Enhancing Resident Education with a Plastic Surgery Inpatient Service Guide Becky King, MD, Neil J. Khatter, BS, MBA, Kia M. Washington, MD, David W. Mathes, MD

Purpose: At our institution, the plastic surgery inpatient service is managed by first-year resident interns from surgical subspecialties including plastic surgery, general surgery, orthopedic surgery, urology, and otolaryngology. Some have little to no exposure to the field of plastic surgery prior to caring for these patients. We aim to educate residents on the essentials of plastic surgery, enhance their experience on the rotation, and improve patient care through the use of a plastic surgery inpatient service guide. We hypothesize that the guide will improve resident understanding of key topics in plastic surgery.

Methods: First-year residents rotating on the plastic surgery service from all subspecialty backgrounds were administered a survey at the beginning of their rotation (pre-survey). The survey consists of questions that utilize the Likert Scale to determine resident experience of a key topic in plastic surgery. The scale ranges from 1 (no prior experience or knowledge) to 5 (very comfortable managing independently). Key topics include flap assessment, dressing change, wound assessment, etc. After the rotation, a post-survey with the same key topics was administered to assess improvement in knowledge and skills as well as helpfulness of the provided guide. The guide distributed at the beginning of the rotation provides information for procedures an intern would be expected to complete, preferences of each surgeon, and miscellaneous resources (parking, dining, etc.) to ease their transition onto a new service. Given presumed non-normal distribution of responses, data was analyzed using descriptive frequency distribution of responses.

Results: The survey was administered over 30 months from April 2019 to October 2021. The response rate was 83.3% (25/30). **Figure 1** demonstrates the specialty background of respondents. **Figures 2 and 3** show the Likert Scale results assessing key topic experiences from the pre-survey and post-survey, respectively. The general trend across both surveys demonstrates improvement in every key topic area for interns.

Conclusion: As expected, a rotation on the plastic surgery service contributed towards making residents more confident across each (100%) of the key topic areas assessed. One unique addition to this rotation was the inpatient guide that served as a useful resource throughout the rotation and contributed towards the success of residents across several specialties. Future directions of this study are to analyze the specific progression of residents from different specialties, produce more data specific to the usage of the guide by residents, and assess the utility of the guide for fourth year medical students rotating on the service.

Figure 1: Intern Specialty Distribution

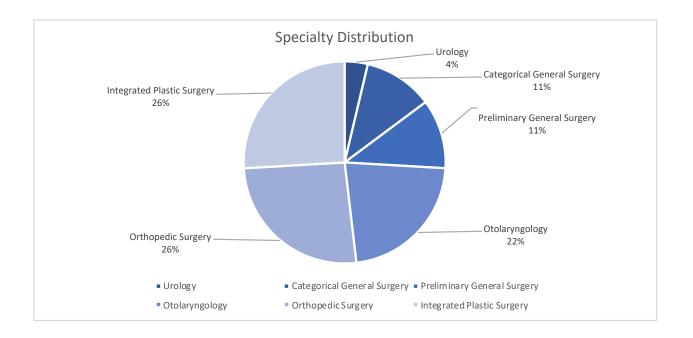


Figure 2: Assessment of Key Topics (pre-survey results)

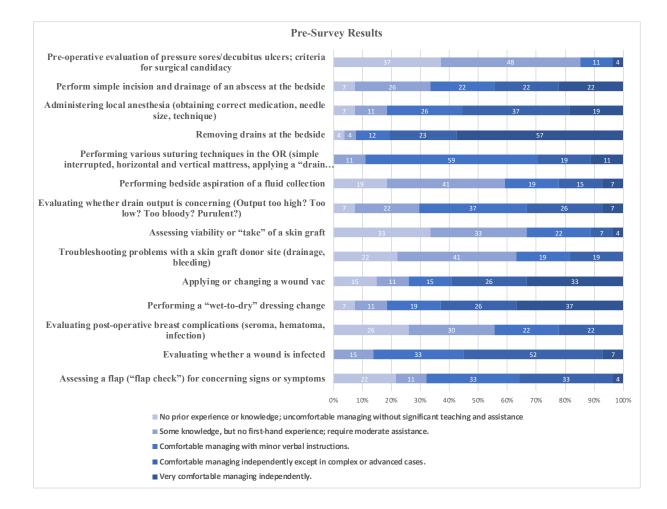
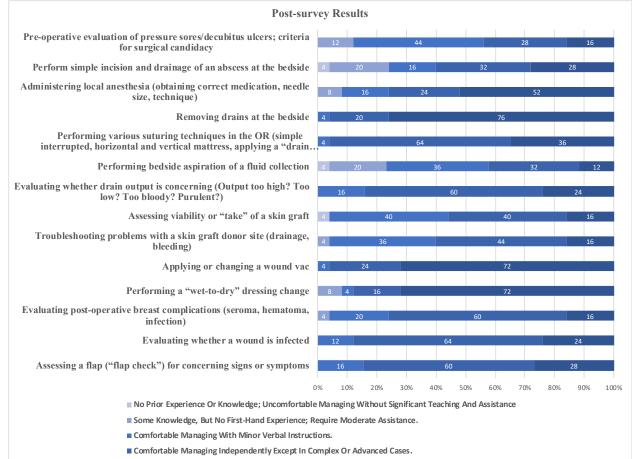


Figure 3: Assessment of Key Topics (post-survey results)



Very Comfortable Managing Independently.