

UNC DIVISION OF PLASTIC AND RECONSTRUCTIVE SURGERY

Proposed Goals and Objectives for the Integrated Program Competency-Based, Rotation-Specific, Level-Appropriate

PGY3 Levels

Plastic Surgery Residency Overview

The plastic surgery residency commences at the PGY1 level and concludes after successful completion of the PGY6 year. In the first year, each resident will spend one month with the plastic surgery service. Otherwise they will participate in a variety of general surgery rotations, similar to that of a categorical general surgery resident. The second year will be comprised entirely of general surgery rotations. Then in the third year, each resident will spend six months with the plastic surgery service and six months in subspecialty electives. During the six months of plastic surgery time, the PGY 3 resident will serve as the daytime consult resident for the ED and for in-patient services, and he or she will learn perioperative management of the plastic surgery patient. The PGY3 resident will work with all three plastic surgery services (Hand/Burn--PEACOCK, Breast/Micro/General--HARTRAMPF, and Craniofacial/Cosmetic--FURLOW), to help coordinate care and assist with signoffs and transitions of care. In the PGY4, PGY5 and PGY6 years, each resident will spend four months per year, rotating on each of the three plastic surgery services.

Service #1: The **HARTRAMPF** Service UNC Breast/Micro/General Reconstruction

The UNC Breast/Micro/General Reconstruction service will expose the resident to the evaluation and treatment of general plastic and reconstructive surgery issues with a primary focus on breast reconstruction. The full complement of breast reconstructive management and microsurgical reconstruction as well as the management of general plastic surgical complaints such as truncal deformity and wounds will be provided. The faculties of the UNC Breast/Micro/General Service are Drs. Lee, Roughton, and Wood.

Service #2: The **PEACOCK** Service UNC Hand/Burn Service

<u>UNC Hand/Burn Service</u> exposes the plastic surgery residents to the evaluation and management of patients who require complex burn, hand, and extremity reconstruction. This rotation provides the knowledge and tools required to evaluate and treat both traumatic hand and upper extremity problems as well as complex functional extremity reconstruction. Graduated responsibility is provided including outpatient evaluation and follow-up care, participation in microsurgical hand and extremity reconstruction, and includes the use of multiple laser surgery techniques for burn reconstruction. Faculty members include Dr. Hultman.

Service #3: The **FURLOW** Service UNC Craniofacial and Cosmetic Service

The <u>Craniofacial and Cosmetic</u> resident will learn the principles and tenets of evaluating, diagnosing and treatment management of patients with reconstructive and aesthetic issues of the face and cranium. Furthermore, the resident will gain critical knowledge in the diagnosis and treatment of aesthetic problems such as facial aging, rhinoplasty, breast aesthetics and techniques in structural fat grafting and dermal fillers. Upon completion of the month, she/he will be proficient in understanding the cutting edge techniques in aesthetic surgery. Graduated responsibility for the management and surgical care of patients requiring craniofacial reconstruction and aesthetic surgery will be provided. This will include outpatient evaluation and follow-up care, participation in calvarial and cleft reconstruction and evaluation and treatment of a multitude of aesthetic complaints. Faculty members include Drs. Damitz and Wood.

PGY3

A. MEDICAL KNOWLEDGE

Goal: The resident will achieve introductory knowledge of the evaluation and management plastic surgery patients, including subspecialty patients who have hand surgery, microsurgery, craniofacial surgery, breast reconstruction, pediatric plastic surgery, aesthetic surgery, acute burn care and burn reconstruction, and body contouring.

Objectives:

- 1. Understands the different fields of plastic surgery: hand surgery, microsurgery, breast reconstruction, craniofacial surgery, pediatric plastic surgery, aesthetic surgery, acute burn care and burn reconstruction, body contouring, breast reconstruction, lower extremity reconstruction, management of facial trauma, management of skin cancers, and management of difficult, complex, and chronic wounds.
- 2. Describes the pathophysiology of chronic, complex, and difficult wounds.
- 3. Discusses the appropriate levels of the reconstructive ladder for the repair of complex wounds.
- 4. Understands the principles of tissue perfusion, flap physiology and monitoring, and wound healing.

- 5. Correctly uses perioperative medications to treat infections, thromboembolic disease, pain, and hemodynamic abnormalities.
- 6. Understands the impact of chronic and acute diseases, such as diabetes, COPD, adrenal insufficiency, coronary artery disease, hypertension, renal dysfunction, and hepatic dysfunction, on the plastic surgery patient.
- 7. Discusses multiple treatment options for patients seen in the Emergency Department and in the In-Patient setting.
- 8. Describes appropriate follow-up for for patients seen in the Emergency Department and in the In-Patient setting.
- 9. Understands the etiology of complex wounds: congenital, traumatic, oncologic, acquired, functional, infectious.
- 10. Explains preventive measures to decrease the incidence of complex wounds.

B. PATIENT CARE

Goal: The resident will provide patient care that is compassionate, appropriate, and effective for the treatment of plastic surgery patients, focusing on patient safety and efficacious outcomes, in the perioperative setting.

Objectives:

- 1. Participates in multi-disciplinary conferences regarding specific plastic surgery patients.
- 2. Performs basic plastic surgery procedures such as wound preparation and closure, laceration repair, management of hand injuries and infections, and debridement of pressure ulcers.
- 3. Assists in flap harvest and insetting, as well as closure of donor site.
- 4. Provides appropriate, timely, initial consultation for patients in the emergency department, inpatient locations, and the intraoperative setting.
- 5. Participates in and leads junior house officers in preoperative preparation and postoperative evaluation and management of the plastic surgery patient.
- 6. Coordinates care between different services within Plastic Surgery and outside of Plastic Surgery
- 7. Carefully and respectfully communicates with other consultants.
- 8. Diligently works to provide efficient care, with patient safety and efficacious outcomes as the primary goals.
- 9. Educates patients and families about plastic surgery procedures and the disease processes that plastic surgeons treat.
- 10. Performs impeccable sign-out to the on-call resident of all issues regarding the in-patient and consult services, to provide a seamless transition of care to the on-call team.

- 11. Collaborates with nursing staff, social workers, case managers, therapists, chaplains, and other care providers to deliver care that facilitates post-operative recovery and discharge.
- 12. Establishes appropriate follow-up for all patients who have had surgery or who may need surgery.
- 13. Understands how to delegate patient care tasks to other team members.
- 14. Responds favorably when patient care tasks are delegated to the house officer.
- 15. Recognizes when to involve superior members of the surgical team, for all urgent medical, surgical, social, psychological, and logistical issues.

C. PRACTICE BASED LEARNING AND IMPROVEMENT

Goal: The resident will investigate and evaluate his or her own patient care practices, appraise and assimilate scientific evidence, and improve patient care practices.

Objectives

- 1. Uses information technology to prepare for cases, bringing to the OR the knowledge of current modalities of care and the scientific evidence for that care.
- 2. Routinely analyzes the effectiveness of own practices in caring for surgery patients.
- 3. Improves own practices in the care of patients by integrating appropriately gathered data and feedback.
- 4. Educates medical students and other healthcare professionals in the practices of general plastic surgery, plus such subspecialties as hand surgery, microsurgery, craniofacial surgery, breast reconstruction, pediatric plastic surgery, aesthetic surgery, acute burn care and burn reconstruction, and body contouring.
- 5. Functions independently with graduated advancement and appropriate faculty supervision.
- 6. Uses library sources to perform research and literature searches.
- 7. Understands the principles of clinical research and the application of biostatistics.

D. INTERPERSONAL AND COMMUNICATION SKILLS

Goal: The resident will demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and professional associates.

Objectives

- 1. Educates patients and families in general plastic surgery, plus its subspecialty fields of hand surgery, microsurgery, craniofacial surgery, pediatric plastic surgery, aesthetic surgery, acute burn care and burn reconstruction, and body contouring.
- 2. Demonstrates compassion for patients and families.

- 3. Provides adequate counseling and informed consent to patients.
- 4. Listens to patients and their families.
- 5. Assimilates data and information provided by other members of the health care team.
- 6. Charts and records accurate information.

E. SYSTEM BASED PRACTICE

Goal: The resident will demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.

Objectives

- 1. Coordinates all aspects of plastic surgery, plus its subspecialty fields of hand surgery, microsurgery, craniofacial surgery, pediatric plastic surgery, aesthetic surgery, acute burn care and burn reconstruction, and body contouring, in the care of patients.
- 2. Demonstrates knowledge of cost-effective general plastic surgery, especially in the area of perioperative management of the surgical patient.
- 3. Advocates for patients within the health care system.
- 4. Refers patients to the appropriate practitioners and agencies.
- 5. Facilitates the timely discharge of same day surgery patients.
- 6. Works with primary care physicians, and other consultants such, toward the safe administration of anesthesia.

F. PROFESSIONALISM

Goal: The resident will demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

Objectives

- 1. Develops a sensitivity of the unique stresses placed on families under care for surgical diagnoses.
- 2. Exhibits an unselfish regard for the welfare of surgical patients.
- 3. Demonstrates firm adherence to a code of moral and ethical values.
- 4. Is respectful to patients and their families, especially in times of stress to the family unit.
- 5. Respects and appropriately integrates other members of the health care team.
- 6. Provides appropriately prompt consultations when requested.

- 7. Demonstrates sensitivity to the individual patient's profession, life goals, and cultural background as they apply to health care.
- 8. Is reliable, punctual, and accountable for own actions in the OR and clinic.
- 9. Understands the concepts of autonomy, beneficence, nonmaleficence, justice, and respect for life.
- 10. Maintains patient confidentiality.