Guidelines for the Breast Surgery Patients

Case coverage:

 The Breast surgeons have enough staffing between PAs and fellows that they do not require resident staffing. Residents are permitted and encouraged to scrub whichever cases they would like, but for the purposes of surgery chiefs ensuring that there is adequate case coverage, the breast cases will not be included and will not be "staffed" by residents in this manner.

Post-operative care:

- Following every case, someone who was scrubbed for the case will write a brief op note and put in post-op orders.
- For any patient (post-op, or otherwise) that will be admitted to the hospital or has any action-item that will need to be performed by a member of the Surg Onc team (i.e. a CXR to be followed-up on for a chemotherapy port placement prior to discharge), someone who was scrubbed for the case will perform a closed-loop communication with a member of the Surgical Onc team (ideally the on-call intern or the PA, with the PGY2 as a back-up).
- We did not specifically touch on this, but this should include signing out patients who are still currently in the OR undergoing reconstruction with the Plastics team. We will remain the primary team for all patients who undergo tissue expander reconstruction, and Plastics will be the primary team for all patients with flap reconstruction.
- Signout will include the patient's medical history, intraoperative course, and post-operative care plan.

How to reach the appropriate on-call person:

- The on-call PA and intern can always be found on amion.com under Surg Onc. There is a Surg Onc PA every weekday from 7am-3pm who is never in the OR. There is an on-call intern every day from 7am-7pm who is almost never in the OR, and when they are in the OR their pager will forward to the PA.
- From 7am-3pm, signout should be given to the PA.
- From 3pm-7pm, signout should be given to the on-call intern.
- From 7pm-7am, signout should be given to the overnight PA.

Rounding on inpatients:

- The Surg Onc team (primarily the PGY2 during the week and the intern on weekends) will continue to round on and oversee care for all breast surgery patients admitted to the hospital for whom the Surg Onc team has been provided signout as detailed above.
- Breast Surgery attendings will not always see postoperative patients in-house prior to discharge.

Emergencies or patient issues at night:

• At night, in the event of an emergency, Breast Surgery attendings should be called directly.

Coverage of late cases:

- In order to maintain duty hour compliance, residents will not cover cases beyond 8pm.
- 1) Surg Oncology is covered by a PA overnight. The PA will mobilize and assist the attending in the takebacks (other than reconstruction where Plastic Surgery is involved). This will ensure compliance with duty hours.
- 2) Please discuss the sign out of breast surgery patients with Plastic Surgery leadership. I agree that a thorough sign out is important