

PGY1 Anesthesiology Rotation Primer

Welcome to Loma Linda Anesthesia! We are excited to have you here and are looking forward to helping you become more comfortable in your role as an anesthesiology resident. Our goals for you during this month in your intern year are:

- To familiarize you with the flow and processes of the operating room so that when you return for your CA1 year you can focus on actually learning anesthesiology
- To meet and spend time with the other anesthesiology residents and attendings
- To remind you how awesome anesthesiology is

This guide is intended to help structure your time this month, but it's fine to go through these bullet points out of order. The amount to learn can seem overwhelming, and you are by no means expected to be able to perform an anesthetic alone yet. You'll notice that many of the objectives outlined here are not actually about performing anesthesiology; that's on purpose. We want you to become familiar with the OR processes (staff, timing, documentation, etc.) now to eliminate one thing that you have to learn when you return in July. We will of course involve you in the actual anesthesia (i.e. the fun parts) too but perfecting your skills and anesthesiology knowledge are not the main focus of this month.

Week 1

Day 1: Typically, this is the day you are scheduled for LLEAP training (Dr. Gatling will tell you what time), but you will also have time to begin to get oriented to the OR.

- Find the main OR board and introduce yourself to the service director (usually Dr. Lauer). Try to make sense of the whiteboard and ask questions about it.
- Introduce yourself to Don and Mary at the OR front desk
- Ask someone to point out the department contact list on the wall
- Familiarize yourself with the layout of the ORs. Find ORs 0-16.
- Find the PDCU (adult pre-op area) and adult PACU.
- Explore the anesthesia workroom and know where to find pre-filled syringes of emergency medications, glidescopes, ultrasounds, and infusion pumps.
- Introduce yourselves to the anesthesia techs
- Practice placing monitors on the patient
- Have your senior resident and/or attending help with your bag-mask technique. Practice this on every patient.
- Administer a medication via a luer lock in the IV tubing (clean with alcohol first)
- Ask your senior resident how to look up the cases and room assignment on Microsoft Teams. E-mail your coordinator if you don't have access.

Day 2:

- Every evening find out which room and resident you are with the next day. Look up your patients in LLEAP.
- Arrive early (discuss time with resident) to see how your senior resident sets up their room for the day
- Learn a mnemonic for making sure the essential equipment is available and ready
- Make sure you can log in to the medication cart
- Learn how to inventory narcotics at the start of the day and after each patient
- Practice pulling a medication from the medication cart, labeling a syringe, and drawing up the medication
- Learn how to waste narcotics
- Practice priming a bag of IV fluids
- Pay attention to intra-operative vitals and respiratory dynamics
- Ask for feedback from your senior resident

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Day 3:

- Set up the OR in the morning under the supervision of your senior resident
- Find the backup O2 tank and manual BVM
- Log in to EPIC under the LLU ANES FPS context and familiarize yourself with you to find information in this view. Find out what is included under the “Pre,” “Intra,” and “Post” tabs.
- Edit the pre-op note and indicate “Anesthesia Ready for Procedure” in LLEAP before each case
- Mark intraoperative events in the anesthesia record: Anesthesia Start, Start Data Collection, Induction, Intubation, Emergence, etc.
- Write a transfer of care note after taking a patient to PACU
- Ask for feedback from your senior resident

Day 4:

- Practice pushing a gurney
- Continue to do the documentation in LLEAP that you practiced yesterday. Add on charting medications given, fluids given, and other intraoperative information like vent mode, assessment, urine output, etc. Also complete the “Best Practice” documentation and “Checklist”
- Ask for feedback from your senior resident

Day 5-6:

- Try to set up for your cases with minimal input from your senior resident.
- Practice the documentation that you learned earlier this week and see how much you can do on your own.
- Consider making notes for yourself on steps for setting up the room and steps for documentation that you can review in July
- Ask for feedback from your senior resident

Week 2:

This week’s objectives will be broken down by pre-op, intra-op and post-op (rather than by day) so you can work on them throughout the week.

Week 2 Pre-Op Objectives:

- Start working on pre-op patient assessments the night before. E-mail, text or page your senior with your assessment, plan and questions so they can guide you. Good things to include are: IV access, GA vs MAC, airway management, whether you’ll need blood available, and potential complications. Jaffe’s Anesthesiologist’s Manual of Surgical Procedures is an excellent resource.
- Perform pre-op physical exams including heart, lung, airway, and any relevant neuro exam. Add your findings to the pre-op note and make sure the pre-op note is complete (check “Physical Exam Complete” and indicate ASA status).
- Discuss pros and cons of pre-medication with your senior.

Week 2 Intra-Op objectives:

- Discuss hypotension differential with your senior, and a few common treatments.
- Adjust ventilator settings including ventilation mode, settings, and volatile anesthetic concentration.
- By the end of this week, you should be comfortable doing the LLEAP documentation for each case
- Topics to consider discussing with your residents and attendings:

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- Differential for hypotension, and common treatments
- Modes of ventilation

Week 2 Post-op Objectives:

- Give report to the PACU nurses when you drop off the patient
- Complete post-op documentation
- Ask for feedback from your senior resident every day

Weeks 3-4:

Ask someone to show you the following locations:

- Cardiac labs (CVL 1-5), IR suites (2nd floor) and MRI (basement)
- NORA pre-op area
- 2800 and peds pre-op
- Peds supply room
- Pump room

Weeks 3-4 Pre-Op Objectives:

- Start sending the attending your pre-operative assessment and plan (email, page, or text). This is to be used as a point of learning so don't be afraid to ask questions.
- Know how to confirm blood availability and how to release it to the OR
- Work on developing a "list" of topics that you discuss with each patient, i.e. previous reactions to anesthesia, PMH, meds, allergies, your anesthetic plan
- Do two time-outs per patient: once with the pre-op nurse prior to induction (confirm name, MRN, DOB, and surgery planned) and once with the entire OR team before incision (our portion includes allergies, beta blocker usage, blood availability, and antibiotic to be given).

Weeks 3-4 Intra-Op objectives:

- Learn how to refill the volatile anesthetic cassette, replace the CO2 absorbent and D-fend.
- Know how to obtain medications that are not in your drug cart
- Learn how to use an infusion pump
- Topics to consider discussing with your seniors and attendings:
 - Differential for hypoxia, immediate actions to take, and common fixes
 - PONV prophylaxis
 - Prophylactic antibiotics
 - Paralytic monitoring and reversal
 - Extubation criteria

At this time of year, the CA-1's are finishing their first year. It may seem like a long way away from now, but everyone was in your shoes before getting to where they are now. Trust the process and try to learn something every day. We all have more to learn and there is no such thing as a perfect anesthetic!