Welcome to your rotation in Plastic Surgery at HHS, and welcome to our team. We hope this will be a valuable learning experience for you. There is a lot to gain from this rotation regardless of what you plan to do in your future career.

Dr. Michael Cooper is the HGH CTU director and staff plastic surgeon at HHS hospitals. During your rotation, if you have any concerns or questions, please feel free to contact him at mjimcooper@gmail.com.

The purpose of this document is to outline the structure of the rotation and to highlight what is expected of you.

PREPARATION
Before starting, Clerks must be familiar with how to:

- Write and Dictate a Consult Note
- Write Progress Notes during rounds
- Write Admission Orders
- Write an OR Note and Postoperative Orders
- Dictate a Discharge Summary

To help you with this, review the document “Writing Notes and Dictations” which we have sent you. Speak to the resident on the morning of your Orientation if you need more help/information.

SCHEDULE
- The Chief Resident will email the weekly schedule to the team usually on Sunday evening
- You may be "assigned" to a particular staff, but you will probably spend time with all staff during your rotation
- You are required to participate in Morning Rounds regardless of what you have been scheduled to do that day. The exception is if you are working at the Juravinski Hospital that day.

The work day ends at 5 pm. Do not go home without checking in with a resident. There may be issues/patients/consults going on that you aren't aware of and your help may be needed. If the whole team works together to finish things up, everyone can get out at a reasonable hour.

DRESS CODE
- If you are assigned to the OR or Minor Procedures, wear scrubs. If you are assigned to clinic, wear regular clothes or a lab coat over your scrubs.

PATIENT LIST
- Our patient list is kept on a Google document and you will be given access prior to your rotation starting. It is a good idea to have a look through the list before your rotation begins.
• All members of the team are responsible for keeping this list up to date.

**ROUNDS**

• On your first day, you will meet with a resident before morning rounds for an Orientation. He/she will contact you with the location and time.
• The team meets for morning rounds on the Burn Trauma Unit (BTU) on the 3rd floor of HGH between 0700h-0715h. The Senior/Chief Resident leads rounds.

**Prior to rounds,** Clerks will print a copy of the patient list, record the vital signs and bloodwork of each patient, and photocopy this document for all team members. (At your Orientation, a resident will show you how to do this if you are unfamiliar.)

During morning rounds, you will be expected to pick up charts and **write Progress Notes** and orders for our patients. A resident will review and co-sign your orders.

**You are expected to be on time.** If there are unforeseen circumstances causing you to be late, text or call a resident to let them know.

**CONSULTS**

• If you have been asked to see a consult, perform an appropriate History and Physical Examination and review relevant bloodwork and imaging prior to reviewing with a Resident. Try to come up with an Assessment and Plan as well; you will learn more if you challenge yourself.
• All consults must be dictated.
• **Call a resident for help if your patient is sick or unstable.**

**BURN ROUNDS**

• Every Tuesday at 3:30 in the Conference Room on the BTU, we have Burn Rounds which is a multidisciplinary meeting attended by Nursing, PT, OT, Dietician, SW. These Rounds are typically run by Dr. Dal Cin, the Burn Unit Director.
• Burn patients are reviewed and a Resident will provide a short presentation. (Elective students: If you would like to do a presentation, let the Chief resident know and they can accommodate this.)
• Attendance is mandatory (i.e. you will leave clinic, OR, same day surgery to attend).

**CALL**

• Call is home-call.
• Clerks are not required to do call, but you are encouraged to join if you are interested (esp. those doing electives). Call is a great way to learn more, see more cases and to spend more time with the staff.
• If you are doing overnight call with another service, you must give the senior resident appropriate advanced notice of when you may be post call. It is not appropriate to tell him/her the day of.

**Advice...**

• **Ask lots of questions.** We meet Clerks who are at all stages of Clerkship with variable amounts of experience. If you are just starting out and need more help with writing notes or orders, ask. If you don’t understand why we are using a specific type of dressing, ask. If you don’t know how to do a hand examination, ask.
• **Read around cases.** Picking 3-5 small topics to review around a case you saw each day will add up to huge learning by the end of your Clerkship. Do this regardless of what rotation you are on.

• **Prepare the night before an OR.** This is something surgical residents do every night… you will learn more from the case (and it never hurts to impress your staff!). Ask a resident to show you where you can find the next day’s OR list.

• **Try something you haven’t done before.** Learn to apply a plaster cast, reduce a fracture, close a wound with subcuticular suturing