

DUKE ORTHOPAEDIC SURGERY
GOALS AND OBJECTIVES

DURHAM VETERANS ADMINISTRATION MEDICAL CENTER

PATIENT CARE

PGY-2/PGY-3

Effectively evaluates new and returning patients as their primary orthopaedic surgeon under the supervision of the Chief Resident and/or attending orthopaedic surgeon.

Effectively conducts a thorough evaluation and examination of every area of the musculoskeletal system including clinical, radiographic, and MRI examinations.

Correctly diagnoses common musculoskeletal conditions and able to formulate a thoughtful treatment plan for patients with common orthopaedic conditions.

Performs aspirations and injection techniques effectively.

Possesses confidence and independent conduct of:
Arthroscopic examination of the knee with evaluation and management of meniscal pathology and landmarks for ACL reconstruction.

Arthroscopic examination and treatment of the shoulder including rotator cuff debridement, acromioplasty, and Mumford procedure.

CHIEF RESIDENT(PGY-5)

Demonstrates ability to comprehensively assess and correctly interpret diagnostic studies and display sound decision making with regard to treatment options and treat patients within the gamut of orthopaedic conditions including:

- 1) Degenerative conditions of the knee, hand, and wrist
- 2) Shoulder, elbow, spine, foot and ankle
- 3) Rotator cuff disease, shoulder instability and arthrosis
- 4) Knee instability
- 5) Metastatic and metabolic bone disease
- 6) Geriatric fractures

Determines indications for treatment and selection of patients for surgery.

Possesses competency above and beyond those expected of the PGY-2/3 Resident(s) and sufficient enough to achieve independent conduct in teaching of::

- 1) Arthroscopic examination and treatment of the knee
- 2) ACL reconstruction

Arthroscopic examination and treatment of the shoulder, arthroscopic rotator cuff repair.

<p>Knee arthroplasty including surgical approaches and sequencing of arthroplasty steps.</p> <p>Hip arthroplasty including surgical procedures and sequencing of arthroplasty steps.</p> <p>Shoulder arthroplasty including surgical exposures, open rotator cuff repair, and mini-repair sequence arthroplasty steps.</p> <p>Fracture reduction and internal fixation of ankle fractures, tibial plateau fractures, tibial femoral intramedullary nailing techniques, external fixation of the tibia, and intertrochanteric subtrochanteric hip fractures.</p> <p>Amputations below and above knee.</p> <p>Hand and wrist surgery including carpal and cubital tunnel surgery and wrist arthrodesis.</p>	<p>Knee arthroplasty—conducts basic and difficult primary arthroplasty and correction of angulatory and flexion deformity</p> <p>Surgical management of revision total knee arthroplasty and infected arthroplasty.</p> <p>Basic and difficult primary arthroplasty and revision hip arthroplasty.</p> <p>Correction of acetabular bone loss, use of allografts and management of infected hip arthroplasty.</p> <p>Shoulder arthroplasty and hemi-arthroplasty.</p> <p>Fracture reduction internal fixation of tibial plafond fractures as well as acetabular fractures.</p>
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DUKE ORTHOPAEDIC SURGERY GOALS AND OBJECTIVES

DURHAM VETERANS ADMINISTRATION MEDICAL CENTER

MEDICAL KNOWLEDGE

PGY-2/PGY-3

Demonstrates understanding of indications and contraindications for all common elective orthopaedic conditions.

Prepare for and participate in the four (4) dedicated conferences at the parent institution, including:

1. Hand/Upper Extremity
2. Grand Rounds
3. Fracture Conference
4. Orthopaedic Science

Attend and participate in as many as possible of the subspecialty conferences at the parent institution as consistent with VAMC patient care duties.

Read and master the principles and concepts as outlined in the OKU Subspecialty Series entitled Adult Reconstruction, Shoulder and Elbow.

Successfully complete the OKU Subspecialty Self-Assessment examinations in Adult Reconstruction, Shoulder and Elbow.

Read and master the Principles and Concepts in AAOS: Musculoskeletal Imaging.

CHIEF RESIDENT(PGY-5)

Possesses knowledge of the following orthopaedic conditions:

- 1) Degenerative conditions of the knee, hand, and wrist
- 2) Shoulder, elbow, spine, foot, and ankle
- 3) Rotator cuff disease, shoulder instability, and arthrosis
- 4) Knee instability
- 5) Metastatic and metabolic bone disease
- 6) Geriatric fractures

Prepare for and participate in the four (4) dedicated conferences at the parent institution, including:

5. Hand/Upper Extremity
6. Grand Rounds
7. Fracture Conference
8. Orthopaedic Science

Attend and participate in as many as possible of the subspecialty conferences at the parent institution as consistent with VAMC patient care duties.

Read and master the principles and concepts as outlined in the OKU Subspecialty Series entitled Adult Reconstruction, Shoulder and Elbow.

	<p>Successfully complete the OKU Subspecialty Self-Assessment examinations in Adult Reconstruction, Shoulder and Elbow.</p> <p>Read and master the Principles and Concepts in AAOS: Musculoskeletal Imaging.</p>
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DUKE ORTHOPAEDIC SURGERY GOALS AND OBJECTIVES

DURHAM VETERANS ADMINISTRATION MEDICAL CENTER

PRACTICE—BASE LEARNING AND IMPROVEMENT

PGY-2/PGY-3 RESIDENT

Prepares for and participates in Indications Conference and Surgical Planning Conference(s)

Actively acquires new knowledge through library and electronic resources and through participation in Journal Club reviews.

Facilitates the learning of students and other health care professionals on the service.

Able to obtain and use information about his/her patient population and the larger population from which patients are drawn.

Able to apply knowledge and study designs and statistical methods to the appraisal of clinical studies.

Able to use information technology to manage information, access on-line medical information to support his/her own education.

Prepare for and participate in the monthly Orthopaedic

CHIEF RESIDENT(PGY-5)

Prepares for and participates in Indications Conference and Surgical Planning Conference(s)

Actively acquires new knowledge through library and electronic resources and through participation in Journal Club reviews.

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Able to obtain and use information about his/her patient population and the larger population from which patients are drawn.

Able to apply knowledge and study designs and statistical methods to the appraisal of clinical studies.

Able to use information technology to manage information, access on-line medical information to support his/her own education.

Successfully assumes responsibility for conduct and supervision

<p>Complications Conference with appropriate literature review included in the subject matter.</p> <p>Prepare for and present at the General Orthopaedic Journal Club(s).</p>	<p>of general adult orthopaedic outpatient and emergency room service as the orthopaedic surgeon.</p> <p>Monitors junior level residents, physician's assistants, and medical student activity and assists in their education.</p> <p>Prepare for and participate in the monthly Orthopaedic Complications Conference with appropriate literature review included in the subject matter.</p> <p>Prepare for and present at the General Orthopaedic Journal Club(s).</p>
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DUKE ORTHOPAEDIC SURGERY GOALS AND OBJECTIVES

DURHAM VETERANS ADMINISTRATION MEDICAL CENTER

INTERPERSONAL AND COMMUNICATION SKILLS

PGY-2/PGY-3 RESIDENT

Able to assume leadership role to direct orthopaedic rehabilitation, able to communicate and work effectively with therapists to achieve these ends.

Able to create and sustain a therapeutic and ethically sound relationship with patients and their families.

Able to effectively provide information to patients via various methodologies and techniques.

Able to work effectively with others as a leader of the health care team.

CHIEF RESIDENT(PGY-5)

Able to assume leadership role to direct orthopaedic rehabilitation, able to communicate and work effectively with therapists to achieve these ends.

Able to create and sustain a therapeutic and ethically sound relationship with patients and their families.

Able to effectively provide information to patients via various methodologies and techniques.

Able to work effectively with others as a leader of the health care team.

Effectively serves as an educator of the junior level resident(s) as well as medical students on the service.

Effectively communicates with patients, families, ancillary staff, associated health care personnel, and medical staff in a respectful and ethical manner.

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DURHAM VETERANS ADMINISTRATION MEDICAL CENTER

PROFESSIONALISM

PGY-2/PGY-3 RESIDENT

Demonstrate respect, compassion, and integrity in response to the needs of patients and their families.

Demonstrates ethical principles pertaining to patient confidentiality issues.

Demonstrates sensitivity to the culture, age, gender, and disabilities of patients and fellow health care professionals.

CHIEF RESIDENT(PGY-5)

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Demonstrates ethical principles pertaining to patient confidentiality issues.

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DURHAM VETERANS ADMINISTRATION MEDICAL CENTER

SYSTEMS-BASED PRACTICE

PGY-2/PGY-3 RESIDENT

Demonstrates understanding of the veterans administration model and health care delivery system: recognizing that this system provides comprehensive health care services over an extended region.

Understands the role of therapists in orthopaedic rehabilitation.

Acts as an advocate for quality patient care.

Able to assess, coordinate, and approve the care of patients within the current health care models or systems within the program.

Develops an understanding of the impact of social and economic realities in the care of veteran administration patients.

Possesses an understanding of the importance of patient compliance on outcome.

CHIEF RESIDENT(PGY-5)

Demonstrates understanding of the veterans administration model and health care delivery system: recognizing that this system provides comprehensive health care services over an extended region.

Understands the role of therapists in orthopaedic rehabilitation.

Acts as an advocate for quality patient care.

Able to assist, coordinate, and approve the care of patients within the current health care models or systems within the program.

Develops an understanding of the impact of social and economic realities in the care of veteran administration patients.

Possesses an understanding of the importance of patient compliance on outcome.

DUKE ORTHOPAEDIC SURGERY

DELINEATED LINES OF RESPONSIBILITY

DURHAM VETERANS ADMINISTRATION MEDICAL CENTER

OUTPATIENT

PGY-2/PGY-3 RESIDENT

Evaluate new patients, postoperative patients, and follow up patients with operative and nonoperative musculoskeletal problems.

The PGY-2 and PGY-3 Residents present each patient either to the Chief Resident in the clinic and/or to the attending. Presentation will include history, examination, diagnoses, and proposed treatment plan.

The PGY-2 and PGY-3 Resident is expected to perform office procedures such as injections, cast applications, fracture reduction, and fluoroscopic manipulation.

The PGY-2 and PGY-3 activities are supervised by the Chief Resident and the attending orthopaedic surgeon. As the PGY-2 and PGY-3 Residents become more competent, the degree of supervision is reduced but not completely eliminated.

The PGY-2 and PGY-3 Residents are expected to participate in the education of medical students rotating on orthopaedics.

CHIEF RESIDENT(PGY-5)

The Chief Resident functions independently in the clinic with the attending assisting the PGY-2 and PGY-3 Residents in the evaluation of new patients, postoperative patients, follow up patients with operative and nonoperative musculoskeletal problems.

The Chief Resident is expected to closely supervise the activities of the PGY-2 and PGY-3 residents and to participate in the education of medical students rotating in orthopaedics.

DUKE ORTHOPAEDIC SURGERY

DELINEATED LINES OF RESPONSIBILITY

DURHAM VETERANS ADMINISTRATION HOSPITAL

INPATIENT

PGY-2/PGY-3 RESIDENT

PGY-2 and PGY-3 Residents participate in morning and evening rounds with the Chief Resident and the attending orthopaedic surgeon as appropriate. Appropriate progress note and discharge summary are made by the resident team. The PGY-2 and PGY-3 residents are directly responsible to the Chief Resident.

CHIEF RESIDENT – PGY-5

The Chief Resident participates in morning and evening rounds with the PGY-2 and PGY-3 Residents as well as the attending orthopaedic surgeon(s) as appropriate.

The Chief Resident is directly responsible to the attending orthopaedic surgeon (s) and the Chief of Service.

DUKE ORTHOPAEDIC SURGERY

DELINEATED LINES OF RESPONSIBILITY

DURHAM VETERANS ADMINISTRATION MEDICAL CENTER

OPERATIVE

PGY-2/PGY-3 RESIDENT

In the operating room the PGY-2 and PGY-3 Residents assist the Chief Resident in performing surgery as deemed appropriate for his/her level of experience.

The PGY-2 and PGY-3 Residents are guided by the Chief Resident and the attending orthopaedic surgeon(s) and may perform surgery appropriate to their skill level under the direct supervision of the Chief Resident and/or the attending orthopaedic surgeon.

CHIEF RESIDENT(PGY-5)

In the operating room the Chief Resident functions as the primary surgeon on cases deemed appropriate. The Chief Resident is responsible for preparing for and performing surgical procedures and insuring the appropriate instruments, implants have been properly procured. He reports directly to the attending orthopaedic surgeon who will be present and assist as appropriate.

DUKE ORTHOPAEDIC SURGERY

DELINEATED LINES OF RESPONSIBILITY

DURHAM VETERANS ADMINISTRATION MEDICAL CENTER

EMERGENCY

PGY-2/PGY-3

The PGY-2 and PGY-3 Residents serve emergency on-call for the wards and the emergency department. They will present all patients to the Chief Resident and will assist the Chief Resident and/or attending if emergency surgery is required prior to the next day.

CHIEF RESIDENT(PGY-5)

The Chief Resident will “back up” the PGY-2 and PGY-3 Residents and will be present for all admissions occurring at night. When emergency surgery is to be performed, the cases will be discussed with the attending orthopaedic surgeon and the Chief Resident, the PGY-2/PGY-3 Resident, and the attendings will work as a team to accomplish the emergency surgery.