

CORE CLERKSHIP IN SURGERY
LOUIS STOKES CLEVELAND VETERANS AFFAIRS MEDICAL CENTER

This information packet serves as your introduction to the third year clerkship in surgery at the VA Medical Center. Included is a description of the surgical services at the VA, details about the rotation, expectations of faculty and residents, and the basis for your evaluation. More specific learning objectives are provided for you at the beginning of each chapter in your required textbook, **Essentials of General Surgery**, by Peter F. Lawrence. You should refer to these often as a study guideline. ***Please obtain this textbook and make sure you have read the first chapter before the clerkship begins.*** Self-education cannot be emphasized too strongly. Good reading habits and the development of clinical thinking based on a strong fund of knowledge will serve you well the rest of your professional lives.

GENERAL DESCRIPTION OF THE SURGICAL SERVICES AND THE ROTATION

Two rotations are required components of the core clerkship: General Surgery (2 weeks) and Peripheral Vascular Surgery (2 weeks). There is opportunity for 2 1-week electives. Electives are chosen from a number of surgical subspecialties including anesthesia, otolaryngology, ophthalmology, orthopedics, etc. In addition, students are required to do their Emergency Medicine rotation (2 weeks) at UHCMC.

General surgery treats patients with a wide variety of major and minor surgical diseases. Patients requiring admission are admitted to Ward 5A while those undergoing outpatient operations are admitted via the adjacent short stay unit (SSU). All students spend 3 weeks on the general surgery service.

Full-time faculty includes:

Chief of Surgery
Dr. Melanie Lynch, Section Chief-General Surgery
Dr. Mujjahid Abbas

The peripheral vascular surgery service treats patients with disease of the cerebrovascular circulation, the great vessels and extremity vascular diseases. Vascular patients are admitted to Ward 5A. All students spend 3 weeks on this service.

Full time faculty includes:

Drs. Jessie Jean-Claude, Section Chief-Vascular Surgery
Dr. Gilles Pinault

Both services are staffed with residents from CWRU. General Surgery has PGY-5 a junior resident (PGY 2 or 3) and an intern (PGY 1). Vascular Surgery has a Fellow, PGY-4, 2 PGY-1's Chief residents rotate for 2 months while most junior residents and interns rotate for one month each.

The daily schedule is variable, depending on the day of the week and the rotation. The General Surgery Service operates 4 days per week and has teaching conferences on Thursdays. They also

have clinic on Thursdays and Mondays. The Vascular Surgery Service also operates 4 days per week and has teaching rounds and clinic on Tuesdays. Both services make early morning rounds in the SICU, on the ward and in the SSU before going to the operating rooms. The operating room starts at 7:30 am daily except for Wednesdays when there is a 9:00 am start.

Afternoon rounds occur after the team has finished in the OR and the work is done. The residents throughout the day see consults as time allows. Each of the services can get quite busy and the workday is adjusted accordingly.

LECTURES AND CONFERENCES

You are expected to attend the scheduled lecture series given at UH in the education office. Lectures are given on weekday afternoons and take priority over other activities on the service. Your residents and faculty are aware that your attendance at lectures is required. Please call the education office at UH (844-8030) before you leave the VA to confirm that the lecture will be given.

You are also expected to attend and participate in the surgical conferences held at the VA. The conference schedule is as follows:

Tuesday	7:00-8:15 am	Vascular teaching rounds (5A and SICU)
	8:15-9:00 am	Angio Indications Conference
Thursday	7:00- 8:00 am	Morbidity & Mortality Conference, K-119
	8:00- 9:00 am	Tumor Board K-119
	9:00-11:00 am	General Surgery teaching rounds SICU
	11:00-11:30 am	Pathology conference, basement

STUDENT PARTICIPATION AND BASIS FOR EVALUATION

Because this is a core clerkship, you are expected to become involved in the day-to-day activities of the service. This involves making rounds with the residents in the mornings and afternoons except when your lecture series overlaps afternoon rounds. The best way to approach this kind of service, which tends to be busy, is to closely follow several patients rather than trying to take on all patients who are admitted. Check with the chief resident about elective admissions before the patient comes in to the hospital. You should perform a history and physical examination. Your history and physical should be complete, including a differential diagnosis and a treatment plan. In addition, you must read about the problem at hand and the other diagnoses in the differential and prepare a discussion about the topic. Each student must turn in a minimum of 4 H & P'S.

You should make a point to scrub on the cases you work-up and to follow those patients post-operatively. You should learn how to construct a pre-operative note, a brief operative note, and should write daily progress notes in the electronic chart, CPRS. You may also write orders, under the direction of the resident staff, for your patients. Please remember that all notes and

orders you write must be co-signed by a physician. Please remind the resident you designate as your co-signer that he or she has notes to sign.

Students are expected to take in-hospital call 1/week during the general and vascular surgery rotations. To optimize this experience, you should take call with the junior/senior resident on your service.

One of the unique features of the VA is that you are provided ample opportunity to perform minor procedures, which are essential to patient care regardless of your intended specialty. These include phlebotomy, IV lines, NG tubes, Foley catheters, arterial lines, fine needle aspiration and endotracheal intubations.

You should also make a point of seeing patients with interesting physical findings. Your chief resident is a good source of information about interesting findings on patients not on the surgery service.

The elements of your evaluation include: Attendance, initiative in seeing patients and performing write-ups, fund of knowledge as evidenced in conferences, your write-ups, attending rounds, and your score on the final examination. Both attending staff and residents participate in the evaluation process.

I will meet with you halfway through the rotation to find out how you think things are going and to provide feedback. I will also meet with you at the end of the rotation to provide you with your evaluation. Your final grade will not be determined until the exam results are available. In addition to these meetings, please feel free to come to me with any problems or concerns during the rotation.

I hope this clerkship will be a valuable learning experience which will help you gain an understanding of surgical diseases, the appropriate work-up and therapy for these diseases, and when to involve a surgeon. I also hope that you will develop an appreciation for what we surgeons do and that perhaps some of you might become interested in a career in surgery.

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