DEPARTMENT OF SURGERY

SECTION OF PLASTIC SURGERY

PLASTIC SURGERY ROTATION (RED SERVICE)

University Hospital

House Officer I

Curriculum/Rotation Goals and Objectives for Surgery Residents
Plastic Surgery
House Officer I

**Goal:** The PGY 1 rotation in plastic surgery will increase residents’ knowledge and skills necessary for complex wound management. It will also increase residents’ skills with planning and execution of reconstruction after burns, cancer treatment, previous surgery, or deformity.

**Learning Objectives:**

**Patient Care:**
By the end of the Plastic Surgery rotation, the HO I resident will be able to:

1. Provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.
2. Communicate effectively and demonstrate caring and respectful behaviors when interacting with patients and their families.
3. Gather essential and accurate information about their patients.
4. Suggest informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment.
5. Develop and carry out patient management plans.
6. Counsel and educate patients and their families.
7. Use information technology to support patient care decisions and patient education.
8. Participate progressively in medical and invasive procedures (under supervision of attending plastic surgeons).
9. Collaborate with health care professionals, including those from other disciplines, to provide patient-focused care.
10. Demonstrate pre-operative planning and intraoperative execution of complex wound closure for tissue defects related to injury, deformity or previous surgery.
11. Demonstrate safe and harvesting of split thickness or full thickness skin grafts with appropriate placement and securing of grafts.

**Medical Knowledge:**
By the end of the Plastic Surgery rotation, the HO I resident will be able to:

1. **Wound Healing and Management**
   - a. Explain the physiology and biochemistry of normal wound healing and of abnormal wound healing, including hypertrophic scars and keloids.
   - b. Explain principles of healing of bone, tendon, cartilage, nerve, skin, muscle.
   - c. Explain the role of nutrition in the wound healing process and is familiar with standard methods for diagnosis and treatment of nutritional deficiency.
   - d. Outline pharmacologic agents and other nonsurgical methods for treatment of abnormal healing of skin and subcutaneous tissue.
   - e. Delineate differences in suture materials and indications for use of different materials.
   - f. Demonstrate safe and effective management of dressings, splints and other devices and techniques utilized in wound management.
   - g. Outline the etiology and nonsurgical management of pressure sores (including preventive measures).

2. **Breast and Trunk**
   - a. Demonstrate knowledge of the musculature, blood supply, lymphatic drainage and innervation.
of the trunk, abdominal wall and breast.

b. Explain normal breast development, anatomy and physiology

c. Outline various surgical techniques for breast reduction, the indications for and contraindications to the procedures, and the complications of breast reduction, their prevention and management.

d. Outline the various surgical techniques for breast augmentation, the indications for and contraindications to the procedures, and the complications of augmentation mammoplasty, their prevention and management.

3. **Skin**

   a. Explain the anatomy and function of the epidermis, dermis, skin appendages/nails, subcutaneous tissues and fascial layers.

   b. Explain the clinical presentation of benign and malignant cutaneous lesions and generalized skin disorders

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### Systems-Based Practice:

By the end of the Plastic Surgery rotation, the HO I resident will be able to:

1. Explain how his or her patient care and other professional practices affect other health care professionals, the health care organization, and the larger society and how these elements of the system affect their own practice

2. Delineate how types of medical practice and delivery systems differ from one another, including methods of controlling health care costs and allocating resources

3. Practice cost-effective health care and resource allocation that does not compromise quality of care

4. Advocate for quality patient care and assist patients in dealing with system complexities

5. Collaborate with health care managers and health care providers to assess, coordinate, and improve health care and know how these activities can affect system performance

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### Practice-Based Learning and Improvement:

By the end of the Plastic Surgery rotation, the HO I resident will be able to:

1. Locate, appraise, and assimilate evidence from scientific studies related to his or her patients’ health problems

2. Given online resources, conduct an effective literature search about a given plastic surgery topic

3. Describe a systematic approach to evaluate the results of one’s own practice

4. Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness

5. Use information technology to manage information, access on-line medical information; and support their own education

6. Facilitate the learning of students and other health care professionals

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### Professionalism:

By the end of the Plastic Surgery rotation, the HO I resident will be able to:

1. Demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest; accountability to patients, society, and the profession; and a commitment to excellence and on-going professional development

2. Recognize the importance of timely record keeping and its impact on the quality of plastic surgery care

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

4. Demonstrate sensitivity and responsiveness to patients’ culture, age, gender, and disabilities
### Interpersonal and Communication Skills:
By the end of the Plastic Surgery rotation, the HO I resident will be able to:

1. Create and sustain a therapeutic and ethically sound relationship with patients
2. Use effective listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills
3. Interview and evaluate the patient, especially the aesthetic surgery candidate.
4. Collaborate effectively with others as a member or leader of a health care team or other professional group