

**University of Utah Plastic Surgery Residency  
Goals & Objectives  
South Jordan Service**

The junior plastic surgery resident is trained during the first three years in the evaluation and treatment of patients needing breast, trunk/abdominal reconstruction. Further, this month will provide the junior plastic surgery residents the knowledge and tools required to evaluate and treat general plastic surgery problems including pressure sores, maxillofacial trauma, abdominal and chest wall reconstruction and wound care. Principles and practice of aesthetic surgery will also be taught. The University 2 Service is comprised of Dr. Courtney Crombie and Dr. Dana Johns while at the South Jordan facility. Graduated responsibility for the management and surgical care of these patients will be provided. This will include outpatient evaluation and follow-up care, participation in the reconstruction of the breast, head and neck, and trunk.

The senior resident should have a working knowledge of the service and thus will be an integral member contributing to the diagnosis, assessment, surgical plan and care of the patient. Further a disposition for each patient will be formulated by the senior resident with faculty oversight. The senior resident should also gain the skills necessary to understand and perform the index operations that the South Jordan service faculty engages in. A thorough knowledge base of pertinent anatomy, reconstruction and trunk/chest wall and breast reconstruction, maxillofacial trauma and aesthetic surgery should be developed by the senior resident and the assessment of that knowledge will be based on the six clinical competencies.

The chief resident should demonstrate competence in breast and trunk/chest wall reconstruction, maxillofacial trauma and aesthetic surgery. With supervision, the chief resident should be able to diagnose, plan, execute and care for all the patients on the South Jordan service. Upon completion of the rotation, the chief resident should be able to demonstrate the skills and techniques required to practice safely and independently based upon the six clinical competencies.

<b>GOALS &amp; OBJECTIVES</b>	<b>COMPETENCY</b>
The resident will achieve a detailed knowledge of the evaluation and management of patients requiring head and neck reconstruction after tumor extirpation, chest wall reconstruction, skin cancer excision, and general reconstruction	MK,PC
Recite the principles of and infiltration techniques of local anesthesia	MK,PC

used in the head and neck	
Discuss the options for reconstruction of complex head and neck extirpative defects as it relates to form and function	MK,PC
Recite the basic principles of medical and surgical management of common acute traumatic trunk and breast injuries including sternal infections	MK,PC
Recite the etiology and nonsurgical management of pressure sore ulcers (including preventative measures)	MK,PC
Recite a detailed knowledge of surgical aspects of pressure sore reconstruction	MK,PC
Recite the principles for extirpation and reconstruction of skin malignancies.	MK,PC
The resident will provide patient care that is compassionate, appropriate, and effective for the treatment of reconstructive surgery	MK,PC
Participate with graduated independence in the surgical management of thoracic and abdominal wall reconstruction (6)	MK,PC
Participate in surgical and nonsurgical management of pressure sores (7)	MK,PC
Evaluate and perform with graduated responsibility local, regional and distant tissue transfers with appropriate supervision for level of residency and skill set	MK,PC
Participate in treatment of patients with malignancy of the trunk, thorax and abdominal wall (8)	MK,PC
Demonstrate knowledge of the anatomy, physiology, and embryology of the trunk and breast, and apply this knowledge to the comprehensive management of a variety of problems in these anatomic areas (10)	MK,PC
Demonstrate knowledge of the biologic behavior, histology, physiology and management principles of benign and malignant processes of the breast, and carry out comprehensive medical and surgical management of such problems (11)	MK,PC
Demonstrate knowledge of management of problems of the breast and trunk, and carry out surgical management including reconstruction for such disorders (12)	MK,PC
Perform reconstructive surgery on the trunk, breast, and abdomen with increasing independence and surgical responsibility	MK,PC
Participate in the surgical management of thoracic and abdominal wall reconstruction with graduated independence (13)	MK,PC
Participate in the full spectrum of reconstructive surgery after breast carcinoma, including procedures on the opposite breast; participate in long-term treatment and follow-up of these patients (15)	MK,PC

Participate in the surgical care of common developmental breast anomalies, with graduated surgical independence, including amastia, Poland's syndrome, asymmetry, ectopic mammary tissue, virginal hypertrophy, and gynecomastia	MK,PC
Participate in the evaluation and treatment of patients with post surgical breast deformities	MK,PC
Be familiar with aesthetic surgery of the trunk and breast, and undertake comprehensive surgical management of such diagnoses (22)	MK,PC
Be familiar with aesthetic diagnoses of the head and neck and understand the principles of surgical treatment of such problems (23)	MK,PC
With graduated independence, perform various surgical procedures related to aesthetic surgery (24)	MK,PC
To become familiar with the mechanisms of traumatic head and neck injuries, understand the diagnostic techniques and therapeutic options for such problems, and perform complete management of traumatic injuries of the head and neck (3)	MK,PC
Chief residents, with supervision, assume control of aesthetic patients through their work with attending plastic surgeons and with the residents' cosmetic clinic	MK,PC
The resident will investigate and evaluate his or her own patient care practices, appraise and assimilate scientific evidence, and improve patient care practices	PBLI
Use information technology to prepare for cases, bringing to the OR the knowledge of current modalities of care and the scientific evidence for that care	PBLI
Routinely analyze the effectiveness of own practices in caring for surgery patients	PBLI
Improve own practices in the care of patients by integrating appropriately gathered data and feedback	PBLI
Function independently with graduated advancement and appropriate faculty supervision	PBLI
Educate medical students and other healthcare professionals	PBLI
Use library sources to perform research and perform literature searches	PBLI
Understand the principles of clinical research and the application of biostatistics	PBLI
The resident will demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and professional associates	ICS
Demonstrate compassion for patients and families	ICS
Provide adequate counseling and informed consent to patients	ICS

Listen to patients and their families	ICS
Assimilate data and information provided by other members of the health care team	ICS
Chart and record accurate information	ICS
Educate patients and families in post operative and rehabilitative strategies for patients	ICS
The resident will demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value	SBP
Advocate for patients within the health care system	SBP
Refer patients to the appropriate practitioners and agencies	SBP
Facilitate the timely discharge of same day surgery patients	SBP
Work with primary care physicians, and other consultants, toward the safe administration of anesthesia	SBP
Demonstrate knowledge of cost-effective surgery	SBP
Facilitate the timely discharge of patients undergoing reconstructive plastic surgery	SBP
The resident will demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population	P
Develop a sensitivity of the unique stresses placed on families under care for surgical diagnoses	P
Exhibit an unselfish regard for the welfare of surgical patients	P
Demonstrate firm adherence to a code of moral and ethical values	P
Be respectful to patients and their families especially in times of stress to the family unit.	P
Respect and appropriately integrates other members of the health care team	P
Provide appropriately prompt consultations when requested	P
Demonstrate sensitivity to individual patient's profession, life goals, and cultural background as they apply to health care	P
Understand the concepts of autonomy, beneficence, nonmaleficence, justice, and respect for life	P
Maintain patient confidentiality	P
Be reliable, punctual and accountable for own actions in the OR and outpatient clinic	P

