Acting Internship in Minimally Invasive Surgery (SURG MIS) SU 401 4 weeks

Updated April 2021

The Minimally Invasive Surgery Acting internships takes place at the UMass Memorial Campus, University Campus, and Baystate Medical Center to fulfill the Advanced Studies AI requirement. This acting internship is available during E1-M10 for one 4th year medical student/month. The student will participate in daily morning teaching rounds run by the chief surgical resident on the service and be expected to supervise and assist the 3rd year students. The student will attend all surgical conferences, scheduled surgical cases in the operating room, and surgical clinics with various MIS attendings. The student will be responsible for preparing at least one formal case presentation (with PowerPoint) to be presented at MIS Rounds during his/her time on service.

By the end of this acting internship, the medical student will be able to:

- 1. Define the roles and responsibilities of a surgical intern, and assume the role of a junior resident/intern in patient care under the direct supervision of senior residents and attending (Physician as Professional)
- 2. Effectively communicate with all team members (students, residents, attendings, nursing staff) as well as all services that interact with surgery on a daily basis (Physician as Communicator)
- 3. Perform a surgical consult (including appropriate history taking and physical exam), develop a care plan, and present to a chief resident (Physician as Clinical Problem Solver, Scientist, Communicator)
- 4. Manage the care of 2-4 surgical patients, including having first-call responsibilities (Physician as Professional, Clinical Problem Solver, Communicator)
- 5. Perform basic surgical procedures, including but not limited to: simple suturing, NGT placement, urinary catheter placement, IV insertion (Physician as Clinical Problem Solver, Scientist)
- 6. Teach basic surgical concepts and mentor third year clerks (Physician as Professional, Patient Advocate, Person)
- 7. Respond with intern to all acute situations on the ward (acting-intern to carry service pager while on call) (Physician as Professional, Communicator, Clinical Problem Solver)

By the end of the acting internship rotation, the student will have encountered and helped to manage common perioperative situations.

Pre-operative evaluation (including the following):

- Undifferentiated abdominal pain (including evaluation for the following)
- Appendicitis pre-operative
- Cholecystitis / Biliary colic
- Hernia (Inguinal, Ventral, Incisional, Hiatal, etc.)
- Intra-abdominal and soft tissue abscess
- Sepsis of unknown origin
- GERD
- Achalasia
- Pancreatitis
- Small bowel obstruction
- Gastric outlet obstruction
- Benign foregut tumors

- GI malignancies
- Bariatric surgery patients
- Lesions of the spleen
- Lesions of the adrenal gland

Post-operative management of:

- Pain
- Fever
- Chest pain/SOB/CHF/EKG changes
- Mental status change/delirium
- Bleeding
- Managing patient and family expectations/concerns
- Low urine output
- Renal insufficiency/Acute renal failure
- Wound infections/vacuum assisted dressings/advanced wound management
- Discharge planning/placement

Student competency is assessed based on evaluations of the student's demonstrated clinical knowledge and skills, presentation skills, communication skills, and professionalism.

Note:

Students should **not** schedule this course to coincide with other major conflicts including ACLS, USMLE Board Exam, or Residency Interviews.

Acting Internship Directors: James Carroll, MD Donald R. Czerniach, MD