Hospital for Special Surgery

Department of Anesthesiology

General Information for Rotating Residents

I. Introduction

Welcome to your anesthesia rotation at Hospital for Special Surgery (HSS). You will find that the practice of anesthesia at HSS is unique, challenging and rewarding. This rotation is designed to provide you with an exceptional experience in regional anesthesia, major spine surgery, acute pain medicine, and care of post surgical and seriously ill patients in our PACU, Step Down Unit (SDU) and Orthopedic Special Care Unit (OSCU). All of this is incorporated within a private practice environment.

The Department of Anesthesiology at Hospital for Special Surgery is Attending-administered and supervised. We believe in a "hands-on" approach to patient care. Therefore, you will be supervised performing most aspects of patient care. We work as a team and communication is what makes this possible. If, at any time, you are not sure or are concerned about any aspect of patient care, please consult your supervising Attending. We are there to take part in the decision process and to assist you.

Enclosed in this packet is an outline of the general responsibilities and duties expected of you during your rotation.

II. Clinical Responsibilities

Preoperative Responsibilities

- A. Most patients are admitted on the day of surgery through the Same Day Surgery Unit (4th Floor), through the Ambulatory Surgery Unit (9th Floor), or to the Hand and Foot Center (1st Floor). You should review your patients' medical records prior to seeing them
- B. In-Patients should be seen the night before surgery.
- C. During your preoperative visit:
 - 1. Discuss the anesthetic plan with the patient
 - 2. Obtain the patient's signature on the consent form
 - 3. Document the preoperative evaluation and anesthetic plan
 - 4. If indicated, enter a preoperative medication order
 - a. Belladonna agents like Atropine and Glycopyrrolate are usually avoided for patients scheduled to have a regional anesthetic but may be used for a general anesthetic
 - b. The choice of preoperative medication must be discussed with the Attending Anesthesiologist
 - 5. All patients, including those seen by Residents, are visited by the Attending Anesthesiologist, and should never be transferred into the OR until approved for transfer by the Attending Anesthesiologist.
- 6. From the first day of the rotation onward, Residents are asked to "preop" their first assigned patient for the following OR day and review their anesthetic plan with the Attending Staff Member, with whom they will be working on the following day Residents will receive contact information for all Attending Staff prior to starting the rotation.

Intraoperative Responsibilities

- A. Residents should have their rooms set up <u>before</u> the morning conferences (see "Academic Responsibilities").
- B. The OR starts at 8:00 AM Monday to Wednesday, and at 8:30 AM on Thursday and Friday. This means that the full preoperative evaluation must be complete and the patient should be in the room by the prescribed "start time".
- C. Residents are responsible for having formulated an anesthetic plan for all patients which must be first be approved by the Attending Anesthesiologist on either the previous OR day for the first patient, or before the patient is transferred to the OR.
- D. Residents are responsible for having a working knowledge of regional blocks and the appropriate anatomy.
- E. All changes in the patient's care have to be communicated to the Attending Anesthesiologist
- F. At the end of the case, Residents are responsible for signing out the patient to the the PACU Staff.. You must stay with the patient until he/she is stable and the responsibility for the patient has been transferred to the appropriate staff.

Postoperative Responsibilities

- A. Residents are responsible for seeing their patients postoperatively within 48 hours and documenting a postoperative check.
- B. If there are postoperative complications or concerns, they must be communicated to the Attending Anesthesiologist

EPIC Training

The Hospital converted to an EMR in 2016. All Residents rotating to HSS for the first time will receive EPIC training in a classroom setting on the first day of their rotation following Dept. Orientation (at approximately 7:30 AM). They will also be required to complete some online EPIC training modules before the rotation starts.

III. Academic Responsibilities

There are usually three academic programs weekly for residents: Mondays, Thursdays and select Fridays. Residents are expected to attend all AM Academic Programs unless they are Post Call, or on vacation.

Journal Club/Case Conferences/Research Update/Complications Conference

- A. The Journal Club usually convenes on Monday morning at 7:00 AM if 1 article is scheduled for presentation. or at 6:45 AM, if 2 articles are scheduled for presentation. All Residents are expected to read the articles before the Journal Club date. They are usually emailed to the Department Staff and the Residents 4-5 days before the presentation date.
- B. CA3 Residents will be assigned a date during their rotation to select an article and present it at Journal Club. They will also be assigned a Faculty Member who will guide them in their preparation. Residents should submit their article to the Anesthesia Office x1036, no later than 9:00 AM on the Wednesday morning preceding their Monday presentation (or 4-5 days before any other weekday when the Journal Club is scheduled). A brief power point presentation of approximately 10 minutes summarizing your chosen article should be prepared which features the study hypothesis, methodology, results, discussion, evaluation of study design, and assessment of impact of study on future practice.
- C. All Journal Club Programs are CME-accredited, thus the presenting Residents will be asked to sign a disclosure form the week before their Journal Club presentation, in the Anesthesia Office, and they will be asked to present a disclosure slide prior to their presentation.
- D. On occasional Mondays, there will be a Case Conference, Research Update or Complications Conference in place of Journal Club.

HSS CME Grand Rounds Lecture Series

The Department of Anesthesiology's Grand Rounds are an accredited CME Program and all Residents are expected to attend these lectures. Lectures are held on Thursday mornings at 7:00 AM in the hospital's Main Conference Center on the second floor or remotely on Microsoft Teams.

Friday Teaching Conferences

Teaching Conferences are held on select Friday morning at 7:15 AM in the 11 East Conference Room or remotely on Microsoft Teams. These conferences are designed and prepared specifically for Fellows and Residents, and attendance and participation is mandatory.

For specific information on all conferences, including remote access or locations (which may vary due to hospital renovations or preemptive meetings), please contact the Department's Administrative Director of Education, Mary Hargett, at x1793.

IV. Call Duties

- A. All residents rotating at HSS will take weekend and Saturday call as per home program agreement. Cornell Chief Residents will make the monthly schedules.
- B. Following morning rounds, the Call Resident is excused from clinical duty for a period of no less than 24 hours.
- C. Residents are responsible for all the patients in the PACU, OSCU, SDU, and occasionally patients on the Acute Pain Service.
- D. The Call Resident rounds with the PACU Attending, Overnight Attending, and PACU Staff at 4:30 PM the call night. The Call Resident should be familiar with the patient, the surgical procedure, any complications, and the plan for each patient.
- E. The SDU is a unit for sub-acute patients. Although not as active as the PACU or OSCU, the Call Resident must round in the SDU, however, a note is only required for those patients requiring specific interventions.
- F. While on-call, you might be responsible for patients on the Acute Pain Service (see "A Clinician's Guide to the Pain Management Services at Hospital for Special Surgery" for further information.)
- G. Call Residents are entitled to complimentary dinner at the Belaire Café (on 71st Street) on weekdays. Vouchers with a value of \$12.00 are issued on the first day of your rotation. On weekends, Call Residents should purchase their own meals and submit the <u>original</u> receipts to the Academic Training Office for reimbursemen. The maximum amount allowed per weekend day for meals is \$25.00. All receipts for deliveries must indicate that delivery was made to the HSS address (535 East 70th Street)
- H. Every patient who is "active" in the PACU or OSCU requires a note. Discuss with PACU Attending what constitutes "Active." Patients are to be discharged from the PACU only after consulting with the Attending Anesthesiologist. You are responsible for assessing all laboratory data (including ECG's) ordered in the PACU, and discussing any abnormality with the Attending Anesthesiologist. Patients who are overnight in the PACU solely because there are no floor beds available do not require a PACU Resident note.
- I. Residents may consult at any time with the Attending Anesthesiologist on-call. The telephone extension for the Attending On-Call room is X1533.

- J. When asked to transfer a patient to the PACU or OSCU from the floor, ask the Attending Physician to call the Attending Anesthesiologist On-Call. Always notifythe Attending Anesthesiologist prior to transferring any patient to the PACU.
- K. Whenever you are contacted regarding any patient's condition, you are required to see that patient immediately (or as soon as feasible if you are attending to another patient) and document your assessment.
- L. The Call Room is located on the 4th floor outside the PACU and must be kept locked at all times.

If you are ill or an emergency situation arises which prevents you from reporting for duty or may delay your punctual arrival, please text the AIC, your attending and call the OR Main Podium telephone number -212.606.1400 before 7:00 AM on the day when you are scheduled to report and will be unable to do so. Please also email Mary Hargett.

Scrubs

HSS uses an automated scrub-dispensing system. All residents will be asked for their scrub size in order to create a scrub account. Once an account is created, two sets of scrubs will be credited. Rotators are responsible for returning all scrubs at the end of their rotation. The scrub account will remain active until July 1st of the year you complete your residency. Please make careful note of your scrub account information when it is given to you.

If you have any questions, at any time, regarding your responsibilities at HSS during your rotation, please speak to the Director of Rotating Residents – Dr. Stephanie Cheng. Please contact the Department's Administrative Director of Education and Clinical Initiatives, Mary Hargett, for any logistical issues.