical Experiences:
Specific Daily Responsibilities of the PGY-1 Resident:
- Round with the team in the morning and record a list of patient care needs that will need to be completed after the completion of rounds
- Communicate with the Junior or Chief resident if there is concern about a patient
- Respond in a timely manner to pages
- Attend assigned clinics and OR cases
- Prepare for the assigned OR cases with a basic understanding of the patient and procedure
- See consults as they come up and discuss with Junior or Chief resident
- Write daily progress notes and consult notes in a timely manner
- Notify the Chief resident of updates on patients during the day – if feasible come to the OR to do so
- Present patients and brief clinical updates at CRS teaching rounds.
- Contact/communicate with the Anesthesia pain service twice daily for management of all patients
- Coordinate all inpatient changes with the NP
**Description of Didactic Experiences:**

1. Colorectal Teaching Conference: A team conference every Thursday from 8:00 – 9:00 attending by all attendings, residents, and students on the rotation.
2. Inflammatory Bowel Disease Conference – monthly multidisciplinary conference on Mondays
3. GI Solid Tumor board (optional) – weekly multidisciplinary conference from 7:00 to 8:00 on Tuesdays

**Evaluation Process:**

Faculty and senior residents will evaluate the performance of each resident using these goals and objectives. Each resident on the service will evaluate the rotation, the service, faculty and any senior residents also on the rotation.

**Other Important Rotation Information:**