

SENIOR ELECTIVE IN FROZEN SECTION CONSULTATIONS:

Rotation director: John Reith, M.D., Associate Professor

1. Description of the rotation - Residents will participate in the interpretation of all frozen section consultations performed at Shands Hospital during the four-week rotation. The rotation is designed to emphasize the interpretive aspects of frozen section consultation as opposed to the technical aspects. Residents should be available in the gross room area from 8:00 a.m. until 5:00 PM (ACGME competency #5, professionalism).

2. Goals of the rotation – The main goal of the rotation is for senior level residents to become comfortable with the interpretation of frozen sections and increase their efficiency in the interpretation of intraoperative consultations (ACGME competencies #1 and #2, patient care and medical knowledge). Residents will also learn to communicate effectively with the surgical attendings (ACGME competency #4, communication), and learn to appropriately document the results of intraoperative consultation (ACGME competency #1, patient care). Residents should also gain an appreciation of the everyday quality control issues that occur on the frozen section bench, and how to remedy issues with cryostats, stain lines, etc. (ACGME competency #3, practice-based learning). Residents should gain an appreciation for appropriate indications for frozen section consultations (ACGME competency #6, systems-based practice).

3. Duration of the rotation - 4 weeks, for residents in PGY 3 or higher.

4. Duties and responsibilities of resident - Residents will participate in all intraoperative consultations and frozen sections. He/she should be available from 8 a.m. to 5 p.m. When called, the resident will triage the tissue or specimen to determine an appropriate area to freeze. After the frozen section slides are prepared by the PA's, the resident will formulate an opinion of the diagnosis, and may complete the frozen section forms if comfortable. When the microscopic examination is complete, the resident will call the Triage attending to examine the frozen section and co-sign the report. .

5. Teaching staff – All Anatomic Pathology faculty members who staff the Triage Service, Robin Foss, P.A., Jerry Phipps, P.A., Trevor Jorgenson, P.A.

6. Resident supervision and evaluation - The attending pathologist on service **must** co-sign all reports, and will **always** be available to assist the resident with any specimen. PA's will also assist the resident if there are questions regarding the most appropriate areas for processing. The PA's and Triage service attendings will evaluate the resident using standard Anatomic Pathology assessment forms.