The Department of Surgery welcomes you to this portion of your educational experience. The following information is provided to help orient you to the various activities in which you will participate and to review some of the objectives for this course. The Surgery clerkship office is located in Dowling Hall, Room 2141. Office telephone is 419-383-3580. The fax number is 419-383-6636. Voice mail is activated 24 hours, 7 days per week. Claudia can be paged at 419-218-4591. E-mail is Claudia.Davis@utoledo.edu.

Structure of the Clerkship

The surgery student’s clerkship consists of a 10 week program with 3 rotations. The first week includes an extensive orientation with core general surgery didactics, operating room scrub sessions, hospital orientation, suture lab, and workshops. 6 weeks of the rotation will consist of general surgery at The University of Toledo’s Health Science Campus, St. Vincent Mercy Medical Center, The Toledo Hospital, Riverside Methodist in Columbus, St. Joseph’s Mercy in Ann Arbor, Michigan, and various AHEC sites. Three weeks of the rotation may include a surgery subspecialty consisting of Cardiothoracic Surgery, Neurosurgery, Plastic Surgery, Urology, and Orthopedic Surgery. We also include Trauma, Surgical Critical Care, Vascular Surgery and Pediatric Surgery rotations. The objective of the clinical rotation is to learn surgical concepts and management skills.

On the last week before the final exam is given the students will attend an oral examination session and participate in a surgery OSCE demonstrating their skills they have learned modeled after the Clinical Skills CS.

General Information

A professional approach is expected of all members of the surgical team. Your attire and conduct should lend dignity to the health care process. Men are expected to wear dress slacks with shirt and tie. Women are to dress in a similarly professional manner. Wearing scrub clothes out of the operative suite is discouraged. If they are necessary for a procedure, you must change to clean scrub clothes before leaving the operating suite and change again before re-entering the operating room. Your interactions with the nursing and ancillary staff should reflect an attitude of providing the best possible care for your patients.

We hope you will establish habits of quality patient care that will continue throughout your career. It is important that you become highly motivated in your desire to seek additional information about your patients in order to provide the best care.

The surgical attending staff and resident staff are committed to the teaching of medical students. However, the initiative of the medical student will be a major determining factor as to how much is ultimately gained from the clerkship. Your initiative in discussing patients and their surgical care problems with the faculty and residents is encouraged.

After you have been assigned a new patient, your history and physical examination should be completed as promptly as possible and placed in the chart within a few hours of admission.

While you may be intimately involved with your assigned patients, we urge you to become familiar with as many of the other patients as possible.
SERVICE ASSIGNMENTS

IT IS IMPORTANT TO KEEP IN MIND THAT THE OBJECTIVE OF THE CLINICAL ROTATION IS TO LEARN SURGICAL CONCEPTS AND MANAGEMENT SKILLS AND NOT THE TECHNICAL ASPECTS OF OPERATIVE PROCEDURES.

Each student is assigned to a surgical service under the direction of attending surgeons and resident staff. It is important that you integrate yourself into the service and make the most of the opportunity to learn clinical surgery. You are expected to acquire practical skills as well as knowledge in basic techniques of pre and postoperative evaluation and management. You will assist in management and treatment procedures performed on your assigned patients. It is important to balance the time spent with management of patients and that devoted to conferences and outside reading.

Included in this orientation packet is a list of technical procedures that you are expected to perform or observe during your rotations.

The service assignment includes the last weekend of each block. This applies to the first and second block of the rotation only; at the end of the third block, your responsibilities are complete after the NBME subject examination on the last day of the rotation. Your call schedule will include this period and you are required to report as scheduled as expected by the service.

Lectures, Seminars and Conferences

The first week of orientation is devoted to lectures, workshops, and skills labs. The lecture schedule encompasses basic science and general surgery topics. There are additional resources, such as subspecialty topic lectures located on Blackboard for your personal review. You will have no clinical duties during orientation week. Attendance at every lecture and educational activity is mandatory. Several teaching conferences are held each week at all hospitals. These include Morbidity/Mortality Conference, Tumor Conference and Professor Conference. All students are required to attend M&M and Grand Rounds at UTMC on Wednesday mornings, with the exception of AHEC, Urology, St. Joseph, and Riverside assigned students. Professional attire is expected at conference. Professional attire (shirt and tie for males) along with your student white coats are mandated (scrubs are not permitted). There is a sign in sheet at all conferences and it is pulled to note late attendees. Failure to attend or attend on time could result in a Professional Behavior Report. It is imperative that you contact Claudia at (419) 383-3580 for ANY absences!

Professor Conference

Professor Conference is student case presentation. Students are assigned to present an interesting case they have followed during their clerkship. It should be a general surgery case unless otherwise indicated on your assignment sheet in your packet. The case presentation should include a history, physical, diagnostic studies, diagnosis, pre and post operative treatment, description of the case, ethical considerations of the case. The presentation is moderated by an attending physician with class discussion. The presentation should be approximately 30 minutes in length. Professor Conference is held on Thursdays at 4:00 p.m. in Dowling Hall, room 2315. Please check your handout in your packet for assignments and schedules. This is a mandatory conference, however AHEC, Riverside, St. Vincent Mercy Medical Center, Urology, TTH students are excused. Professional attire (shirt and tie for males) alone with your student white coats are mandated (scrubs are not permitted). There is a sign in sheet at all conferences and it is pulled to note late attendees. Failure to attend or attend on time could result in a Professional Behavior Report. It is imperative that you contact Claudia at (419) 383-3580 for ANY absences!

PLEASE NOTE: The resident and teaching staff are aware of scheduled activities and will excuse you from ward and operating room duties at the appropriate time. If you are a member of an operating team at the time a conference is scheduled, you should ask the operating surgeon to be excused. Unless the conduct of the operation and the patient’s safety would be jeopardized by your absence, you must attend the scheduled activity. If the operation is still in progress at the completion of the lecture, you are to return to the operating room. Attendance is taken at these conferences. If you are tardy, you may come to the clerkship office and sign your name on the attendance sheet. You will sign in red ink, which is your statement that you attended the conference but arrived after the attendance was taken. This also is a statement that the Clerkship Coordinator did not see you at this conference. The conference preceptor or your resident may be asked to confirm your attendance. Professional behavior report may result in consistent late attendance or unexcused absence.
Rounds, Progress Notes and Ward Work

You are expected to attend rounds each morning at the time designated by your attending or resident physician. Students should be prepared to present their patients on rounds with the attending and should be aware of the result of recent tests, etc.

A professional approach is expected of all members of the surgical team. Your dress and conduct should conform to departmental standards and should lend dignity to the health care process. Your interactions with the nursing and ancillary staff should reflect an attitude of mutual respect and cooperation in the conjoint effort of providing the best possible care for your patients. You will assist in management and treatment procedures performed on your assigned patients. You are expected to acquire practical skills as well as knowledge in basic pre and post-operative evaluation and management. The surgical attending staff and resident staff are committed to the teaching of medical students. However, the initiative of the medical student will be a major determining factor as to how much is ultimately gained from the clerkship.

Progress notes on your patients should be entered dependent upon the service and preceptor. Progress notes should be made whenever anything significant occurs to your patient. Your progress note should be a brief, succinct and meaningful record of your patient’s status. It is important for the student to be closely involved with the patient’s progress throughout the hospital stay. Remember that charts are medico-legal documents.

Absences

Any and all absences must be approved by the director of the surgery program, regardless of service assignment. If you are ill, you must report the illness to Claudia in the clerkship office, and then notify your service resident or team. If you need to request an excused absence (i.e. a family function, wedding, graduation, etc.) you must make the request to the clerkship office in writing (email is fine). You may be required to make up absences. You will be notified when the absence is approved and if make up is needed. UNEXCUSED ABSENCES MAY RESULT IN A PROFESSIONAL BEHAVIOR REPORT OR FAILURE OF THE CLERKSHIP.

Procedure Requirement

Students are given a card for tracking required procedures. Upon completion of the clerkship students must present signed documentation that he or she has completed one intravenous catheter insertions, one nasogastric tube insertions, one Foley catheters on a male patient, and one Foley catheters on female patient. You are also required to log these procedures into the Meded system. Students are also asked to track other procedures they may observe or perform. Failure to complete the required number of procedures will result in a grade of Incomplete until documentation of procedures is completed. (Refer to Surgery Clerkship Objectives). 2 departmental points are given for successful completion of procedure requirement by the end of the clerkship.

Students will have several opportunities to obtain these procedures while on their clerkship. Some suggested sites are as follows; reporting to the Emergency Department, Pre Operative Department and Endoscopy suite. You will have practice time in the Simulation Center.

Required Clinical Experiences

During the clerkship, students are required to recognize symptoms that may signify disease in the following categories; Abdomen/Biliary (1 patient), Abdomen/General (2 patients), Abdomen Hernia (2 patients), Alimentary tract/Rectal (1 patient), Alimentary Tract/Large Intestine (1 patient), Alimentary Tract/Small Intestine (1 patient), Alimentary Tract/Stomach (1 patient), Breast (1 patients), Trauma (2 patients).

All categories are required and considered essential as part of an introduction to surgery. Patients are seen in both inpatient and ambulatory settings. Students must log all patient encounters and logs will be monitored to ensure adequate experience. Failure to complete the number of required diagnostic categories will result in a grade of Incomplete until documentation is completed. In addition 2 departmental points are given for successful completion of diagnostic category requirements by the end of the clerkship. (Refer to Surgery Clerkship Objectives)
**Case Logs**

Case logs need to be updated on a regular basis in Meded. We expect procedure, diagnostic category, and educational assigned hours be updated on a regular basis. 2 departmental points are given for consistent compliance with case logging. Reminders are sent out if logs have been neglected and points may be deducted. Logging is essential to most residency programs and we are here to help prepare you for this.

**Required Ethics Consultation Note**

During the clerkship students will be required to write a brief summary outlining a clinical scenario that you have encountered on the service with an ethical consideration, which identifies the ethical aspect to be considered in patient management. This report will be reviewed and critiqued by an attending physician and may require further study and revisions. 2 departmental points are given for the required ethics paper. Failure to complete by the deadline may result in a deduction of points. The requirements for this paper are displayed below:

* Paper should be 1-2 pages in length, typed, and double spaced
* Describe the clinical scenario
* Describe the ethical consideration in this case
* Identify the ethical issues involved using appropriate terminology
* Identify the primary decision maker
* Briefly discuss your thinking regarding the values in conflict based on the information you have about the case
* Describe additional information relevant to the case that you would ideally want to have to help you make your decision.
* Describe the options for resolving the problem
* Which option do you recommend, i.e., which would be the best/worst option and your reasons for making this recommendation
* Which option was chosen and the outcome if possible.

Examples would include informed consent issues (risks of surgery vs medical management), patient compliance issues (taking medications, follow up visits, postoperative instruction on diet and smoking), religious beliefs and surgery, refusal of treatment, disagreements among family members or with the physician.

Printed or electronic copies will be accepted. Reports should be submitted to Claudia Davis, Dowling Hall, 2141 no later than 2 weeks prior to the end of your rotation with the Department of Surgery. This is a required report and failure to complete the report will result in an Incomplete until the report is submitted, reviewed, and corrected (if necessary).

**Skills Training**

Various teaching sessions will be offered during orientation week including gowning, gloving, and scrubbing into the OR, an introduction to the hospital wards will be given, various workshops and simulation skills sessions will also be included during orientation week.

Skills practice sessions will also be offered in the simulation lab.

**Call Schedule**

In-house call is approximately every seventh night at University of Toledo Medical Center. This may not be the case at other hospitals. Failure to report for call or being consistently unavailable while on call can result in you being scheduled for make-up call, result in a Professional Behavior report, and/or impact on your successful completion of the clerkship. The resident on call will report you as absent if you do not respond to attempts to locate you. You must report to the general surgery resident on call, the senior night float, as well as the hospital operator. All trading of call must be cleared with clerkship coordinator and marked on the call schedule located on the office door. If you are ill or absent for any reason on your call day, you must arrange to make up the call.
Professional Behavior Report

A Professional Behavior Report may be initiated by the Clerkship Director following any circumstance that is deemed unprofessional. These circumstances include, but are not limited to:

- Improper conduct
- Inappropriate language
- Dress code violations
- Intentional disruption
- Unexcused absences
- Disrespectfulness
- Consistent tardiness
- Dishonesty
- Withdrawal from Clerkship

Students who must withdraw from the clerkship prior to its completion are eligible to receive elective credit for time actually spent on the service. This applies only to those students in good standing in the clerkship and who have valid and compelling reason for the withdrawal request, as approved by the Associate Dean for Student Affairs. Upon the student’s return from leave, the twelve weeks of surgical clerkship must be rescheduled to be completed in its entirety.

Recommended Text:

  ISBN# 9780781750032
  ISBN# 9780781750042

Other Suggested Readings:

- Current Surgical Diagnosis and Treatment, Doherty, 12th ed., Norwalk, CT, Appleton & Lange, 2006
  ISBN# 9780071423151
- Surgical Recall, Blackbourne, 5th ed., Lippincott, Williams & Wilkins, Baltimore, MD, 2009
  ISBN# 9780781770767
  ISBN# 9781416037477
  ISBN# 9780071457705

Online Resources

- Blackboard
  UTMC Distance and E learning website that offers all of The Department of Surgery didactic lecture notes for your review, including subspecialty notes.

- Academic Intranet
  UTMC student website offers instructional videos pertaining to the required procedures for The Department of Surgery. Look under the Curriculum List/College of Medicine, Third and Fourth Year/Clinical Skills.

- American College of Surgeons
  The American College of Surgeons is a scientific and educational association of surgeons that was founded in 1913 to improve the quality of care for the surgical patient by setting high standards for surgical education and practice.

- The Cochrane Database
  The Cochrane Collaboration is an international not-for-profit organization, providing up-to-date information about the effects of healthcare.
The Office of Medical Education proposed a standardized grading system policy for the seven required clerkships, which consists of the following:

- **Clinical Evaluations are composed of a maximum of 40 points**
  The student’s final evaluation for clinical competence will be determined from the assessments received by the attending and resident faculty. The faculty will complete the Clerkship Clinical Competency Evaluation Form, which will require evaluation in several criteria. You will be evaluated on history taking skills, physical examination skills, oral case presentation, written data recording skills, clinical judgment and diagnostic skills, self-education skills, and professional behaviors. Attached is the evaluation form along with the Grading Policy set forth by the University of Toledo, College of Medicine, Office of Medical Education. The attending and resident evaluations are weighted the same.

- **NBME Subject Examination percentile composed of a maximum of 40 points**
  The National Board of Medical Examiners subject examination in surgery will be given at 12:30 p.m. on the last Friday of the clerkship unless otherwise stated. This is multiple choice in format. You must bring #2 pencils and your rocket ID. Report 15 minutes prior to the exam. It is important to prepare for this examination by studying the lecture notes and assigned textbook on a regular basis. The use of a question review book is helpful when used as a guide to focused study review.

- **Departmental Program Grade composed of 20 points**
  The Department of Surgery’s Departmental Grade is composed of the following:

  **OSCE=6 points**
  The Department of Surgery will administer an Objective Structured Clinical Examination. This offers the opportunity to demonstrate some of the skills and abilities learned during the clerkship. It is modeled comparatively to the clinical skills assessment required after your third year. The examination will consist of two 25 minute H&P sessions with write up.

  **Oral Examinations=6 points**
  Standard format. Consists of one 20 minute oral examination given by an attending surgeon. Students are tested on any of the following topics: Wound Healing, Cholecystitis, Nutrition, Appendicitis, Diverticulitis, Peripheral Vascular Disease, Inguinal Hernia, Upper Gastrointestinal Bleeding, Reflux Esophagitis, Trauma/Shock, Breast Cancer, Thyroid Disease, Colon Cancer, Lung Cancer and Melanoma. Students will be testing according to their basic knowledge, principles of surgery (pathophysiology), basic clinical judgment, and ability to analyze clinical problems and communicate them effectively in an organized and intelligible manner.

  **Case Logs=2 points**
  Case logs, including educational assigned hours, procedures, and diagnostic category requirements need to be logged on a regular basis and in a timely fashion. Logs need to be complete and consistently updated to receive full credit for case logs. If logs are incomplete by the end of the clerkship or if notices are received of inconsistent updates points will be deducted.

  **Ethics Paper=2 points**
  All students are required to write an Ethics Paper (description in manual). If the ethics paper is submitted on time you will receive the full point value. If the Ethics Paper is turned in late or not at all points will be deducted. If the paper is written extremely poorly points may be deducted.

  **Diagnostic Category Requirements=2 points**
  Diagnostic category requirements must be met (and logged into Meded) by the end of the clerkship to receive full credit. Points may be deducted for late submission of logs/requirements or failure to obtain the required categories. In addition a grade of incomplete may be assigned. Should you find that you are lacking in cases it is your responsibility to bring it to the coordinator’s attention in a timely fashion for advice.

  **Procedure Category Requirements=2 points**
  Procedure requirements must be met (and logged into Meded) by the end of the clerkship to receive full credit. This includes submission of your green procedure card with verification signature and case log completion. Failure to submit your procedure card, or complete logs, or meet procedure requirements by the end of the clerkship will result in point deduction and possible grade of incomplete.
A grade of **INCOMPLETE** will be assigned in the event that the student has not completed all components of the educational program.

A grade of **DEFER** will be assigned for any of the following:

- Failure of oral examinations.
- Failure of the written examination.
- An unsatisfactory score on the OSCE.

Any student who fails the written examination will receive a grade of Defer for the clerkship and receive **one** opportunity to repeat the examination. Please consult your student handbook regarding the official policy on the requirements for the resolution of Defer grades. The clerkship office requires written notification one month in advance of the date that you intend to take the examination. Once you submit written intent to the clerkship office, and an examination has been ordered for you, you will be expected to take the examination as scheduled.

A grade of **FAIL** will be assigned for any of the following:

- Failure on two Surgery NBME subject examinations.
- Failure of clinical competency less than 20 points
- Failure to attend scheduled educational activities or unexcused absences

Failure to achieve 10 points or more on the departmental portion of the grade will result in a grade no higher than a pass.

A grade of Fail will require that the student participate in a remedial clerkship experience. Depending on the basis of the failing grade, the length of the remedial clerkship and the criteria for passing the remedial experience will vary accordingly. The clerkship director has the ability to override a determined grade based on performance and professionalism.
# Surgery Clerkship

## Final Clinical Competency Evaluation

**Student's Name:**  
**Block:**  
**Evaluator:**  

**Amount of Contact with Student:**
- [ ] Extensive (more than 10 hours)
- [ ] Moderate (4 to 10 hours)
- [ ] Minimal (1 to 4 hours)
- [x] No Contact (0 hours)

**Dates:**

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<tr>
<th>History taking Skills</th>
<th>Excellent (5 pts)</th>
<th>Very Good (4 pts)</th>
<th>Good (3 pts)</th>
<th>Fair (2 pts)</th>
<th>Poor (1 pt)</th>
<th>N/A (0 pts)</th>
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<tr>
<td>Able to obtain a through and accurate surgical history</td>
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<th>Physical Examination Skills</th>
<th>Excellent (5 pts)</th>
<th>Very Good (4 pts)</th>
<th>Good (3 pts)</th>
<th>Fair (2 pts)</th>
<th>Poor (1 pt)</th>
<th>N/A (0 pts)</th>
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<tr>
<td>Able to perform a focused physical examination</td>
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<th>Oral case Presentation</th>
<th>Excellent (5 pts)</th>
<th>Very Good (4 pts)</th>
<th>Good (3 pts)</th>
<th>Fair (2 pts)</th>
<th>Poor (1 pt)</th>
<th>N/A (0 pts)</th>
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<tr>
<td>Gives an accurate, clear and concise oral presentation</td>
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<tr>
<th>Written data recording skills</th>
<th>Excellent (5 pts)</th>
<th>Very Good (4 pts)</th>
<th>Good (3 pts)</th>
<th>Fair (2 pts)</th>
<th>Poor (1 pt)</th>
<th>N/A (0 pts)</th>
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<td>Data documentation is complete, accurate and legible</td>
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<th>Clinical Judgment and Diagnostic Skills</th>
<th>Excellent (5 pts)</th>
<th>Very Good (4 pts)</th>
<th>Good (3 pts)</th>
<th>Fair (2 pts)</th>
<th>Poor (1 pt)</th>
<th>N/A (0 pts)</th>
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<td>Has demonstrated an appropriate knowledge base for the clinical setting and level of training</td>
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<td>Develops a differential diagnosis and plan of investigation</td>
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<th>Self-Education Skills</th>
<th>Excellent (5 pts)</th>
<th>Very Good (4 pts)</th>
<th>Good (3 pts)</th>
<th>Fair (2 pts)</th>
<th>Poor (1 pt)</th>
<th>N/A (0 pts)</th>
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<tr>
<td>Student is motivated and initiates self-education</td>
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<th>Professional Behaviors</th>
<th>Excellent (5 pts)</th>
<th>Very Good (4 pts)</th>
<th>Good (3 pts)</th>
<th>Fair (2 pts)</th>
<th>Poor (1 pt)</th>
<th>N/A (0 pts)</th>
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<td>Student demonstrates respect for patients and other health care workers</td>
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<td>Student demonstrates eagerness to learn and willingness to work and study</td>
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**Narrative:**  
**Required**
*(Please explain all Outstanding and Poor performance grades.)*

**Faculty/Resident**  
**Date**  
Please print name also: