CA-2 INTERDISCIPLINARY OPERATIVE PATIENT CARE (IDPO) ROTATION

University of Minnesota Medical Center
Rotation Site Director: Dr. Elif Cingi
Rotation Duration: 4 weeks

**Introduction:**
The goal of the UM Department of Anesthesiology is to educate board–certified consultants in anesthesiology. A diplomate of the American Board of Anesthesiology (ABA) is defined as a physician possessing knowledge, judgment, adaptability, clinical skills, technical facility and personal characteristics to carry out the entire scope and practice of anesthesiology. The necessary personal characteristics include but are not limited to advanced communication skills and professionalism. Moreover, an increasing component of current anesthesiology practice occurs outside of the operating room itself. These outside areas include the preoperative evaluation clinics, post-anesthesia care unit (PACU or recovery room), inpatient wards, intensive care units, catheterization laboratories, endoscopy suites, and the emergency department. The anesthesiologist is frequently called to these non–OR settings, where rapid assessment of acute medical needs of unstable patients, precise communication with other professionals and ancillary personnel, and leadership in triage and direction of immediate life-saving methods are required. Effectively management is expected of an anesthesiologist consultant in these urgent circumstances, and the interdisciplinary perioperative (IDPO) rotation is designed to nurture residents in the delivery of acute and urgent anesthesiology care outside the operating room. During this rotation, the resident will learn to coordinate the highest level of patient care while communicating professionally with other physicians, hospital staff, patients, and family members. The rotation further provides an acute pain experience of patients post-surgery that includes, but is not limited to management of intravenous analgesia, PCA, nerve blocks, nerve block catheter placements, neuraxial analgesia.

**GOALS:**
- To train residents who are capable of independently providing high quality anesthesia care based on principles of teamwork and collaboration for patients in the postoperative period including patients with acute and/or postoperative pain;
- To train residents who provide high quality care to patients in the postoperative period, including patients with acute pain in the perioperative period.

**OBJECTIVES** (by ACGME Competency)

<table>
<thead>
<tr>
<th>Approximate Training Level</th>
<th>Assessment Methods/Tools</th>
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<tbody>
<tr>
<td>Patient Care</td>
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## Developmental Milestone Objective

### Clinical Skills and Reasoning:
- **Objectives**:
  - Demonstrates independent use of clinical skills of interviewing, data gathering and physical examination to perform a thorough assessment of a patient in the postoperative period and patients with acute pain (mechanism or complex overt response).
  - Progressively more and more independently formulates a safe plan for post-operative management of patients and management of acute pain (mechanism or complex overt response).
  - Independently develops a plan for hemodynamic, respiratory, neurologic and laboratory management of patient in the postoperative unit (mechanism to complex overt response).
  - Formulates and discusses management plan for side effects of intraoperative medications and side effects of acute pain management (perception to complex overt response).

### Technical/Device Related Skills
- **Objectives**: Maintains anesthesia regional cart, code back pack in ready-to-go state at all times (complex overt response).
- Confidently prepares patient and room for neuraxial and regional procedures, considering patient privacy, patient and practitioner safety (perception to complex overt response).
- Confidently uses ultrasound, PCA pumos, epidural pumps, infusion pumps (complex overt response).

### Developmental Milestone Objective

#### Patient Management
- **Objectives**: Assesses and manages patient in the post-operative anesthesia unit with less and less supervision (complex overt response).
- Assesses and manages postoperative pain – including pharmacologic management, patient controlled analgesia, regional and neuraxial analgesia (perception to complex overt response).
- Skillfully recognizes and manages side-effects of pharmacological, regional and neuraxial anesthesia such as hypotension, bradycardia, serious complications of pain management such as respiratory
Department of Anesthesiology

Goals and Objectives

depression, local anesthetic toxicity, high spinal, spinal or epidural hemathoma / abscess, etc. (perception to mechanism or complex overt response)

- Rounds on patients in the post-operative period and modifies management as necessary to achieve patient overall comfort and good pain control (perception to complex overt response) 12-36 months
- Helps, teaches line placement depending on the level of training during times when PAC unit is not busy (night, early morning) (complex overt response) 12-36 months
- Performs preoperative evaluations of patients and prepares in-house patients for operative procedures (complex overt response) 12-36 months

Medical Knowledge

**Developmental Milestone Objective**

<table>
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<th>Training Level</th>
<th>Assessment</th>
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<tr>
<td>12-36 months</td>
<td>o Introductory lecture series test</td>
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<td>o Anesthesia knowledge test</td>
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<td>o Annual in-training examination</td>
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<td>o Informal oral questioning</td>
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<td>o Simulation</td>
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<td>o Oral case presentations</td>
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- Discusses postoperative management of PACU patients as it relates to hemodynamic, respiratory, neurologic and fluid/electrolyte well-being of the patient (application) 12-36 months
- Discusses acute pain mechanisms and treatment modalities, pharmacology of oral, intravenous pain medications, and local anesthetics, use of oral and intravenous pain medications for management of acute pain, regional and neuraxial anesthesia for management of acute pain (application) 12-36 months
- Discusses physiologic changes that occur postoperatively and during regional nerve blocks and neuraxial anesthesia, side-effects of oral, intravenous pain medications, and local anesthetics, side-effects and management of regional and neuraxial anesthesia (application) 12-36 months

Practice Based Learning and Improvement

**Developmental Milestone Objective**

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<td>12-36 months</td>
<td>o Written essay describing an analysis of patient management (areas of deficiencies, room for</td>
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- Identify own learning deficits, develop a learning plan and carry it out (receiving to valuing) 12-36 months
- Respond appropriately to constructive feedback (receiving to valuing) 12-36 months
- Demonstrate ability to effectively search for literature (perception to 12-36 months
Department of Anesthesiology
Goals and Objectives
complex overt response)
- Read, analyze and interpret the scientific literature
- Analyze own practice and determine ways in which you can improve your comprehensive anesthetic plan (analysis, valuing)

Interpersonal and Communication Skills

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<tr>
<td>o Use of effective listening, questioning, and explanatory skills in gathering information from anesthesia providers, nurses, patients and in providing information to patients, families, the public, and other health care providers (receiving to valuing)</td>
<td>12-36 months</td>
<td>o Direct observation with patient</td>
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<tr>
<td>o Effectively and efficiently communicates pertinent patient information to nurses, surgery team, primary anesthesia provider and secondary care provider (receiving to valuing)</td>
<td>12-36 months</td>
<td>o Direct observation in simulation</td>
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<td>o Skill in working as a member of a patient care team including PACU nurses, floor nurses, ICU nurses, primary anesthesia provider, surgery team, other health care professionals, social workers, and volunteers (receiving to valuing)</td>
<td>12-36 months</td>
<td>o 360 global rating</td>
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<td>o Maintain comprehensive, timely, and legible medical records (receiving to valuing)</td>
<td>12-36 months</td>
<td>o Learner classroom presentation</td>
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Professionalism

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<td>o Awareness and management of his/her own values and attitudes, which might interfere with appropriate patient care specific to management of obstetric patient (receiving to valuing)</td>
<td>12-36 months</td>
<td>o direct observation</td>
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<td>o Responsiveness to and management of issues that relate to socio-cultural aspects of family life, and social adjustment related to ethnicity, religion, culture, gender or sexual preference (receiving to valuing)</td>
<td>12-36 months</td>
<td>o 360</td>
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Goals and Objectives

- Consistent compassion, honesty, integrity and respect for others in all professional activities (receiving to valuing)

**System Based Practice**

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| Work in inter-professional teams to increase patient safety and quality of care (perception to complex overt response) | 12-36 months | o direct observation  
| o Coordinate patient care including coordination of different teams involved in patient care, patient disposition, coordination of diagnostic and treatment plans, coordination of family involvement (perception to complex overt response) | 12-36 months | o 360  
| o Discuss complex system-based problems as they pertain to patient care at M&M conferences (knowledge to analysis) | 12-36 months | o M&M conference presentation with system analysis |
Scholarly/Research Activities

Reading Requirements
The resident should read the following chapters while taking the rotation:

Chapters: Anesthesia and Co-existing Disease-Stoelting & Dierdorf 5th Edition
Chapters: Pharmacology and Physiology in Anesthesia Practice-Stoelting & Hillier
Chapters: Miller's Anesthesia 7th Edition
Chapters: AHA Guidelines for Advanced Cardiac Life Support
Chapters: Annual Refresher Course Lectures and Basic Science Reviews of the ASA (published annually)

Assessments
The resident will receive a summative written evaluation form at the end of the rotation from the Site Director, as well as verbal feedback informally throughout the rotation. The case-logs of the resident will also be evaluated periodically by the clinical competency committee for the number and type of procedures and anesthetic techniques entered to ensure they are obtaining adequate experience.

Notes