

General Surgery Curriculum

Residency Match

Each fall the Department of Surgery will conduct interviews for prospective surgical resident positions with a contractual one year agreement. Upon completion of the first year of residency, contracts will be renewed annually if the resident satisfies the seven core competencies. We anticipate that the resident will demonstrate the skills and knowledge to allow them to progress to each successive year until graduation. We will provide the support needed to produce competent and skillful surgeons.

During the OGME-I year, you will be required to fulfill the rotations (as determined by the AOA and ACOS) as well as surgically oriented rotations (as determined by the Department of General Surgery). These rotations may include (but not limited to) the following:

Anesthesia

General surgery night float

Internal medicine night float

Internal Medicine

Emergency Medicine

Pediatric surgery

Radiology

Surgery (General, Peripheral Vascular)

Surgical Intensive Care/Trauma

OGME-I residents will be required to participate in the house night call schedule as determined by the Department of Medical Education. In addition, the surgical OGME-I's will participate in the surgical night call schedule as determined by the Department of Surgery. Both departments will coordinate these schedules to prevent schedule conflicts. This also applies to traditional and surgical weekend call schedules. The goal of this is to maximize the surgical interns overall academic experience while providing a smoother transition into surgical education.

Resident Selection

The candidate must be in good standing with the American Osteopathic Association.

The candidate must complete all the necessary documentation as designated by the Department of Medical Education.

The candidate will be interviewed by the members of the Department of Surgery and selected by the members of the resident selection committee.

The candidate will be offered an annual contract. Renewal of the contract will be based on satisfactory performance according to the standards established by the Department of Surgery, ACOS, AOA, and Medical Education Department.

The resident selection will not be influenced by sex, race, religion, age, or nationality of the candidate.

The candidate's ERAS application must be complete by October 1, with the exception of the Dean's letter.

Resident Evaluation

The resident will be evaluated on a monthly basis by the attending physicians with whom the resident has worked. The evaluation is based on the resident's strengths, weaknesses, and ways to improve their performance. A copy of those evaluations should be maintained by the resident with the master copy in the residents' permanent file in the department of Medical Education.

A summary of the resident's progress will be evaluated quarterly by the members of the General Surgery department and a quarterly report will be completed by the program director and be presented to the resident.

The program director will submit an annual evaluation of the resident's progress at the completion of the academic year as outlined by the AOA and ACOS.

The resident's contract will be renewed annually based on satisfactory performance during the academic year. The program director and resident committee will have the ultimate decision as to the progress made by the resident.

Educational Experience

The resident will gain experience in the pre-operative, operative and post-operative management of surgical and non-surgical patients. The resident will evaluate patients and implement treatment plans under the supervision of an attending physician.

The resident will gain experience in the management of critically ill patients throughout the residency. Rotations in SICU/MICU and trauma will provide the resident with ample opportunity to manage a multitude of medical and surgical problems.

The resident will gain experience in the techniques and surgical procedures unique to urologic and plastic surgery.

The resident will have the opportunity to perform endoscopic evaluations and treatments under the supervision of gastroenterologists and surgeons.

The resident will assist and perform a variety of general, vascular, cardiothoracic, oncologic, pediatric, trauma, and transplant surgical cases. The resident will be given progressive responsibility as determined by the attending surgeon.

The resident will participate in an academic program coordinated by the chief residents under the supervision of the program director. The educational activities include: surgical textbook reading, journal club, tumor board, morbidity and mortality conference, case presentations, morning report, non lecture series, grand rounds, trauma conference, basic science conference, surgical anatomy conference and CORE surgical conferences.

The resident will be provided with one to two months of elective time during the residency to pursue individual areas of interest. That timeframe will be determined by the program director and is subject to approval by the PD and the department of Medical Education.

The resident will be provided an educational stipend annually, determined by the OhioHealth Educational Council in order to attend required educational conferences. The Stipend money is first applied to any required education activity as stated by the ACOS. After the required courses are determined, any leftover stipend money may also be used for additional educational expenses as deemed necessary by the program director and the office of Medical Education.

Each resident is required to attend the annual ACOS convention once during his/her residency program. The resident will complete ATLS during the beginning of the second year of residency.

The resident will be given vacation time as contracted by the Department of Medical Education. The vacation request must be approved by the program director and chief resident in addition to any outside institution involved.

The resident will gain experience in office management through participation in the surgical clinic. Additional experience may be obtained by visiting an assigned surgeon's scheduled office hours.

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