

Dalhousie University Neurosurgery

Resident Rotation Objectives: Anesthesiology

Medical Expert

KNOWLEDGE

As a basis for clinical competence, the neurosurgery resident must be familiar with, and be able to describe and discuss:

1. Principles of preoperative assessment pertinent to safe conduct of anesthesia.
2. Implications of systemic disease on general anesthesia.
3. Impact of home medications on administration of anesthesia.
4. Principles of general anesthesia and medications used.
5. Anesthetic strategies for conduct of awake surgical procedures.
6. Medical management of raised intracranial pressure.
7. Intraoperative neuroprotective strategies.
8. Strategies for intraoperative titration of blood pressure and heart rate.
9. Principles of airway management in the patient with an unstable cervical spine.
10. Perioperative management of patients on anticoagulant medications.
11. Principles related to transfusion of blood products.

CLINICAL SKILLS

1. Obtain a history and perform a physical examination pertinent to anesthesia.
2. Placement of peripheral intravenous lines.
3. Placement of central venous lines.
4. Endotracheal intubation.
5. Placement of arterial lines.
6. Careful patient positioning to minimize perioperative complications.

Communicator

1. Establish a therapeutic relationship with patients and their families
2. Document appropriate pre-operative assessments.
3. Write appropriate post-operative orders.
4. Communicate with surgical and nursing team.

Collaborator

1. Consult effectively with other physicians and other health care professionals as needed regarding issues pertinent to perioperative anesthetic management.
1. Contribute to interdisciplinary activities as needed.

Leader

1. Principles of triaging urgency of surgical cases.
2. Must be prepared to provide advice on the efficient use of resources as pertinent to perioperative anesthetic management of the neurosurgical patient.

Health Advocate

1. Secure the resources necessary to perioperative patient management, including patient disposition (e.g.: post-anesthetic care unit, intermediate care unit, intensive care unit, or general inpatient hospital ward).

Scholar

1. Participation in anesthesia rounds and academic activities.
2. Demonstrate self-directed learning with critical appraisal of relevant literature.
3. Facilitate the learning of patients and their families, colleagues, and other health care professionals.