GENERAL INFORMATION

COURSE CHAIR: Farin Amersi, MD
STUDENT COORDINATOR: Alan Pierce
E-MAIL: alan.pierce@cshs.org
STUDENTS / PERIOD: max 1  min 1
DURATION: 4 weeks

ROTATIONS WILL BE OFFERED AS FOLLOWS:

- July 15 – August 11
- August 12 – September 8
- September 9 – October 6
- October 7 – November 3
- November 4 - December 1
- December 2 – December 29
- December 30 - January 26
- January 27 – February 23
- February 24 – March 23
- March 24 – April 20
- April 21 - May 18
- May 19 – June 15
- June 16 – July 13

NOTE:
- Surgery electives are not available to DO students
- 3-week rotations are available. Please inquire

COURSE OBJECTIVES

1. Take an accurate, focused patient history as it relates to their malignant disease, including risk factors, precipitating factors, and family history
2. Ability to perform a focused breast exam
3. Ability to concisely make a patient presentation at the bedside and in the clinic setting
4. Knowledge of common malignant disorders, their biology, and their surgical and adjuvant therapies. These include breast, melanoma, stomach, endocrine, colon, etc.
5. Knowledge of gender and age-specific preventative measures for patients at high risk for breast and other endocrine malignancies
6. Knowledge of appropriate use of imaging modalities, such as ultrasound, MRI, CT scan to diagnose or follow-up on different malignancies, such as breast, pancreas, stomach, etc.
7. Knowledge of appropriate bedside procedures to diagnose common benign and malignant breast disorders, including ultrasound, fine needle aspiration, core needle biopsy, stereotactic biopsy, etc.
8. Knowledge of the indications and risks of minimally invasive surgery for malignant diseases
9. Evidence-based knowledge of treatment recommendations for breast cancer, stomach cancer, pancreatic cancer, colon cancer, melanoma, etc.
10. Knowledge of breast and auxiliary anatomy

DESCRIPTION

This sub-internship is intended to provide the student with in-depth knowledge of surgical oncology as a multi-disciplinary specialty. The student is expected to function at the level of an intern, including pre-operative assessment of the patient in the clinic setting, participation in the operating room, and post-operative care of the patient either in the intensive care unit or on the wards. The student is involved in formal bedside presentations, journal club presentations, and case presentations, which are teaching sessions that are held weekly or bi-weekly. In addition, the student is expected to gain in-depth knowledge by attending various multi-disciplinary conferences, such as Tumor Board and pathology conferences.

ADDITIONAL INFORMATION

Students are expected to participate in weekend rounds for routine patient care.

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 10

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 75

INPATIENT: 60%
OUTPATIENT: 40%

CONSULTATION: 10%
PRIMARY CARE: 90%

Cedars-Sinai Medical Center
Surgery Electives

SU 306.01 SURGICAL ONCOLOGY & BREAST SURGERY
Subinternship – Academic Year 2013-2014

PAGE 1
GENERAL INFORMATION

COURSE CHAIR: J. Louis Cohen, MD
STUDENT COORDINATOR: Alan Pierce
E-MAIL: alan.pierce@cshs.org

STUDENTS / PERIOD: max 1 min 1
DURATION: 4 weeks

ROTATIONS WILL BE OFFERED AS FOLLOWS:

- July 15 – August 11
- August 12 – September 8
- September 9 – October 6
- October 7 – November 3
- November 4 – December 1
- December 2 – December 29
- December 30 - January 26
- January 27 – February 23
- February 24 – March 23
- March 24 – April 20
- April 21 - May 18
- May 19 – June 15
- June 16 – July 13

NOTE:
- Surgery electives are not available to DO students
- 3-week rotations are available. Please inquire.

COURSE OBJECTIVES

1. Take an accurate, focused patient history as it relates to vascular disease, including risk factors, precipitating factors, and family history
2. Ability to perform a focused vascular exam
3. Knowledge of common acute and chronic vascular disorders of peripheral and central arterial and venous systems
4. Knowledge of gender and age-specific preventive measures for vascular disorders, including evidence-based knowledge of treatment recommendations for carotid atherosclerotic disease
5. Knowledge of appropriate use of imaging modalities, such as ultrasound, MRI, CT scan to diagnose or follow-up on vascular diseases
6. Knowledge of appropriate bedside procedures to diagnoses common vascular disorders, including ankle-brachial index, transcutaneous PO2, and physical exam maneuvers
7. Knowledge of the indications and risks of endovascular surgery for arterial diseases
8. Treatment of peripheral venous disorders, such as deep venous thrombosis, venous stasis ulcers, and thoracic outlet syndrome
9. Knowledge of assessment of vascular patients in the perioperative setting
10. Knowledge of vascular anatomy

DESCRIPTION

This sub-internship is intended to provide the student with in-depth knowledge of vascular surgery as it relates to common chronic medical illness as well as surgical disorders. The student is expected to function at the level of an intern, including preoperative assessment of the patient in the clinic setting, participation in the operating room, and post-operative care of the patient either in the intensive care unit or on the wards. In addition, the student is involved in formal bedside presentations, journal club presentations, and case presentations, which are teaching sessions that are held weekly or bi-weekly.

ADDITIONAL INFORMATION

Student is expected to participate in weekend rounds for routine patient care.
GENERAL INFORMATION

COURSE CHAIR: Phillip Fleshner, MD
STUDENT COORDINATOR: Alan Pierce
E-MAIL: alan.pierce@cshs.org
STUDENTS / PERIOD: max 1  min 1
DURATION: 4 weeks

ROTATIONS WILL BE OFFERED AS FOLLOWS:

- July 15 – August 11
- August 12 – September 8
- September 9 – October 6
- October 7 – November 3
- November 4 - December 1
- December 2 – December 29
- December 30 - January 26
- January 27 – February 23
- February 24 – March 23
- March 24 – April 20
- April 21 - May 18
- May 19 – June 15
- June 16 – July 13

NOTE:
- Surgery electives are not available to DO students
- 3-weeks rotations are available. Please inquire

COURSE OBJECTIVES

1. Take an accurate, focused patient history as it relates to colorectal and anal disorders, including risk factors, precipitating factors, and family history
2. Ability to perform a focused physical exam, including a complete abdominal and rectal exam
3. Knowledge of common acute and chronic disorders of the colon, rectum, and anus
4. Knowledge of gender and age-specific preventive measures for colorectal disorders
5. Knowledge of appropriate use and interpretation of imaging modalities, such as plain X-Ray, ultrasound, MRI, CT scan, to diagnose or follow-up on colorectal diseases
6. Knowledge of appropriate bedside procedures to diagnose common anorectal disorders, including hemorrhoids, fissures, and benign and malignant masses
7. Knowledge of the indications and risks of minimally invasive surgery for colorectal diseases
8. Evidence-based knowledge of treatment recommendations for colon cancer
9. Knowledge of medical and surgical indications for treatment of inflammatory bowel disease
10. Knowledge of colorectal and anal anatomy

DESCRIPTION

This sub-internship is intended to provide the student with in-depth knowledge of colorectal surgery as it relates to common chronic medical illnesses as well as surgical disorders. The student is expected to function at the level of an intern, including preoperative assessment of the patient in the clinic setting, participation in the operating room, and post-operative care of the patient either in the intensive care unit or on the wards.

ADDITIONAL INFORMATION

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: No call. Student is expected to participate in weekend rounds for routine patient care.

In addition, the student is involved in formal bedside presentations, journal club presentations, and case presentations, which are teaching sessions that are held weekly or bi-weekly.
GENERAL INFORMATION

COURSE CHAIR: Nicholas Nissen, MD

STUDENT COORDINATOR: Alan Pierce
E-MAIL: alan.pierce@cshs.org

STUDENTS / PERIOD: max 1 min 1

DURATION: 4 weeks

ROTATIONS WILL BE OFFERED AS FOLLOWS:

- July 15 – August 11
- August 12 – September 8
- September 9 – October 6
- October 7 – November 3
- November 4 - December 1
- December 2 – December 29
- December 30 - January 26
- January 27 – February 23
- February 24 – March 23
- March 24 – April 20
- April 21 - May 18
- May 19 – June 15
- June 16 – July 13

NOTE:
- Surgery electives are not available to DO students
- 3-week rotations are available. Please inquire.

COURSE OBJECTIVES

1. Demonstrate ability to make concise patient presentation
2. Interpret common imaging modalities used to diagnose liver and pancreatic pathology, including CT scan and MRI
3. Demonstrate knowledge of common chronic and acute diseases of the liver, including benign and malignant masses.
4. Demonstrate knowledge of indications for solid organ transplantation, including kidney, pancreas, liver, heart and lung.
5. Participate in patient selection process through patient encounters and presentation at selection committee meeting.
6. Identify common side effects and mechanism of action in common immunosuppressive medications.
7. Manage post-operative patients after liver resection and pancreatic resection.
8. Describe surgical approach and techniques for organ procurement and organ transplantation, resection, regional therapy, and transplantation.
9. Gain an understanding of the treatment options for liver cancer, including local therapy, resection, regional therapy, and transplantation.

DESCRIPTION

This sub-internship is intended to provide the student with in-depth knowledge of transplantation surgery and non-transplant hepatobiliary surgery. The student is expected to function at the level of an intern, including pre-operative assessment of the patient in the clinic setting, participation in the operating room, and post-operative care of the patient either in the intensive care unit or on the wards. In addition, the student is involved in formal beside presentations, journal club presentations, and case presentations. The student is expected to attend and participate in conferences sponsored by the Liver Transplant Service including:
1) Transplant morbidity/mortality conference (monthly); 2) Multidiciplinary Liver Cancer Conf. (weekly); 3) Carcinoid & Neuroendocrine Tumor Conf. (monthly); 4) Journal Club (monthly); 5) Transplant Patient Selection Committee (weekly); 6) Transplant Grand Rounds (monthly).

ADDITIONAL INFORMATION

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: No in-house call, however, student is to remain on pager during assigned home on-call dates.

Due to the unpredictable nature of transplantation students will be on-call assigned dates for organ procurements and solid organ transplants including kidney, pancreas, heart, lung and liver. Attendance at transplant surgery will take priority over all other clinical activities until the student has attended or scrubbed 2 organ procurements and one of each type of solid organ transplant surgery.
GENERAL INFORMATION

COURSE CHAIR: Robert McKenna, MD
STUDENT COORDINATOR: Alan Pierce
E-MAIL: alan.pierce@cshs.org
STUDENTS / PERIOD: max 1  min 1
DURATION: 4 weeks

ROTATIONS WILL BE OFFERED AS FOLLOWS:
- July 15 – August 11
- August 12 – September 8
- September 9 – October 6
- October 7 – November 3
- November 4 - December 1
- December 2 – December 29
- December 30 - January 26
- January 27 – February 23
- February 24 – March 23
- March 24 – April 20
- April 21 - May 18
- May 19 – June 15
- June 16 – July 13

NOTE:
- Surgery electives are not available to DO students
- 3-week rotations are available. Please inquire

COURSE OBJECTIVES

1. Patient history as it relates to thoracic disorders
2. Perform a focused physical exam of the chest, lung, and heart
3. Make a thoracic surgery patient presentation at the bedside
4. Knowledge of common acute and chronic lung disorders
5. Knowledge of common malignancies and infectious processes affecting the chest and mediastinum
7. Appropriate use of imaging modalities, such as plain Xray, MRI, and CT scan to diagnose or follow-up on lung diseases
8. Appropriate bedside procedures performed both diagnostically and therapeutically, including thoracentesis, tube thoracostomy, pleurodesis, and pulmonary function testing
10. Minimally invasive surgical options for patients with thoracic disorders, eg, video-assisted thoracic surgery
11. Knowledge of clinical criteria for lung transplantation
12. Knowledge of common post-operative complications seen with thoracic surgery
13. Treatment recommendations for lung carcinoma
14. Knowledge of risk assessment of patients with chronic lung disease in the peri-operative setting
15. Knowledge of bronchial anatomy

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Lung carcinoma
2. End-stage lung disease
3. Emphysema
4. Pleural diseases
5. Mediastinal diseases
6. Esophageal carcinoma

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 25

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 110

INPATIENT: 85%
OUTPATIENT: 15%
CONSULTATION: 35%
PRIMARY CARE: 65%

DESCRIPTION

This sub-internship is intended to provide the student with in-depth knowledge of thoracic surgery as it relates to common chronic medical illnesses as well as surgical disease processes. Pre-operative assessment of the patient in the clinic setting, hands-on participation in the OR, and post-operative care of the patient either in the ICU or on the wards. Also, the student is involved in formal bedside presentations, journal club presentations, and case presentations, which are teaching sessions that are held weekly.

ADDITIONAL INFORMATION

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: No call. Students are expected to participate in weekend rounds for routine patient care.
GENERAL INFORMATION

COURSE CHAIR: Philip K. Frykman, MD, PhD
STUDENT COORDINATOR: Alan Pierce
E-MAIL: alan.pierce@cshs.org

STUDENTS / PERIOD: max 1  min 1
DURATION: 4 weeks

ROTATIONS WILL BE OFFERED AS FOLLOWS:

- July 15 – August 11
- August 12 – September 8
- September 9 – October 6
- October 7 – November 3
- November 4 - December 1
- December 2 – December 29
- December 30 - January 26
- January 27 – February 23
- February 24 – March 23
- March 24 – April 20
- April 21 - May 18
- May 19 – June 15
- June 16 – July 13

NOTE:
- Surgery electives are not available to DO students
- 3-week rotations are available. Please inquire

COURSE OBJECTIVES

1. Take an accurate, focused patient history as it relates to the pediatric patient, including risk factors, precipitating factors, birthing history, and family history.
2. Ability to perform a focused physical exam on neonates and children.
3. Ability to concisely make a patient presentation at the bedside and in the clinic setting.
4. Knowledge of diagnosis and management of common acute surgical disorders that afflict the pediatric population, such as gastroschesis, iaphragmatic hernia, patent ductus arteriosis, omphalocele, gastro-esophageal reflux disease, and appendicitis.
5. Knowledge of diagnosis and treatment of age-specific disorders, such as pyloric stenosis, tracheoesophageal fistula, necrotizing enterocolitis, HirsUCLAprung’s disease, and midgut volvulus.
6. Knowledge of appropriate use of imaging modalities, such as plain X-ray, ultrasound, MRI, CT scan, to diagnose or followup on common disorders.
7. Knowledge of appropriate bedside procedures performed in the NICU and PICU, including arterial line placement, central line placement, and management of gastrostomy tubes.
9. Treatment of inguinal and umbilical hernias in different age groups.
10. Knowledge of common anatomic anomalies leading to foregut obstruction, biliary obstruction, and urinary obstruction.

DESCRIPTION

This sub-internship is intended to provide the student with in-depth knowledge of pediatric surgery in the acute and subacute setting. The student is expected to function at the level of an intern, including pre-operative assessment of the patient in the clinic or inpatient setting, participation in the operating room, and post-operative care of the patient, either in the intensive care unit or on the wards.

ADDITIONAL INFORMATION

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Overnight in-house call every 4th night w/ Pediatric Surgery resident.

Student expected to participate in weekend rounds for routine patient care.
Cedars-Sinai Medical Center  
Surgery Electives

SU 391.06  PLASTIC AND RECONSTRUCTIVE SURGERY  
Subinternship/Inpatient  –  Academic Year 2013-2014

GENERAL INFORMATION

COURSE CHAIR: Claude Langevin, MD

STUDENT COORDINATOR: Alan Pierce
E-MAIL: alan.pierce@cshs.org

STUDENTS / PERIOD: max 1 min 1
DURATION: 4 weeks

ROTATIONS WILL BE OFFERED AS FOLLOWS:
- July 15 – August 11
- August 12 – September 8
- September 9 – October 6
- October 7 – November 3
- November 4 - December 1
- December 2 – December 29
- December 30 - January 26
- January 27 – February 23
- February 24 – March 23
- March 24 – April 20
- April 21 - May 18
- May 19 – June 15
- June 16 – July 13

NOTE:
- Surgery electives are not available to DO students
- 3-week rotations are available. Please inquire

COURSE OBJECTIVES

1. Take an accurate, focused patient history as it relates to the plastic surgery patient.
2. Ability to perform a focused physical exam which may include a vascular exam, and assessment of functional or aesthetic defects.
3. Ability to concisely make a patient presentation at the bedside and in the clinic setting.
4. Knowledge of management of common reconstructive techniques for the face, breast, abdomen, and extremity.
5. Knowledge of management of wound complications.
6. Knowledge of appropriate use of imaging modalities, such as ultrasound, CT scan, and angiography for pre-operative planning of traumatic, oncologic, and congenital deformities.
8. Knowledge of muscular and vascular anatomy of the face, chest wall, torso, and extremities.

DESCRIPTION

This sub-internship is intended to provide the student with in-depth knowledge of plastic surgery with significant emphasis on reconstructive and microvascular surgery. The student is expected to function at the level of an intern, including pre-operative assessment of the patient in the clinic or inpatient setting, participation in the operating room, and post-operative care of the patient either in the intensive care unit or on the wards. In addition, the student will be involved in formal bedside presentations and case presentations, which are teaching sessions that are held weekly.

ADDITIONAL INFORMATION

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: One full day off per week. No Call

STUDENT EXPERIENCES

COMMON PROBLEMS/DISEASES
1. Wound healing
2. Myocutaneous flaps
3. Microvascular reconstruction
4. Skin grafting
5. Deformities caused by trauma
6. Deformities after oncologic surgery

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 10

TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 300

INPATIENT: 50%
OUTPATIENT: 50%
CONSULTATION: 70%
PRIMARY CARE: 30%

January 2013
Cedars-Sinai Medical Center
Surgery Electives

SU 394.02  MINIMALLY INVASIVE SURGERY
Subinternship – Academic Year 2013-2014

GENERAL INFORMATION

COURSE CHAIR: Miguel Burch, MD
STUDENT COORDINATOR: Alan Pierce
E-MAIL: alan.pierce@cshs.org

STUDENTS / PERIOD: max 1  min 1
DURATION: 4 weeks

ROTATIONS WILL BE OFFERED AS FOLLOWS:

- July 15 – August 11
- August 12 – September 8
- September 9 – October 6
- October 7 – November 3
- November 4 - December 1
- December 2 – December 29
- December 30 - January 26
- January 27 – February 23
- February 24 – March 23
- March 24 – April 20
- April 21 - May 18
- May 19 – June 15
- June 16 – July 13

NOTE:
- Surgery electives are not available to DO students
- 3-week rotations are available. Please inquire.

COURSE OBJECTIVES

1. Take an accurate, focused patient history as it relates to the surgical disease process
2. Ability to perform a focused physical exam
3. Ability to concisely make a patient presentation at the bedside and in the clinic setting
4. Knowledge of common presentations of gastro-osophageal reflex disorder
5. Knowledge of chronic medical problems associated with obesity
6. Knowledge of common presentations of pheochromocytoma and other adrenal disorders
7. Knowledge of precipitating factors for developing hernias and risk factors associated with hernia surgery
8. Knowledge of indications and contraindications of minimally invasive surgery
9. Knowledge of indications and contraindications to weight loss Surgery
10. Knowledge of appropriate use of imaging modalities, such as plain x-ray, ultrasound, MRI, CT scan, nuclear medical scan to diagnose or follow-up on common solid organ disorders
11. Knowledge of abdominal anatomy
12. Knowledge of inguinal anatomy

DESCRIPTION

This sub-internship is intended to provide the student with in-depth knowledge of general surgery and weight loss surgery using minimally invasive techniques. The student is expected to function at the level of an intern, including pre-operative assessment of patient in the clinic setting, participation in the operating room and post-operative care of the patient either in the intensive care unit or on the wards. In addition, the student is involved in formal bedside presentations, journal club presentations, and case presentations, which are teaching sessions that are held weekly or bi-weekly.

ADDITIONAL INFORMATION

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: No on-call, however, the student is expected to participate in weekend rounds for routine patient care.

APPROXIMATE # OF PATIENTS EVALUATED EACH WEEK BY STUDENT: 20
TOTAL # OF PATIENTS EVALUATED EACH WEEK BY ENTIRE SERVICE: 200
INPATIENT: 80%
OUTPATIENT: 20%
CONSULTATION: 5%
PRIMARY CARE: 95%
GENERAL INFORMATION

COURSE CHAIR: Nicolas Melo, MD
STUDENT COORDINATOR: Alan Pierce
E-MAIL: alan.pierce@cshs.org

STUDENTS / PERIOD: max 1 min 1
DURATION: 4 weeks

ROTATIONS WILL BE OFFERED AS FOLLOWS:
- July 15 – August 11
- August 12 – September 8
- September 9 – October 6
- October 7 – November 3
- November 4 - December 1
- December 2 – December 29
- December 30 - January 26
- January 27 – February 23
- February 24 – March 23
- March 24 – April 20
- April 21 – May 18
- May 19 – June 15
- June 16 – July 13

NOTE:
- Surgery electives are not available to DO students
- 3-week rotations are available. Please inquire.

COURSE OBJECTIVES

1. Knowledge of principles of blunt and penetrating trauma patient resuscitation with regards to primary and secondary evaluation
2. Ability to resuscitate the injured patient using advanced trauma life support algorithm
3. Ability to concisely make a patient presentation appropriate to the multi—system trauma patient scenario
4. Knowledge of common causes of hemorrhage and management of blunt head injury, including use of adjunctive medications, such as steroids, thyroid hormone, mannitol, blood products, etc.
5. Ability to manage acutely ill patients with multi-system trauma in an evidence-based and cost effective manner
6. Knowledge of appropriate use and interpretation of imaging modalities, such as plain x-ray, ultrasound (FAST scan), MRI, CT scan to diagnose and manage trauma injuries
7. Ability to safely perform common bedside procedures, including chest tube placement, cut-downs, venous and arterial access, reduction of fractures, cervical spine immobilization, and airway management
8. Knowledge of indications for operative management of blunt and penetrating traumas
9. Evidence-based management of common emergency surgical conditions, such as appendicitis, cholecystitis, bowel obstruction, mesenteric ischemia, and perforated duodenal ulcer.
10. Interpretation of abnormal laboratory values, including venous

DESCRIPTION

This sub-internship is intended to provide the student with in-depth knowledge of patient care as it relates to trauma and non-trauma emergency surgically diseases. The student is expected to function at the level of a junior resident and be on the scene for first-line evaluation and management of patients in the emergency room. In additional, it is expected that the student maintain close follow-up of the patient’s progress on a daily basis. In addition, the student is involved in formal daily bedside presentations, and case presentations which are all teaching sessions.

ADDITIONAL INFORMATION

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Overnight in-house call every 4th night

Student is expected to participate in weekend rounds for routine patient care.
GENERAL INFORMATION

COURSE CHAIR: Nicolas Melo, MD
STUDENT COORDINATOR: Alan Pierce
E-MAIL: alan.pierce@cshs.org

STUDENTS / PERIOD: max 1 min 1
DURATION: 4 weeks

ROTATIONS WILL BE OFFERED AS FOLLOWS:

- July 15 – August 11
- August 12 – September 8
- September 9 – October 6
- October 7 – November 3
- November 4 - December 1
- December 2 – December 29
- December 30 - January 26
- January 27 – February 23
- February 24 – March 23
- March 24 – April 20
- April 21 - May 18
- May 19 – June 15
- June 16 – July 13

NOTE:
- Surgery electives are not available to DO students
- 3-week rotations are available. Please inquire.

COURSE OBJECTIVES

1. Knowledge of principles of surgical critical care as it relates to physiology and hemodynamics
2. Ability to manage acutely ill patients with surgical diseases, especially those with multi-organ system failure
3. Ability to concisely make a patient presentation appropriate to the ICU setting
4. Knowledge of common presentations of shock, including hemorrhagic shock, septic shock, and cardiogenic shock
5. Knowledge of the microbiology and evidenced-based management of hospital-acquired and ventilator-acquired infections
6. Knowledge of appropriate use and interpretation of imaging modalities, such as plain x-ray, ultrasound, MRI, CT scan to diagnoses or follow-up on critically ill patients with acute surgical diseases.
7. Knowledge of appropriate bedside procedures to diagnoses and treat common hemodynamic and ventilatory problems in the ICU, including central line placement, chest tube placement, arterial line placement, Swan-Ganz placement, intubation, bronchoscopy, percutaneous tracheostomy, paracentesis, and ultrasound.
8. Knowledge of successful manipulation of ventilators
9. Treatment of shock using physiologic knowledge of different vasoactive drugs
10. Evidenced-based knowledge of treatment recommendations for SIRS, ARDS, and coagulopathies
11. Knowledge of critical care record-keeping, including knowledge of a computerized data management system.

DESCRIPTION

This sub-internship is intended to provide the student with in-depth knowledge of surgical critical care as it relates to trauma and non-trauma emergency surgical diseases. The student is expected to function at the level of an intern by managing critically ill patients with close follow-up of their progression on a daily basis. In addition, the student is involved in formal daily bedside presentations, weekly journal club presentations, and case presentations, which are all teaching sessions.

ADDITIONAL INFORMATION

ON-CALL SCHEDULE & WEEKEND ACTIVITIES: Overnight in-house call every 4th night

Student is expected to participate in weekend rounds for routine patient care.