

Resident and Student Orientation --- Pediatric Surgery Rotation

Goals

- To provide the best possible care of neonates, infants, children and adolescents with surgical diseases
- To expose residents and students to the unique teaching opportunities provided by congenital and pediatric general surgical problems
- To provide a team atmosphere which is educational, enjoyable, and reasonable and which reinforces learning for the students.

Service Structure

Attendings:

Andre Hebra, MD
Charles D. Smith, MD, MS
Christian Streck, MD
Robert Cina, MD
H. Biemann Othersen, MD
Emeritus Professor
Katherine Chessman, PharmD

Support Staff:

Julie Mansfield, PA-C
Kiften Carroll, FNP
Jenny Waterhouse, FNP

Office Staff:

Julie Caraway, Office Manager
Elaine Cullars, Administrative Assistant

Burn Team:

Jill Evans, RN, MSN (Burn Coordinator)
Ryan Curry, RN, (Burn Nurse)
Amy Ferguson (Burn PT)
Josie Craig (Burn OT)

Child Life:

Betsy McMillan, MS, CCLS, Child Life

Ancillary Resources:

Pam Srinivas (ostomy/wound care)
Debbi Kerness (Social Worker)

Patients:

All general surgery patients, newborn up through 17.
-all burn patients 17 and under
-all trauma patients 17 and under. Some 16-17 will go to adult trauma

Schedule / Conferences:

Monday	Tuesday	Wednesday	Thursday	Friday
Main OR	Main OR	(No OR Scheduled)	Main OR	Main OR
Ambulatory OR			Ambulatory OR	
6:30 Resident Conf	7-8 Grand Rounds Clinic 8-12 Smith	7:15 Beehive session 7:30 Clinic Hebra 12:00 Clinic Streck 4 pm Ped Tumor Board(2 nd floor XRAY conf room)	6:30-7:30 M&M 3:00pm Radiology Rounds 4:00pm Cookie Session	

*Note: Other teaching sessions may be scheduled weekly by the attendings, with dates and times TBA.

Operating Room Experience:

Students are expected to be in the operating room as much as possible. We encourage you to see a variety of cases on all of the services in the Department of Surgery. But if you are not scrubbing on a procedure with another service or involved in another required activity for your clerkship, and if a case is being performed on the pediatric surgery service, we would expect you to be present in the operating room for that case. Students should discuss the next day's OR schedule or their plans to attend cases on another service, with the chief resident so that students will know what cases they will scrub on and be able to prepare for that case by reviewing data about that patient and reading about the disease process being treated. The chief resident may also be able to assist you in identifying cases being performed on other services that will help you fulfill your clerkship diagnosis requirements or that may interest you.

Rounds:

Structure of rounds to be determined by the Chief Resident. Students should follow two or three patients based on the complexity of the cases and the volume of patients on the service. They should know something about ALL patients on the service but should be fully engaged in the care of the patient's they are following. Students should present the patients they are following on rounds to attendings and/or residents. Students should examine their patient each morning and review all events occurring since their last encounter with the patient. Data should be presented in an organized way and thoroughly reviewed (not just listed on paper) to the team at the bedside each morning.

Clinic:

Pediatric Surgery Clinic is located on the 4th Floor of Rutledge Tower. Students not scrubbed in the OR or attending another required activity for the clerkship are expected to attend and see patients during clinic. An orientation to clinic will be given by the Pediatric Surgery Staff the first clinic of your rotation.

Teaching Conferences

Beehive sessions with Dr. Othersen will take place on Wednesday mornings at 8am in the clinic conference room. Other teaching sessions (Cookie sessions) will be scheduled at the discretion of the attendings. Each team member will receive a disk of case studies that will be discussed at these teaching sessions.

Other Fine points:

Trauma

The pediatric surgery team, including attendings, responds promptly to pediatric trauma alerts. The adult trauma team will cover when peds team members are unavailable, but every effort to attend trauma alerts will be made by ped surgery team members that are "in house".

Pharmacy Support:

Kathy Chessman, PharmD 11054 is another huge resource for us. She is frequently available, but should not be expected to do our work for us. Please use this excellent resource frequently and wisely. The Pharmacy residents can also be extremely helpful. Jill Thompson, PharmD covers for Dr Chessman when she is off service.

Child Life:

Child life is a valuable resource that we are privileged to have access to in nearly every area in which we see patients. Betsy McMillan works with all our burn patients both in and out patient, participates in surgery clinic on Wednesdays, and also works with patients in the main OR holding room. Jennifer Redfern is the child life specialist working with our patients in the ambulatory OR. Also there are designated child life specialists on every unit. Child life can be helpful by preparing children for procedures, providing support and coping during procedures and helping to prepare children and families for surgery. Additionally, they can create positive hospital experiences for surgery and trauma patients by providing emotional support and therapeutic play opportunities.

We do not expect students to be comfortable with pediatric care, nor do we expect you to know everything!! We DO EXPECT you to call frequently and never feel like you cannot contact one of the residents, attendings, or other support staff if you have any questions. We want you to enjoy this rotation and to share our commitment to providing the best possible care to our pediatric patients.