UPMC Horizon – General Surgery

Medical Student Rotation Guide

Attending Surgeons

- Jon Henwood, DO – Vascular and General Surgery (Program Director)
- Christopher Esper, DO – Vascular and General Surgery (Assistant Program Director)
- Joseph Wizorek, MD – Minimally Invasive Thoracic/Foregut Surgery
- Christopher Myers, MD – Advanced Laparoscopic and Bariatric Surgery
- Pablo Giuseppucci, MD – General and Minimally Invasive Surgery

Residents

- Marc Campbell, DO – PGY 4
- Melissa Loveranes, DO – PGY 4
- Derek Polecritti, DO – PGY 3
- Ben Raymond, DO – PGY 3
- Joseph Leaman, DO – PGY 2
- Dustin Stanley, DO – PGY 2
- Michael Morrison, DO – PGY 1
- Emily Zayshlyy, DO – PGY 1

Campuses

- UPMC Horizon – Shenango Valley
  2200 Memorial Dr.
  Farrell, PA 16141
  (724) 983-3500
- UPMC Horizon – Greenville
  110 North Main St.
  Greenville, PA 16125
  (724) 589-2100

Required Texts

- Sabiston Textbook of Surgery
- Cameron Current Surgical Therapy
- Zollinger’s Atlas of Surgical Operations

Recommended Resources

- University of Pittsburgh Health Sciences Library System Online
  - http://www.hsls.pitt.edu/
Accessible from any hospital computer. The above listed required texts are available via this website as are various other medical and surgical texts/journals

- Maxwell Quick Medical Reference
- Bates Guide to Physical Examination and History Taking
- Mosby’s Physical Examination Handbook
- The ICU Book
- Any standard anatomy atlas

Daily Rounds

- Morning rounds begin anytime between 5:00-6:00AM. Ask the junior resident on service what time they will be rounding the next day. Rounds may start earlier depending on whether or not there is a morning surgical conference
- You are expected to round on patients on a daily basis, preferably those whose cases you have scrubbed. Follow your patients from admission to discharge
  - MS-III: 1-2 floor patients OR 1 ICU patient
  - MS-IV: 3-4 floor patients OR 2 ICU patients
- You are expected pre-round on your patients and complete your progress notes, then round with the junior resident. Everyone will round with the chief resident/senior resident on service closer to OR or lecture time. Rounds with attending surgeons typically occur between or after cases, but can occur at any point in the day
  - Appropriate data to gather when you pre-round:
    - Vital signs
    - Lab data
    - Intake and output/24 hours
      - Urine output
      - Drain/tube output and character
    - Radiology studies
    - Recommendations from consultants/primary service
    - Overnight events
    - Any other pertinent information regarding your patient
- Examine and write progress notes on your patients in the usual SOAP note format. The residents will go over these notes with you, and you will present your patients on a daily basis

Daily Tasks

- Become familiar with the histories and physical exams of your patients. Because you will not be writing notes and following every single patient on the service closely, you are expected to know all the details of the patients you will follow. Treat them as if they were your own patients
- Check SPU after you are done rounding on your patients for H&Ps for procedures to be done for the day
You may be asked to go see surgical consults or complete pre-op H&Ps throughout the day
- Follow-up on labs, pending diagnostic tests, recommendations from other consult services

**Surgical Experience**

- On your first day on service, you will attend a required scrub/OR orientation
- OR cases almost always start at 7:30 AM unless otherwise indicated on the OR schedule
- ALWAYS introduce yourself to the residents, attending physicians, and OR staff when you will be scrubbing or observing a case. Write your name and student description (MS-III or MS-IV) on the white board on the wall
- If you will be scrubbing the case, pull your own gown and gloves prior to the start of the case. Wear eye protection for every case you scrub
- Students are to accompany the patient back to the operating room. You can help move the patient and assist the residents with prep and positioning of the patient. Stay with the patient after the case is completed and accompany them to the PACU
- Know the natural history, clinical indications, medical management, anatomy/physiology, and complications of the cases you are involved in. You are not expected, at your level, to know how to operate

**Medical Student Required Call**

- You are required to take **2 weeknights and one weekend of call per month**
- If you are on service for 2 months, than the same applies for each month you are on service
- Work out the call weekends with the other students on the service. We will not assign call days, this is your responsibility to do so
- On the weeknight or weekend you choose to take call, ask the resident on call for that night/weekend the day before if you can take call with them and give them your contact information
- Not every night and weekend is available for students to take call, so check with your residents beforehand
- **Weeknight** call:
  - You are not required to sleep in the hospital, but you must be available via pager or cellphone and be within 20 minutes of the hospital
- **Weekend** call:
  - The resident on for the weekend rounds on all the surgical patients at both the Shenango Valley and Greenville campuses
  - Check with the resident on-call the night before about what time and at which campus
You will pre-round and round with the resident on call as if it were a normal weekday at the first hospital. You will both round with the attending surgeon on-call at the first hospital, then round together at the next hospital. You may see consults and if applicable, scrub the cases added on for the weekend.

**Required Lectures**

- Super Tuesday Lectures
- UPMC ST. Margaret Grand Rounds
- Tumor Conference
- All surgical conferences
  - Morning surgical conferences
  - Surgical Peer Review
- **Excuse yourself from the OR even if you are scrubbed in to attend the required lectures. This is part of your medical education and absolutely required**

**Before you leave for the day you should**

- Check the OR schedule available at the OR front desk the day before
- Split up the cases amongst the other students. Know which cases you are covering for the next day so that you can read for these cases. We should not hear you dividing up the cases in the morning prior to OR start time. If you have not divided up the cases, then you have also not read for them
- Follow-up on any pending labs/diagnostics on your patients.
- Check SPU for H&Ps/charts on the cases you will be covering for the next day

**Useful Tips**

- **Always introduce yourself**
- Wear comfortable shoes
- Always eat breakfast and any other meal you have the opportunity to partake in. You never know how long you will be in the OR for any given case
- Ask questions
- Plan to arrive early and stay late
- Bring reading material with you. There will be times when there are not many cases or patients on the service and you will be allotted time to study in the library
- If you see a case that looks interesting to you, and nothing is going on for General Surgery, you may ask the other attendings if you are allowed to observe/scrub their cases
- Be pro-active with your own education
Evaluations

- Medical school end-of-rotation evaluations should be given to the chief or senior resident on service to be filled out. Do not wait until the last day of your rotation, allow appropriate time for the residents to complete the forms.

Hospital Extensions

- SV OR 7190
- SV SPU 7588
- GV OR 6295
- GV SPU 6160
- SV ICU 7194
- GV ICU 6218
- Aleesa Foltz, Graduate Medical Education 7507
- To page any resident, dial “0” to reach the operator and ask them to page whomever you are trying to reach.