

GENERAL SURGERY CURRICULUM

The general surgery training program at the University of Western Ontario is a five year program. During the PGY1 year, trainees will rotate through four 3 month blocks which will include 24 weeks of general surgery, usually as two, 12 week rotations. A variety of elective times may be selected according to the student's interests and goals. These typically include ER, medicine consult, trauma team, etc. Two training streams are offered (but are not mutually exclusive) based on the trainee's career goals of community or academic surgery. Those wishing to pursue an academic career will be offered 12 months in basic science research with the possibility of obtaining an additional degree. Alternatively the third year can comprise electives or a combination of electives and research.

The community surgery stream permits residents to acquire skills required for a broader practice in general surgery. Electives may be tailored to the needs of the candidate.

The residency program has three components: Core Surgery (PGY1 & 2), Traditional year (PGY3) and senior residency (PGY4 & 5)

Clinical Rotations

PGY-1

- 6 blocks general surgery
- 3 blocks vascular surgery
- 1 block trauma
- 1 block emergency medicine
- 1 block ambulatory general medicine
- 1 block elective

During this time, the PGY-1 "Introduction to Surgery" course is conducted. This is a program with didactic lectures and surgical skill labs, it is designed to prepare junior residents in surgical subspecialties to function with confidence in the operating rooms and write the Surgical Foundations exam in their PGY2 year. All 1st year general surgery residents are excused from their clinical duties to attend this course, which runs for approximately 6 months on Wednesday. Topics include laparoscopic surgery, palliative care, wound healing, surgical knots and sutures, and many more.

PGY-2

- 3 blocks critical care medicine
- 3 blocks gastroenterology
- 3 blocks thoracic
- 1 block research
- 3 blocks electives (eg. ENT, pathology, radiology, community surgery)

PGY-3

This is an elective year, up to 12 months research or surgical electives divided to allow the resident to achieve career goals. Out-of-town or out-of-country electives may occur during this year.

PGY-4

- 7 blocks general surgery
- 3 blocks community surgery
- 3 blocks pediatric surgery

PGY-5

- 13 blocks general surgery

Research

There is an opportunity for full time research within the third year of the general surgery program. An annual Residents' Research Day is held during which work is presented by all postgraduate trainees. An opportunity is available to spend a year or more in the laboratory later in training. It is possible to extend this to get Master level project.

As part of the residency training, residents must produce and present research projects four out of their five years of training. First year residents have the opportunity to attend a two day research course to provide an introduction to clinical research and critical appraisal concepts. Financial support is also provided, upon approval by the Research Coordinator, for travel to peer-reviewed meetings for presentation of research work.

Seminars

A series of seminars are held on Wednesday mornings (8:00 am - 11:00 am), and this time is protected from clinical duties and attendance is mandatory. Based on a 2-year cycle, these seminars cover a broad range of clinical and basic science topics. Speakers are invited from within our own division, and other disciplines. There are additional seminars for core year residents preparing to write the Principles of Surgery exam (all core year residents).

Introduction to Surgery Course: This innovative course is mandatory for PGY-1 residents and involves 8 consecutive Wednesdays. The course consists of lectures and numerous "wet" labs where residents learn surgical techniques in an animal laboratory.

Rural Regional Program

Western has established a rural regional component to its training program and has developed linkages with Windsor, St. Thomas, Stratford, Strathroy and Woodstock. All residents will have the opportunity to participate in community rotations. In the past, these rotations have been highly evaluated and are encouraged by our division. Residents wishing to pursue careers in community surgery will have an opportunity to expand the amount of time spent in the community over the course of residency training.

Assessment and Evaluation

Continuous assessment of resident performance is essential to ensure proper progression through the residency training program. The most important elements of the evaluation process are the ongoing communication between faculty members and residents during their day-to-day work on the wards. Resident evaluations are conducted quarterly based on the Final In-Training Evaluation of the Royal College. Informal evaluations are conducted more frequently. The Canadian Association of General Surgery In-Training Examination is written annually to provide feedback and measure progress. An extensive series of practice oral exams is conducted during the final year to help residents prepare for their Royal College Fellowship Exams. An annual OSCE in the style of the Royal College Oral exam held in April is also part of the ongoing evaluation process.

Additional Information

Rotations can usually be designed to meet the student's needs and goals as there is a wide variety of clinical material and a high yearly case load. Flexibility is a popular feature and strength of the Western program.

The unique combination of the small size of the program with a very large clinical volume allows frequent clinical interaction between staff and residents, and there are many benefits from the consultants and residents coming to know each other well.

The strength of Western's General Surgical Program is the educational experience provided during our teaching rounds and protected academic half-days. Broad clinical experience in all subspecialty areas of general surgery provides the necessary exposure to train excellent surgeons.

Western graduates have an extremely high rate of pass on Royal College examinations, and approximately 75% of our graduates in the last 10 years have obtained national or international fellowships in every area of subspecialty.

Call Requirements

On call ratio is 1 in 4 for senior residents "at home". Junior residents take 1 in 4 to 1 in 6 "in house" calls at Victoria Hospital and University Hospital.

Ratio of Consultants to Residents

The ratio of consultants to residents is on average 2 consultants per team. Each team has a senior and at least one junior resident. Currently we have 34 residents and 21 consultants at Western teaching hospitals.