

**Sunnybrook Health Sciences Centre,  
Division of General Surgery\_  
Goals and Objectives for General Surgery Trainees  
JUNIOR RESIDENT**

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Junior (PGY1, 2) General Surgery residents will complete a 2-3 month rotation on the service. The General Surgery service at Sunnybrook Health Sciences Centre offers a rich exposure to key areas of General Surgical care including learning opportunities in:

- Trauma
- Acute Care Surgery
- Colorectal Oncologic Surgery
- Hepatobiliary Oncologic Surgery

The goal of this rotation is to afford residents the opportunity to develop the knowledge and the skills necessary to assess and deliver surgical and peri-operative care to complex general surgery trauma and oncology patients. The rotation is conducted with a focus on evidence-based and multidisciplinary care, with goal-directed and individualized assessment and training for residents.

The following Goals and Objectives are detailed for Junior General Surgery residents and organized by CanMeds roles.

*These Goals and Objectives are utilized in evaluation of Resident performance and will be reflected on the ITER.*

### **Medical Expert**

**At the end of the rotation the Junior resident will be able to:**

#### **Knowledge**

1. Demonstrate an appropriate fund of knowledge of normal physiology/pathobiology of disease
2. Conduct relevant, precise, concise, organized, appropriate and accurate physical examinations
3. Analyze and integrate relevant data to formulate correct diagnoses and therapeutic plans
4. Create plans that are documented, organized and well executed
5. Describe the principles of resuscitation of the major trauma patient
6. Conduct a primary, secondary and tertiary survey for the injured patient
7. Describe role of the trauma centre in secondary prevention
8. Manage acute appendicitis, intestinal obstruction, and uncomplicated gallstone disease
9. Manage patients with acute biliary colic/cholecystitis, including appropriate antibiotics, timing of surgery and an understanding of the role of cholecystostomy tubes
10. Diagnose and develop a management plan for acute cholangitis including need for antibiotics, timing, indications and methods of duct decompression and complications of these procedures (PGY2)
11. Diagnose and create a plan of management for acute biliary pancreatitis, including initial resuscitation, investigations, radiologic and clinical scoring systems, management of nutritional issues, indications for interventional or surgical drainage of collections, management of pseudocysts, timing and indications for surgical debridement (PGY2)
12. Diagnose and counsel a patient in clinic or in the emergency department about the management of a hernia repair including timing and indications for surgery (PGY2)
13. Diagnose and manage early post-op bowel obstruction, including timing and indications for surgery and management of nutrition. (PGY2)
14. Diagnose and create a plan of management for diverticulitis. This includes the ability to describe the Hinchey classification of diverticulitis and appropriate medical, interventional and surgical techniques using this classification schema. (PGY2)

15. Demonstrate an understanding of the screening criteria for colorectal cancer
16. Demonstrate proficiency in the diagnostic workup of colon cancer
17. Describe the principles of source control for surgical infections
18. Describe the principles of damage control resuscitation and damage control surgery
19. Demonstrate proficiency in the management of postoperative complications after major laparotomy including hypoxemia, hypovolemia and pain
20. Provide post-operative care for elective intestinal surgery including demonstration of fast track principles, including pain and symptom management (PGY2)
21. Provide appropriate pre- and post-operative care of patients undergoing elective and/or emergency surgery that includes attention to wound management, organ dysfunction, infections, avoidance of complications, treatment of hypovolemia, hypoxemia, and pain, psychosocial issues and discharge planning
22. Follow the Best Practice in General Surgery Guidelines related to VTE prophylaxis, mechanical bowel preparation, and blood product management
23. Recognize patients who require surgical source control of hemorrhage or infection in the ICU (PGY2).

### **Technical Skills**

1. Demonstrate an understanding of surgical anatomy, indications, contraindications, conduct of the operation
2. Demonstrate anticipation of surgical maneuvers and appropriate assisting in the operating room
3. Demonstrate respect for tissue and planes and handle tissue gently
4. Demonstrate accurate and deliberate suturing and appropriate knot tying
5. Demonstrate safe entry into the abdomen both open and laparoscopically
6. Demonstrate closure of the open abdomen in a clinically stable patient
7. Demonstrate an understanding of the conduct of a trauma laparotomy
8. Surgically manage uncomplicated appendicitis and cholecystitis with assistance
9. Demonstrate the safe mobilization of the colon and completion of a bowel anastomosis with assistance
10. Demonstrate the technique of end and loop stoma formation with assistance
11. Manage a chest tube, including recognizing indications and contraindications, insertion and safe removal.
12. Complete maturation of a stoma in a clinically stable patient (PGY2)

### **Communicator**

#### **At the end of the rotation the Junior resident will be able to:**

1. Provide timely, accurate, compassionate and patient-centered information exchange, with patients and their families, at the point of care.
2. Use voice, body language, translators to good effect
3. Demonstrate proficiency in obtaining informed consent for emergency and elective surgery, providing sufficient information regarding risks and benefits of treatment alternatives.
4. Complete appropriate documentation that is organized and timely with minimal assistance (e.g. discharge summaries, consult notes, death certificates).
5. Complete OR notes that are cohesive, timely, and with appropriate detail of important issues
6. Establish a therapeutic relationship with patients and communicate well with family.

### **Collaborator**

#### **At the end of the rotation the Junior resident will be able to:**

1. Complete the surgical checklist with the peri-operative team.
2. Communicate with consultant services and collaborate effectively with consulting services and allied professionals to ensure best care delivery.
3. Complete the electronic handover tool after their on-call period.
4. Consult relevant services and incorporate relevant therapeutic plans into the overall plan of care for the patient.

5. Communicate effectively with the ICU team to coordinate ICU and surgical care of patients.
6. Demonstrate proficiency in handover with the team on call and the responsible attending surgeon for any patient with active issues prior to leaving the hospital (e.g. pending investigations, required clinical reassessment, pending surgical intervention, or recent transfer to the ICU).
7. Collaborate with medical and radiation oncology for appropriate multi disciplinary care of the cancer patient.
8. Interact effectively at multidisciplinary rounds.
9. Effectively provide and receive information.
10. Handle conflict situations effectively.

### **Leader/Manager**

#### **At the end of the rotation the Junior resident will be able to:**

1. Ensure timely discharge of patients.
2. Demonstrate proficiency in time management by appropriately signing over patients to the on call team and ensuring safe and appropriate delegation of tasks to team members.

### **Health Advocate**

#### **At the end of the rotation the Junior resident will be able to:**

1. Ensure diagnostic tests are completed in a timely fashion.
2. Organize resources to ensure that patients can be safely discharged from hospital in a timely fashion.
3. Engage in patient safety initiatives and identify opportunities for quality improvement in surgical care delivery.

### **Scholar**

#### **At the end of the rotation the Junior resident will be able to:**

1. Demonstrate a curiosity and interest in the field.
2. Read around cases to expand their scope of knowledge.
3. Present and discuss relevant topics at teaching rounds, including morbidity and mortality reviews and journal clubs.
4. Demonstrate proficiency in the teaching of undergraduate students.
5. Demonstrate the ability to meet the learning needs of medical students regarding appendicitis, inguinal hernia, and post-operative problems. (PGY2)

### **Professional**

#### **At the end of the rotation the Junior resident will be able to:**

1. Complete medical records: OR dictations, discharge summaries, consult notes, death certificates in a timely manner.
2. Respect the PARO contract.
3. Provide patient care in a compassionate and ethical manner, reflecting an understanding of issues related to age, gender, culture and ethnicity.
4. Demonstrate respect for colleagues and other members of the health care team.
5. Maintain an acceptable attendance record at teaching rounds.
6. Demonstrate insight into strengths and weaknesses and receive critical feedback appropriately.
7. Maintain appropriate boundaries, including appropriate draping for a physical examination and appropriate presentation of a case to a group in the presence of the patient.