The Fellowship Council
Core Curriculum for
Advanced GI Surgery

PREAMBLE:
The purpose of this document is to define the learning objectives in an Advanced GI Surgery fellowship. This curriculum is designed to build on and to follow the current RRC and ABS requirements for General Surgery training. It is an expectation of the American Board of Surgery that a qualified surgeon be knowledgeable in the management of GI surgery, therefore, this curriculum will not restate those learning objectives required of all general surgeons but rather build upon these concepts.

PREREQUISITES:
Completion of an RRC approved (or International equivalent) General Surgery Residency. The fellow must be Board-Certified or in the examination process by the American Board of Surgery (i.e., “board eligible”). Exceptions for entry into fellowship for international candidates may be granted by the program director. However, ultimate certification will be dependent upon the fellow’s ability to meet all stipulated requirements.

AIM:
To define the knowledge and technical skills required to achieve mastery in Advanced GI and related Surgery.

Specialty silos under the umbrella of Advanced GI Surgery:
- Advanced GI Surgery Curriculum for Minimally Invasive Surgery (MIS)
- Advanced GI Surgery Curriculum for Bariatric Surgery
- Advanced GI Surgery Curriculum for Hepatobiliary Surgery
- Advanced GI Surgery Curriculum for Flexible Endoscopy

GOAL OF THE FELLOWSHIP:
To provide fellows with an immersion in the study and practice of diseases of the GI tract and abdominal cavity such that knowledge and skill-based confidence will achieve expert status by the end of the experience.

This Curriculum for Advanced GI Surgery Fellowships describes the goals and objectives of the core competencies that are common to and required by all Fellowships in Advanced GI Surgery including: patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism and systems-based practice.
Patient Care:

Fellows will be expected to perform preoperative assessment of patients and demonstrate an understanding of the management options, indications, contraindications, and complications associated with the recommended procedure.

Fellows should demonstrate understanding of and ability to order, integrate and interpret perioperative testing and evaluation of all organ systems as related to advanced GI surgery.

Fellows will demonstrate intraoperative decision-making that minimizes complications and demonstrates an awareness of the limitations of his/her technical skills.

Fellows will demonstrate knowledge of anatomy of the GI tract and the abdominal cavity, including as viewed through MIS access, both normal and abnormal.

Fellows will demonstrate knowledge of a variety of approaches (both operative and non-operative) to a given GI tract disease and exhibit reasoning to arrive at the correct procedure for a given patient.

Fellows will demonstrate expertise in interpreting anatomic and physiologic studies of the GI tract and abdominal cavity relevant to their areas of expertise.

Fellows will demonstrate fundamental MIS competency relevant to their area of expertise. These would include some or all of the following:

1. Basic Skills:
   a. preoperative preparation (positioning, knowledge of necessary equipment, bowel prep); evaluations of cardiopulmonary system, age, body habitus
   b. exposure
   c. retraction
   d. tissue handling
   e. camera navigation
   f. two-handed manipulation
   g. port-site placement
   h. alternative access techniques
   i. use of angled scopes
   j. FLS completion
   k. vascular control and algorithm for control of bleeding
   l. knot-tying ability, both hands, intracorporeal and extracorporeal
   m. decision to convert a laparoscopic procedure to an open operation

2. Advanced Skills:
   a. intraoperative ultrasound
   b. suturing
   c. stapling
   d. intracorporeal anastomosis
   e. adhesiolysis
   f. running of bowel
   g. demonstrates knowledge of energy sources
   h. placement and fixation of prosthetic material
Fellows will acquire skill in diagnostic flexible endoscopy relevant to their area of expertise.

**Medical Knowledge:**

Fellows will be expected to demonstrate understanding of the anatomy, physiology and pathologic conditions of the entire GI tract, abdominal cavity, abdominal wall, and solid organs in the abdominal cavity and retroperitoneum.

Fellows will demonstrate an understanding of the surgical and nonsurgical options for managing pathologic conditions of the entire GI tract, abdominal cavity, abdominal wall, and solid organs in the abdominal cavity and retroperitoneum.

Fellows are expected to be able to appropriately order, read, and interpret diagnostic tests and images.

Fellows are expected to have basic FLS certification; to have knowledge of two or more journals delving into Advanced GI Tract Surgery and MIS

*The specific medical knowledge expectations appear in the curricula of the specific subspecialty fellowships in advanced gastrointestinal surgery.*

**Practice-based Learning and Improvement**

Fellows will remain diligent in updating their knowledge with regard to advances in allied health disciplines.

Fellows will demonstrate an ability to access multiple resources for obtaining timely evidence to guide patient care decisions and be able to explain their decision-making rationale.

Fellows will demonstrate ability to perform a detailed assessment of their patient care practice and be able to identify best practices and areas for improvement.

Fellows will participate in and lead journal clubs, M&M conferences, and Grand Rounds as indicated.

Fellows will be engaged in the education and training of residents and medical students, where appropriate.

Fellows will seek and accept constructive feedback concerning their practices.

Fellows will use feedback from faculty and their own self-assessments to develop a plan for filling gaps in knowledge or skills.

Fellows will learn the basics of practice management to include billing and coding for operative procedures, where relevant.
Fellows will actively participate in bench, clinical, or basic science research as it applies to their situation.

**Interpersonal and Communication Skills**

Fellows will provide concise and accurate communication of clinical information both in verbal and written form.

Fellows will demonstrate effective communication with patients and family members in a manner that creates and sustains a professional and therapeutic relationship across a broad range of socioeconomic and cultural backgrounds.

Fellows will demonstrate a caring attitude toward patients and families.

Fellows will effectively explain working diagnoses and management.

Fellows will demonstrate ability to effectively communicate with physicians, other health professionals and health related agencies about patients’ problems.

Fellows will maintain comprehensive, timely and legible medical records.

**Professionalism**

Fellows will display compassion and respect for all patients even under difficult circumstances.

Fellows will treat all members of the health care team with respect regardless of their level of power or influence.

Fellows will advocate for patients’ needs and desires even if they differ from the fellow’s views.

Fellows will take personal responsibility for the timely completion of all assigned work and medical records.

Fellows will demonstrate the importance of teamwork by assisting colleagues in need.

Fellows will demonstrate honesty in their interactions with patients and team members by practicing full disclosure of information with their patients, admitting and disclosing patient care errors, and admitting weaknesses as well as knowledge gaps.

Fellows will demonstrate respect of patient confidentiality and the importance of best practices for insuring optimal care in the clinical setting.

**Systems-based Practice**

Fellows will demonstrate understanding of new technologies and their role in the care of their patients.
Fellows will demonstrate understanding of the integrative nature of health care and will coordinate the care of their patients utilizing the support of consulting physicians, allied health professionals, and ancillary staff.

Fellows will develop appropriate discharge and disposition plans for patients by assessing the patients’ access to out-patient services, resources for paying for medications and tests, and by working cooperatively with the discharge planning service to obtain needed treatments and follow-up for their patients.

Fellows will communicate the discharge plan with the patient’s referring physician to insure adequate follow-up care.

Fellows will practice cost-effective medicine. Specifically, they will learn to avoid unnecessary tests and minimize length of stay while providing high quality care.

Fellows will demonstrate understanding of the importance of institutional policy in promoting patient health through strict adherence to infection control policies and specific treatment protocols.

Fellows will demonstrate understanding of documentation criteria for different levels of care.

Fellows will develop an understanding of the nature and importance of regulatory requirements implemented by agencies such as the Joint Commission, CMS, RRC, and Fellowship Council.