Welcome to the Vascular Surgery Rotation!

During this rotation you will become familiar not only with vascular surgery problems, but also basic surgical principles that apply to many different disciplines. You will find that attention to detail in regard to medical issues must be considered in order to optimize the results of surgical outcomes. There will be many opportunities for learning on this service including in the clinic, in the OR, in conferences, and on rounds with the house staff and attendings. However, consistent with the principles of adult learning, much will be **up to you** to take advantage of these opportunities. You are 'not in Kansas anymore' and no one will be 'spoon –feeding' you knowledge!

So how can you maximize your experience? Of course, you will have many competing demands and goals, so you must be efficient with your time. First, you should have a positive attitude, no matter what your previous perceptions about surgery or interest in another field with apparent minimal relevance to surgery. You may be surprised. Second, participate. You can be an important part of the team. Third, be on time. If you can't be on time, be early. People notice. Fourth, read and review; to be at least minimally prepared we expect you to do the following :

Review the pathophysiology and anatomy before you go to the OR. You will shine.
Know why the patient is having the procedure. If you don't you may be asked to leave the room.!

3) Be able to discuss the potential complications of the procedure. You should know what problems your patients may have after surgery or interventions.

You can ask questions too, especially if these are not clear from your reading. Remember the adage: "there are no stupid questions, just stupid people". Prepare, and you won't be perceived as the latter! We don't expect you to be knowledgeable about surgical techniques and nuances, and we will guide you in your initial presentations on rounds and conferences. Just try and know more about your patients than anyone else!

Small group sessions are a priority, but hopefully your preceptor will schedule them other than mornings when much of our OR and teaching clinics occur. Remember, the small group sessions are to familiarize you with the MINIMUM knowledge any physician should have about surgery. We would encourage you to go beyond this by exploring any standard textbook in surgery to read about cases you will see on this or any other surgical or subspecialty service. You also should plan to spend ½ day during the rotation observing in the ART vascular lab by coordinating with Jack Siegel, the director, and become familiar with a basic understanding of common vascular laboratory studies of the carotids, aorta, and extremities – including their indications and limitations.

Besides the above, we expect attendance at all the Surgery major conferences in 2W AMP on Tuesday (Grand Rounds @ 7AM and M&M @ 4 PM) as well as our vascular conference on Wednesday mornings @ 7:30 AM on the 7th floor ART in 7045. We will likely ask you to present cases at this conference. It is a good opportunity for you to practice, and show your presentation skills in a low pressure environment. You are encouraged to get some advice and practice with the housestaff before the conference though. If you are scheduled for in-house call you will be excused from any clinical duties the next day after conferences, but if you are on call on a Tuesday night, regulations may preclude you from participating in our teaching clinic on Wednesday mornings --so you may want to switch that call. Heart and Vascular M&M is the 3rd Thursday afternoon each month@ 4:30 PM but is not required for students and housestaff.

You must read the several dedicated chapters on vascular disease (to include lower extremity, carotid, aneurysms, and venous problems along with an introduction to the vascular laboratory) in any standard textbook of surgery the first week of your rotation-- assuming you didn't already do it the weekend before starting! That way you will better understand the "lingua franca"! We have an online manual that you may find useful at our Division of Vascular Surgery website:

http://academicdepartments.musc.edu/surgery/divisions/vascular/index.htm

within the Department of Surgery's web page. Do look the vascular handbook over as well. Even though it maybe a little dated and in need of some revisions it contains your goals and learning objectives for students, as well as the housestaff's. There is also a very nice Manual of Patient Care in Vascular Surgery -a new 5th edition by Rasmussen et al – available for purchase from Amazon or the bookstore, especially if you think you might be interested in further surgical training and career. Older used editions by Hallett et al are cheaper, (and may be available through the library) but the basic principles will be the same. However, it is not required. Other than the occasional article reviewed at our vascular conference, you should not focus too much on reading current published literature, unless you have a great interest in a topic or a specific patient problem, or wish to pursue a subject as a clinical research project. Make sure you read about the other wider areas of surgery according to the recommendations of Dr. Norcross as well, however, since your shelf exam covers much, much more than Vascular!!

Rounds and assigned tasks generally will be at the discretion of the Senior Resident, who is responsible for the day to day ward care of our vascular patients. All of the attendings have varying schedules. For example, Monday is a VA clinic day in the morning for Dr Brothers . Dr Garg is in the VA OR on Tuesday, Dr Brothers in the VA OR on Thursdays, Dr Robison shares ART OR with Dr Garg on Monday and Thursdays, Dr Elliott on Tuesdays and Fridays when he shares the OR day with Dr. Brothers at ART. All attendings rotate and share the responsibility for the Wednesday morning teaching clinic, and Dr Elliott and Robison have their private clinics on Wednesday PM, Dr. Brothers on Monday PM and Garg on Friday AM. You are welcome to participate in any attending clinics when your time permits, but it is not required. You should make every effort to get to the OR, especially when a patient you have seen in the clinic, done an H&P on, or are following on the ward requires surgery. You do not have to follow every patient on the service (2-4 may be adequate), but you should be aware of every patient's admitting problem, procedure, and general hospital course since you may get questions on rounds. On the other hand, since you are only following a few patients, NO ONE should know more about your patient than you do!!

You will have a number of other required procedures to observe during your rotation. Use your time wisely, so that during any down time on the service you can get these requirements taken care of so that they will not conflict with your team responsibilities during more busy periods.

Though you may find surgery is demanding, our hope is you will also find it rewarding as you contribute in a positive way to improving our patients' quality of life. After all, that's why we went into medicine anyway, isn't it? You will find each of us very interested that you glean as much knowledge about surgery - and particularly about vascular surgery - as possible, so that you might apply this to your practice in the future – whatever that may be. Our doors are open for your elucidation, questions, and also your feedback!

We look forward to having you on our service!