



Ambulatory Anesthesia: Goals and Objectives

Goals

- 1. CA1-3 residents are assigned to the Ambulatory Anesthesia Rotation for 1 or more months to develop competency in managing the common cases encountered in ambulatory surgery patients.**
- 2. The ability to independently practice as a member of an ambulatory anesthesia care team is the expected outcome of this rotation.**

Objectives

1. Patient Care

- Perform a directed pre-operative anesthesia assessment in an ambulatory surgery patient
- Obtain IV access using aseptic technique
- Apply the ASA NPO guidelines as a patient management criteria
- Administer an anti-emetic based on guidelines for treatment of post-operative nausea and vomiting in ambulatory surgery (A&A 97:62-71, 2003)
- Perform a regional block in an ambulatory surgery patient
- Place an LMA using the Brain technique as demonstrated on the LMA video
- Perform a general anesthetic in a spontaneously ventilating patient using an LMA
- Identify and Locate all supporting equipment and medications required to manage:
 - Cardiac Arrest
 - Malignant hyperthermia
 - Difficult airway

2. Medical Knowledge

- Reading Assignments: Miller Chapters 40, 65, and recommended articles
- Specific Cognitive Objectives
 - Discuss the rationale for performing surgery in an outpatient setting compared to in-patient surgery relative to:
 - Cost
 - Infection control
 - Convenience to patient
 - Discuss the criteria for outpatient surgery patient selection relative to:
 - Patient risk factors
 - Surgical risk factors
 - Results of pre-op lab tests
 - Discuss the indications for pre-op medical consultation in ambulatory surgery patients
 - List the ASA pre-operative NPO Guidelines
 - Describe the neurophysiologic processes involved with nausea and vomiting including references to anatomic structures

- vi. List the five major risk factors for developing post-operative nausea and vomiting
- vii. Define the mechanism of action, dose, relative effectiveness, and side effects of the following treatments:
 - 1. Ondansetron, granisetron
 - 2. Droperidol
 - 3. Phenergan
 - 4. Compazine
 - 5. Accupressure
- viii. Describe the process of selecting LMA size based on patient age and weight
- ix. List 5 complications associated with an LMA
- x. List 4 contraindications to the use of an LMA
- xi. Describe the difference between Phase 1 and Phase 2 recovery
- xii. List the discharge criteria for ambulatory surgery

3. Interpersonal and Communication Skills

- a. Establish and maintain professional relationships with the ambulatory surgery patients, their families and the nursing staff involved with their care.
- b. Identify the special needs of ambulatory surgery patients in dealing with the stress of elective surgery as it impacts their daily routine.

4. Practice-Based learning and Improvement

- a. Describe an evidenced-based approach to choosing or excluding anesthetics in ambulatory surgery patients to reduce the incidence of post-operative nausea and vomiting. List references to support your point of view.
- b. Use an evidence-based approach to choosing or excluding medications for treating post-operative pain in ambulatory surgery patients.
- c. Based on a review of the literature, identify the major causes of hospital admission from ambulatory centers. Describe how this information may be useful to improve the patient outcome of reduced unplanned hospital admissions.

5. Professionalism

- a. Reliably start cases on time
- b. Treat patients and their families with respect and honesty at all times.

6. Systems-based Practice

- a. Participate in the nursing assessment of patient's condition on arrival to phase 1 recovery.
- b. Evaluate patients for discharge from the PACU using institutional criteria.
- c. Describe the difference between phase 1 and phase 2 recovery and indicate the benefit of this organizational set-up relative to:
 - i. Patient care
 - ii. Improved efficiency