

## **Rotation Specific Objectives - Community Orthopaedic Surgery**

**Sites:** Brantford, Chatham, Owen Sound and Stratford

The following document is a resource for some of the specific knowledge and skills you should develop during a Community Orthopaedic Surgery rotation. This document is intended to augment but not replace the “Objectives of Training and Specialty Training Requirements in Orthopedic Surgery” and the “Specific Standards of Accreditation for Residency Programs in Orthopedic Surgery”. A copy of these documents is available in your residency handbook and is also available on the royal college website

The resident is expected to be able to describe the rotation specific objectives prior to or at the commencement of the rotation.

It is understood that a residency in Orthopaedics is a continuum. Senior residents will be able to meet the same objectives as junior residents as well as the senior objectives.

### **1. MEDICAL EXPERT**

#### **1.1. Cognitive & Diagnostic**

##### **1.1.1. Junior/Senior Resident**

Upon completion of the community rotation the resident will be able to;

- 1.1.1.1. Understand the spectrum and limitations of practice in a community setting based on resources and geography
- 1.1.1.2. Demonstrate appropriate core knowledge based on their level of training
- 1.1.1.3. Appreciate the structure of health care in a community setting including:
- 1.1.1.4. Access to tertiary care, stabilization and investigation of patients for transfer
- 1.1.1.5. deal effectively within a multidisciplinary setting
- 1.1.1.6. Resource allocation and health care infrastructure
- 1.1.1.7. Practice Management – Group and Solo

#### **1.2. Technical Knowledge**

##### **1.2.1. Junior/Senior Resident**

- 1.2.1.1. Perform adequately many community based procedures:
- 1.2.1.2. Common upper extremity fractures
- 1.2.1.3. Hip fractures
- 1.2.1.4. uncomplicated arthroplasty hip/ knee
- 1.2.1.5. Ankle fractures
- 1.2.1.6. Arthroscopy
- 1.2.1.7. Uncomplicated pediatric fractures

## **2. COMMUNICATOR**

- 2.1. The resident will be expected to establish and maintain treatment based relationships with both patients and their families.
- 2.2. The resident will be able to:
  - 2.2.1. elicit a focused history
  - 2.2.2. listen effectively
  - 2.2.3. deliver information to patients/extended family and colleagues
  - 2.2.4. demonstrate proficiency in documenting progress notes, orders, consultation letters etc.

## **3. COLLABORATOR**

- 3.1. The resident will be required to demonstrate an ability to interact with all other health care professionals including family, allied health professionals and other physicians.
- 3.2. Respect the roles of other professionals.

## **4. MANAGER**

- 4.1. The resident will utilize resources to balance patient care and to allocate finite resources wisely.
- 4.2. The resident will demonstrate the ability to balance personal and professional activities and use their time to optimize patient care and Continuing Professional Development.
- 4.3. Understand office administration, practice management and billing.
- 4.4. The community rotation provides an excellent arena to teach and discuss practice management along with other managerial skills. Topics for review in this arena include:
- 4.5. Negotiation skills
- 4.6. Committee responsibilities
- 4.7. How to get and give references
- 4.8. Practice efficiency; Hospital, house and office
- 4.9. Managing length of stay and waitlist.
- 4.10. Time management skills and work / home life balance

## **5. SCHOLAR**

- 5.1. Demonstrate the ability to assess, appraise, acquire, and contribute to lifelong learning.
- 5.2. Recognize the need for a broad spectrum of knowledge when practicing in the community; as well as a strategy for Continuing Professional Development in order to remain current.
- 5.3. Understanding of the MOCOMP requirements of the Royal College of Physicians and Surgeons.

## **6. ADVOCATE**

6.1. The community rotation represents an ideal setting to discuss with the resident the role of a community group in developing an expansion plan to meet the needs of the growing community.

6.2. Advocating for access to tertiary care

## **7. HEALTH PROFESSIONAL**

7.1. The resident will be expected to adhere to a high standard of honesty, integrity, commitment, compassion, effectiveness, competence and altruism.

7.2. Self-regulation in these areas is imperative. The resident will be expected to be accountable for all behaviors and recognize the boundaries between professional and personal realms.