Patient Care

The resident is expected to be introduced to:
- Care of peri-operative patients, including postoperative volume resuscitation
- Fascial closure
- Anorectal procedures (ex. Hemorrhoidectomy, fistulectomy/fistulotomy, anoscopy)

The resident is expected to be proficient at:
- Management of gastrointestinal tubes and ostomies
- Post-operative fluid resuscitation
- TPN, TEN in cancer and non-cancer patients, interpretation of nutritional labs.
- Electrolyte repletion/management

Medical Knowledge

The Resident should understand:
- Pathophysiology of colorectal diseases including hereditary disorders, IBD, perianal disease, and malignancy
- Treatment of perianal diseases including perirectal abscess, fistula in ano, pilonidal cyst, and hemorrhoids
- Basic Science principles (ex: metabolism, wound healing)
- Radiographic studies: indications and interpretation

Practice Based Learning and Improvement

The Resident should demonstrate the ability to:
- Evaluate published literature in peer reviewed journals and texts
- Apply clinical trials data to patient management
- Participate in academic and clinical discussions
- Teach medical students
- Attend conferences

Interpersonal and Communication Skills

The resident is expected to demonstrate the ability to:
- Interact with patients and their family
- Interact with Nursing staff and other members of the health care team
- Interact with OR staff
- Interact with Attendings
- Interact with peer and senior Housestaff
Professionalism

*The resident should:*
- Be receptive to feedback on performance
- Be attentive to ethical issues
- Be involved in end-of-life discussions and decisions
- Be sensitive to gender, age, race, and cultural issues
- Demonstrate leadership

Systems Based Practice

*The Resident should demonstrate:*
- Awareness of cost-effective care issues
- Sensitivity to medical-legal issues
- Knowledge of information technology/computer resources available