CLINICAL SURGICAL ROTATION CASE REQUIREMENTS

Surgical Specialty General Surgery	Total Number (#) of Cases Required 30	Minimum # of First Scrub(S1) Cases Required	Maximum # of Second Scrub (S2) Cases That Can be Applied Toward 120 Cases
General Surgery Surgical Specialties:	90	60	30
 Plastics Diagnostic Endoscopy: Bronchoscopy Colonoscopy Cystoscopy EGD ERCP Esophagoscopy Laryngoscopy Panendoscopy Sinoscopy Ureteroscopy 			10 diagnostic endoscopy cases may be applied only toward the second scrub (S2) cases.
Labor & Delivery Totals	120	80	5 vaginal delivery cases may be applied toward the second scrub cases. 40
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BREAKDOWN CLARIFICATION

Students must complete a minimum of **120 cases** as delineated below.

A. General Surgery Cases

1. Students must complete a minimum of 30 cases in General Surgery; 20 which must be performed in the First Scrub (S1) Role. The remaining 10 cases may be performed in either the First or Second Scrub (S2) Role.

B. Specialty Cases

- Students must complete a minimum of 90 cases in various surgical specialties, excluding General Surgery; 60 which must be performed in the First Scrub (S1) Role. The additional 30 cases may be performed in either the First or Second Scrub (S2) role.
 - a. A minimum of 60 surgical specialty cases must be performed in the First Scrub (S1) role and distributed amongst a minimum of four surgical specialties.
 - (1) A minimum of 10 cases in the First Scrub (S1) Role must be completed in each of the required minimum of four surgical specialties (40 cases total required).
 - (2) The additional 20 cases in the First Scrub (S1) Role may be distributed amongst any one surgical specialty or multiple surgical specialties.
 - b. The remaining 30 surgical specialty cases may be performed in any surgical specialty either in the First (S1) or Second Scrub (S2) Role.

C. Optional surgical specialties

- Diagnostic endoscopy cases and vaginal delivery cases are **not** mandatory. However, up to 10 diagnostic endoscopic cases and 5 vaginal delivery cases can be counted toward the maximum number of Second Scrub (S2) Role cases.
 - a. Diagnostic endoscopy cases **must** be documented in the category of "Diagnostic Endoscopy", rather than by specialty.
 - b. Vaginal delivery cases **must** be documented in the category of "Labor & Delivery" rather than in the OB/GYN specialty.
- D. Case experience in the Second Scrub (S2) Role is **not** mandatory.
- E. Observation cases **must** be documented, but do **not** count towards the 120 required cases.

F. Counting cases

1. Cases will be counted and documented according to surgical specialty (exception being diagnostic endoscopic cases; refer to C.1.a. above).

2. Examples of counting

- a. Trauma patient requires a splenectomy and repair of a Lefort I fracture. Two cases can be counted and documented since the splenectomy is a General surgery Specialty and the repair of the Lefort I is an Oral-Maxillofacial surgery Specialty.
- b. Patient requires a breast biopsy followed by mastectomy. It is one pathology, Breast cancer, and the surgical intervention Specialty is General surgery; therefore, it is counted and documented as one procedure- one case.
- c. Endoscopic cases that convert to an open case (e.g. Laparoscopic Cholecystectomy converted to an Open Cholecystectomy) are counted and documented as one (1) procedure.