

## **CA 1 Anesthesiology: Post-Anesthesia Care Unit Rotation**

**Rotation: PACU**

**Institution: Thomas Jefferson University Hospital**

**Director: James W. Heitz, MD**

During a two week rotation on the PACU, the CA 1 anesthesiology resident should:

### **Goals:**

1. Learn to diagnosis and treat common complications after surgery and anesthesia.
2. Learn how intraoperative anesthetic management impacts the incidence and severity of post-operative complications.
3. Learn the appropriate use of post-operative diagnostic studies.
4. Acquire sufficient medical knowledge to care for patients in the Phase I recovery setting.

### **Objectives:**

Upon the completion of this rotation the Anesthesiology Resident must be able to:

1. Perform a directed history and physical examination on post-surgical patients experiencing complications in the PACU (MK, PC).
2. List a differential diagnosis for the most common post-operative signs and symptoms of complications (MK, PC, PBLI).
3. Discuss a treatment plan for each patient with the supervising PACU attending (MK, PC, IPSC, PBLI, P).
4. Write orders, progress notes and all relevant records as needed on PACU patients subject to review and approval by the supervising PACU attending (MK, PC, IPSC, PBLI, P, SBP).
5. Effectively work as a member of the interdisciplinary care team providing exemplary care to the surgical patient (IPSC, SBP, P).
6. Demonstrate interpersonal and communication skills that result in effective information exchange with patients, patient families, consultant physicians, and non physician care providers (IPSC).
7. Diagnosis and treat any patient who presents in the PACU with the following common postoperative complications (MK, PC):
  - a. Pain
  - b. Ventilatory Disturbance (hypoventilation, hypoxia, obstruction)
  - c. Hemodynamic instability
  - d. Nausea and emesis
  - e. Delirium
  - f. Headache
  - g. Hypothermia
  - h. Shivering
  - i. Pruritis
  - j. Oliguria

- k. Urinary retention
  - l. Hypo or hyperglycemia
  - m. Eye pain
8. Describe the indications for reintubation (MK, PC).
  9. Describe the indications for and the interpretation of common postoperative diagnostic testing (MK, PC).

**PACU Resident Duties:**

1. The resident will be available for PACU duty from 0700 – 1600 hrs during weekdays assigned to the rotation. Coverage of the PACU will begin at 0800 on Thursdays.
2. The resident will receive report from the 1st Call Resident about any patients in the PACU requiring on-going management at the beginning of his or her shift.
3. The resident will give report to the 1st Call Resident about any patients in the PACU requiring on-going management at the conclusion of his or her shift.
4. The PACU resident will review the white boards in 7 PACU and 5 PACU to confirm that the PACU Attending, PACU Resident, and Pain Service Resident names and pagers are correct and present each morning.
5. Residents will attend all Departmental Didactic lectures when available including PACU specific lectures.
6. Residents will complete the assigned self-study PACU Educational Modules prior to completion of the rotation and take a brief examination to demonstrate competency after completion.
7. Residents are expected to
  - a. Document all duty hours.
  - b. Document all procedures.
  - c. Complete all medical records in a timely and accurate fashion.
  - d. Self-monitor for fatigue.
  - e. Dress appropriately.
  - f. Act in professional and ethical manner in interactions with patients, nursing and medical staff.
8. The PACU resident will not be permitted to take in-house call or vacation during the rotation.

**Description of Didactic Experience:**

1. Completion of all PACU Educational Modules.
2. Presentation at PACU In-Service Meetings when requested.
3. Reading Assignments
  - a. Fowler MA, Spiess BD. Chapter 55: Post Anesthesia Recovery in Clinical Anesthesia, 6th Edition, ed Barash PG, (Philadelphia: Lippincott, Williams & Wilkins, 2009), p. 1421-43.
  - b. Otto CW. Chapter 59: Cardiopulmonary Resuscitation in Clinical Anesthesia, 6th Edition, ed Barash PG, (Philadelphia: Lippincott, Williams & Wilkins, 2009), p. 1532-59.

4. Case-based reading from supplemental sources including the residency textbook and articles chosen by PACU faculty for inclusion in the “Reading Corner” tab on the PACU website.

**Evaluation Process:**

Electronic evaluations by supervising faculty  
Evaluation of rotation and faculty by resident

**Feedback mechanisms:**

Automatic grading of PACU Educational Module Post-tests indicating successful completion of each module (Score of 80% or better).  
Review of resident evaluation with program director, faculty advisor, or PACU Medical Director.  
Daily feedback from supervising faculty.