Trauma

Rotation Specific Evaluation (PGY1,2,3) Orthopaedic Surgery Residency Training Program College of Medicine, University of Saskatchewan

CanMEDS Roles / Competencies	Expectations							
Name: PGY				Somewhat				
Rotation Dates:	Much Below Average	Somewhat Below Average	Average	Above Average	Much Above Average	N/A		
Attending Staff:	Rarely Meets Expectations	Inconsistently Meets Expectations	Generally Meets Expectations	Sometimes Exceeds Expectations	Consistently Exceeds Expectations			
A. MEDICAL EXPERT: At the conclusion of residency, the resident should meet all of the following objectives in spite of variations in rotation durations and resident exposure								
1. Cognitive and Diagnostic								
1 Polytrauma patients								
Initial ATLS management								
Prioritization of injuries in trauma patients								
The principles of open fracture management								
Recognition of dysvascular limb and compartment								
syndrome								
Understand the importance of pelvic fractures								
5 Demonstrate knowledge of the concepts of "damage								
control orthopaedics" vs "early total care"								
6 Isolated limb trauma								
7 Principles of the management of:								
 Fractures, dislocations and fracture dislocation with 								
appropriate splintage								
Intraarticular fracture management								
Associated soft tissue injury								
 Compartment syndrome 								
 Dysvascular limb 								
Acute infection								
Malunion, nonunion, late infection								
Segemental bone loss								
8 An understanding of associated conditions:								
Adult respiratory distress syndromeDVT								
Fat and pulmonary embolism								
Multiple organ system failure								
Chronic regional pain syndrome								
Awareness and recognition of:								
 non-accidental trauma issues related to geriatric fractures 								
pathologic fractures								
A. MEDICAL EXPERT: At the conclusion of residency, the redurations and resident exposure	esident should	meet all of the	following obje	ctives in spite	of variations	in rotation		
2. Technical								
1 Initial management of fractures and dislocations with								
appropriate reduction and splinting								
2 Develop competencies as a surgical assistant,								
knowledge of the surgical approaches, handling soft tissues and appropriate wound closures								
3 Proficiency in the use of orthopaedic equipment and								
power instruments used in the management of the								
trauma patient								
4 Technical skills involved in ATLS protocol								
5 Operative management of simple fractures - ankle,								
wrist, hip								
6 Management of compartment syndrome and acute								
infection		l .	1	I	l	l		

CanMEDS Roles / Competencies			Expectat	ions		
	Much Below Average	Somewhat Below Average	Average	Somewhat Above Average	Much Above Average	N/A
	Rarely Meets Expectations	Inconsistently Meets Expectations	Generally Meets Expectations	Sometimes Exceeds Expectations	Consistently Exceeds Expectations	
B. COMMUNICATOR						
Demonstrate skills in working with patients and families who present with communication challenges such as anger, confusion, and issues related to gender, ethnicity, cultural and religious background. This would also involve communication with those with traumatic brain injury and critical injuries						
Deliver information including options of care, possible complications and long-term prognosis in a humane and understandable way. The resident should encourage discussion and participation in developing a treatment plan. This will lead to obtaining informed consent						
3 Demonstrate skill in communicating with other members of the trauma team and other health care personnel involved in the care of the traumatized patient						
Communicate effectively with appropriate consultants and synthesize their input into the care plan Clearly document the patient encounter including						
trauma records, progress notes, operative notes and discharge summaries						
6 The ability to obtain an appropriate informed consent for patients undergoing interventions						
C. COLLABORATOR						
 Understand the importance of the multidisciplinary trauma team and describe their roles Effectively work as a member of the trauma team both acutely and in the long term management of the trauma patient 						
Learn to resolve interpersonal conflict D. MANAGER						
Understand the importance of allocation of resources for the trauma patient and prioritize care						
Understand provincial trauma programs						
E. HEALTH ADVOCATE						
Understand the lifestyle issues and different work place environments that lead to an increased risk of trauma						
Describe the appropriate provincial legislation relating to decreasing trauma risk						
F. SCHOLAR						
The resident will pose a learning question and do an appropriate literature search, they will then interpret this evidence and suggest a change in practice if necessary						
Present an effective lecture or presentation R. PROFESSIONAL						
Describe informed consent and alternative consent						
givers 2 Maintain patient confidentiality and describe the limits as defined by professional practice standards and law						
as domined by professional practice standards and law			L	I .	I .	

DESCRIPTIVE RESPONSES

Evaluator Signature:

Program Director:

Resident Signature:

COCKIF TIVE RESPONSES
For any items scored 0 or 1, specific comments are critical.
1 <u>Strengths:</u>
2 Areas for improvement: (If remedial work is recommended - please provide specific suggestions)
3 <u>Comments:</u>

Date: _____

Date:

Date: _____