LEARNING OBJECTIVES: SI SURGERY VASCULAR SURGERY SUBINTERNSHIP

(Revised 2-23-2025)

Overarching Goals of Curriculum	st	jectives: By the end of the rotation, udents will be expected to:	Where/how taught	Taught by	How student's achievement of objective is assessed	How feedback is given	Quantity target
1, 2, 3, 4, 5, 6	needed for the a history in the a. The s are in	Cather the important information that is Vascular Surgery Service history and complete e medical record for patients. It tudent should name all the routine questions that volved in taking a history of the vascular system thy they are being asked.	Outpatient clinic, Inpatient floors, Consults in the ED and other hospital units	Attending, Senior resident Fellow	Observation and supervised history taking	Mid-point feedback by Elective Director, Chief residents or fellows	In-patient:10 Outpatient:10
1, 2, 3, 4, 5	examination for student should physical exam attending or reare a. The substitute b. The substitute b. The substitute physical examination for students and the substitute physical examination for substitute physi	tudent should know how to differentiate carotid , peripheral pulse exam, use of hand-held ler, abdominal aortic palpation, description of heral wounds to differentiate those caused by ha or arterial vs venous insufficiency. tudent should be able to explain each part of the cal examination of the vascular system, why it is performed and what abnormalities are being	As above	As above	Observation and supervised physical examination	Mid-point feedback by Elective Director, Chief residents or fellows	In-patient:10 Outpatient:10
1, 2, 3, 4, 5, 6, 7, 8	understand the vascular condi Ultrasound stu a. Know proce caroti threat abdor venou b. Interp clinic recore c. Unde	diagnostic and treatment: Recognize and pertinent information regarding common tions, also develop the ability to interpret dies, CTA, and angiograms. For examples: the indications for surgery and relevant dural steps for common procedures: such as distensis, claudication, acute and chronic limb rening ischemia, chronic mesenteric ischemia, and minal aortic aneurysms, dialysis access, and is disease. The basic vascular testing and incorporate into all context (e.g., Doppler ultrasound, pulse volume dings, CTA, MRA, conventional arteriography). The rentions, and open surgery for various conditions are natural history of the disease.	As above	As above	As above	Mid-point feedback by Elective Director, Chief residents or fellows	In-patient:10 Outpatient:10

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Overarching Goals of Curriculum	Elective objectives: By the end of the rotation, students will be expected to:	Where/how taught	Taught by	How student's achievement of objective is assessed	How feedback is given	Quantity target
4	 4. Procedural skills: Assist and sometimes first assist on open surgical cases, perform basic wound closures, assist on endovascular cases and learn wire and catheter manipulation. a. The student should know the key indications for the procedure. b. The student should be observed and get feedback on the performance of the procedure on at least one occasion. c. Additional skills to include basic suturing, tissue handling, and knot tying. 	Clinic, hospital units, OR	As above	Observation and supervised participation in the Operating room	Ongoing feedback during observation	10 operations at least
4, 5, 6	 5. Attitude: Demonstrate professional responsibility in working as a team member with other members of the vascular surgery team, including patients and families. a. The student should exhibit sensitivity to the psychosocial issues faced by vascular patients and their families (particularly recognizing the issues that impact on functional status and quality of life). b. The student should exhibit honesty, accuracy and integrity in all interactions with patients, families, colleagues and others. 	All clinical settings		Observation	Mid-point feedback as necessary; summary feedack	
5, 6, 8	 6. Career/context: Know the training/career pathway for Vascular Surgery as a specialty (including Fellowship training and integrated vascular surgery residencies). a. Know the aspects of both career satisfaction and career challenges in this specialty. b. Know key roles that the specialty plays in the health care system. 	Clinic, hospital units, OR	As above			

Logistics of the SI: (4 weeks)

As of February 2025, the SI will be divided into 2 weeks at SRC campus and 2 weeks at YSC. This rotation will provide broader exposure to various facets of vascular surgery and to the faculty in the division of vascular surgery and endovascular therapy at Yale. The students are expected to participate in patient care on the floors and in the ICU with daily rounding and presentations to the chief residents and the faculty. Every student should round on at least 1 patient on daily basis preferably a patient that they have participated in their respective operations or are expected to be scrubbing on their cases. The student is responsible for the daily note and make sure the orders and plans of care are followed through during the day. Students are expected to participate in seeing consults in the ED and other inpatient units. The rotating student will be assigned to assist on surgeries daily with residents or can be assigned to be first assist depending on the level of the case and availability of other residents. The student will have one dedicated day per week to spend in outpatient clinic preferably with the rotation directors (Dr. Chaar at YSC/ Dr. Tonnessen at SRC). Students are expected to take call one weekend a month and help with rounding, consults and emergency operations. Students will be expected to attend all vascular surgery teaching conferences including Wednesday MM and indication conference, Friday residents teaching conferences, Friday department Grand Rounds and any other division educational activities. The student will prepare a case based on paper based presentation to be presented in the wednesday morning conference on their 3rd or 4th week on service to the division. Students are encouraged to select a topic early in the rotation after discussing with the rotation directors.