Dear Team,

Welcome to Green surgery. I look forward to a fun and learning month ahead with all of you. Below, please find some directions and expectations for the service. Hopefully, these will help you perform better and make the experience more fruitful.

AM Rounding:

We expect the medical students and/or the junior resident to collect Overnight events, vital signs and I/Os on every patient on the service, and present it on a sheet thus making it available to the rest of the team. The students and/or junior resident can take turns doing this on a day to day basis.

We expect the students to see 1-2 patients every day prior to rounds and present them in SOAP fashion.

S: One line introduction and any pertinent overnight events.

O: Vitals signs, I/Os, labs, imaging

A: One line assessment.

P: In FAVORITETHUGS format. (Feeding, analgesia, volume, OT/PT, Respiratory, Infection, transfusions, embolic prophylaxis, tubes and drains, heart, ulcer prophylaxis, glycemic, specials)

We also expect the student to know everything about that patient and his/her disease pathology. Please prepare ahead. The junior residents are not expected to see patients prior to rounding with me but are expected to present the patients, their overnight events and vital signs/I/Os if students are not assigned to that patient.

When in a patient room, no one must stand idle. As one person communicates with the patient, others must examine him/her or perform parts of the exam, change dressing, check what is hanging on the IV pole, check how much supplemental oxygen is being used, etc. Please avoid multiple people talking to the patient. It is always best if a unified plan comes from a single person and is given to the patient.

While in a patient room, one person is expected to log into a bedside computer and check orders, write new orders, write the note (if fast enough). This will typically be the junior or the midlevel resident.

Following rounds, we will huddle and discuss all plans for every patient (Running the list). This is typically performed by the junior resident. I will then discuss plans with the attendings. The midlevel resident will also be expected to run the list with attendings. We will then communicate with each other throughout the day about plans and results via group text.

OR:

Following AM rounds, we expect most if not all of the team to be in the operating room. This includes the junior resident (making sure that there nothing on the floor going uncared for or pending). Cases will be assigned a week ahead of time. Please prepare well for them.

Workflow and communication:

Once we run the list with the attendings, plans will be communicated via group texts. Please acknowledge the receipt of texts and implement the plans. This means that whichever resident is available must quickly place the orders in EMR. Please do not prioritize notes and discharges prior to other patient orders, save them for last. Notes must be written in the same SOAP format.

Plans will typically come from a senior resident. It is everyone’s responsibility to implement them. In the same light, new information typically come from the junior resident or whoever is holding the team pager. It is their responsibility to ensure that this information is passed up the chain. Free/Open communication is key. No answer is wrong and no questions is too dumb. Please ask if you are not sure lest you should do harm to a patient.

PM rounds:

This will typically take place between 3-6 pm. Similar to AM rounds, we expect the students/junior resident in have information from the day (events, results, vitals, I/Os) available for rounds. Plans will again be discussed and implemented. PM rounds will also typically be a more teaching session. Please prepare ahead.

The List:

The list represents the brain of the team. It needs to be accurate and up to date all the time. It is everyone's responsibility to work on it every time you have an opportunity.

Sign out:

After PM rounds, we will run the list and discuss what needs to be signed out. It is imperative that we clearly communicate this to the night person so he/she can work well on our behalf.

Clinic/Conference:

Green surgery has clinic on Fridays. All students and residents are expected to be there. Please prepare for clinic ahead of time as well.

Green surgery conference is held on Friday AMs. Students and residents are expected to present a case during this conference. The case will be assigned ahead of time. Please prepare well as this is attended by several attendings and they tend to pimp everyone.

There will be many more things to talk about and work on during this rotation but if we work hard, communicate well and make our patients a priority, this will be a fun and fruitful rotation. Please don’t hesitate to call me if you have any questions. Cell phone: 216-543-0985.

Terence