

Perioperative Medicine

Stage 3 SIA learning outcomes

- ▶ Provides clinical management of patients in the preoperative, intraoperative and both immediate and longer term postoperative periods independently
- ▶ *Is capable of leading the delivery of care in this area of anaesthetic practice, to the benefit of both patients and the organisation*

Key capabilities

A	Provides expert opinion in the clinical management of patients in the whole perioperative process
B	Leads in decision making about the suitability of high risk patients for surgery
C	Manages the perioperative services, ensuring that the care delivered is safe and timely, benefiting both patients and the organisation
D	Develops and evaluates local services and practice
E	Seeks to ensure that perioperative services are fully integrated, consistent, and reliable and sustainable
F	Develops, maintains and evaluates partnerships with colleagues in other disciplines, in particular primary care.

Examples of evidence

Experience and logbook:

- ▶ pre-operative assessment clinics, cardio-pulmonary exercise clinics, acute pain rounds, surgical multi-disciplinary team (MDT) meetings.

Supervised Learning Events (SLEs) can be used to demonstrate:

- ▶ assessment of risk and management of high-risk patients
- ▶ involvement of MDT and patient in shared decision making about high risk surgery
- ▶ pre-operative assessment and management of, for example: anaemia, anticoagulant medication, diabetes, obstructive sleep apnoea, pacemakers, hypertension
- ▶ assessment of frailty
- ▶ use of risk scoring tools and models of functional capacity
- ▶ perioperative analgesia management including regional techniques
- ▶ assessment of post-operative pain
- ▶ assessment and management of post-operative delirium

Personal Activities and Personal Reflections may include:

- ▶ national and international meetings related to perioperative medicine
- ▶ presentation at relevant meeting eg abstract or free paper
- ▶ development of guidelines and policies
- ▶ leadership of QI projects related to perioperative medicine
- ▶ leadership training
- ▶ experience of inpatient rounds such as orthogeriatrics
- ▶ attendance at medical clinics such as cardiology and respiratory.

- ▶ courses and eLearning: shared decision making.

Other evidence:

- ▶ satisfactory MSF.

Supervision level

- ▶ 4 - should be able to manage independently with no supervisor involvement (although should inform consultant supervisor as appropriate to local protocols).

Cross links with other domains and capabilities

- ▶ all non-clinical domains of learning
- ▶ *Perioperative Medicine and Health Promotion*
- ▶ *General Anaesthesia*
- ▶ *Regional Anaesthesia*
- ▶ *Pain*