RURAL REGIONAL COMMUNITY ANESTHESIA ROTATION
Southwestern Ontario Medicine Education Network (SWOMEN) and the Department of Anesthesia & Perioperative Medicine

Specific Objectives in CanMEDS Format

OVERALL GOALS

In response to a growing demand from the community for specialist physicians in many different disciplines, and a recognition by the RCPSC of the importance of integrating electives in community based medicine into training programs, Western University has established a Southwestern Ontario rural medicine unit and a multi-specialty community training network.

Electives in Community Anesthesia are offered at various sites throughout Southwestern Ontario. The elective is one month in duration, and the main participating sites are St. Thomas, Stratford, and Owen Sound. Other sites can also be arranged.

There are currently eight staff members providing professional services to the following sites: St. Thomas Elgin General Hospital, Tillsonburg Memorial Hospital, Interface (2 sites), Pediatric Dentistry (Dr. Jeff Richmond), the Pain Clinic at the St. Thomas Elgin General Hospital.

This rotation allows residents to experience anesthesia as it is practiced outside of a major teaching hospital. Anesthesia services are provided to the community in a number of settings. A small but efficient suite of operating theatres offers the resident an opportunity to participate in the anesthetic management of patients undergoing a variety of common surgical procedures. Orthopedics, ENT, General Surgery, Ophthalmology, OB-Gyn and Urology form the basis of a typical community case mix comprising patients from a complete spectrum of ages and ASA status.

Opportunities to develop special areas of expertise are presented by a large volume of oral and maxillofacial hypotensive cases and less so with a limited volume of thoracic anesthesia. Pre-operative consultations are done as part of an outpatient clinic. The obstetrical experience will include OB analgesia for labor and delivery, including combined spinal epidural and continuous epidural infusions. Involvement in an informal acute pain service for post-surgical and trauma patients rounds out the continuum of anesthetic care provided and includes the supervision of perioperative neuraxial and peripheral regional anesthesia as well as PCA.

The Department of Anesthesia is actively involved in all ventilated patients in the critical care unit.

Opportunity exists to participate in a chronic pain clinic under the direction of a board certified pain specialist including the assessment and treatment of various somatic and neuropathic pain states. Techniques employed include: analgesic infusions, acupuncture, trigger point...
injections, nerve blocks, stellate ganglion blocks, epidural steroid injections, facet injections, and iv regional bretylium blocks. Ultrasound is utilized when image guidance is required.

Residents self-assign to work with any of the consultant staff representing varied interests, backgrounds and experience, including a mixture of FRCPC, board eligible and CCFP Anesthesia.

The rotation follows the local practice pattern:
- Call is 1 in 5 in house with the next day off, or
- 1 in 5 from home with the expectation of working the following day.

In the past, residents have mainly been PGY-5, but requests for this experience at an earlier stage of training could likely be accommodated.

This is a highly rated elective experience which enables residents at all levels of training to explore an exciting alternative to academic anesthesia practice. Please feel free to contact the SWOMEN Academic Director (Dr. Mark Soderman) or the SWOMEN office for more information about Rotations in Anesthesia.

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Please refer to the following links for further information regarding this opportunity:

SWOMEN Core Electives & Accommodation Policy
http://www.schulich.uwo.ca/swomen/coreelectivestravelpolicy

Core and Electives PGE Expense Form
https://web.schulich.uwo.ca/swomen/forms/index.php?page=coreElectivesExpenses

SWOMEN Conference Funding for Trainees
http://www.schulich.uwo.ca/swomen/confunding4trainees/

SWOMEN Windsor Anesthesia Rotation
http://www.schulich.uwo.ca/swomen/windsoranesthesia
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ROTATION OBJECTIVES
At the completion of training, the resident will have acquired the following competencies and will function effectively as:

Medical Expert/Clinical Decision-Maker
The resident will be able to:
- Demonstrate ability to carry out a directed history and physical as it pertains to anesthesia care.
- Demonstrate knowledge of anatomy, pharmacology and physiology appropriate for training level.
- Demonstrate knowledge of diseases and chronic conditions that may impact anesthesia care.
- Demonstrate skill in airway management and other procedural skills as they may arrive in a given community (such as i.v. access, central lines, arterial lines, spinals and epidurals).

Communicator
The resident will be able to:
- Establish therapeutic relationship with patients and their family.
- Complete timely, accurate and legible documentation.
- Communicate patient summaries concisely to the consultant physician.

Collaborator
The resident will be able to:
- Contribute to the multidisciplinary team in perioperative medicine.

Manager
The resident will be able to:
- Recognize the position of the Anesthesiologist as a resource to a community hospital and anesthesia department.
- Recognize the limits of clinical care which can be provided in the community setting.
Health Advocate

The resident will be able to:

- Understand the differences between academic and community anesthesia practice. Appreciate how these impact the patient and the anesthesiologist.
- Identify areas of challenges in the clinical setting, compare and contrast these between academic and community based practice.

Professional

The resident will be able to:

- Demonstrate honesty and integrity.
- Demonstrate respect for diversity.
- Demonstrate respect for the dignity of patients and fellow health-care workers.
- Demonstrate punctuality and consistent attendance.

Reviewed: July 2012, Dr. Granton