

Progression of Training and Skills Surgery

Preamble

The Residency Program expects that those wishing to develop the knowledge, practical skills and judgment necessary for "full-spectrum practice" will recognize the contribution of family medicine to the diagnosis of surgical conditions, together with pre- and post-operative care. The primary sources of education in the care of the surgical patient are the inpatient and outpatient services of the surgical residency program of the University of North Dakota School of Medicine and its faculty, together with longitudinal experience at the family medicine residency program's continuity clinic.

Residents will have a least 100 hours dedicated to the care of surgical patients.

Goals

- A commitment to the comprehensive care of the personal patient to include recommendations for preoperative and peri-operative care
- The ability to assist in the postoperative medical management of personal patients
- The competence to guide patients to understand their appropriateness for surgery and the risks and benefits of surgical procedures
- The willingness to guide patients to understand the nature of a surgical procedure
- The confidence and ability to appropriately refer patients for surgery, particularly in emergent or life-threatening situations
- The ability and willingness to safely perform minor procedures with adequate surgical technique

Objectives

- Ability to diagnose common surgical conditions in a primary care setting
- Ability to perform a surgical assessment and develop an appropriate treatment plan
- Development of skills necessary to assist and to perform minor surgery competently
- Development of proficiency in the preparation of the patient for surgery, and in the care following surgery
- Ability to communicate effectively with surgical staff and consultants concerning signs and symptoms, test results and proposed plan of care
- Proficiency in management of hypovolemia and administration of appropriate intravenous fluids
- Understanding appropriate use of diagnostic tests including imaging and skill in interpretation of results from such tests
- Ability to communicate in compassionate, knowledgeable manner and address complex psychosocial surgical issues with patients and families

The goals and objectives are achieved through a combination of structured experience, together with didactic instruction.

[Revised and approved at the Faculty Meeting April 3, 2012]

[Revised and approved at the Faculty Retreat June 20, 2014]

Suggested readings:

[Acute abdominal pain in children](#)

[Acute pancreatitis: diagnosis, prognosis, and treatment](#)

[Diagnosis and management of acute pancreatitis](#)

[Evaluation and management of intestinal obstruction](#)

[Evaluation of palpable breast masses](#)

[Imaging for suspected appendicitis](#)

[Management of gallstones and their complications](#)

[Preoperative evaluation](#)

[Present and future of prophylactic antibiotics for severe acute pancreatitis](#)

[Surgical options in the management of groin hernias](#)

[A comprehensive review of evidence-based strategies to prevent and treat postoperative ileus](#)

[2011 ACCF/AHA focused update of the guideline for the management of patients with peripheral artery disease \(updating the 2005 guideline\): a report of the American college of cardiology foundation/American heart association task force on practice guidelines](#)

[A systematic review of the effectiveness of revascularization of the ulcerated foot in patients with diabetes and peripheral arterial disease](#)

At the Residency there is information including knot tying pearls, punch biopsy pearls, and suturing.