MRVAMC SENIOR ROTATION IN ANATOMIC AND/OR CLINICAL PATHOLOGY: Rotation 
Director: Byron Croker, M.D., Ph.D., Chief, Pathology

1. Description of the rotation/duties and responsibilities: This rotation provides a bridge between resident and attending responsibilities on any of the anatomic and/or clinical pathology services at the Veterans Administration Medical Center. In simple terms, the resident will perform all of the functions of the attending pathologist on the service(s) selected by the resident, with the exception of signing final reports (ACGME competency #1: Pt. Care). This may include review of gross and microscopic samples, laboratory data, patient information, etc., prior to formulating a preliminary diagnosis which can be communicated to clinicians. Depending on the service(s) selected, the resident may sign out with other residents, and will be expected to provide instruction about the cases reviewed. When the resident is satisfied with the workup of a case, all case materials (slides, report, etc.) will be submitted to the attending pathologist on service, for his/her review and signature (ACGME competency #2: Medical Knowledge).

Prior to starting the rotation, the resident should meet with the rotation director to prepare a schedule, and to initiate privileging. Depending upon the resident’s interests, the resident may choose to serve on any of the VAMC pathology services, including surgical pathology, cytopathology, autopsy, electron microscopy, or clinical pathology, or a combination of these services. After the service selection has been made, the resident’s requests will be reviewed by the VA Pathologists’ QA Committee for determination of privileges.

2. Goals of the rotation: This rotation provides the senior resident with the opportunity to experience the role of a practicing pathologist, in a sheltered setting (ACGME competencies #3: Practice-Based Learning; #4: Communication; #5: Professionalism; #6: Systems-Based Practice).

3. Duration of the rotation: Up to four 4-week blocks during the last year of residency.

4. Duties and responsibilities of residents: Graduated levels of responsibility: The responsibilities of the resident will be identical to those of the attending pathologist on service, with the exception of signing final reports. An attending pathologist, however, will be available at all times for backup.

5. Teaching staff: Byron P. Croker, M.D., PhD.; William L. Clapp, M.D.; William E. Winter, M.D.; Li Liu, MD

6. Supervision and evaluation of residents:
   i. Supervision is provided by VAMC-based faculty with consultations from Shands-based faculty as needed.
   
   ii. The resident’s evaluation is based on knowledge base, clinicopathologic correlation, handling of responsibilities, promptness and initiative in case work up, reliability, and interactions with staff. 6-28-04

Senior Resident Rotation Core Curriculum

By the end of a 4-week rotation, the resident should be able to accomplish the following:

Accurately interpret 90% of the cases reviewed with minor input from faculty
Direct 90% of case workup, including use of histochemical and immunohistochemical stains, EM, flow cytometry, molecular studies, etc.
Prepare final reports that include information needed for staging and prognosis, and literature references as appropriate
Discuss important diagnostic features of routine cases with the other residents on service