Surgery Clerkship
Virtual Curriculum Manual

Department of Surgery
Course MS 311
July 2020

Clerkship Director: Cullen Carter, MD
Associate Clerkship Directors: Tejal Brahmbhatt, MD; Patrick O’Neal, MD; Abdul Saied Calvino, MD
Clerkship Coordinator:
Lana Ketlere; Syed Nanna
Surgery Clerkship Virtual Curriculum Manual

Table of Contents
Medical Education Program Objectives ......................................................................................................................... 4
Contact Information .......................................................................................................................................................... 7
Virtual Clerkship Curriculum Description .................................................................................................................. 9
Curriculum Overview ...................................................................................................................................................... 9
Block Schedule ............................................................................................................................................................ 9
Holidays ......................................................................................................................................................................... 9
Learning Schedule ....................................................................................................................................................... 9
Virtual Clinical Experiences ......................................................................................................................................... 11
Small Group Sessions .................................................................................................................................................. 11
Other Independent Learning ...................................................................................................................................... 11
Learning Communities ................................................................................................................................................ 11
Assessment and Grading ............................................................................................................................................ 12
Clerkship Grading Policy ............................................................................................................................................. 12
Virtual Clerkship Grading .......................................................................................................................................... 12
Entire Clerkship Grading ............................................................................................................................................ 13
Roles and Responsibilities ........................................................................................................................................... 13
Clerkship Director ........................................................................................................................................................ 13
Clerkship Coordinator .................................................................................................................................................. 14
Third Year Student ......................................................................................................................................................... 14
Professional Comportment .......................................................................................................................................... 14
Student Evaluation of the Clerkship ............................................................................................................................ 14
Assignments .................................................................................................................................................................. 15
Policies and Procedures for Evaluation, Grading and Promotion of Boston University School of Medicine MD Students .................................................................................................................................................. 15
Collaborative Student Assessment System ................................................................................................................ 15
<table>
<thead>
<tr>
<th>INSTITUTIONAL LEARNING OBJECTIVE</th>
<th>MEDICAL EDUCATION PROGRAM OBJECTIVE</th>
</tr>
</thead>
</table>
| **B - Behaves in a caring, compassionate and sensitive manner toward patients and colleagues of all cultures and backgrounds. (Interpersonal and Professionalism)** | B.1 - Apply principles of social-behavioral sciences to provision of patient care; including assessment of the impact of psychosocial and cultural influences on health, disease, care-seeking, care compliance, and barriers to and attitudes toward care. (2.5)  
B.2 - Demonstrate insight and understanding about emotions that allow one to develop and manage interpersonal interactions. (4.7)  
B.3 - Demonstrate compassion, integrity, and respect for others. (5.1)  
B.4 - Demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation. (5.5) |
| **U - Uses the science of normal and abnormal states of health to prevent disease, to recognize and diagnose illness and to provide and appropriate level of care. (Medical Knowledge and Patient Care)** | U.1 - Perform all medical, diagnostic, and surgical procedures considered essential for the area of practice. (1.1)  
U.2 - Gather essential and accurate information about patients and their conditions through history-taking, physical examination, and the use of laboratory data, imaging and other tests. (1.2p)  
U.3 - Interpret laboratory data, imaging studies, and other tests required for the area of practice. (1.4)  
U.4 - Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence and clinical judgement. (1.5)  
U.5 - Develop and carry out patient management plans. (1.6)  
U.6 - Provide health care services to patients, families, and communities aimed at preventing health problems or maintaining health. (1.9)  
U.7 - Demonstrate an investigatory and analytic approach to clinical situations. (2.1)  
U.8 - Apply established and emerging bio-physical scientific principles fundamental to health care for patients and populations. (2.2)  
U.9 - Apply established and emerging principles of clinical sciences to health care for patients and populations. (2.3)  
U.10 Recognizes that ambiguity is a part of clinical health care and respond by utilizing appropriate resources in dealing with uncertainty. (8.8) |
| **C - Communicates with colleagues and patients to ensure effective interdisciplinary medical care (Interpersonal and Communication Skills; Patient Care)** | C.1 - Gather essential and accurate information about patients and their conditions through history-taking, physical examination, and the use of laboratory data, imaging and other tests. (1.2h)  
C.2 - Counsel and educate patients and their families to empower them to participate in their care and enable shared decision making. (1.7)  
C.3 - Participate in the education of patients, families, students, trainees, peers and other health professionals. (3.8)  
C.4 - Communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds. (4.1)  
C.5 - Communicate effectively with colleagues within one's profession or specialty, other health professionals, and health related agencies (4.2, see also 7.3)  
C.6 - Maintain comprehensive, timely, and legible medical records. (4.5)  
C.7 - Demonstrate sensitivity, honesty, and compassion in difficult conversations, including those about death, end of life, adverse events, bad news, disclosure of errors, and other sensitive topics. (4.6)  
C.8 - Communicate with other health professionals in a responsive and responsible manner that supports the maintenance of health and the treatment of disease in individual patients and populations. (7.3) |
| **INSTITUTIONAL LEARNING OBJECTIVE** | **MEDICAL EDUCATION PROGRAM OBJECTIVE** |
| **A - Acts in accordance with highest ethical standards of** | A.1 - Demonstrate responsiveness to patient needs that supersedes self-interest. (5.2)  
A.2 - Demonstrate respect for patient privacy and autonomy. (5.3)  
A.3 - Demonstrate accountability to patients, society, and the profession. (5.4) |
| A.4 | Demonstrate a commitment to ethical principles pertaining to provision or withholding of care, confidentiality, informed consent, and business practices, including compliance with relevant laws, policies, and regulations. (5.6) |
| A.5 | Work with other health professionals to establish and maintain a climate of mutual respect, dignity, diversity, ethical integrity, and trust. (7.1) |
| A.6 | Demonstrate trustworthiness that makes colleagues feel secure when one is responsible for the care of patients. (8.5) |
| R.1 | Apply principles of epidemiological sciences to the identification of health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations. (2.4) |
| R.2 | Locate, appraise, and assimilate evidence from scientific studies related to patients' health problems. (3.6) |
| R.3 | Continually identify, analyze, and implement new knowledge, guidelines, standards, technologies, products, or services that have been demonstrated to improve outcomes. (3.10) |
| E.1 | Identify strengths, deficiencies, and limits in one's knowledge and expertise. (3.1) |
| E.2 | Set learning and improvement goals. (3.2) |
| E.3 | Identify and perform learning activities that address one's gaps in knowledge, skills, and/or attitudes. (3.3) |
| E.4 | Incorporate feedback into daily practice. (3.5) |
| E.5 | Obtain and utilize information about individual patients, populations of patients, or communities from which patients are drawn to improve care. (3.9) |
| E.6 | Develop the ability to use self-awareness of knowledge, skills, and emotional limitations to engage in appropriate help-seeking behaviors. (8.1) |
| E.7 | Manage conflict between personal and professional responsibilities. (8.3) |
| S.1 | Provide appropriate referral of patients including ensuring continuity of care throughout transitions between providers or settings, and following up on patient progress and outcomes. (1.8) |
| S.2 | Systematically analyze practice using quality-improvement methods and implement changes with the goal of practice improvement. (3.4) |
| S.3 | Use information technology to optimize learning. (3.7) |
| S.4 | Work effectively with others as a member or leader of a health care team or other professional group. (4.3, see also 7.4) |
| S.5 | Work effectively in various health care delivery settings and systems relevant to one's clinical specialty. (6.1) |
| S.6 | Coordinate patient care within the health care system relevant to one's clinical specialty. (6.2) |
| S.7 | Incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population-based care. (6.3) |
| S.8 | Advocate for quality patient care and optimal patient care systems. (6.4) |
| S.9 | Use the knowledge of one’s own role and the roles of other health professionals to appropriately assess and address the health care needs of the patients and populations served. (7.2) |
| S.10 | Participate in different team roles to establish, develop, and continuously enhance interprofessional teams to provide patient- and population-centered care that is safe, timely, efficient, effective, and equitable. (7.4) |

**Third Year Learning Objectives**

During the third-year clerkships, students will

- Demonstrate use of patient-centered interviewing and communication techniques (U.2)
- Take a clinical history that demonstrates both organization and clinical reasoning (U.7)
- Perform accurate and relevant physical exam techniques (U.2)
• Demonstrate an ability to synthesize clinical information and generate a differential diagnosis, assessment and plan (U.3, R2, U.5)
• Demonstrate a compassionate and patient-sensitive approach to history taking and physical examinations (B.3)
• Communicate well organized, accurate and synthesized oral presentations (C.1)
• Counsel and educate patients and families (C.3)
• Demonstrate timely, comprehensive and organized documentation (C.6)
• Demonstrate a fund of knowledge in the clinical discipline and apply this to patient care (U.4)
• Demonstrate an awareness of one’s own learning needs and work to address these gaps (E.1, E.3)
• Show respect and empathy for others (B.3)
• Demonstrate accountability to the responsibilities of the student’s role and expectations of a clinical clerk (S.4)
• Communicate effectively with the interprofessional team (S.9)

**Surgery Clerkship Learning Objectives**
*(Linked to Medical Education Program Objectives in parentheses)*

Upon successful completion of the surgery clerkship, each student will be able to do the following:
• Gather a history and perform a physical for patients presenting with a variety of surgical conditions both in the elective and the emergent setting. (U.2, U.7)
• Formulate a differential diagnosis for patients presenting with a variety of abdominal symptoms (abdominal pain, nausea/vomiting, change in bowel habits, hematemesis/hematochezia) and other surgically treated conditions (U.3, R2, U.5)
• Recommend and interpret diagnostic tests for patients presenting with abdominal symptoms or other surgically treated conditions (U.1, U.2, U.3, U.4)
• Document an encounter in the medical record for patients presenting with surgical disease. (C.6)
• Provide an organized and accurate oral presentation of a patient encounter. (C.1)
• Form clinical questions and retrieve evidence to advance patient care. (U.4, U.7, R.1, R.2, R.3, E.1, E.3)
• Collaborate as a member of an interprofessional team (B.2, B.3, C.5, C.8, A.5, A.6, S.9)
• Perform general procedures expected of physicians, including venipuncture, iv placement, suturing of surgical incisions or lacerations, performing sterile technique, foley catheter placement, basic airway management, arterial blood gas (U.1)
Contact Information

Clerkship Director
Cullen Carter, MD
Telephone: (617) 638-8443
Cell phone: (434) 989-5290
Email: Cullen.Carter@bmc.org
Pager: 2227
Office: Boston Medical Center, Collamore Building, Room 501
Office Hours: Available anytime – please email to set up a time to meet

Associate Clerkship Director
Tejal Brahmbhatt, MD
Telephone: (617) 414-8052
Email: Tejal.Brahmbhatt@bmc.org
Pager: 5683
Office: Boston Medical Center, Dowling Building, 2 South
Office Hours: Available anytime – please email to set up a time to meet

Associate Clerkship Director
Patrick O’Neal, MD
Telephone: (857) 203-6205
Email: Patrick.Oneal2@va.gov
Office: 1400 VFW Parkway, West Roxbury, MA 02132
Office Hours: Available anytime – please email to set up a time to meet

Associate Clerkship Director
Abdul Saied Calvino, MD
Email: Abdul.Saied@CharterCARE.org
Office: 825 Chalkstone Avenue, Providence, RI 02908
Office Hours: Available anytime – please email to set up a time to meet

Associate Clerkship Director
Melanie Gainsbury, MD
Email: Melanie.L.Gainsbury@kp.org
Office: 710 Lawrence Expy, 2nd Floor, Dept 286
Office Hours: Available anytime, please email to set up a time to meet

Clerkship Coordinator
Lana Ketlere
Telephone: (617) 638-8442
Email: Lana.Ketlere@bmc.org
Office: Boston Medical Center, Collamore Building, C515
Office Hours: Monday-Friday, 8:00am – 4:30pm
Surgical Education Support Coordinator
Syed Nanna
Telephone: (617) 638-8443
Email: Syed.Nanna@bmc.org
Office: Boston Medical Center, Collamore Building, C515
Office Hours: Monday-Friday, 8:00am – 4:30pm
**Virtual Clerkship Curriculum Description**

We have transitioned two weeks of the clerkship content to an online curriculum in order to allow students to continue their learning while maintaining social distancing. All students will complete the clinical portion of the clerkship later in the year.

This Virtual Curriculum Manual serves as an overview of the two-week virtual portion of the curriculum. Students will be provided with a clinical syllabus prior to the start of their clinical clerkship rotations.

The overall goals of the Virtual Clerkship in Surgery are to:

1. Provide students with an overview of the common and most important “Key” topics in surgery, with a focus on the assessment and treatment of patients presenting with severe abdominal pain.
2. Provide students with clear information about what students do on a surgical service and what is expected of a student on the surgical service.
3. Provide students with practical skills and knowledge which will be useful during the surgery clerkship and hopefully any career in medicine- for example, suturing skills, basic knowledge of a myriad of tubes/lines/drains, wound management, etc.
4. Introduce students to written and verbal presentations specific to surgery.

Opportunities for engaged learning include:

1. Large group learning through highly relevant lectures. Most of these lectures will have an interactive component.
2. Small group case learning. You will be assigned 6 small group case studies, where you will work through a simulated case with an experienced faculty member.
3. Small group learning with your AME during one afternoon of the virtual clerkship.
4. Directed reading- most of the virtual clerkship activities have assigned/recommendend reading.

**Curriculum Overview**

**Block Schedule**

Block schedule dates for all clerkships can be located on the Medical Education website:

http://www.bumc.bu.edu/busm/education/medical-education/academic-calendars/

**Holidays**

Holidays by Clerkship can be viewed on the Medical Education website at:

http://www.bumc.bu.edu/busm/education/medical-education/academic-calendars/#clerkhols

**Learning Schedule**
**WEEK 1**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>10:00-10:30AM</td>
<td>Intro/Orientation- Dr. Carter</td>
</tr>
<tr>
<td>10:30-11:30AM</td>
<td>Intro to Anesthesiology- Dr. Litvak</td>
</tr>
<tr>
<td>11:30-12:30AM</td>
<td>Intro to abd pn- Dr. Carter</td>
</tr>
<tr>
<td>10AM</td>
<td>GI bleed- Dr. Sanchez</td>
</tr>
<tr>
<td>11AM</td>
<td>Anorectal disease- Dr. Carter</td>
</tr>
<tr>
<td>12-12:30PM</td>
<td>BUSM town Hall</td>
</tr>
<tr>
<td>10AM</td>
<td>Fluids/Electrolytes- Dr. Carter</td>
</tr>
<tr>
<td>11AM</td>
<td>&quot;Surgical Bucket&quot;- Dr. Hasley</td>
</tr>
<tr>
<td>11am</td>
<td>Breast Cancer- Dr. Cassidy</td>
</tr>
<tr>
<td>11:00</td>
<td>Intro to surgical teams- what is student role- Melanie Fritz</td>
</tr>
<tr>
<td>10AM</td>
<td>Leadership in Teams- Dr. Woodson</td>
</tr>
<tr>
<td>10AM</td>
<td>Postoperative management- Dr. O'Neal</td>
</tr>
</tbody>
</table>

**WEEK 2**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>10AM</td>
<td>Burns- Dr. Brahmbhatt</td>
</tr>
<tr>
<td>11AM</td>
<td>Transgender surgery- Dr. Slama-</td>
</tr>
<tr>
<td>10AM</td>
<td>Thyroid disease- Dr. Drake</td>
</tr>
<tr>
<td>11AM</td>
<td>Dr. Favuzza-</td>
</tr>
<tr>
<td>10AM</td>
<td>Hernia- Dr. Calvino</td>
</tr>
<tr>
<td>11AM</td>
<td>Tubes/Lines/Drains 1- Carter</td>
</tr>
<tr>
<td>10AM</td>
<td>Aortic disease- Dr. Farber</td>
</tr>
<tr>
<td>11AM</td>
<td>Peripheral Vascular Disease- Dr. Farber</td>
</tr>
<tr>
<td>10AM</td>
<td>Pancreatic cancer- Dr. Sachs</td>
</tr>
<tr>
<td>12-12:30PM</td>
<td>BUSM town Hall</td>
</tr>
<tr>
<td>1PM</td>
<td>Wound management- Dr. Nelson</td>
</tr>
<tr>
<td>1PM</td>
<td>Suturing</td>
</tr>
<tr>
<td>1PM</td>
<td>Suturing</td>
</tr>
<tr>
<td>1-5PM</td>
<td>Medical Education Office Content</td>
</tr>
</tbody>
</table>

**Notes:**
- Small Group Case-time variable by group OR AME session (2-5PM)
- 7-8AM- Morbidity and Mortality Conference
Virtual Clinical Experiences
The following is a “Key” to explain the color-coding system in the above schedule

Blue: These sessions are large group learning

Green: These sessions are large group learning, specifically designed to give you practical skills/knowledge

Yellow: These are small group sessions- Timing of each group is variable, and you will be assigned a clear schedule for this at orientation. Each student will be assigned to three approximately 1 hour long small group sessions each week. In addition, during week 1, each student will have an AME session from 2:00-5:00. This will be scheduled so as not to conflict with your small group cases.

Purple- Time used for MEO programming

Please see the “Session Learning Objectives and Notes” section at the end of this syllabus for more information on each session.

Small Group Sessions
As above, a significant portion of the Virtual Clerkship will be devoted to small group learning. These sessions will be held three times weekly, and you will either have the same faculty member for all two weeks or a different faculty member for each week. Some preliminary reading will be assigned for each small group session so you can maximize your learning from each session. These are designed to last approximately 1 hour each.

Other Independent Learning
As you will note, there is ample free time in the schedule, and we very strongly encourage you to use this time for independent learning. You will be provided with assigned readings from the DeVirgilio Surgery- A Case Based Clinical Review textbook, which is a very high-yield and readable textbook. Please use this time wisely- it will prepare you very well for the clinical portion of the Surgery Clerkship. The assigned readings will be posted on the course blackboard site.

Learning Communities

You will be assigned a learning community for the entirety of the virtual clerkship. This is the group you will be meeting with regularly to do group learning, discuss things that you have learned, and support each other. You should create a communication contact who will start/run Zoom sessions for your group.

Please communicate to the clerkship coordinator which student will be running your Zoom session and what your Zoom ID is by 5pm on the first day of the virtual clerkship. This student may be given editing permission on BB/google calendar to enter LC meeting times and ZOOM ids.

As a group your learning community should:

- Start brainstorming about how you want your group to work and which of the assigned work you want to do as a group, and which will be done individually.

- Anticipate 3 meetings per week, typically immediately following your small group sessions in the afternoon.
• Create ground rules for communication and learning in your learning community.

• Make a plan for your learning community. Plans for the learning communities may include:
  o Review the group plan for the day/week
  o Do cases on Aquifer (aquifer.org) or other self-study modules together
  o Discuss the online content you are completing—what you learned, questions it raised, etc.
  o Discuss any of the live work you are doing—what you learned, questions it raised, next steps for your learning
  o Support each other in prep for/stress of step 1 and be a community for each other in this isolated time.

These activities are in addition to your Zoom classroom work. We will be assigning a faculty member for each clerkship who will plan to join your group check-in’s a few times over the two-week clerkship.

Assessment and Grading

Clerkship Grading Policy
An overview of the grading policy for the full clerkship is listed below. Please note that the clinical components will take place after all virtual clerkships. Students will take the shelf exam at the end of their clinical clerkship experience.

Virtual Clerkship Grading

<table>
<thead>
<tr>
<th>Clerkship Virtual Grading Procedures/Policies</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The virtual clerkship is a pass/fail portion of the clerkship. In order to pass the virtual clerkship, students must:</td>
</tr>
<tr>
<td>o Attend all live virtual zoom sessions (unless excused by the clerkship)</td>
</tr>
<tr>
<td>o Attend all learning community group sessions (unless excused by the clerkship)</td>
</tr>
<tr>
<td>o Complete all self study content</td>
</tr>
<tr>
<td>o Complete all assignments</td>
</tr>
<tr>
<td>o Meet the professionalism requirements</td>
</tr>
</tbody>
</table>

Clerkship Specific Virtual Grade Procedures/Policies

Professionalism on the Virtual Clerkship
Evaluation of a medical student's performance while on a clerkship includes all expectations outlined in the syllabus and clerkship orientation as well as the student's professional conduct, ethical behavior, academic integrity, and interpersonal relationships with medical colleagues, department administrators, patients, and patients' families. Any professionalism lapses resulting in a failure to meet the virtual clerkship professionalism requirements may result in a failure of the virtual portion of the clerkship and will require narrative comments by the clerkship director in the summative comment section of the final evaluation.

Virtual Clerkship Failure and Remediation Policies/Procedures
If a student fails the virtual portion of the clerkship, they will still be allowed to take the clinical portion of the clerkship during the scheduled time.

If a student receives a grade of fail in a clerkship, based on failure of the virtual clerkship, the student will have the opportunity to remediate the failing grade through two additional clinical weeks on that clerkship. Upon earning a passing grade for those clinical weeks, the final grade will be recalculated as specified in the course syllabus and will appear on the transcript as a Fail/(Remediated Grade). A transcript note will be made to designate that the remediation was completed by an additional clinical experience.

BUSM Grade Review Policy
BUSM’s Grade Reconsideration Policy is located in section 2.2 of the Policies and Procedures for Evaluation, Grading and Promotion of Boston University School of Medicine MD Students: http://www.bumc.bu.edu/busm/faculty/evaluation-grading-and-promotion-of-students/

### Entire Clerkship Grading

<table>
<thead>
<tr>
<th>HOW MUCH EACH PART OF YOUR GRADE IS WORTH FOR THE ENTIRE CLERKSHIP:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Virtual Clerkship</td>
<td>P/F</td>
</tr>
<tr>
<td>Clinical Grade Percentage</td>
<td>TBD</td>
</tr>
<tr>
<td>Shelf/Exam Percentage</td>
<td>TBD</td>
</tr>
<tr>
<td>“Other” Components Percentage</td>
<td>TBD</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HOW YOUR FINAL WORD GRADE IS CALCULATED FOR THE CLERKSHIP:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Honors</td>
<td>TBD</td>
</tr>
<tr>
<td>High Pass</td>
<td>TBD</td>
</tr>
<tr>
<td>Pass</td>
<td>TBD</td>
</tr>
<tr>
<td>Fail</td>
<td>TBD</td>
</tr>
</tbody>
</table>

**SHELF/EXAM GRADING**
- Exam minimum passing (percentile/2 digit score) | TBD
- Exam minimum score to qualify for honors (percentile total year using 2017-2018 academic year norms/2 digit score) | TBD

**What is “Other” and what percentage is it worth?**
- OSCE | TBD
- Percentage | TBD

**Other components that need to be completed in order to pass the clerkship**
- Patient log
- FOCuS Forms
- Duty Hour logs
- Required physical exams
- Required feedback signatures

**Professionalism**
Evaluation of a medical student’s performance while on a clerkship includes all expectations outlined in the syllabus and clerkship orientation as well as the student’s professional conduct, ethical behavior, academic integrity, and interpersonal relationships with medical colleagues, department administrators, patients, and patients’ families. Any lapses in professionalism may result in a loss of up to 3% of the total possible clerkship points regardless of performance in other areas of the clerkship. Any professionalism lapses resulting in a loss of clerkship points will require narrative comments by the clerkship director in the professionalism comment section of the final evaluation.

Clerkship-Specific Failure and Remediation Policies/Procedures

**BUSM Grade Review Policy**
BUSM’s Grade Reconsideration Policy is located in section 2.2 of the Policies and Procedures for Evaluation, Grading and Promotion of Boston University School of Medicine MD Students: http://www.bumc.bu.edu/busm/faculty/evaluation-grading-and-promotion-of-students/

### Roles and Responsibilities

**Clerkship Director**
- Oversee the design, implementation, and administration of the curriculum for the virtual clerkship curriculum
- Orient students to the virtual clerkship curriculum
• Create and maintain an appropriate learning environment, modeling respectful and professional behaviors for and toward students
• Ensure student and faculty access to appropriate resources for medical student education. Evaluate and grade students
• Ensure LCME accreditation preparation and adherence
• Adhere to the AAMC-developed guidelines regarding Teacher-Learner Expectations

Clerkship Coordinator
• Support the clerkship director in the responsibilities provided above
• Create and maintain an appropriate learning environment, modeling respectful and professional behaviors for and toward students
• Maintain student rosters
• Coordinate orientations and didactic sessions
• Verify completion of virtual clerkship curriculum for each student

Third Year Student
• Attend all of the live virtual sessions
• Attend all learning community sessions
• Complete all self-study work
• Complete all assignments

Professional Comportment
Students are expected to adhere to the AAMC-developed guidelines regarding Teacher-Learner Expectations, located on the Policies page, under “Academic Policies and Information” (http://www.bumc.bu.edu/bsm/files/2015/05/AAMC-Teacher-Learner-Expectations.pdf)

Students are expected to be aware of and follow the site expectations on professional comportment, including, but not limited to, dress code and the use of phones, pagers, and laptops. Students must arrive on time at their site and for any scheduled sessions. Any missed sessions and absences must adhere to the Attendance & Time Off Policy.

Further, below are expectations for student professionalism in the virtual curriculum. These include, but are not limited to:
• Treating the clerkship team in a professional and respectful manner
• Engaging in the virtual curriculum and participating respectfully at all times
• Arriving at scheduled sessions (e.g. Zoom meetings) on time
• Handing in all assignments on time
• Informing clerkship leadership of absences
• Responding to emails in a timely fashion (within 48 hours)

Student Evaluation of the Clerkship
Student feedback is a highly valued, critical resource for helping us continually improve our curriculum. Evaluation of learning experiences is a requirement of the Liaison Committee on Medical Education. To ensure that we have a representative amount of data on our courses and clerkships, all students are expected to complete an evaluation via eValue (www.e-value.net) for each of the courses/modules and their instructors. All
evaluations are anonymous and aggregate data is only released to clerkship directors after grades have been submitted for the blocks. Please comment freely and honestly about your experience.

Assignments
There are no assignments to be formally submitted during the virtual clerkship. We expect students to attend all learning exercises, including large groups, small groups, AME sessions, suturing sessions, etc.

Policies and Procedures for Evaluation, Grading and Promotion of Boston University School of Medicine MD Students
http://www.bumc.bu.edu/bumc/faculty/evaluation-grading-and-promotion-of-students/

Collaborative Student Assessment System

Student Disciplinary Code of Academic and Professional Conduct
http://www.bumc.bu.edu/bumc/faculty/medical-student-disciplinary-code/

Attendance & Time Off Policy

- 3rd Year Excused Absence Form: https://wwwapp.bumc.bu.edu/MedPersonalDays/home/Index

Personal Day Policies
The personal day policy applies only to the clinical portion of the clerkships.
http://www.bumc.bu.edu/bumc/education/medical-education/policies/personal-days-policy/

BUSB Policies
In addition to the expectations listed above, all students are expected to adhere to BUSM and Boston University policies.
http://www.bumc.bu.edu/bumc/education/medical-education/policies/

BU Policies and Student Support Services

Appropriate Treatment in Medicine
Boston University School of Medicine (BUSB) is committed to providing a work and educational environment that is conducive to teaching and learning, research, the practice of medicine and patient care. This includes a shared commitment among all members of the BUSM community to respect each person’s worth and dignity, and to contribute to a positive learning environment where medical students are enabled and encouraged to excel.

BUSB has a ZERO tolerance policy for medical student mistreatment.
Students who have experienced or witnessed mistreatment are encouraged to report it using one of the following methods:

- Contact the chair of the Appropriate Treatment in Medicine Committee (ATM), Dr. Robert Vinci, MD, directly by email (bob.vinci@bmc.org)
- Submit an online Incident Report Form through the online reporting system [https://www.bumc.bu.edu/busm/student-affairs/atm/report-an-incident-to-atm/](https://www.bumc.bu.edu/busm/student-affairs/atm/report-an-incident-to-atm/)

These reports are sent to the ATM chair directly. Complaints will be kept confidential and addressed quickly.


**Boston University Sexual Misconduct/Title IX Policy**

**Boston University Social Media Guidelines**

**Learning Strategies and Tools**

**Recommended Texts**

Multiple sources are available to match different learning styles. Based on input from students during the prior academic years, we recommend the following book for use during the virtual portion of the clerkship.

- **Surgery: A Case Based Clinical Review.** De Virgilio, 2020. Please note that the BU medical library has an older edition (the 2015 edition), but we have secured the 2020 version which is posted on the course Blackboard site for download. The majority of the reading assignments will be from this book. Occasionally, another source will listed as assigned reading for a lecture.

**eValue Student Resources**
[http://www.bumc.bu.edu/evale/students/](http://www.bumc.bu.edu/evale/students/)

**Echo360/Technology**

Echo360 may only be used for streaming captured lecture videos; the videos may not be downloaded. Taking smartphone or digital pictures or videos of any part of the lecture in class, or at home, is similar to downloading and is not allowed. There are a number of reasons for this, including that students and/or the University may be liable for violations of federal copyright and privacy laws as a result of the use of copied material.

If you experience any technical problems, please report the issue in one of the following ways to generate an IT ticket:

- **Echo360 Related Issues:** Create a ticket on the Ed Media site ([http://www.bumc.bu.edu/bumc-emc/instructional-services/echo360/](http://www.bumc.bu.edu/bumc-emc/instructional-services/echo360/)): sign in and provide pertinent information that will enable an effective response. Have a link to the problematic video ready to copy/paste into this form.

- **Educational Technology Related Issues:** For assistance with technology supported by BUMC's Educational Media (e.g. ExamSoft), tickets can be created via their website at: [http://www.bumc.bu.edu/bumc-emc/instructional-services/report-an-educational-technology-issue/](http://www.bumc.bu.edu/bumc-emc/instructional-services/report-an-educational-technology-issue/)
Other Technology Related Issues: For assistance with BU-wide technology, such as Blackboard, email an example (e.g. picture or very brief phone video) to ithelp@bu.edu with a descriptive subject line and give as many details as possible on the what, where, how you are using the service and what type of computer, browser, etc. along with type of student (i.e. BUSM III). Always include link(s) to or screen shots of where the issue is occurring.


Tutoring
Peer tutors may be requested via the Office of Academic Enhancement’s Peer Tutoring Program at: http://www.bumc.bu.edu/busm/student-affairs/office-of-academic-enhancement/academic-enhancement/peer-tutoring-program/

Office of Disability Services
Boston University is committed to providing equal and integrated access for individuals with disabilities. The Office of Disability Services provides services and support to ensure that students are able to access and participate in the opportunities available at Boston University. http://www.bu.edu/disability/policies-procedures/academic-accommodations/

Session Learning Objectives and Notes (In order of presentation during the virtual clerkship)

WEEK 1
MONDAY 7/27:

10:30 AM- Introduction to Anesthesiology (Dr. Eva Litvak)
At the conclusion of this lecture, participants will be able to:
- Understand the basics of anesthesiology
- Understand the scope of anesthesia practice and the responsibilities involved in being a perioperative specialist
- Review the procedures and skills required of anesthesiologists
- Be able to perform an anesthesia-focused patient history and physical exam
- Understand fundamentals of anesthesia preparation and equipment
- Review commonly used medications
- Review the general types of anesthetic plans
- Understand how to formulate an anesthetic plan
- How to be successful and get the most out of your anesthesia rotation

Assigned Reading: None
PPT to be posted on Blackboard

11:30 AM- Introduction to Abdominal Pain (Dr. Cullen Carter)
At the conclusion of this lecture, participants will be able to:
- Take a history from a patient presenting with acute abdominal pain
- Perform an appropriate exam on a patient presenting with acute abdominal pain
- Recognize patterns of abdominal pain and make an appropriate and prioritized differential diagnosis for a patient presenting with acute abdominal pain

Assigned Reading: None
PPT to be posted on Blackboard

**PM- Small Group Case #1** (Please note that your assigned group time may be either Monday afternoon or Tuesday afternoon) (Please also note that for the small group case lectures, the PPT slides will not be posted in advance, as this would give away much of the case and discourage independent clinical decision making). At the conclusion of this lecture, participants will be able to achieve the following on a patient presenting with RLQ abdominal pain

- Take an appropriate history
- Describe the appropriate exam maneuvers to perform
- Recommend and interpret diagnostic tests such as laboratory and imaging studies
- Describe the treatment options and goals for various presentations of this disease process

Assigned reading: DeVirgilio, Ch. 23
PPT will not be posted (as above)- Zoom link to be posted after lecture

**Independent Reading Assignments for 2/27: DeVirgilio, Ch. 20**

**TUESDAY 7/28:**

**10:00 AM- GI Bleeding (Dr. Sabrina Sanchez)**
At the conclusion of this lecture, participants will be able to:

- Understand diagnosis and treatment of GI Bleeding
- Form a differential diagnosis for UGIB and LGIB
- Discuss the work up for an UGIB and LGIB from time of arrival to the ED to performance of the gold-standard diagnostic test and the management of the most common findings
- Discuss the management of patients in which EGD/colonoscopy are non-diagnostic for their UGIB/LGIB
- Describe the pathophysiology of ischemic colitis as it relates to mesenteric ischemia

Assigned reading: Devirgilio, Ch. 22, Ch. 49
PPT to be posted to Blackboard

**11:00- Anorectal Disease (Dr. Cullen Carter)**
At the conclusion of this lecture, participants will be able to:

- Form a differential diagnosis for perianal/perirectal pain
- Discuss the indications for diagnostic testing such as anoscopy, flexible endoscopy
- Discuss a treatment plan for common perianal pathologies such as:
  - Hemorrhoids
  - Fissure
  - Abscess
  - Condylomatous disease
  - Anal cancer

Assigned reading: None
PPT to be posted to Blackboard

**1:00 PM- Suturing Session #1**
At the conclusion of this lecture, participants will be able to:
• Discuss the most important means of preventing injury to themselves or others from sharp instruments and needles
• Learn the proper way to hold surgical instruments
• Learn the technique of closing a laceration or surgical incision with a simple interrupted suture, using an “instrument tie”

Assigned Reading: Please watch the below Zoom video with some basic instructions: https://bostonu.zoom.us/rec/share/-etzP6zyzpLXM_cX2PUP4rRo3cX6a813AY_qEJzko7T5qmr288nJh2j3TmZxRK?startTime=158557466400

Independent Reading Assignments for 7/28: DeVirgilio, Ch. 27

WEDNESDAY, 7/29:

10:00 AM - Fluids and Electrolytes (Dr. Cullen Carter)
At the conclusion of this lecture, participants will be able to:
• Choose an appropriate type of intravenous fluid for a patient in multiple different situations
• Calculate how much fluid to give a patient in various settings
• Manage common electrolyte abnormalities

Assigned reading: Unfortunately, there is no excellent chapter on this topic. Please have a look at the following chapter in another surgical textbook (Lawrence) which is written for students. This link will prompt you to login with your BU credentials to access the chapter: https://clerkship-lwwhealthlibrary-com.ezproxy.bu.edu/content.aspx?sectionid=205017097&bookid=2553&rotationId=0
-This chapter is dense- Please do not get bogged down. We will hopefully make some sense of it in lecture
PPT to be posted to Blackboard

11:00 AM - The Surgical Bucket (Dr. Rebecca Hasley, Surgical Resident)
This is a “practical lecture” and is new for the clerkship in that it is purely designed to get you ready for the wards very soon. The lecture is highly visual. The third year is much like a new language, and the goal is for you to “learn the lingo.”
At the conclusion of this lecture, participants will be able to:
• Identify the materials that are commonly used on rounds to take care of surgical patients
• Will be ready to actively participate in the hands nature of caring for surgical patients

Assigned reading: None
PPT to be posted to Blackboard

PM - Small Group Case #2 (again, please check the schedule- while most small groups will meet on Wednesday for Case #2, some groups will be one day before or after)
At the conclusion of this lecture, participants will be able to achieve the following on a patient presenting with RUQ abdominal pain
• Take an appropriate history
• Describe the appropriate exam maneuvers to perform
• Recommend and interpret diagnostic tests such as laboratory and imaging studies
• Describe the treatment options and goals for various presentations of this disease process

Assigned reading: DeVirgilio, Ch. 18, Ch. 19
PPT will not be posted (as above) - Zoom link to be posted after lecture

Independent Reading Assignments for 7/28: DeVirgilio, Ch. 7

THURSDAY, 7/30:

10:00 AM - Leadership in Teams (Dr. Jonathan Woodson)
Dr. Jonathan Woodson is a Professor of Vascular Surgery at BU/BMC, who served with the Department of Defense from 2010-2016 as the Assistant Secretary of Defense for Health Affairs. In that role, he reported directly to the Secretary of Defense, and administered the over $50 billion Military Health System budget and was responsible for the care of almost 10 million patients. He currently is the Larz Anderson Professor of Management and Professor of Practice at the BU Questrom School of Business, where he leads the Institute for Health System Innovation & Policy. He is also board-certified in Surgery, Internal Medicine, Vascular Surgery, and Surgical Critical Care. As physicians, you will need the skills to lead teams of people in solving complex problems. Please bring all of your attention for this rare opportunity to hear Dr. Woodson speak on this important topic.

Assigned reading: TBD

11:00 AM - Breast Cancer (Dr. Michael Cassidy)
At the conclusion of this lecture, participants will be able to:
• Understand risk factors for developing breast cancer
• Understand workup for a breast mass and for abnormalities detected on screening studies
• Understand how abnormalities are detected on breast exam
• Describe subtypes of breast cancer
• Understand indications and options for surgery of the breast and axilla
• Understand adjuvant therapies for breast cancer
• Discuss the indications for genetic testing for cancer susceptibility genes

Assigned reading: Devirgilio, Ch. 5, Ch. 6
PPT to be posted to Blackboard

1:00 PM - Suturing Session #2
At the conclusion of this lecture, participants will be able to:
• Perform deep dermal suturing without assistance
• Understand the principle of burying knots and how this is successfully done
• Describe when a “deep dermal” suture is used and it’s advantages

Assigned reading: Review what you learned in Suturing 1 from Tuesday - watch that video again if you need a refresher on “simple interrupted” suturing. Also, watch the following video on “deep dermal suturing”: https://bostonu.zoom.us/rec/share/-
Independent Reading Assignments for 7/29:
No reading is assigned as multiple high-yield chapters are assigned for the Friday lectures- please use your time to work through those chapters.

FRIDAY, 7/31:

7:00 AM- Morbidity and Mortality Conference: (Optional but strongly encouraged)
M&M conference is held weekly in departments of surgery across the country. This is an important and always an interesting conference where we can talk openly about our complications and ask honestly what we could have done differently to prevent a bad outcome. Of note, the conference is protected and is not discoverable, which allows for a free and open dialogue. At BMC, three cases are chosen every week. For each case, the resident involved tells the story of what happened with a patient, and then pauses for questions and discussion. The resident then gives a literature review which is relevant to the topic. Everyone in surgery considers this our best conference and no matter your level of training, everyone learns something at M&M. We have chosen not to make attendance required as would be especially difficult for students in other time zones to attend, as the conference starts at 7:00 AM EST. If you can attend, however, please do. Unfortunately the conference cannot be recorded for medicolegal reasons.

10:00 AM- Postoperative Management (Dr. Patrick O’Neal)
At the conclusion of this lecture, participants will be able to:
- Formulate a basic care plan for any patient who is receiving care on a surgical service after an operation
- Describe the common and severe postoperative complications
- Initiate the workup for patients who suffer postoperative complications

Assigned reading: DeVirgilio, Ch. 1, Ch 39, Ch 40, Ch 41
PPT to be posted to Blackboard

11:00 AM- “A Day on the Surgical Service”- Introduction to Surgical Teams (Melanie Fritz, MS 4)
This is again a “practical lecture.” At the conclusion of this lecture, participants will be able to:
- Describe the general work that is performed on a day to day basis on surgical teams
- Describe the role of the student within a surgical team
- Understand the expectations set for students on surgical services

Assigned reading: None
PPT to be posted to Blackboard

PM- Small Group Case #3 (again, please check the schedule- while most small groups will meet on Friday for Case #3, some groups will be one day prior)
At the conclusion of this lecture, participants will be able to achieve the following on a patient presenting with LLQ abdominal pain
- Take an appropriate history
- Describe the appropriate exam maneuvers to perform
- Recommend and interpret diagnostic tests such as laboratory and imaging studies
- Describe the treatment options and goals for various presentations of this disease process

Assigned reading: DeVirgilio, Ch. 26
PPT will not be posted (as above)- Zoom link to be posted after lecture

**Independent Reading Assignments for 7/31:**
None- Just look ahead at the assignments for Monday’s lectures. Enjoy your weekend!

**WEEK 2**
**MONDAY, 8/3:**

**10:00 AM- Burns (Dr. Tejal Brahmbhatt)**
At the conclusion of this lecture, participants will be able to:
- Understand diagnosis and treatment of Burns
- Be able to classify the stages of burn injuries based on histological findings
- Identify physiological changes that occur after sustaining burn injury
- Basic principles of burn injury management – open versus closed therapy

Assigned reading: DeVirgilio, Ch. 47
PPT to be posted on Blackboard

**11:00 AM- Transgender Surgery (Dr. Jaromir Slama)**
At the conclusion of this lecture, participants will be able to:
- Understand treatment options for patients with gender identity disorder and gender dysphoria
- Understand the multidisciplinary approach to gender identity disorder and gender dysphoria
- Understand the surgical options utilized in transgender medicine

Assigned reading: Please read the BMC Center for Transgender Medicine and Surgery website including under the headings “Clinical Services,” “Surgical Services,” and “Frequently Asked Questions.”
PPT to be posted to Blackboard

**1:00 PM- Wound Management (Dr. Ben Nelson- Chief Resident)**
This is again a “practical lecture,” designed to get you “ward-ready.” At the conclusion of this lecture, participants will be able to:
- Describe the treatments options for healing open wounds
- Define (and properly pronounce!) “debridement” and describe it’s importance in leading to wound healing
- Define “wet-to-dry” dressing changes as a concept in wound healing
- Understand the role of negative pressure wound therapy in healing of complex wounds

Assigned Reading: None- this is a visual lecture and no preparation is necessary
PPT to be posted to Blackboard
PM- Small Group Case #4 (again, please check the schedule- while most small groups will meet on Monday for Case #4, some groups will be one day later)
At the conclusion of this lecture, participants will be able to achieve the following on a patient presenting with crampy abdominal pain

- Take an appropriate history
- Describe the appropriate exam maneuvers to perform
- Recommend and interpret diagnostic tests such as laboratory and imaging studies
- Describe the treatment options and goals for various presentations of this disease process

Assigned reading: DeVirgilio, Ch 3
PPT will not be posted (as above)- Zoom link to be posted after lecture

Independent Reading Assignments for 8/3: DeVirgilio, Ch. 4

TUESDAY, 8/4

10:00- Thyroid/Parathyroid Disease (Dr. Thurston Drake)
At the conclusion of this lecture, participants will be able to:

- Understand the embryology and relative anatomy of the thyroid and parathyroid glands
- Understand the evaluation of a thyroid nodule, including the indications for biopsy
- Discuss the types of thyroid cancer, including their prevalence, prognosis, and treatment
- Understand primary hyperparathyroidism, including its presentation, evaluation, and treatment

Assigned reading: DeVirgilio, Ch. 14, Ch. 12
PPT to be posted to Blackboard

11:00- Colorectal Cancer
At the conclusion of this lecture, participants will be able to:

- Understand diagnosis and treatment of Colorectal Cancer
- Identify risk factors for development of colorectal cancer
- Know the differences in staging of colon cancer versus rectal cancer
- Understand the staging of colorectal cancer
- Be aware of familial syndromes that predispose to development of colorectal cancer

Assigned reading: DeVirgilio, Ch 24
PPT to be posted to Blackboard

1:00 PM- Suturing Session #2
At the conclusion of this lecture, participants will be able to:

- Perform “running subcuticular” suturing without assistance
- Understand the principle of staying within the same plane within the dermis
- Learn how to “Start” and “Stop” a running subcuticular suture

Assigned reading: Review the techniques learned in sessions 1 and 2, and re-watch those videos if needed. Then, watch the following demonstrating the running subcuticular technique:
https://bostonu.zoom.us/rec/share/
Independent Reading Assignments for 8/4: DeVirgilio, 27

WEDNESDAY, 8/5

10:00 AM - Hernia (Dr. Abdul Calvino)
At the conclusion of this lecture, participants will be able to:

- Understand diagnosis and treatment of Hernias
- Understand the abdominal wall surgical anatomy
- Discuss etiology and differential diagnosis of abdominal wall hernias
- Recognize the clinical symptoms and signs of abdominal wall hernias
- Discuss the surgical treatment of abdominal wall hernias such as:
  - Inguinal hernias
  - Femoral hernias
  - Other common ventral hernias

Assigned Reading: DeVirgilio, 2
PPT to be posted to Blackboard

11:00-12:00, 1:00-2:00 - Tubes, Lines, and Drains - parts 1 and 3 (Dr. Cullen Carter)
This is a practical lecture and highly visual with detailed explanations. This is again an opportunity to “learn the lingo” of this new language of the 3rd year. We hope this lecture will serve you well in many of your clerkships.
At the conclusion of this lecture, participants will be able to:

- Discuss the array of catheters which are placed within all types of blood vessels and their specific function
- Describe the technique of placement of common intravascular catheters
- Describe tubes placed in the airway and the pleura and their function
- Describe the types of tubes placed in the GI tract, their function, and the advantages and disadvantages of the common tubes
- Describe catheters placed in the bladder, the indications for placement, and the general technique of placement

Assigned reading: none, no preparation work required
PPT to be posted to Blackboard

PM - Small Group Case #5 (again, please check the schedule- while most small groups will meet on Wednesday for Case #5, some groups will be one day prior or one later)
At the conclusion of this lecture, participants will be able to achieve the following on a patient presenting with severe abdominal pain

- Take an appropriate history
- Describe the appropriate exam maneuvers to perform
- Recommend and interpret diagnostic tests such as laboratory and imaging studies
- Describe the treatment options and goals for various presentations of this disease process
Assigned reading: There is no DeVirgilio chapter on this topic. Please go to the following chapter and scroll down to and read the section on “Mesenteric Artery Disease.” You will likely have to log in with your BU userID and password.

https://accesssurgery.mhmedical.com/content.aspx?sectionid=216209143&bookid=2576&guestAccessKey=ae439e54-3c36-4ac0-ab00-377e61373650

PPT will not be posted (as above)- Zoom link to be posted after lecture

Independent Reading Assignments for 8/5: No extra independent assignments today

THURSDAY, 8/6

10:00 AM- Aortic Disease (Dr. Alik Farber)
At the conclusion of this lecture, participants will be able to:
- Understand diagnosis and treatment of Aortic Disease
- Discuss definitions and pathophysiology of abdominal aortic aneurysms
- Form an understanding how to diagnose and treat ruptured AAA
- Create an understanding of open and endovascular strategies to treat AAA

Assigned reading: DeVirgilio, Ch. 58
PPT to be posted to Blackboard

11:00 AM- Peripheral Arterial Disease (Dr. Alik Farber)
At the conclusion of this lecture, participants will be able to:
- Understand diagnosis and treatment of Peripheral Arterial Disease
- Understand epidemiology of PAD and CLI
- Learn about the management options in PAD and CLI
- Consider organization of a randomized CLI

Assigned reading DeVirgilio, Ch. 57, Ch. 59
PPT to be posted to Blackboard

Independent Reading Assignments for 8/6: None, as MEO activities take most of the afternoon

FRIDAY, 8/7

7:00 AM- Morbidity and Mortality Conference: (Optional but strongly encouraged)- Please see week 1 for details

10:00 AM- Pancreatic Cancer/Pancreatitis (Dr. Teviah Sachs)
At the conclusion of this lecture, participants will be able to:
- Understand the anatomic considerations that surround the pancreas and pancreatic operations.
- Form a differential diagnosis for pancreatic neoplasms
- Understand the difference between cystic neoplasm and solid neoplasms as it relates to risk of malignancy as well as clinical approach to care.
- Understand the difference between endocrine and exocrine malignancies.
- Understand the operations associated with pancreatic neoplasms and the risks and benefits of each.
- Recognize the indications for observation versus resection
11:00 AM- Welcome to the OR (Melanie Fritz, MS4)
This is again a practical lecture designed to introduce you to the foreign environment of the operating room. Melanie Fritz has worked to provide a clear explanation of this at-first foreign environment. You will learn the vocabulary and the customs, so your first experience in the OR is much more enjoyable and less stressful. At the conclusion of this lecture, participants will be able to:

- Describe the sequence of events necessary to safely get an operation started
- Describe the role of the different people in the operating room
- Describe the basic sterile procedures necessary to protect patient and staff safety
- Describe the student role in the OR, and know how a student can contribute to an operation

PM- Small Group Case #6
At the conclusion of this lecture, participants will be able to achieve the following on a patient presenting with traumatic injury:

- Take an appropriate history
- Describe the appropriate exam maneuvers to perform
- Recommend and interpret diagnostic tests such as laboratory and imaging studies
- Describe the treatment options and goals for various presentations of this disease process

Assigned reading: DeVirgilio, Ch 42, Ch 43
PPT will not be posted (as above)- Zoom link to be posted after lecture

Independent Reading Assignments for 8/7: None: Congratulations on finishing and thank you for your hard work and attention!