# RONALD REGAN UCLA MEDICAL CENTER ADVANCED OPHTHALMIC ANESTHESIA
# GOALS AND OBJECTIVES BY ROTATION

| GOALS | EDUCATIONAL OBJECTIVES | CLINICAL RESPONSIBILITIES / ACTIVITIES | EVALUATIONS |
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| **Patient Care:**<br>To provide the resident with advanced clinical experience in the anesthetic management of adults and children undergoing surgical treatment of ophthalmic diseases that is compassionate, appropriate, and effective.<br>. | 1. Technical skills will be gained in the following areas:<br>a) Use of short-acting sedatives and narcotics and administration modalities in MAC<br>b) Use of oral premedication in children<br>c) Use of laryngeal mask airways in both pediatric and adult population<br>d) Ophthalmic regional anesthesia<br>e) Advanced techniques of ophthalmic regional anesthesia to include retrobulbar, peribulbar, and various facial nerve blocks (Nadbath, Van Lint, O'Brien)<br>2. Preparation and performance of rapid turnover appropriate for outpatient surgery<br>3. Ability to function independently under the direction of the supervising physician | 1. The JSEI Operating Room is comprised of 4 operating rooms, a laser procedure room, and a recovery room. Typically, 300 cases are performed here each month. Residents routinely perform 60-80 cases during the month.<br>2. Residents will be assigned on a monthly basis to the Jules Stein Eye Institute. As part of the rotation, after completion of clinical cases, residents may spend part of the afternoon assigned to the JSEI Preoperative Evaluation Suite. Assignment to the preoperative evaluation suite typically occurs several times a week. Residents evaluate pediatric and adult patients and obtain informed consent.<br>3. A daily phone call is made by the residents to their assigned faculty for the next day to discuss the anesthetic plan for the cases. Any anesthetic or medical issues are researched and | 1. Monthly on-line faculty evaluations.<br>2. 360 evaluations.<br>3. Quarterly meeting with program director. |

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| | | discussed. Final plans for patient optimization are also confirmed.<br>4. Residents may participate in simulation. | |
| **Medical Knowledge:** To acquire the advanced clinical and applied science knowledge pertinent to the management of the ophtalmic patient. | Basic Science Topics<br>1. Physiology of the eye<br>2. Anatomy of the eye and extraocular structures<br>3. Pharmacological interactions with the eye<br>4. Pharmacology of short-acting narcotics<br>5. Pharmacology of sedative-hypnotics<br>6. Pharmacology of anti-emetics<br>7. Pharmacology of local anesthetics<br><br>Clinical Knowledge<br>1. Preoperative evaluation of ophthalmic surgery patients<br>2. Choice of anesthetic technique for ophthalmic surgery for the following groups<br>a) Pediatric patients<br>b) Geriatric patients<br>3. Diagnosis and treatment of common intra-operative events associated with ophthalmic anesthesia<br>4. Diagnosis and treatment of common post-anesthesia problems associated with ophthalmic anesthesia<br>5. Evaluation of ophthalmic blocks and appropriate regional supplementation techniques<br>6. Selection of cost-effective anesthetic techniques appropriate for ophthalmic anesthesia<br>7. Review of clinical outcome data | 1. Preanesthetic evaluations.<br>2. Individual supervision and instruction in the operating room.<br>3. Directed independent study.<br>4. Annually scheduled lectures.<br>5. Simulation curriculum.<br>6. Daily lectures on a one-on-one basis as determined by the cases of the day. Subjects include topics listed under Educational Objectives. | 1. Monthly on-line faculty evaluations.<br>2. Quarterly meeting with program director. |
| **Practice Based Learning:** To be able to investigate and evaluate their own patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices. | 1. Use information technology, on-line resources, expert consultation, and primary texts to | 1. Obtain feedback from the supervising faculty.<br>2. Review and discuss supporting literature with the supervising faculty.<br>3. Participation in departmental Q/A<br>4. Faculty lectures on statistics and critical literature evaluation<br>5. Attend resident simulation. | 1. Daily faculty-resident interaction in the PACU.<br>2. Self evaluations.<br>3. Monthly on-line faculty evaluations.<br>4. Quarterly meeting with program director. |

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| | knowledge base.<br>2. Learn to critically evaluate the anesthesia literature.<br>3. Apply scientific evidence to decision making.<br>4. Compare evidence-based practice to commonly taught experience based decision making to develop a personal practice strategy.<br>5. Understand how to assess the impact of one's actions on outcomes. | | |
| **Interpersonal and Communication Skills**: To be able to demonstrate communication skills that result in effective information exchange and appropriate interaction with colleagues, surgeons, patients, and ancillary personnel | 1. Understand the importance of effective communication between the anesthesiologist and the ophtalmologist, OR, and PACU nurses.<br>2. Learn techniques to decrease patient and patient family anxiety.<br>3. Learn effective communication techniques during periods of stress in order to decrease patient and family anxiety.<br>4. Demonstrate the ability to effectively communicate concerns with surgeons.<br>5. To learn strategies and techniques for teaching medical students the principles of anesthesiology. | 1. Modeling by the anesthesia faculty<br>2. Interact with patients and their families.<br>3. Discuss preanesthetic evaluation and plan with the supervising faculty and pertinent members of the health care team.<br>4. Attend resident simulation.<br>5. Experience teaching medical students in the operating room. | 1. Daily faculty-resident interaction in the PACU.<br>2. 360 evaluations.<br>3. Monthly on-line faculty evaluations.<br>4. Feedback medical students.<br>5. Quarterly meeting with program director. |
| **Professionalism**: Residents must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population. | 1. Demonstrate compassionate and respectful behaviors when interacting with patients and their families.<br>2. Learn communication techniques with patients and families of different cultural backgrounds who possibly speak little English.<br>3. Demonstrate sensitivity to patients various age, gender, ethnic, and religious backgrounds.<br>4. Understand the legal and ethical issues involved in patient consent.<br>5. Demonstrate a commitment to advocating patient care that is appropriate for their individual needs.<br>6. Adhere to institutional and departmental standards and policies.<br>7. Demonstrate ability to appropriately take on, share and delegate patient care responsibilities.<br>8. Demonstrate the ability to effectively balance one’s own personal affairs with clinical and educational duties as outlined in this document.<br>9. Demonstrate a commitment to ongoing professional development.<br>10. Learn how to discuss and record cases with complications and/or poor outcomes. | 1. Modeling by the anesthesia faculty<br>2. Attendance at conferences where many of these issues are discussed. | 1. Daily faculty-fellow interaction in the operating room.<br>2. 360 evaluations.<br>3. Monthly on-line faculty evaluations.<br>4. Quarterly meeting with program director. |

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| **Systems Based Medicine**: To be familiar with the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value. | 1. Learn the cost of the drugs, monitoring equipment and overall procedures involved in surgical care.<br>2. Understand how to do cost analysis for health care systems<br>3. Understand the complex systems that form the foundation for care of patients suffering from various diseases.<br>4. Learn how to effect improved operating room efficiency safely.<br>5. Appreciate the complex interactions that go on between primary care teams, surgeons and anesthesiologist in the overall hospital management of these complex patients.<br>6. Learn how to effectively use information management in the preoperative evaluation. | 1) During their experience in the operating room, the trainees will interact with intensive care, surgical and nursing services in a unique environment, which will require sensitivity to structured and multidisciplinary, simultaneous patient care.<br>2) Attend resident simulation. | 1. Daily faculty-fellow interaction in the operating room.<br>2. 360 evaluations.<br>3. Monthly on-line faculty evaluations.<br>4. Quarterly meeting with program director. |