

Trauma Service

Length: 2 - 4 months of PGY-1 year
Location: The Queen's Medical Center
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This rotation is designed to expose the general surgery Resident to the basic principles of trauma care. The Queen's Medical Center is an American College of Surgeons Committee on Trauma verified Level II Trauma Center. It is the only verified Trauma Center in the State. We evaluate approximately 1,500 trauma patients per year. The trauma case mix is approximately 10% penetrating and 90% blunt.

Goals

Upon completion of the Trauma Surgery rotation, the Resident will have:

1. Acquired the broad knowledge base necessary to enable the Resident to evaluate, resuscitate, and work-up the trauma patient.
2. Acquired a broad knowledge base to determine when surgical intervention is required in the management of the trauma patient.
3. Acquired a broad knowledge base to enable the Resident to care for the trauma patient.

Objectives

Medical Knowledge

1. Demonstrate complete familiarity with the Advanced Trauma Life Support (ATLS) protocol, including resuscitation and stabilization of the acutely injured trauma patient in the emergency room.
2. Understand the prioritization of care ("ABCs").
3. Understand the evaluation and management of penetrating and blunt injuries.
4. Understand the process for clearing the cervical spine.
5. Understand the early and initial treatment of the head injury patient.
6. Understand the principles of vascular trauma, specifically trauma of the threatened limb.
7. Understand management of pelvic and retroperitoneal hematomas.

Patient Care

1. Demonstrate understanding of, and skills necessary for, pre-hospital management of the trauma patient.
2. Demonstrate understanding of, and ability to perform, the initial assessment and resuscitation of the trauma patient, including the ability to utilize ultrasonography in diagnostic evaluation

- (FAST), and securing of intravenous access.
3. Demonstrate proficiency in various methods of securing airway access in the trauma patient.
 4. Understand and discuss various operative exposures for all areas of trauma.
 5. Demonstrate understanding of, and proficiency in, performing bedside procedures, such as diagnostic peritoneal lavage, needle pericardiocentesis, placement of central lines, arterial lines, chest tubes, fasciotomies, and percutaneous tracheostomy.
 6. Demonstrate skill in interpreting radiographs and other imaging studies performed in the workup and management of the trauma patient.
 7. Demonstrate understanding and ability to management the trauma patient in the critical care setting.
 8. Demonstrate skill in bedside presentations, as well as conference presentations.

Professionalism

1. Interact with patients and their families in a respectful, sensitive, and ethical manner.
2. Interact with other members of the Multidisciplinary Trauma Team in a respectful, responsible, and professional manner.

Systems-based Practice

1. Understand the multidisciplinary role of the Trauma Surgeon, Subspecialty Physicians and Consultants, Trauma Nurse Coordinator, Nurses, Physician Assistants, Physical Therapists, Occupational Therapists, Rehabilitation Specialists, Social Services, and the Operating Room Team in the provision of safe, efficient, coordinated, and high quality trauma care.
2. Demonstrate understanding of the importance of delivery of cost-effective health care (diagnostic evaluation, therapy) and the importance of coordination in rehabilitation and discharge planning.

Practice-based Learning and Improvement

1. Demonstrate ability to utilize scientific studies to provide high quality trauma care.
2. Appropriately utilize Hospital information technology systems to manage patient care, and to access on-line medical information to deliver high quality care.
3. Facilitate and support the education of Medical Students, other Residents, and other healthcare team members.

Interpersonal and Communication Skills

1. Demonstrate skill in effective information exchange with patients, their families, and other members of the Multidisciplinary Trauma Team.
2. Demonstrate ability for accurate and timely information exchange between other members of the healthcare team, both verbally and in writing, with appropriate use of the medical record.

Implementation

Residents will be actively supervised by the Faculty who are in-house 24 hours a day during their call periods. Attendings actively participate and supervise the initial assessment and management of all trauma patients, as well as resuscitation. Attendings scrub and supervise the Resident in every surgical procedure performed allowing the Resident to perform all surgical procedures within their skill level. The Trauma Resident will be required to take in-house call during the day and in-house call during the night as assigned by the Program.

There are several organized teaching activities that provide ample contact time for teaching and Resident interaction. These activities include:

1. Daily Team Rounds: The Residents review all trauma cases with the Trauma Attending assigned to Service Rounds and the Case manager(s). Clinical management plans are formulated.
2. Trauma Teaching Rounds (daily): Specific trauma topics are reviewed with discussions. Residents may be asked to make a presentation at this forum.
3. Multi-Disciplinary Trauma Conference (fourth week of each month): Presentation of a trauma topic by a national/local expert or the Residents rotating on the service. Topics involving multiple specialties are encouraged.
4. Queen's Morbidity and Mortality Conference (weekly): The Trauma Residents will be responsible for presenting trauma cases from the previous week. All surgical Attendings are invited.
5. Visiting Professors will be invited at different times during the year. The Residents will be responsible for participating in rounds and activities planned for each Visiting Professor.
6. The Residents will be required to see patients in follow-up with the Trauma Faculty Surgeons in the outpatient clinic in The Queen's POB III, Suite 501.

Required Readings

Mattox K.L., Moore E.E., Feliciano D.V., eds. 2000: *Trauma, 4th Edition*; (Appleton & Lange).

A list of required readings of journal articles will be given to the Resident at the beginning of the rotation, in addition to The Queen's Medical Center Trauma Manual.

Performance Measures and Competency Assessment

1. Daily interactions with Trauma Attending Faculty and Senior Residents on patient wards, in the Clinic, and in the Operating Room, with Focused Review.
2. Conference participation.
3. Global Evaluation at the end of the rotation.
4. Nursing and Medical Student evaluations (360 degree evaluation)