

ACS
Fundamentals
of Surgery
Curriculum[®]



How Program Administrators Can Use ACS FSC to Guide Resident Development



AMERICAN COLLEGE OF SURGEONS

*Inspiring Quality:
Highest Standards, Better Outcomes*

100+ years

AMERICAN COLLEGE OF SURGEONS | DIVISION OF EDUCATION
Blended Surgical Education and Training for Life

Good Afternoon!

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Goal

To learn how you can monitor and guide resident development by using ACS FSC



What is ACS FSC?

- Online, interactive, case-based curriculum
- Goal: Teach new residents HOW TO THINK
 - How soon to see a patient
 - What questions to ask
 - What tests to order
 - What the results might indicate
 - How to formulate the correct diagnosis for each virtual patient
 - What to do to assist in patient's care



What is ACS FSC?

110 Case Scenarios – 14 Critical Content Areas

- Patient and Workplace Safety
- Preoperative Assessment
- On-Call Issues
- Pain Management
- Unresponsive and agitate patients
- Respiratory Management
- Gastrointestinal Conditions
- Wound Management
- Nutritional Support
- Fluid and Electrolyte Management
- Cardiac Conditions
- Vascular Conditions
- Cardiothoracic Conditions
- NEW! Oncology



What does your resident see?

The screenshot displays the ACS Fundamentals of Surgery Curriculum interface. At the top, the American College of Surgeons logo and name are visible, along with the tagline "Inspiring Quality: Highest Standards, Better Outcomes" and the text "100+ years". The main title "ACS Fundamentals of Surgery Curriculum" is centered, and the "AMERICAN COLLEGE OF SURGEONS | DIVISION OF EDUCATION" logo with the tagline "Blended Surgical Education and Training for Life" is on the right. A "Resources" button is in the top left. The main content area shows a 3D-rendered hospital room with a patient in a bed. A white text box at the bottom left of the room states: "The patient appears acutely ill and does not wish to be bothered." To the right, a smartphone displays a text message: "We have a 35-year-old woman in the ED with a hot gallbladder. She has a temperature of 38.9, her blood pressure is 110/70, pulse is 104, respiratory rate is 26. We got a set of labs, but we knew she needed to be admitted. The ER Doc wishes to admit her to your service. Please come and see her and write her admitting orders." A blue "Continue" button is at the bottom of the phone screen.

Advantages of using ACS FSC

- Designed to fit into *your* educational plan
- Provides documentation of exposure to curriculum and competencies
- Residents learn – and make mistakes – in a safe environment
- Provides hundreds of reference materials with access throughout the year



Putting ACS FSC into Action

ACS FSC teaches residents HOW TO THINK

- Presents real-life situations they will likely face
- Teaches decision making and strategies in caring for real patients

COGNITIVE SIMULATION



How would YOU respond to these situations with residents?



Resident #1

Matthew is arriving at your institution on July 1 to begin his PGY1 year.



Resident #1 Strategies



Resident #2

Andy began his critical care rotation on September 1. One week later, the chief resident complains that Andy is way behind in the rotation and she is worried. Yesterday, he didn't follow proper protocol with a ventilator.



Resident #2 Strategies



Resident #3

During the mid-year performance review for Susan, you notice that her evaluations are often below average. There are concerns with ABSITE fast approaching, and with her progressing to the PGY2 year.



Resident #3 Strategies



Questions?

Want more information or a personal demo?

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<http://www.facs.org/education/program/fsc>

