

Health Sciences Centre, Team C, Dr. M. Wells (Breast and Hernia)

Introduction

The goal of this rotation is to afford senior residents the best possible opportunity to develop the foundational knowledge and skills necessary to assess the need for, and safely deliver, surgical care to patients with breast cancer, and patients with complex hernias, as well as other common general surgery problems. We strive to make this rotation evidence-based with consistent exposure to complex multidisciplinary care. The objectives for acute care surgery, as these also pertain to this service.

Medical Expert

Breast

Knowledge

By the end of the rotation the resident will be able to:

1. Demonstrate an understanding of relevant breast, axilla, and groin anatomy,
2. Demonstrate appropriate knowledge of normal physiology / pathobiology of breast cancer.
3. Demonstrate an approach to the workup and management of benign and malignant breast diseases, including fibroadenoma, Phyllodes tumour, DCIS, LCIS, invasive breast cancer, locally advanced breast cancer and metastatic breast cancer.
4. Use the appropriate investigations for the patient, e.g. mammography, ultrasound, core biopsy, MRI.
5. Recognize the indications for radiotherapy, chemotherapy, hormonal therapy, neoadjuvant therapy and palliation for advanced breast disease.
6. Describe the indications and contraindications for lumpectomy, mastectomy and sentinel lymph node biopsy in the context of a breast lesion.
7. Analyze and integrate relevant pathological, imaging and clinical data to formulate diagnoses and therapeutic strategies (lumpectomy vs mastectomy, extent of nodal dissections) including referrals to genetics team, medical and radiation oncologists, plastic surgeons (breast reconstruction), or psychology when appropriate.
8. Provide sound rationale for surgical intervention.
9. Demonstrate an approach to the management of lymphedema.
10. Demonstrate appropriate preoperative planning and preparation, including patient marking, imaging display and completion of the peri-operative checklist.
11. Recognize post-operative complications and create appropriate management plans.

12. Provide appropriate post-operative patient care and generally recognize and manage post-operative complications, including management of wound healing, bleeding, infections, post-op pain, lymphedema and psychosocial issues
13. Recognize urgent situations and respond with prompt intervention and appropriate communication

Technical Skills

By the end of the rotation the resident will:

1. Demonstrate comfort with surgical anatomy, indications, contraindications and conduct of the operation
2. Conduct lumpectomies, mastectomies, sentinel node biopsies and axillary dissections
3. Be time and motion efficient
4. Slow down in appropriate circumstances, recognize unexpected findings and respond appropriately
5. Manage stresses of the operating room environment appropriately

Hernia

Knowledge

1. The resident will demonstrate knowledge of anatomy of the abdominal wall, including:
 - a. inguinal/femoral region
 - b. anterior abdominal wall
 - c. diaphragm
 - d. lumbar region
2. The resident will be able to assess and make a management plan for the patient with infected mesh.
3. The resident will identify the presence of risk factors for recurrence of hernias in patients.
4. The resident will demonstrate knowledge of the different types of repair including
 - a. use of mesh and the different types of mesh
 - b. contraindications to mesh
 - c. closure of the complicated abdomen
 - d. sutured inguinal hernia repairs

Technical Skills

By the end of the rotation the resident will be able to perform:

1. opening and closing of the abdomen

2. uncomplicated inguinal, umbilical and ventral hernia repairs using mesh
3. complex hernia repairs with supervision

Collaborator

Breast

By the end of the rotation the resident will be able to:

1. Effectively and appropriately consult other physicians and health care professionals.
2. Participate in interdisciplinary team activities, including patient review working rounds and tumor boards.
3. Effectively provide and receive information.
4. Handle conflict situations well
5. Consult and collaborate effectively with other physicians and a multidisciplinary team of expert health care professionals to provide optimal patient care, education and research.
6. Recognize and understand the roles and expertise of other health professionals.
7. Effectively present cases at rounds.
8. Interact courteously and professionally with team members
9. Demonstrate competency with briefing, checklist and debriefing

Hernia

By the end of the rotation the resident will be able to:

1. Consult appropriate health care professionals to improve patient status prior to surgical repair of a hernia (e.g. to stop smoking, to lose weight).
2. Consult OT perioperatively to get abdominal wall binders as appropriate.

Communicator

Breast

By the end of the rotation the resident will be able to:

1. Deliver bad news in a compassionate and sensitive manner that takes into account the patient's unique psychological and social needs.
2. Obtain informed consent, including an effective explanation of the rationale for the recommended surgical approach and its possible complications.

3. Exhibit a sensitive and culturally appropriate style of communicating with patients and their families.
4. Explain and discuss all aspects of a patient's treatment and care plan in lay terms.
5. Communicate effectively with patients and families.
6. Use voice, body language, and translators to good effect.
7. Provide clear and thorough explanation of diagnosis and plan for cancer treatment.
8. Complete appropriate documentation that is organized and on time (e.g. discharge summaries, consult notes, death certificates).
9. Create OR notes for routine procedures that are cohesive, with appropriate detail of important issues, completed in a timely fashion

Hernia

By the end of the rotation the resident will be able to:

1. Explain hernia repair to the patient, including all potential complications
2. Explain the problem with infected mesh
3. Counsel those patients who may not benefit from a hernia repair, or those who are not suitable for repair.

Health Advocate

Breast

By the end of the rotation the resident will be able to:

1. Understand and promote the recommendations for breast cancer screening in Newfoundland.
2. Discuss with patients the way to minimize breast cancer recurrence when appropriate (e.g. exercise, weight reduction).
3. Promote the standard of care in the surgical management of breast disease.
4. Demonstrate knowledge of primary and secondary prevention of diseases.

Hernia

By the end of the rotation the resident will be able to:

1. Identify the risk factors for recurrence of a hernia in the individual patient.
2. Identify those patients who may have loss of domain and fail the hernia repair.

Manager

Breast

By the end of the rotation the resident will be able to:

1. Use healthcare resources appropriately and efficiently.
2. Demonstrate effective time management skills and punctuality.

Hernia

By the end of the rotation the resident will be able to:

1. Prioritize patients with hernias for whom urgent surgical intervention is required.

Professional

Breast

By the end of the rotation the resident will be able to:

1. Demonstrate respect for colleagues, more junior trainees and other members of the healthcare team.
2. Demonstrate empathy, cultural sensitivity, honesty and compassion while performing high quality patient care.
3. Demonstrate insight into strengths and weaknesses and receive feedback appropriately.
4. Demonstrate respect for the medical code of conduct and ethical practice.
5. Maintain appropriate boundaries, including appropriate draping for a physical examination and appropriate presentation of a case to a group in the presence of the patient.

Scholar

Breast

By the end of the rotation the resident will be able to:

1. Demonstrate a scholarly attitude towards lifelong learning
2. Critically appraise relevant current literature on the surgical management of breast cancer
3. Demonstrate effective self-directed learning in-terms of reading around cases, asking questions, and recognizing need for life-long learning.
4. Appropriately research and present topics for teaching rounds.

Hernia

By the end of the rotation the resident will be able to:

1. Critically appraise relevant current literature on the surgical management of hernias, both simple and complex.
2. Demonstrate effective self-directed learning in-terms of reading around cases, asking questions, and recognizing need for life-long learning.
3. Appropriately research and present topics for teaching rounds.