

SOME ADVICE FOR *JUNIOR* RESIDENTS

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You train only once; give it your best. Believe it or not, you will look back upon your residency as one of the best parts of your life. But remember, you still have the rest of your life to learn more.

Keep a *Good and Bad Book*. A log book of each surgery you do or witness. The "good" is what you or the surgeon did well, e.g. appropriate incision, well marked. "Bad" is what was not well done or what went wrong, e.g. "Took one hour to find the facial nerve trunk during parotidectomy".

The next time you scrub on a similar case, you review your notes for that procedure; you will not make the same mistake twice or more!

Develop a system of personal continuing medical education:

- Subscribe to/retrieve on line the common head and neck journals or develop a reprint file (costs less).
- Review old journals, look for classical articles. File them. and further divided by procedures.
- Develop a good filing system by head and neck subspecialty and further divided by procedures.
- Check out journals of the overlapping specialties, e.g. *Plastic and Reconstructive Surgery*, *Dermatologic Surgery*, *Archives of Ophthalmology*, etc. Subscribe to all free journals that cover our and allied specialties.
- Take the Home Study Courses
- Use videotapes and on-line teaching aids available from the American Academy of Facial Plastic and Reconstructive Surgery, American Society of Plastic Surgeons, American Society for Dermatologic Surgery, or the American College of Surgeons, etc.
- Attend as many meetings and courses as possible in the last half of your residency. Meet residents from other programs and compare notes.
- As a senior resident, try to watch other top surgeons at

other local programs or hospitals; visit the clinics, also. Want to learn more about orbital or eyelid surgery? Jules Stein is right next door. For an all-around experience, visit the office of someone who does "general head and neck." If you are thinking of sub-specialties, visit with a practicing sub-specialist. Example, interested in otology, first talk to Dr. Irwin Harris. Ask him which practices to visit. You need to see what "the outside world is like." Visit an HMO like Kaiser; they have very interesting practices. Young doctors get lots of experience there. My first "job" after the Army and fellowship was at Ross-Loos, another HMO. The experience was fantastic.

- **Take a speed-reading course.** I took the Evelyn Wood Reading Dynamics Course as a senior medical student. Great move.

Learn everything you can about surgical instruments. Before you leave a residency, be sure you have a list of "sets" to do the most common procedures. Take a look through surgical instrument catalogs and get used to understanding the cost of these items (hint: never pay the 'listed' price. Tell the instrument company rep you will favor him or her with your business but only if you get a great deal. You should get 20% discount, minimal. Remember: **EVERYTHING IN LIFE IS NEGOTIABLE.**) Make friends with the OR supervisor; he or she can be of help to you.

Develop your own O.R. protocol book. For each procedure or class of procedure (head and neck, facial plastic, otology, etc) develop a listing that includes: position on table, prep preference, local anesthesia, additional meds routinely used, glove size, dressing materials. Why bother repeating each time you enter the OR? And, the nurses will love you since they will get it right and look smart.

Want a sample? Contact my office and we will e-mail ours to you. Guaranteed 100% satisfaction.

As a resident, train to be an all-around specialist, proficient in both surgical and medical treatments. You are not in training just to learn how to "cut"; otherwise you could go to a trade school and learn it.

- Harvey Cushing: "A great surgeon is an internist who can operate".
- Most problems come from patient handling or mishandling; poor work-ups, inappropriate patient selection, poor communication. Not technical errors in surgery.

Residency is only the start of your life-long learning. "We can't stay good if we don't continually try to get better". Do not get too cocky as a chief resident. Here is what one of my attendings told me at the end of my residency:

"Kotler, you might think you know it all, but in reality you do not know very much at this point. Keep studying."

- Richard Buckingham, MD, Professor of Otology, University of Illinois. June, 1973.

60 days later, up to my neck in work in the US Army, I knew he was right.

Finally, a fantastic resource for you, in the future, particularly in your early years of practice, are your teachers of today. Keep your faculty phone directory handy and when you have a tough case, call one of your attendings. I did it and it has been great on two fronts—you will get the best advice and you will keep alive one of the special relationships of life — teacher and student.