CA-1 ORIENTATION GOALS AND OBJECTIVES

CA-1 residents begin their Anesthesiology Residency experience at the University Campus during an 8-week orientation process. This process is designed to introduce residents to the basics of anesthesia management from both a didactic and experiential model. For the first 6 weeks, residents will be assigned cases in conjunction with either a faculty member alone, or with a CA-2 or CA-3 resident in a teaching role, with a faculty member providing supervision. As each CA-1 resident progresses, they will gradually be given independence from direct supervision until, after 8 weeks, they are allowed to manage their own cases with faculty supervision and assistance. In addition, didactic lectures addressing the basic topics of anesthesia care will be provided for a total of 5 hours/week throughout the orientation period.

GOALS OF ROTATION

By progressing through this 8-week orientation period, beginning CA-1 residents will achieve a basic understanding of pre-anesthetic assessment, intraoperative management, and postoperative care. In addition, residents will begin the process of acclimating to the Operating Room setting, understanding the dynamics and need for excellent communication among health care team members, and being introduced into their role as patient advocate.

COMPETENCIES

I. MEDICAL KNOWLEDGE

Residents are expected to be able to:

- Describe ASA classification
- Describe the function of the anesthesia machine, including all components (vaporizers, flowmeter, Gas sources, ventilators, pressure systems)
- Understand safety features of the anesthesia machine
- List and describe an adult circle system
- Know the elements of the “standards of basic anesthetic monitoring”
- Describe basic pharmacology of commonly used induction agents, inhalation agents, local anesthetics, neuromuscular blockers, and opioids
- Describe basic pharmacology of commonly used vasopressors, neuromuscular blocker antagonists, Resuscitation drugs and antimuscarinics
- Describe anatomy relevant to the performance of common regional anesthetics (spinal, epidural and axillary blocks), as well as physiologic effects related to performance of such blocks
- Know the elements of an airway exam, as well as be aware of the airway management algorithm
- Know the elements of a good pre-operative assessment, including the details of all comorbidities as well as the possible presence of anesthetic related problems, including malignant hyperthermia and pseudocholinesterase deficiency
- Know the indications of lab testing
• Know the basics of fluid and electrolyte management, including calculation of deficits

II. PATIENT CARE

Residents are expected to gain experience and demonstrate a beginning skill in the following:

• Airway evaluation and appropriate physical exam
• Development of an anesthetic plan
• Ability to provide a rationale for selection of plan and associated anesthetic agents
• Demonstrate a knowledge of common drug reactions (contraindications of Succinylcholine, MH, antibiotic allergy, Vancomycin administration)
• Organized set-up of room in a timely fashion
• Airway management utilizing methods of mask ventilation, direct laryngoscopy and LMAs
• Proper positioning of patient for mask ventilation and laryngoscopy
• Ability to provide a differential diagnosis and treatment plan for common intra-operative complications (hypoxemia, bronchospasm, hypo/hypertension, low urine output)
• Emergence techniques and criteria for extubation
• Basic equipment set-up for and management of thermal regulation and fluid replacement
• Management of common postoperative complications including nausea, vomiting, hypo/hypertension
• Technical skills of intravenous line placement and mask ventilation
• Proper attention to patient position, with intervention as needed

III. INTERPERSONAL AND COMMUNICATION SKILLS

The resident will learn to:

• obtain appropriate and in-depth medical history from the patient and/or family
• communicate information concisely and completely in order to provide accurate information to the patient and obtained informed consent
• confirm correct plans for pre-operative antibiotic dosing
• communicate effectively with OR team members

IV. PROFESSIONALISM

The resident will:

• begin to participate as an effective team member
• be reliable, prepared and accountable
• treat patients and colleagues with respect
• understand privacy regulations (HIPAA) and follow policy

V. PRACTICE-BASED LEARNING

The resident will:

• begin to identify areas requiring further study
• attend all orientation lectures
• be encouraged to begin independent study habits

VI. SYSTEMS-BASED PRACTICE

The resident will:

• learn how to participate effectively during “codes”
• learn the importance of billing compliance and accurate chart completion
• learn to identify issues that may impact patient safety
• learn to gather data through the Meditech Information System