

Resident and Clinical Fellow Orientation
The Division of Neurosurgery
St. Michael's Hospital
(Revised June 2001)

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See also:

1. St Michael's Hospital intranet for complete resident orientation package and guidelines
2. www.surg.med.utoronto.ca/neuro/

OBJECTIVES

The postgraduate educational objective of the Division of Neurosurgery at St. Michael's Hospital is to train consultant neurosurgeons. Training incorporates progressive, graded responsibility for operative and peri-operative patient management. Resident training is conducted with special emphasis in the following areas:

1. Oncology:
 - Photodynamic therapy of brain tumours
 - Skull base surgery, including trans-sphenoidal pituitary surgery and acoustic neuroma surgery
2. Cerebrovascular:
 - Aneurysm surgery
 - Carotid endarterectomy
3. Trauma:
 - Multi-modal monitoring in head injury
 - Exposure to a multi-disciplinary Head Injury Team (HIT) in the early rehabilitation of head injured patients
 - Peripheral nerve injuries
 - Participation in a Trauma Team on an ad hoc basis
4. Spine:
 - Treatment of degenerative, neoplastic and selected traumatic conditions of the spine, in close collaboration with the Division of Orthopedic Surgery.

ROLES OF THE RESIDENTS

The Senior Residents direct the day-to-day running of the service, for the Resident Teams. It is the responsibility of the senior resident to organize the call schedule for both the residents and fellows. One of these teams will work with the Staff Team of Drs. Tucker, Moulton and Cusimano for three months, and then switch to the other Staff Team of Drs. Muller, Perrin and Smyth. As much as feasible, the house staff will be on call with a staffperson from the Staff Team to which they are assigned. The Senior Resident will take second call when Junior Residents from their team are on first call. The Residents/ Fellows for a team will do the written discharge summaries for their staff's patients, and dictate the final notes (required only for patients being discharged to another in-patient facility, be it the local acute care hospital, a convalescent, or a chronic facility). Whenever feasible the Residents assigned to a team will speak to relatives requesting to speak to a physician, and make rounds with the staff of that team. On weekends and at night, the Resident/Fellow on call will of course be called upon to deal with any outstanding service work for both teams, and a certain amount of collegial cross-coverage while other Residents/ Fellows are in the O.R. or otherwise occupied, is expected. 'Sign-out' rounds should be conducted between teams to communicate issues of concern to the resident/fellow covering the service during nights/weekends.

EDUCATIONAL ACTIVITIES AND RESPONSIBILITIES

1. CLINICAL CLERKS

- Both Phase I (3rd year) and Phase II (4th year) clerks are frequently assigned to the service. *The senior resident should assign them to a specific staff surgeon as soon as they arrive.* This assignment should be based primarily on the student's request, and secondarily on the logistics of running the service. The clerks should be made to feel welcome, and should be involved as fully as possible with all of the activities of the service.
- The clerks must always be excused from duties to attend their seminars and other formal educational activities. Clerks will help with service work, but *they must not be abused as errand runners and x-ray film finders* unless the activity is of educational activity in relation to a case with which the student is involved. Their histories and physical examinations should be constructively reviewed and counter-signed by a Resident/Fellow. The staff will ask for resident input in determining the ward marks of the clerks, but the formal ward assessment must at least be reviewed and always signed by the staff surgeon who had the most contact with the student.
- Elective clerks from St. Michael's or other hospitals, often from other Universities, are frequently on the service. By virtue of an interest in our specialty, these students are particularly productive, and can be allowed extra responsibility commensurate with demonstrated ability, but must not compromise the learning opportunities provided to University of Toronto undergraduates who are on the service. Elective clerks have usually chosen a particular staff member with whom they will work.

2. HOSPITAL AND UNIVERSITY ROUNDS

- Friday mornings are always devoted to some type of formal teaching rounds. On the third Friday of each month, from 0745-0845, there are combined Spine Rounds with the Orthopedic service. The Neurosurgical and Orthopedic services alternate responsibility for presenting at these case-based interactive rounds, held in the 2E Assembly Hall. A schedule of Friday morning rounds will be circulated in advance for each 6-month teaching block.
- University Department of Surgery Rounds are held on the first Friday of each month, usually at Mt Sinai Hospital, 0730-0830 hours.
- Grand Surgical Rounds or Trauma Rounds are held on the second Friday of each month, from 0745-0845 hours, in the Paul Marshall Lecture Theatre of St Michael's Hospital (located at the Queen Street entrance).
- About once per month there are Morbidity and Mortality Rounds from 0745-0845 on Friday mornings in the 9V classroom. The Senior Resident is responsible for keeping a log of deaths on the service and significant morbidity. The Senior Resident usually conducts these rounds, emphasizing those cases of educational value, or those where preventable factors may have played a role in patient morbidity or mortality.
- Any remaining Friday mornings are devoted to Neurosurgery Rounds from 0745-0845 in the 9V classroom. The Senior Resident will delegate the presentation of current cases of interest. Open and frank discussion is encouraged. Junior Residents should be encouraged to present at these and any of the other rounds as well.
- During the academic year, combined Neurology/ Neurosurgery Rounds are held in the 7B classroom from 1630-1730 on Monday afternoons. The rounds are assigned to a particular staff person for each date, but when they are assigned to a Neurosurgeon, the house staff are often called on to participate in or totally conduct the round. The Senior Resident is generally expected to assume the role of coordinator, but may orchestrate Junior Resident participation as well.
- On Thursday afternoons from 1700-1800, Neurosurgery case discussions will be held for the house staff in the 9V conference room. The staff surgeon on call for the following weekend will be in charge of these rounds, but may ask the house staff to bring cases for discussion or prepare material for these sessions. Frequently the exact time of this meeting is changed for logistical reasons.
- Neuroradiology Rounds are held Wednesdays from 0800-0900 on 3Victoria Wing in one of the classrooms. As many Residents as possible should attend, but at least two house staff will be needed in the OR, usually Fellows.

3. UNIVERSITY DIVISIONAL ROUNDS

- Neurosurgery resident teaching seminars are generally held Friday mornings at the Hospital for Sick Children from 0900 – 1200. Neurosurgery resident attendance is mandatory. The Fellows, or if necessary the staff surgeon on call will cover to permit all Neurosurgical Residents to attend. During the academic year, these rounds are supplanted once per month by City-wide Divisional Rounds, held at different hospitals in rotation.
- On Monday evenings, about four times in the academic year, Journal Club is held, at the home of one of the staff, for all Neurosurgical Residents. Arrangements should be made for covering the service so that all our Residents are able to attend these sessions, the purpose of which is to acquire skill in critical evaluation of relevant medical literature.
- Each academic year there are several named lectureships, including the Keith, Botterell and Hendricks Lectureships, which the Neurosurgical Residents are expected to attend. The weekly seminars are generally not held on weeks during which such a lectureship program is scheduled.

4. UNIVERSITY DEPARTMENTAL ROUNDS

- On Tuesday mornings there are Principles of Surgery Lectures held centrally at TTH/ TGH, and Surgical Skills Sessions held at the Mt. Sinai Hospital in the Surgical Skills Laboratory. All Junior Surgical Residents, in any Division, are expected to attend these seminars and skill sessions for the first two years of training, and thereafter until they have passed the Royal College Principles of Surgery Examination. All surgical trainees are similarly expected to write the University of Toronto POS MCQ examinations each year until they have passed the RCSC POS exam.

5. ROUNDS FOR RESIDENTS ROTATING TO NEUROSURGERY

- Various residents from other Divisions/Departments may from time to time rotate to our service. If they have specific seminars or other formal educational programs connected with their specialty, they should be free to attend these. In turn, they will cover our trainees while they attend the specific neurosurgical educational sessions outlined above.

6. SPONSORSHIP TO ATTEND NEUROSURGICAL MEETINGS

- The Division of Neurosurgery at St. Michael's Hospital will adhere to the guidelines for such sponsorship articulated in a policy circulated to our residents from the Division Chair's office. Please present your requests to the Head of the Division well in advance of the anticipated meeting for which you are requesting sponsorship, and be prepared to submit original receipts for expenses claimed.

STAFF CALL SCHEDULE

Generally, the staff take call for one day at a time, 0800 to 0800 hours. The weekends are covered by one staff surgeon, from 0800 Friday to 0800 the following Monday. The schedule is prepared by the Division Head for three-month blocks. The staff surgeon on call will accept all undirected in-hospital or outside referrals, and will generally be responsible for all staff-level decisions on weekends. The staff surgeon on call will be responsible for the care of the patients of any other staff member who is out-of-town or otherwise unavailable, unless a specific assignment of this responsibility has been pre-arranged.

RESIDENT CALL SCHEDULE

This schedule is prepared by the Senior Resident, one month at a time, and is typed and circulated by the Division Head's office. Many factors must be considered in preparing this schedule, and it is not an easy task. However, once it has been completed and submitted, *subsequent scheduling changes should be kept to an absolute minimum*. Last-minute changes can result in communication breakdown and patient care deficiencies that are unacceptable in a specialty such as ours.

RESIDENT VACATION TIME

Holidays are important to the maintenance of some semblance of balance in the demanding life of a neurosurgical resident. To avoid imposing undue strain on house staff left to cover during a Resident's vacation, every effort should be made to ensure that holidays are taken when the service has an extra member, often a PGY1 or PGY2 from another service. The Senior Resident is responsible for overseeing this, and for ensuring that holidays are not left to the end of the rotation, when they must be taken without consideration for the best overall interests of all concerned. It is expected that the Clinical Fellows will fill in as required to permit vacations, and with adequate notification, the Division Head will arrange to hire outside residents or physicians to provide coverage.

PERFORMANCE EVALUATIONS

The Division Head is responsible for completing all evaluations, and for discussing their content with the trainee. However, all evaluations in our Division are based on input from all the staff surgeons, as well as relevant comments from other staff physicians and other health care professionals who may have had interactions with the trainee.

For six-month rotations, there will be a final interview, at which the Division Head and the resident will discuss the written evaluation. For all rotations of three months duration or longer, the Division Head will meet with each trainee to discuss his/ her progress half way through the time, in an informal manner.

FREQUENTLY USED TELEPHONE NUMBERS

Surgeon	Office
Tucker	864-5396
Muller	864-5590
Moulton	864-5703
Cusimano	864-6048
Perrin	864-5503
Smyth	864-5504