Ambulatory Resident Training Policy
Effective from 7.28.09

ACGME PROGRAM REQUIREMENTS

The Residency Review Committee (RRC) for General Surgery establishes educational and training requirements for the residency programs. The following excerpts from the Program Requirements for Residency Education in General Surgery pertain to ambulatory training:

1. (Section V.B.4):
   “A resident is considered to be the surgeon when he or she can document a significant role in the following aspects of management: determination or confirmation of the diagnosis, provision of preoperative care, selection and accomplishment of the appropriate operative procedure, direction of the postoperative care, and accomplishment of sufficient follow-up to be acquainted with both the course of the disease and the outcome of its treatment. Participation in the operation only, without preoperative and postoperative care, is inadequate.”

2. (Section V.D. Outpatient Responsibilities):
   “To be adequate, a program must document both inpatient and outpatient activities. Outpatient activities constitute an essential component of adequate experience in continuity of patient care. These activities should be conducted in such a way that the resident has an opportunity to examine patients preoperatively, has ample opportunity to consult with the attending surgeon regarding operative care, and has an opportunity to participate in the operation and in the immediate postoperative care until release from the facility. To participate in post hospital care, the resident has the responsibility for seeing patients personally in an outpatient setting and consulting with the attending surgeon regarding follow-up care.”

We will comply fully with all program requirements. Therefore, in addition to the customary inpatient assignments on all rotations residents will:

- Spend at least one half-days [Four (4) hours] each week in the outpatient setting for rotations that pertain to principal components (diseases of the head and neck, breast, skin and soft tissues, alimentary tract, abdomen, vascular system, endocrine system, the comprehensive management of trauma and emergency operations, and surgical critical care). Such rotations include: Mt. Sinai Trauma, NMH Breast Apprenticeship, NMH Colorectal Apprenticeship, NMH Endocrine Apprenticeship, NMH GI Team, NMH GS Apprenticeship (Hartz), NMH GS Apprenticeship (Mueller), NMH ICU, NMH Surgical Oncology, NMH Trauma/Emergency Surgery, NMH Vascular, VA General, VA Vascular.

- Spend at least one half-day [four (4) hours] each week in the outpatient setting for rotations that pertain to secondary components (cardiothoracic surgery, pediatric surgery, plastic surgery, burn management, transplant surgery, endoscopy, urology, gynecology, neurosurgery, orthopedics, and anesthesiology). Such rotations include: Pediatrics, NMH Anesthesia, NMH Cardiothoracic, NMH ER, NMH Orthopedics, NMH Otolaryngology, NMH Plastic, NMH Organ Transplantation, NMH Urology, VA Urology.
- Be evaluated on attendance and participation in surgeon’s office hours and hospital clinics at the regular 6-month Resident Evaluation Committee Meeting.