Vanderbilt University Medical Center: Elective Surgery Schedule





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*TheCaseSolutions.com My Summer Schedule...

My Summer Schedule...

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SSCA vs Sub-Internship 📋

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 Must be either Adult Nedicine sub-specialty UR Adult Surgery sub-

specially Off Adult Burgery sub-specially - Assignments to be completed - Evaluation form at end - Exam upon return to RCSI - NOT the come as a USA "Sub-t" - NO different than any other elective

No different Time ray.

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w Do I Set One Up?

SPECIFIC DATES - ROSI will NOT be flexible



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LISTENING!

BEST OF LUCK WITH HUNTING

manthaknight@rcsi.ie

Elective #1 - Hepatobiliary Pancreatic Oncology & Minimally-Invasive Surgery @ University of Tor

- 5am-7pm
- 3 Med Students, 1 Junior, 1 Senior Resident, 1 Attending 1/2 day clinics with 65+ patients Teaching in OR
- +/- 10 patients on service
 5am Pre-rounds Gam - Rounds with the junior and
- 7am Paper rounds with attending · All ward work done on morning rounds

 ORs everyday TheCaseSolutions.com

- 6:30am-6pm
- +++65 patients on service, +/- off-service patients
 3 Med students, 4 Junior Residents, 2 Senior Residents, 2 PAs
- Call shifts 1 in 3.
- 6:30am Junior residents/Med students pre-round (5-8 pts each)
- 8am Entire team rounds
- ORs very sporadic
- 75% time spent in Emergency Room with consults

Resuscitations TheCaseSolutions.com

5pm - rounds with entire team

Endoscopy 1x/week
 1 in 7 call shifts

Resuscitations

ATLS training

Attendings switch every week

Formal teaching by attendings on ward

Physically/mentally exhausting

Hospital politics

Incredibly rewarding when patients recover

- · 4 Med Students, 2 Junior Residents, 4 Fellows, MANY attendings,
- army of PAs NO WARD WORK
- ORs sporadic & LONG
 On call every night
- VERY active role in procurements/transplants
 Donor/recipient selection committee meetings
 Complication rounds, M&Ms, journal club, research seminars







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Studied for

- 6:30am-5:30nm

- 3 Med students, 3 Junior Residents, 2 Senior Residents
- Attendings switch every week
 1 in 5 call
- 1 in 5 cell
 6:30 km Junioru/SenkosiMed students pre-round
 5 km Round with attending
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Elective #5 - Pediatric Surgical Oncology @ Tennessee



Vanderbilt University Medical Center: Elective Surgery Schedule





General Tips/Tricks



- You will not be a superstar... at first
- You may hate it... at first
- Ward smarts way below average
- Practical skills average Knowledge - above average
- Surgery = adult version of high school
- · Textbooks: Surgical Recall, SC2 Surgery text, Clinical Surgery, Grey's Anatomy flashcards OR Essential
- Eat, sleep, and pee when you can... seriously
- "...steel bladder, cast-iron stomach, heart of gold."
- · Working with other IMGs is difficult... make the best of · Ask the CMGs for help when you need it!
- Take each surgeon's personality in stride
- The "perfect med student"... never pimps, never complains, never lies, KNOWS what needs to be done,

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My Summer Schedule...



- Finished SC1 June 16th
- Elective #1 Hepatobiliary and Pancreatic Oncology @ University of Toronto
- · June 20th-July 1st
- Elective #2 Trauma Surgery @ University of Manitoba
- Elective #3 Solid Organ Transplant @ Icahn School of Medicine at Mount Sinai (Sub-I) · August 1st-26th
- Step 2CK @ Philadelphia August 27th
- Elective #4 Acute Care Service @ University of Manitoba August 29th-September 23rd
- NAC OSCE @ Ottawa · September 17th
- Medical rotation @ Beaumont Hospital
- September 26th-October 21st Elective #4 Pediatric Surgical Oncology @ Tennessee

SSCA vs Sub-Internship

October 24th-November 19th TheCaseSolutions.c

Elective #1 - Hepatobiliary Pancreatic Oncology & Minimally-Invasive Surgery @ University of Toronto

- 5am-7pm
- · 3 Med Students, 1 Junior, 1 Senior Resident, 1 Attending
- +/- 10 patients on service
- · 5am Pre-rounds
- · 6am Rounds with the junior and senior resident
- 7am Paper rounds with attending
- · All ward work done on morning rounds
- ORs everyday

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Elective #2 - Trauma Surgery @ University of Manitoba

- 6:30am-6pm
- +/-65 patients on service, +/- off-service patients
- · 3 Med students, 4 Junior Residents, 2 Senior Residents, 2 PAs
- · Call shifts 1 in 3
- 6:30am Junior residents/Med students pre-round (5-8 pts each)
- · 8am Entire team rounds
- · 30+ consults/day
- · ORs very sporadic
- 75% time spent in Emergency Room with consults

- Resuscitations ATLS training
- · Attendings switch every week
- · Formal teaching by attendings on ward
- Hospital politics

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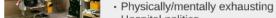
5pm - rounds with entire team

1/2 day clinics with 65+ patients

· Teaching in OR

· 1 in 7 call shifts

Endoscopy 1x/week



General Tips/Tricks



- You will not be a superstar... at first
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- Knowledge above average
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- Eat, sleep, and pee when you can... seriously
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- Working with other IMGs is difficult... make the best of the situation
- · Ask the CMGs for help when you need it!
- Take each surgeon's personality in stride
- The "perfect med student"... never pimps, never complains, never lies, KNOWS what needs to be done, loves the OR

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Elective # & Minima

- 5am-7p
- 3 Med S
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- +/- 10 p
- 5am P
- 6am R
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- 7am P
- All ward
- ORs ev

Elective

• 6:30am-

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- Elective #1 Hepatobiliary and Pancreatic Oncology @ University of Toronto
 - June 20th-July 1st
- Elective #2 Trauma Surgery @ University of Manitoba
 - July 4th-30th
- Elective #3 Solid Organ Transplant @ Icahn School of Medicine at Mount Sinai (Sub-I)
 - · August 1st-26th
- Step 2CK @ Philadelphia
 - August 27th
- Elective #4 Acute Care Service @ University of Manitoba
 - August 29th-September 23rd
- NAC OSCE @ Ottawa
 - · September 17th
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Elective #1 - Hepatobiliary Pancreatic Oncology & Minimally-Invasive Surgery @ University of Toronto

- 5am-7pm
- 3 Med Students, 1 Junior, 1 Senior Resident, 1 Attending
- +/- 10 patients on service
- 5am Pre-rounds
- 6am Rounds with the junior and senior resident
- 7am Paper rounds with attending
- All ward work done on morning rounds
- ORs everyday

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- 5pm rounds with entire team
- 1/2 day clinics with 65+ patients
- Teaching in OR
- Endoscopy 1x/week

• 1 in 7 call shifts



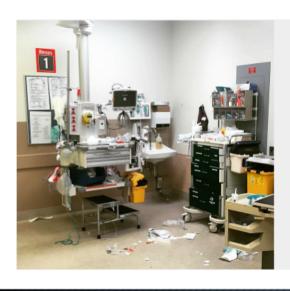
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- 6:30am-6pm
- +/-65 patients on service, +/- off-service patients

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- 8am Entire team rounds
- 30+ consults/day
- ORs very sporadic
- 75% time spent in Emergency Room with consults



Resuscitations

- ATLS training
- Attendings switch every week
- Formal teaching by attendings on ward
- Physically/mentally exhausting
- Hospital politics
- Incredibly rewarding when patients recover

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Elective #3 - Solid Organ Transplant Surgery @ Icahn At Mount Sinai

• 6am-3pm

Studied for Step 2C

- +/- 20 patients on service
- 4 Med Students, 2 Junior Residents, 4 Fellows, MANY attendings, army of PAs
- NO WARD WORK
- ORs sporadic & LONG
- On call every night
- VERY active role in procurements/transplants
- Donor/recipient selection committee meetings
- Complication rounds, M&Ms, journal club, research seminars







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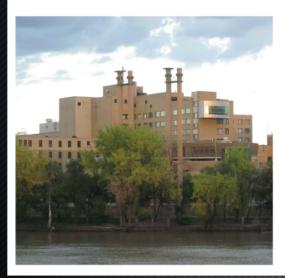






Elective #4 - Acute Care Service @ University of Manitoba

- 6:30am-5:30pm
- +/- 50 patients on service
- 3 Med students, 3 Junior Residents, 2 Senior Residents
- Attendings switch every week
- 1 in 5 call



- 6:30am Juniors/Seniors/Med students pre-round
- 8am Round with attending
- +/- 10 consults /day
- Approx 4 ORs/day
- · Nighttime ORs to clear board
- LOTS of ward work
- Formal teaching from retired surgeon 1x/week
- Informal teaching sessions with attendings
- Complications rounds 1x/week, list management 1x/week

Studied for NAC OSCE

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SSCA vs Sub-Internship



Sub-Internship

- Must be either Adult Medicine subspecialty OR Adult Surgery subspecialty
- Assignments to be completed
- · Evaluation form at end
- Exam upon return to RCSI
- NOT the same as a USA "Sub-I"
- NO different than any other elective

SSCA

- Any specialty
- Not marked, just completion
- Can do 2 weeks and 2 weeks on different sub-specialties

NO difference in setting them up for all intensive purposes!





Elective:

- 6am-3
- +/- 20
- 4 Med army
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- VERY
- Donor
- Comp