

University of South Florida

Hand Orthopaedics – PGY 3

Competency Based Goals & Objectives

Competency 1- Patient Care: Provide patient care that is compassionate, and effective for the treatment of health problems and the promotion of health. The resident demonstrates this in the following manner:

1. Capable of performing and presenting a thorough and accurate patient history and physical examination for the patient presenting with hand/upper extremity complaints. Included are to be chief complaint, history of time of onset of injury or condition, mechanism of injury or functional difficulties produced by condition as well as, past medical, surgical and social history.
2. The physical examination should include a general examination of the patient regarding those conditions or injury associated problems, which may play a role in the patient's functional status of the hand/upper extremity. Examples include: Evidence of head injury, stroke, Parkinson's disease, cerebral palsy and other neurologic problems.
3. Demonstrate proficiency in upper extremity/hand exam, including Identification of peripheral nerve compression problem including carpal, cubital and radial tunnel problems, tendonitis/tendonopathy including stenosis of first dorsal compartment and proximal annular ligament areas, as well as, arthritic problems.
4. Perform basic invasive procedures for patients, which include injections for problems of trigger finger, carpal tunnel and first metacarpal-carpal arthritic conditions.
5. Demonstration of knowledge and complications of non-operative treatment, such as, the use of anti-inflammatory medications, and splinting for basic hand surgery problems.
6. Develop initial management plan for a patient with hand related injuries and or complaints. This includes:
 - a. Management plans for animal/human bites
 - b. Infections
 - c. Common tendon stenosis problems
 - d. Finger tip injuries and amputations
 - e. Basic fractures of the hand, Nerve compression syndromes, including carpal, cubital and radial tunnel syndrome presentations.
7. Demonstrate and perform frequent procedures of hand including carpal tunnel release , trigger finger release, release of first dorsal compartment and excision of carpal ganglion to include both dorsal and volar presentations. The supervising chief resident or attending physician will serve as the junior resident's mentor.
8. Knowledge of proper diagnostic studies to include, radiologic examination and other laboratory studies needed for further assessment of the patient for further establishing of diagnosis and treatment plan of patient presentation.
9. Demonstrate expertise in the more complex aspects of hand and wrist physical presentation to include dynamic carpal instability, levels of hand status with cerebral palsy, the stroke hand and combined nerve paralysis of the upper extremity.
10. Appropriate ordering of specialized diagnostic tests including types of MRI, radioisotope scans and other diagnostic tests in an optimal manner for cost effective care and diagnosis of the given patient in a step wise manner.
11. Demonstrate recommendations of treatment and capability in surgical intervention, for procedures such as, tendon transfers for nerve deficits, basic wrist arthroscopy, arthritic reconstruction including osteoarthritis and treatment of rheumatoid arthritis.

12. Accomplish the more complex tendon transfers and other reconstructive interventions under the supervision of appropriate staff or chief residents.

Competency 2 – Medical Knowledge: Understand the scope of established and evolving biomedical, clinical, epidemiological and social-behavioral knowledge; the ability to acquire, critically interpret and apply this knowledge in patient care.

1. Expected at weekly resident conferences and grand rounds presentations.
2. Preparation of presentation of patient care and topic presentations.
3. Demonstrate commitment to self directed learning and effective communication.
4. Understanding of the scientific basis of diagnosis and treatment of the commonly encountered hand conditions are noted.
5. Indications for basic surgical procedures and hand surgery including:
 - a. Carpal tunnel release
 - b. Trigger finger release
 - c. First dorsal compartment release
 - d. Excision of dorsal and as well as volar ganglion.
6. Demonstrate indications for surgical interventions for osteo and rheumatoid problems to include first metacarpal interventions and arthroplastys.
7. Demonstrate understanding of limitations and expectations of tendon transfers about the hand and wrist for regaining of function including radial nerve, median and ulnar nerve deficit requirement.
8. Successful completion of the Orthopaedic In-service Training Exam.
9. Participation in journal club to include clear understanding of evidenced based studies including meaning of varying levels, application in clinical settings and proper utilization for patient care activities.
10. *Read and understand concepts presented in referenced reading lists with effective communication and demonstration of these concepts.

Competency 3 – Communication Skills: Demonstrate interpersonal and communication skills that result in information exchange and partnering with patients, their families and professional associates.

1. Demonstrate interpersonal and communication skills that result in effective information exchange with the patient, their families and caregivers, as well as, other physicians and members of the healthcare team. This includes service workers, hand therapists and fellow residents.
2. Communications are expected to be accomplished with clarity and at a level, which assists the patient in decision processes.
3. Identification of those mechanisms and skills needed to properly interact with the culturally diverse patient of our society.
4. Completion of the Academy learning vehicles regarding cultural diversity.
5. At all times, demonstrate honest, open, civil and effective communication with patients, staff and colleagues, including medical students, residents and attending.
6. Gain needed information from patients and caregivers by honing listening and questioning skills.
7. Explanations provided are to be a part of each patient encounter.
8. Effective communication through dictations, as a part of the patient record. Demonstrate computer skill level resulting in proper order entry and other aspects of electronic medical record plus penmanship capabilities of such nature that communications are accomplished with clarity in all areas.

Competency 4 – Practice Based Learning and Improvement: Demonstrate knowledge, skills and attitudes needed for continuous self-assessment, using scientific methods and evidence to investigate, evaluate and improve one's patient care practice.

1. Demonstrate knowledge of study designs and statistical methods used in appraisal of clinical studies. Obtain and utilize information from patient populations and the larger populations from which their individual patients are a part.
2. Proper preparation for and regular attendance at weekly meetings and monthly journal clubs.
3. Proficiency demonstrated in using online searches to identify and evaluate educational materials especially of peer review reference articles relevant to individual patient care.
4. Demonstration of involvement in the learning process of students and other healthcare professionals.
5. Serves as tutor/mentor to junior orthopaedic residents, providing basic understanding and performance of surgical principals of the hand, such as carpal tunnel, trigger finger release, ganglion excisions and first dorsal compartment release.
6. Awareness and understanding of established guidelines in Sleep, Alertness & Fatigue, Education in Residency.

Competency 5 – Professionalism: Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles and sensitivity to diversity.

1. Demonstrate commitment to carry out professional responsibilities and adherence to ethical principles and standards taken into account with sensitivity to diverse patient populations.
2. Utilize and successfully complete the Academy's vehicle relating to cultural diversity.
3. Obtaining an informed consent from a patient, this includes the presentation of the non-surgical and surgical aspects of the care of the patient's condition including the more common complications and rehabilitation aspects of the care being utilized.
4. Understanding of value and importance of patient confidentiality along with the varying mandatory aspects of HIPPA regulations.
5. Demonstrate an increased understanding regarding the concept of professional liability aspects of medicine outside the academic setting.
6. Demonstrate consistent learning process anticipated to be life-long in preparation for individual case presentation, involvement in surgical interventions and other patient care activities being a part of the process.
7. Develop a framework of optimal interactive responses to the challenging requirement of working in multiple operating room settings and multiple clinic settings required in the care of orthopaedic hand patients.

Competency 6 – System-Based Practice: Understand how to practice quality health care and advocate for patients within the context of the healthcare system.

1. Regular attendance and presentations at Morbidity and Mortality conference with focus on prevention of complications.
2. Working knowledge and thorough understanding of various healthcare funding systems including Medicare, Medicaid, worker's compensation, vocational rehab, private insurance and no pay status.
3. Develop additional knowledge base as to how to advocate for patient in obtaining funding for care of specific problems with which the patient presents.
4. Demonstrate understanding as to how advocacy on part of the treating physician, may assist in quality patient care and dealing with the complexity of the healthcare system.
5. Demonstrate appropriate use of braces, splints and other assistive devices with awareness of nomenclature to allow for optimal ordering of these devices.

6. Demonstrate an understanding of manner of which patient care and other professional practices have impact on healthcare professionals, healthcare organizations, society as a whole and interaction of these elements/systems with one's practice of orthopaedic/hand surgery.
7. Demonstration of knowledge relating to cost effective healthcare and resource allocation done properly to avoid compromise of quality of patient care.
8. Opportunity has been presented and demonstration of ability to practice medicine accomplished in various healthcare systems including, academic oriented hospital, veterans administration hospital, community hospital, pediatric orthopaedic hospital and varied orthopedic/hand surgery outpatient clinic settings.
9. Demonstration of understanding of ethical and proper manner of correct coding regarding multiple aspects of patient visits and interventions performed.
10. Demonstrate initial understanding of the role of healthcare managers, providers, involvement in the optimal care and management of the patient overall care related to optimal recovery of function in given social settings.
11. Demonstrate capability of working relationship with discharge planners, social service personnel, home health providers and others who are an integral part of the present healthcare system directed in a manner sensitive to the given needs of each patient, their families and caregivers.
12. Demonstrate competency in documentation, functional impairment assessment, knowledge of local or state laws related to workers compensation and disability.

***Reference - Recommended Reading Material**

Hand Surgery Update 2, Orthopaedic Knowledge Update Series-AAOF
Green's Operative Hand Surgery 4th or 5th edition
Surgical Anatomy of the Hand and Upper Extremity – Doyle & Botte
Principles of Hand Surgery and Therapy, Trumble, 2000
Rockwood & Green Fractures in Adults
Rockwood & Green Fractures in Children