ANESTHESIA ROTATION - 17th Street Site

Welcome to your anesthesia rotation at Lehigh Valley Hospital!

Please report to the Anesthesiologists' office near the second floor operating rooms at 17th Street site by 0700 each day. Your main contact each day will be the Anesthesiologist listed on the schedule in that office as "ASU 1". This doctor carries a phone with the extension 610-969-3563 and will then help you organize your day. Failure to report to the Anesthesiologist by 7:30 each morning will be counted as an absence. If you expect to be late, call the Anesthesiologist before this time to inform them the reasons for your tardiness.

If there are any questions or problems that can't be handled by this doctor, please contact the Director of Education for the Department of Anesthesia, Dr. Rafael Martinez at pager number 9211.

- * Please only have <u>Anesthesiologists sign and date your "DAILY LOG SHEET</u>", which will be used for your evaluation and to confirm your attendance for each day of your rotation.
- * You will also receive a "ROTATION CHECKLIST", which lists several lecture topics and procedural skills that should be completed during the course of your rotation. As they are completed, please have the Anesthesiologist with you initial and date that item in the space provided.
- * You will also receive an "**EVALUATION FORM**", which you should complete at the end of the rotation.

*************EXTREMELY IMPORTANT************

ON THE LAST DAY OF YOUR ROTATION, RETURN THE ENTIRE ANESTHESIA PACKET TO:

Robin Gregory Phone: 610-402-8896 1245 S. Cedar Crest Blvd., Suite #301 Fax: 610-402-9029

Allentown, PA 18103

- 1. IT IS <u>IMPERATIVE THAT WE RECEIVE THE ENTIRE</u> ANESTHESIA PACKET WITHIN ONE WEEK OF YOUR ROTATION.
- 2. MAKE A COPY OF YOUR EVALUATION IN THE EVENT IT IS LOST IN THE MAIL.
- 3. YOUR EVALUATION CANNOT BE COMPLETED WITHOUT YOUR RETURNED ANESTHESIA PACKET!!
- 4. FOLLOW UP BY CALLING 610-402-8896 TO MAKE SURE YOUR PACKET HAS BEEN RECEIVED!

Signature	School	
Print Name		
Dates of Rotation: _/	through//	

MEDICAL STUDENT AND RESIDENT ROTATION CHECKLIST

Please have topics/skills initialed by the Anesthesiologists who instructed you.

LECTURE TO	<u>OPICS</u>
1.	Discuss the drugs used for a routine induction of general anesthesia.
2.	Discuss airway management and the ASA Difficult Airway Algorithm.
3.	Discuss the risks/benefits of regional anesthesia vs. general anesthesia.
4.	Discuss routine monitoring and appropriate use of invasive monitors.
5.	Discuss extubation criteria and risks during emergence.
PROCEDURA	AL SKILLS
1.	Perform insertion of peripheral IV.
2.	Perform adequate mask ventilation technique.
3.	Perform direct laryngoscopy and intubation of trachea.
4.	Observe arterial line placement technique.
5.	Observe central venous line placement technique.

PLEASE MAKE A COPY OF YOUR COMPLETED ANESTHSIA PACKET IN THE EVENT IT IS LOST IN THE MAIL. WE CANNOT DO YOUR EVALUATION WITHOUT IT!

MEDICAL STUDENT AND RESIDENT DAILY LOG SHEET

It's imperative that you:

- * Obtain ORIGINAL Anesthesiologists signatures only (not CRNA or RN).
- * Have every Anesthesiologist that you worked with daily, sign this log.

<u>DATE</u>	DOCTOR		<u>DATE</u>	DOCTOR
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In an effort to improve our teaching techniques and the anesthesia program, please take the time to score or comment on the Anesthesiologists that you worked with. Your evaluation is mandatory, confidential and will not affect your grade in any way.

1 - (being the best) -- 5 - (being the worst)

3. Dr. Karen Bretz 4. Dr. Jodie Buxbaum 5. Dr. Dennis Chyung 6. Dr. John Collins 7. Dr. Jeffrey L. Drobil 8. Dr. Scott Dubow 9. Dr. Debra Fullan 10.Dr. Joseph Galassi 11.Dr. Dorothy Hartman 12.Dr. Michael He 13.Dr. Lisa Keglovitz 14.Dr. Richard Kolesky 15.Dr. Rafael Martinez 16.Dr. Michael Mylnarsky 17.Dr. Juhan Paiste 18.Dr. Avani Patel 19.Dr. Ivan Perry 20. Dr. Rene Pristas 21.Dr. Nan Schwann 22.Dr. James Shaheen 23.Dr. Amy Thompson 24.Dr. Cindy Wan	Physician's Name	<u>Score</u>	<u>Comment</u>
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25.Dr. Daniel Weil	23.Dr. Amy Thompson		
	24.Dr. Cindy Wan		
26. Dr. Lawrence Zohn	25.Dr. Daniel Weil		
	26. Dr. Lawrence Zohn		

MEDICAL STUDENT AND RESIDENT EVALUATION FORM

PLEASE MAKE A COPY OF YOUR COMPLETED ANESTHSIA PACKET IN THE EVENT IT IS LOST IN THE MAIL. WE CANNOT DO YOUR EVALUATION WITHOUT IT!		
4.	Please list any individual instructors you worked with during your rotation who you feel deserve to be singled-out in either a positive or negative way, and explain why:	
3.	Would you recommend this rotation to others? Yes No	
2.	How do you think we can improve upon this experience for future residents/students?	
١.	Overall, did you have a good learning experience during this rotation? Tes No	