The format for this listing of goals and objectives for the Surgery Clerkship is modeled after the ACGME Core Competencies (Patient Care, Medical Knowledge, Interpersonal and Communication Skills, Professionalism, Practice-Based Learning and Improvement, and Systems-Based Practice).

The goals listed for each competency mirror the goals stated in the Graduation Competencies (i.e., exit objectives).

The instructional strategies for the following objectives include: supervised clinical experiences, bedside teaching rounds, lectures, textbooks and Operating Room experiences. Clinical skills and medical knowledge are assessed through direct clinical observation, student completion of the clinical passport, and faculty/resident completion of DUCOM evaluation forms. Medical knowledge is also assessed through the NBME subject (SHELF) examination and oral examinations.

I. Competency: Patient Care

Goal: Students must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health in all patients across the continuum of age.

Objectives:

During this rotation, students are expected to:

1. Gather essential and accurate information about their patients.
   
   - Learn surgical assessment skills.
   - Demonstrate sensitivity in the care of all patients by recognizing each of them as an individual, with the appropriate consideration of diversity in age, culture, disability, educational background, ethnicity, gender, gender identity, race, religion, sexual orientation, and socioeconomic background.
   - Effectively communicate with patients and families in pre-op, post-op and outpatient settings.
   - Learn indications for surgery: medical care, timing of surgery, risk management.
   - Work collaboratively with all members of the healthcare team.
   - Recognize the limitations of level of training and seek help appropriately.
   - Protect patients from harm.
   - Advocate for patient interests.
2. Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up to date scientific evidence, and clinical judgment.

   - Interpret history and physical exam findings.
   - Interpret labs (hematological), non-invasive vascular lab, radiologic tests, as appropriate for surgery.
   - Create a sufficiently broad initial differential diagnosis for each problem.
   - Outline an initial evaluation and choose appropriate lab tests.
   - Interpret the results of the tests.
   - Describe the most common treatments for the final diagnosis.

3. Counsel and educate patients and their families

   - Effectively communicate information about the diagnosis and treatment to the patient and family.
   - Recognize the important role of patient education in treatment of acute and chronic illness, and prevention of disease.
   - Learn indications for surgery: medical care, timing of surgery, risk management.

4. Use information technology to support patient care decisions and patient education.

5. Provide health care services aimed at preventing health problems or maintaining health.

6. Work with other health care professionals, including those from other disciplines, to provide patient-focused care.

II. Competency: Medical Knowledge

Goal: Students must demonstrate knowledge about established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care.

Objectives:

During this rotation, students are expected to:

1. Demonstrate basic knowledge of structure and function of major organ systems in the context of health and disease.
2. Identify and learn the core principles of Surgery.

3. Develop a broad based knowledge of surgery that is applicable to many areas of medicine.

4. Identify social, economic, psychological, and cultural factors that contribute to health and disease.

5. Demonstrate a basic knowledge of the following areas:
   - Nutritional assessment and treatment
   - Risk assessment (geriatric competencies):
     - Issues of safety and prevention
     - Risks, indications, alternatives and contraindications for indwelling (Foley) catheter use
     - Risk for developing pressure ulcers
     - Risk of falling
     - Risk of aspiration

6. Demonstrate analytic thinking and clinical reasoning to interpret data and develop a differential diagnosis.

7. Perform common technical procedures accurately and safely.

III. Competency: Interpersonal and Communication Skills

Goal: Students must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients families, and professional associates.

Objectives:

During this rotation, students are expected to:

1. Communicate effectively and demonstrate caring and respectful behaviors when interacting with patients and their families in pre-op, post-op and outpatient settings.

2. Use communication techniques that enable development of a therapeutic alliance with the patient and family, being sensitive to the unique social condition and cultural background of the family.

3. Communicate with patients and families regarding advanced care directives and
end of life care.
4. Communicate effectively in difficult situations including distressed patients and their family members.

5. Synthesize material and present cases in an understandable and concise manner.

6. Learn surgical assessment skills and formulate plan for patients.

7. Communicate effectively with physicians, other health care professionals, and health-related agencies.

8. Document medical information accurately and timely in the medical record.

**IV. Competency: Professionalism**

**Goal:** Students must demonstrate adherence to ethical principles, development of physician attributes, and a commitment to carrying out professional responsibilities.

**Objectives:**

During this rotation, students are expected to:

1. Demonstrate respect for patient and family attitudes, behaviors and lifestyles, with particular attention to cultural, ethnic, and socioeconomic influences.

2. Demonstrate honesty, integrity, reliability and responsibility in all interactions with patients, families, colleagues, and other professional contacts.

3. Demonstrate behaviors and attitudes that promote the best interest of patients and families and that supersede self-interest.

4. Demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, and informed consent.

5. Demonstrate a positive attitude and regard for education by demonstrating intellectual curiosity, initiative, academic integrity, and willing acceptance of feedback.


7. Demonstrate a professional image in behavior and dress.
V. Competency: Practice-Based Learning and Improvement

**Goal:** Students must be able to investigate and evaluate their approach to patient care, appraise and assimilate scientific evidence, and continuously improve patient care based on self-evaluation and life-long learning.

**Objectives:**

During this rotation, students are expected to:

1. Identify strengths and weaknesses in knowledge and skills based on critical reflection and self-evaluation.
2. Seek out opportunities and self-directed learning activities to strengthen deficits.
3. Demonstrate maturity in soliciting, accepting, and acting on feedback in an effort to effectively make improvements.
4. Locate, appraise, and assimilate evidence from scientific studies related to their patients' health problems.
5. Use information technology to access online medical information, support patient care decisions, enhance their own education, and facilitate the learning of colleagues and other health care professionals.

VI. Competency: Systems-Based Practice

**Goal:** Students must demonstrate an awareness of, and responsiveness to, the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care.

**Objectives:**

During this rotation, students are expected to:

1. Work collaboratively in inter-professional teams to enhance the quality of patient care.
2. Identify available community resources beneficial in caring for patients.
3. Describe how the patient's insurance coverage or lack thereof is an impediment or aid to the patient's care.
VII. Time off Policy

a. Student Affairs must excuse an absence. ALL students must contact Student Affairs if they are to be absent.

b. NO faculty, site directors, clerkship directors, or coordinators may excuse an absence.

c. Student requests for time off, or sick time should call Student Affairs.

d. The student affairs Dean will notify the Site and Clerkship Director of an absence.

e. Students who DO NOT report for clinical duties and a notification from Student Affairs has not been received at the site of their rotation will be directed to the Student Affairs or the Office of Clinical Education.

f. ALL missed time WILL require make up. The make-up assignment is at the discretion of the clerkship director