ORTHO TRAUMA

CanMEDS roles and responsibilities

General Objectives

Upon completion of a rotation on Trauma, the learner must demonstrate knowledge of the pathophysiology of the injury to the musculoskeletal system. A knowledge base must exist to formulate a plan to effectively and efficiently order to arrive at a diagnosis and formulate a treatment plan in a multi traumatized patient (ATLS protocol). The learner should be able to communicate the diagnosis/treatment and long term exceptions to patient/family, especially as it relates to establishing a sympathetic and effective professional relationship.

Specific Objectives

At the completion of the rotation, the learner will have acquired the following competencies and will function effectively as:

1. MEDICAL EXPERT/CLINICAL DECISION MAKER

While working on the Trauma service, the learner must become proficient in the following areas:

- 1. Obtain appropriate history and perform physical examination on the injury patient
- 2. Pre-operative management of the injury patient
 - a. Splinting techniques
 - b. Managing premorbid medical conditions
 - c. Prioritizing treatment of MSK injuries with treatment for other injury organ systems
- 3. Describe a diagnosis and management plan (investigations, non-operative and operative) for the following fractures:
 - a. Fractures of the upper extremity:
 - i. Distal radius
 - ii. Radius and ulnar shaft
 - iii. Monteggla and Galeazzi
 - iv. Olecranon and radial head
 - v. Trohlea and capitellum
 - vi. Distal humerus (supracondylar)
 - vii. Humeral shaft
 - viii. Proximal humeral
 - ix. Scapula
 - x. Clavicle
 - b. Fracture of the lower extremity:
 - i. hip
 - ii. femur
 - iii. Supracondylar femur
 - iv. Patella
 - v. Tibial plateau
 - vi. Tibial shaft
 - vii. Tibial plafond

- c. Fractures of the pelvic ring
 - i. Pelvic
 - ii. Sacram
 - iii. Acetabulum
- 4. Describe the surgical approaches and relevant anatomy to treat fractures in Section 3.
- 5. Identify and manage intra and early post-operative complications of the injured patient
 - a. Nerve or large vessel injury
 - b. Compartment syndrome
 - c. Fat embolism syndrome
 - d. Thromboembolic disease (prophylaxis and treatment)
 - e. Infection
 - f. Wound necrosis
- 6. Identify and manage open fractures
- 7. Understand the indications, contraindications and biomechanical properties of the device available for fracture fixation
 - a. Plates and screws
 - b. Intramedullary
 - c. External fixators
- 8. Understand initial management of associated soft tissue injuries
- 9. Describe both closed and open treatment of large joint dislocations
- 10. Diagnosis, investigate, and treat the following late postoperative complications:
 - a. Wound necrosis
 - b. Wound and deep infection
 - c. Nonunion of a fracture
 - d. Malunion of a fracture
 - e. Reflex sympathetic dystrophy
- 11. Patient rehabilitation and disability assessment

II. COMMUNICATOR

General Requirements

- 1. Establish therapeutic relationships with patients/families
- 2. Obtain and synthesize relevant history from patients/families/communities
- 3. Listen effectively
- 4. Discuss appropriate information with patients/families and the health care team

Specific Requirements

- 1. Effectively communicate with patients/families and members of the team
- 2. Effectively communicate important aspects of patient care to the multidisciplinary team and clearly/concisely summarize the patient care plan.
- 3. Understand and empathize with the emotion surrounding orthopedic disease and injury
- 4. Appreciate the dynamics of a traumatized family
- 5. Address patients' concerns with empathy
- 6. Understand the concerns that patients have with loss of control, self-worth and personal dignity
- 7. Explain details of medical conditions and therapy in understandable terms
- 8. Appreciate the fact that interpreters may be required for ethnic groups

III. COLLABORATOR

- 1. Consult effectively with other physicians and health care professionals
- 2. Contribute effectively to other interdisciplinary team activities

Specific requirements

- 1. Understand the roles of other health care professionals
- 2. Seek the advice of other members of the health care team
- 3. Organize/lead tem meetings to discuss problems in investigation/therapy (multidisciplinary conference)
- 4. Consult regularly and reasonably with other physicians and members of the health care team
- 5. Share knowledge effectively to formulate a health care plan

IV. LEADER

General Requirements

- 1. Utilize resources effectively to balance patient care, learning needs and outside activities
- 2. Allocate finite health care resources wisely
- 3. Work effectively and efficiently in a health care organization
- 4. Utilize information technology to optimize patient care, life-long learning and other activities

Specific Requirements

- 1. Participate effectively in resource planning for the orthopedic patient
- 2. Participate in discharge planning

V. HEALTH ADVOCATE

General Requirements

- 1. Identify the importance determinants of health affecting patients
- 2. Contribute effectively to improve the health of patients, their families and communities
- 3. Recognize and respond to those issues where advocacy is appropriate

Specific Requirement

- 1. Demonstrate knowledge of the epidemiology of orthopedic disease and injury
- 2. Advise patients/families of the role of environmental factors in orthopedic disease and injury
- 3. Promote prevention of orthopedic disease and injury
- 4. Outline community resources available to patients/families dealing with orthopedic disease and injury:
 - a. Social work
 - b. Physiotherapy
 - c. Occupational therapy
 - d. Dietary/nutritional services
 - e. Prosthetic support services
 - f. Pain and symptom management
 - g. Palliative care

5. Identify the possibility of non-accidental injury (physical abuse) and make the appropriate referrals to prevent further harm.

VI. SCHOLAR

General Requirements

- 1. Develop, implement and monitor a personal continuing education strategy
- 2. Critically appraise sources of medical information
- 3. Facilitate learning of patients, housestaff and other health professionals
- 4. Contribute to development of new knowledge
- 5.

Specific Requirements

- 1. Question current practice
- 2. Develop a teaching contact that reflects the multidisciplinary approach to orthopedic surgery
- 3. Critically assess the orthopedic literature as it pertains to diagnosis, investigation, treatment and follow-up:
 - a. Outline types of trial design
 - b. Define the relevance of statistical significance and how it is determined
 - c. Define Type 1 and Type II errors and their relevance
- 4. Disseminate relevant knowledge to other health care providers

VII. PROFESSIONAL

General Requirements

- 1. Deliver the highest quality care with integrity, honesty and compassion
- 2. Exhibit appropriate personal and interpersonal professional behavior
- 3. Practice medicine ethically consistent with the obligations of a physician

Specific Requirements

- 1. Understand that professionalism requires ongoing CME
- 2. Maintain a professional attitude consistent with a practicing orthopedic surgeon
- 3. Sympathize with the needs of the patient even when they conflict with medical advice
- 4. Recognize the requirements of patient confidentiality
- 5. Understand the ethical responsibilities as they relate to the orthopedic patient
- 6. Practice in an ethical, honest and forthright manner
- 7. Respond to conflict constructively and with compassion