

CHOC Pediatric Surgery Rotation for CMHS Surgical Residents Goals and Objectives

Residents will be expected to follow the guidelines in the six core competencies set forth by the ACGME:

- I. **Medical knowledge:** The resident will learn the physiology in sickness and disease of children, gain a comprehension of evaluation of the child by history and physical exam, learn the appropriate laboratory and imaging studies for the various illnesses encountered in the child; gain an understanding of the different surgical illnesses encountered in childhood, their diagnosis, their differential diagnosis, the appropriate treatment. They will understand the anatomy and execution of the various surgical procedures common to pediatric practice. They will gain an understanding that the child is not a small adult and requires an approach that utilizes the conduct of fluid and electrolyte management, dosing of various antibiotics and other drugs, management of peri intra and post-op care which is mindful of the differences in children vs. adults.
- II. **Communication and interpersonal skills:** The resident will become familiar and be able to communicate effectively in regards to childhood normal and abnormal physiology and pathology. They will be effective in executing a comprehensive history and physical as well as progress notes and be able to express this in the medical record and to the attending surgeon in a cogent and meaningful way.
- III. **Professionalism:** The resident will adapt and modify the approach used in dealing with adults and be able to relate to children in a kind, appropriate, ethical, honest, culturally sensitive, and compassionate manner, while maintaining a professional demeanor.
- IV. **Practice based Learning:** The resident will use the experience gained during his/her rotation on the pediatric surgical service to broaden the knowledge base with the various exposure in clinical cases as well as conferences and interaction with attending surgeons. This will be accomplished by self-directed reading, conferences, interaction with surgeons, other specialty physicians, and fellow residents, as well as organizing and presenting topics of interest to conferences, fellow residents, and during bedside rounds.
- V. **System Based Practice:** Today's care of the surgical patient requires the utilization of multiple specialties as well as ancillary fields such as dieticians, social workers, psychologists etc. The resident will gain an appreciation of how these various factions interact and how they are utilized in the care of a pediatric surgical patient.
- VI. **Patient Care:** This is the most important component of a surgeon's competency and involves all the other competencies in a joint and integrated fashion to provide the best possible care for the sick child. This can only be learned through the observation

and emulation of competent surgeons providing this patient care and with the resident's gradual and incremental assumption based on the resident's level of training and personal level of competence of appropriate patient care under the supervision of the attending surgeon.