

APPLICATION FOR DEPARTMENTAL 198 SUPERVISED STUDY ELECTIVE

STUDENT INSTRUCTIONS:

1. Submit the form **at least 4 weeks prior to the start of the work** being done. **If the form is not submitted by this deadline, you may not be able to receive credit for your work.**
2. You will be contacted by email when the form has been signed/approved by the Dean. Processing time for most forms is 5-7 business days.
3. It is your responsibility to add the course to your study list for the appropriate term(s). BE VERY CAREFUL TO ADD THE DEPARTMENTAL 198 COURSE (e.g., MEDICINE 198 AND **NOT IDS** 198!)

SECTION I: Background Information

STUDENT NAME: Veronica Orr GRADUATION YEAR: 2016

SUPERVISED STUDY DEPARTMENT: Anesthesia COURSE #: 198

FACULTY SUPERVISOR NAME: Feiner, John
(Note that the Faculty Supervisor must have an appointment in the above department)

FACULTY SUPERVISOR EMAIL: John.Feiner@ucsf.edu PHONE: 4154768624
08/17-08/28/15

ELECTIVE DATES: _____

NUMBER OF WEEKS (a maximum of 4 weeks can be applied to 4th year graduation elective requirements): 2

FORM SUBMISSION DATE: 8/14/2015

SECTION II: Supervised Study Plans

- A. **Learning Objectives and their linkage to competency milestones** (<http://meded.ucsf.edu/ume/md-competencies>): Your learning objectives (typically 3-6) should describe what you will be able to do by the conclusion of your supervised study.

Learning Objective	Competency domain	Relevant milestone(s)
To understand the pathophysiology of cirrhosis as it relates to anesthesia	Medical knowledge	Witnessing a liver transplant
To understand the perioperative and post-operative morbidity and mortality associated with cirrhosis	Medical knowledge	Production of review article
To understand the risk factors for perioperative mortality	Medical knowledge	Production of review article
To understand the pathophysiology of coagulopathy associated with cirrhosis	Medical knowledge	Production or review article
Timely check-ins with my advisor to check my progress	Professionalism	Production of review article

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Scan to File, email pdf to: UME Advisor, UME Evaluations (LJM),
Evalve (evaluations@medsch.ucsf.edu); AC Mentor

Revised 4/5/13

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Student Name: Veronica Orr***B. Supervised Study Summary***

Over the course of two weeks, I will delve into the pathophysiology of cirrhosis to understand how the disease complicates anesthesia and surgical procedures. My study will include the perioperative and post-operative morbidity and mortality ranging from minor laparoscopic procedures to the paramount surgery of liver transplantation. I will also investigate and review the current literature on the mechanism of coagulopathy in cirrhosis. As hepatic disease is becoming a larger burden on the American population, an understanding of the diagnosis and pathophysiology of liver disease will greatly enhance my ability to practice anesthesia as a future career.

C. Learning Activities: Describe what you will do and how this will fill 40 hours per week.

I will investigate primary literature and construct a review article summarizing my findings. I will also learn practically by observing transplant anesthesia in the OR.

D. Learning Resources: What resources will you use to meet your learning objectives? (eg, textbooks, websites, faculty experts).

I will use PubMed to identify the most up to date primary sources. My faculty supervisor, Dr. John Feiner, has also provided me with articles to investigate. Dr. Feiner is also a faculty expert on liver transplantation. I additionally will get first-hand information from faculty experts while observing in the OR.

E. Expected Outcome/Product: Examples include a report, manuscript, web resource, or score on an examination.

I will produce an article summarizing my findings from primary sources and my experience from faculty teaching while in the OR.

F. Plan for Communication with your Faculty Supervisor:

I will be in close e-mail contact with Dr. Feiner to ensure that I am meeting my learning goals. I will also meet with Dr. Feiner on OR days or in-person as needed.

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Student Name: Veronica Orr**SECTION III: Supervisor Attestation**

My signature verifies that I: (1) support all of the plans in the student's proposal; (2) will provide constructive feedback to the student at the midpoint of their supervised study work; and (3) will submit an evaluation of the student's performance at the conclusion of their supervised study.

Feiner, John	<small>DocuSigned by:</small> <i>Feiner, John</i> <small>C66BDAE87B6647C</small>	8/16/2015
Supervisor Name	Supervisor Signature	Date

SECTION IV: Approval Signatures

Mark Rollins	<small>DocuSigned by:</small> <i>Mark Rollins</i> <small>5A7BB0BCEA75452</small>	8/17/2015
Department Course Director Name	Department Course Director Signature	Date

<small>DocuSigned by:</small> <i>Char Viloria</i> <small>B6161422A9E7465</small>	8/17/2015
UME Advisor Signature	Date

<small>DocuSigned by:</small> <i>Susan Masters</i> <small>321EF2AF351440D</small>	8/17/2015
Associate Dean for Students	Date