



UNIVERSITY *of*
ROCHESTER

**Department of Surgery
APP Fellowship Program**

**Policy Manual
2025-2026**

IMPORTANT FELLOWSHIP CONTACT INFORMATION

Surgical APP Fellowship Director:

Alicia Frelier, FNP-C
Office: (585) 275-6078, room 2.7220B
Cell: (585) 472-2713

Department of Surgery APP Manager:

Kara Mestnik, FNP-C
Office: (585) 276-7806, room 2.6114d
Cell: (585) 217-7817

Divisional Program Coordinators:

- **Thoracic-Foregut Surgery:** Alicia Frelier, FNP-C & Megan Poirier, PA
- **Colorectal Surgery:** Holli Swanson, PA & Meghan Leusch, PA
- **Plastic/Burn Surgery:** Morgan Cook, NP
- **Trauma/ EGS:** Zachary Woughter, PA & Leah Green, NP
- **Surgical Oncology/ HPB:** Amanda Battoglia, NP
- **Pediatric Surgery:** Jessica Elbaz, NP & Jenna DiQuattro, NP
- **Vascular Surgery:** Kimberly Silverman, PA & Arica Ferguson, PA
- **Breast Surgery:** Jenna Dobbins, PA & Karina Rios, NP
- **Regional Surgery:** Courtney Quinlan, NP (St. James), Mike Filinger, PA (Noyes), Samantha Johnson (Strong West)

Other pertinent contacts:

- Ostomy APPs: Ginny Hanchett, NP & Ashley Croft, NP
- Sawgrass Wound Clinic: Lisa Wallin, NP

APP Fellowship Administrative Support:

- Sarah Raab
- Christina Mattle, Thoracic Surgery

REACHING THE DIRECTORS/ DIVISION COORDINATORS

- **Routine business** the best contact method is e-mail (all available on global unless otherwise indicated)
- **Urgent business** (i.e. if you are sick and unable to work a shift) you must contact the Program Director, Alicia Frelier, FNP-C by phone/text at (585) 472-2713 and your divisional program coordinator specific to which division you are currently rotating on (see APP Sick Policy).

MISSION STATEMENT

At the University of Rochester, our mission is to develop and empower exceptional NPs and PAs through a comprehensive and transformative fellowship program. Our program is designed to provide postgraduate NPs and PAs with an immersive and dynamic learning experience, equipping them with the necessary skills, knowledge, and confidence to excel in their respective specialties.

Through evidence-based education, mentorship, and hands-on clinical training, our fellowship seeks to cultivate clinical expertise, critical thinking, and leadership capabilities in our NP and PA fellows. We aim to foster a collaborative and interprofessional learning environment, where fellows engage with multidisciplinary teams, learn from seasoned practitioners, and contribute to improving patient outcomes.

As a program committed to excellence, we prioritize patient-centered care and ethical practice, emphasizing compassion, empathy, and respect for diverse patient populations. We are dedicated to instilling a commitment to lifelong learning and professional growth in our fellows, fostering a continuous pursuit of excellence in their careers.

Our ultimate goal is to produce proficient and well-rounded NPs and PAs who serve as advocates for their patients, drive innovation in healthcare, and make meaningful contributions to the advancement of their respective fields. By nurturing the development of capable and compassionate healthcare providers, our fellowship program strives to positively impact the well-being of individuals and communities, advancing the quality of healthcare delivery and shaping the future of advanced practice.

INTRODUCTION

Welcome to the University of Rochester Division of Surgery APP Fellowship Program. This manual includes a description of the program requirements, your responsibilities as a fellow, and important departmental and institutional policies. Fellows are expected to be familiar with the contents of this Manual at the beginning of fellowship. ***Throughout the year, additional important information will be communicated to fellows primarily via email. Fellows are expected to check their email frequently. Please keep this manual as a reference. Your schedules will be located in your outlook calendars for each divisional rotation.***

SURGICAL APP FELLOWSHIP PROGRAM OBJECTIVES

The Surgical APP Fellowship will be a one year extended and focused educational program in surgery which will focus to provide a foundation of general surgical knowledge. This program will be targeted to Nurse Practitioners and Physician Associates that are interested in surgery, but may or may not have any previous experience in the field.

The goals of the program include:

1. Improving competency of APP's with respect to surgical knowledge base and skill set.
2. Improving patient care by providing standardized introduction to the different subspecialties within the division of surgery with evidence-based training in alignment with our general surgery residency program.
3. Providing hands on procedural skills development
4. Providing both inpatient and outpatient patient care across the divisions of surgery to care for patients throughout their surgical experience, and those managed non operatively.
5. Providing observational experiences in the operating room throughout the surgical specialties.
6. Providing weekly/monthly educational programs on the latest surgical topics, provided by numerous health professionals
7. Providing self-study educational opportunities and resources to expand knowledge base and up to date surgery practices.
8. Promote teamwork with the interdisciplinary team (Physician's, surgery residents, APPs, Nursing staff and Administrative Staff) to ensure excellent patient care.
9. Improve retention of APP's that have a shared passion and enthusiasm for surgery

FELLOW RESPONSIBILITIES

1. Participate in the program's educational offerings.
2. Engage in a program of personal study and lifelong learning.
3. Adhere to hospital and program policies and procedures.
4. Avoid behavior that may be perceived as harassment or intimidation by others.
5. Communicate and interact in a respectful manner with peers, faculty, and hospital staff.
6. Treat patients with respect, showing concern for their privacy.
7. Demonstrate honesty and integrity in the care of patients, and in the completion of scholarly work.
8. Report behavior by others that appears to be unethical or unsafe.
9. Successfully comply with all mandatory surveys and mandatory didactic experiences.
10. Be an effective, involved, and enthusiastic team member when assigned to services outside of the division of surgery.
11. Remain up to date with all hospital and unit mandates throughout the year.

CLINICAL PROGRAM

The clinical experiences which have been designed for the Surgical APP Fellowship program have been developed to help Fellows master the skill set and knowledge necessary for becoming a competent Surgical Advanced Practice Provider. There are specific learning objectives for each sub-specialty rotation which are clearly identified in each clinical syllabus. APP Fellows are expected to review the learning objectives, clinical and didactic requirements, and evaluation criteria prior to starting each rotation. A pre and posttest will be administered to monitor material learned with each rotation. Fellows are required to read the required and recommended readings that correspond to the core content area for each rotation, which are included on box for each rotation.

Clinical Rotations:

- Thoracic-Foregut
- EGS/ Trauma
- Vascular
- Plastic/Burn
- Colorectal
- Surgical Oncology/ Hepatobiliary
- Breast Surgery
- Pediatric Surgery*
- Night float intern rotation
- Regional Surgery*

Fellowship Documentation of Procedures:

Fellows are required to maintain an accurate log of all procedures. This log should include procedures done on actual patients as well as any done in any cadaver labs. This log will be reviewed with you at your sixth month evaluation. We recommend that you log on to E*Value at the end of each shift to update your procedures.

APP Delineation of Privileges

The hospital requires APPs to maintain documentation of APP Delineation of Privileges. This document defines the procedures you can do under general supervision versus under direct visual supervision by another credentialed provider. This list is consistent with the credentialing forms you will fill out when you initially applied for hospital privileges. Procedures documented during your

Fellowship training will be used by the Sovie Institute to determine if you qualify for these privileges at the time of your re-credentialing. Please document every procedure that you perform.

DIDACTIC PROGRAM

The didactic portion of the Surgical APP Fellowship program has been designed to complement the clinical experiences which compose the one year program. The APP Fellow director will coordinate additional educational lectures in conjunction with the Surgery Residency program director (>90% attendance required during the one year program).

- 1) Weekly Surgical Grand Rounds are held every Thursday from 7:00AM – 8:00AM (room varies). **These are mandatory so long as your rotations are on site at SMH.**
- 2) Each rotation you will receive individual presentations and education guides for learning for each service.
- 3) Divisional M&M's per individual surgery service rotation schedule
- 4) ACLS/ BLS per RQI schedule
- 5) Designated Radiology days
- 6) Designated days with nutrition
- 7) WOCN/ Ostomy APP/ Wound clinic
- 8) Annual APP Pharmacology Update (usually in October)
- 9) Basic skills/ suturing class in conjunction with 3rd year medical students
- 10) Lecture series combined with medical students during their surgical clerkship
- 11) Weekly meetings with your divisional program coordinator to review and discuss case reports
- 12) Rotational evaluations and discussions with Fellowship Director Alicia Frelier, FNP-C will occur on the last Thursday of each rotation and will include:
 - Chart Reviews (previously reviewed by your divisional program coordinator)
 - Discussion about monthly rotation experiences
 - Clinical Rotation Evaluations
 - Rotation Site Evaluations
 - Indications (monthly)
 - Completion of Case Studies
 - Review of E*Value Procedure Logs
- 13) An examination will be administered prior to each specialty rotation and immediately following the rotation, to track progress during the APP Fellowship program. The results from the examination will be used by the Director to measure outcomes and will not be used for grading purposes.
- 14) Additional applicable divisional conferences during monthly rotations as time allows.

15) Each Fellow is expected to be involved in a quality improvement project within the department of surgery and present on their work at the end of the fellowship.

SURGICAL APP FELLOWSHIP PROGRAM EVALUATION METHODS

Comprehensive evaluations are performed throughout the one-year Fellowship program. Professional growth and development over the course of the Fellowship training is assessed in multiple ways. Each Fellow meets with the Surgical APP Fellowship Director and APP Manager to review performance and progress during the program. Evaluations are received on all the subspecialty rotations and off service rotations.

1. Evaluations showing use of multiple evaluators (*faculty, peers, and other professional staff*):
 - a. Monthly rotation evaluations at the completion of the rotation
2. Evaluations of Progress:
 - a. Soviet Institute 6 month evaluation (NPs and PAs)
 - b. Annual Evaluations—February/March (NPs and PAs)
 - a. Annual Evaluation on MyPath for APPs

2025-2026 COMPLETION REQUIREMENTS

The Fellowship Director is responsible for reviewing the progress of its Fellows. If a Fellow is not performing at an acceptable level for his/her level of training, this group will make recommendations regarding remediation or probation and the provisions for progressing in the program.

Requirements to Graduate

- The APP Fellow will provide patient care that is safe, ethical, and compassionate.
- The APP Fellow will perform at a level that is appropriate for his/her level of training in the areas of Medical Knowledge, Patient Care, Communication, Professionalism, Systems-Based Practice and Practice-Based Learning.
- The APP Fellow will demonstrate the ability to communicate effectively with patients, their families and the interdisciplinary health care team.
- The APP Fellow will demonstrate the ability to acquire new knowledge, critically analyze the medical literature, and understand how new information should be incorporated into the patient's plan of care.
- The APP Fellow will display successful performance on all Surgery rotations and all off-service rotations, as evidenced by satisfactory performance evaluations.
- The APP Fellow will have documented evidence of procedural competency.
- The APP Fellow will present on the quality improvement initiative progress they have made during the program year
- The APP Fellow will complete each of the Fellowship Rotation Clinical Preceptor and Site Evaluations.

SURGICAL APP FELLOWSHIP REMEDIATION PLAN

Creating a remediation plan for APPs requires a thoughtful and individualized approach. The plan will be developed in collaboration with the APP fellow, the fellowship director, and relevant stakeholders. The goal is to identify areas of improvement and provide resources and support to help the APP fellow succeed in their role. In addition to UPMC policies and procedures regarding remediation, below is a general outline for a remediation plan:

1. Assessment and Feedback:

- Conduct a comprehensive assessment of the APP's performance, including clinical skills, communication, documentation, and adherence to protocols.
- Gather feedback from patients, colleagues, and other healthcare team members to gain a well-rounded perspective.

2. Goal Setting:

- Set specific, measurable, achievable, relevant, and time-bound (SMART) goals with the APP. These goals should focus on the areas that need improvement.
- Align the goals with the APP's job responsibilities and the organization's expectations.

3. Educational Resources and Training:

- Provide the APP with access to relevant educational resources, workshops, or training sessions to enhance their knowledge and skills in identified areas of weakness.
- Consider online courses, workshops, or conferences that offer continuing education credits or certifications.

4. Clinical Supervision and Mentorship:

- Pair the APP with an experienced and supportive mentor or preceptor who can offer guidance, feedback, and support.
- Schedule regular meetings with the mentor to discuss progress and challenges.

5. Performance Improvement Plan (PIP):

- Develop a structured Performance Improvement Plan (PIP) that outlines the steps the APP needs to take to address their areas of improvement.
- Clearly define the actions required, resources available, and the timeline for achieving the goals.

6. Feedback and Monitoring:

- Provide ongoing feedback and performance evaluations to track progress toward the established goals.
- Regularly review the APP's performance to assess their development and make adjustments to the remediation plan as needed.

7. Emotional Support:

- Recognize that remediation can be a challenging process and offer emotional support to the APP during their journey.
- Encourage open communication and create a safe environment for the APP to express concerns or seek guidance.

8. Reevaluation and Assessment:

- After a predetermined period, reassess the APP's performance and determine if the goals have been achieved.
- Celebrate successes and acknowledge improvements.

9. Decision-making:

- Based on the progress and outcomes of the remediation plan, make informed decisions about the APP's continued employment or possible changes in their role.

SURGICAL APP FELLOWSHIP SCHEDULING POLICIES

- Schedules are created +6 months in advance.
- All vacation requests are due to the Fellowship Director and APP Manager 8-12 weeks in advance.
- All class time and vacation time must be approved prior to the 8 week deadline. Please request this time off as early as you can, even if it is many months in advance.
- Fellows should refrain from requesting vacation time for the first six months of the program, and ideally not on the shorter rotations.

Monthly Requirements

- A Full Time 40-50 hours per week is required. A full time APP at the university typically works 40-50 hours/ week.

Summer Vacation

- Surgery APP fellows accumulate 5 weeks of vacation/ year. We are able to accommodate 2 weeks off during the Summer (June through August). These 2 weeks will include both vacation and class time. This is to ensure that vacation is distributed evenly among all of the weeks.

PROFESSIONAL DUTIES

Procedure for Sick and/or Call Offs

We understand that there may be times that you may need to call in due to a personal/family emergency or illness. Please follow the procedure below.

- **Call or text** Alicia Frelier, FNP-C (585-472-2713) to notify her about a sick call. Also notify your point of contact APP within the division you are rotating through.

Pay Procedures

- Sick calls will be used solely for personal sick calls.

- Exception: death in the family or jury duty.

Excessive call outs will be addressed on an individual basis.

Where to go for Help:

Surgical APP Fellowship Director
Alicia Frelier, FNP-C
Office: (585) 275-1509
Cell: (585) 472-2713 (best contact)

Division of Surgery APP Manager
Kara Mestnik, FNP-C
Office: (585) 276-7806
Cell: (585) 217-7817

Strong Employee Assistance Program (EAP)
550 White Spruce Blvd
Office: 585-475-0432
Emergency Pager: 585-220-0441

Continuing Medical Education (CME) Funds

Surgical Fellows will be reimbursed up to \$1000 per year to attend an educational conference that has been approved by the Program Director. Expenses must be submitted **no later than 6 weeks after incurrence** (except at fiscal year-end when the deadline is June 1st as communicated by U of R Finance). The CME funds are to be used in the academic calendar year (July 1st to June 30th). The hospital accepts only original receipts for airfare, hotel accommodations, and meals (NOT credit card receipts). If you have any questions about acceptable receipts, please check with the Division of Surgery APP Manager.

Per URMC requirements, APPs are required to complete 50 CME credits per year.

You will NOT be reimbursed for alcohol per departmental policy.

Use of Generative AI (e.g., ChatGPT, DALL-E, BARD, co-pilot, duet, etc.) in this Fellowship Program and online course:

Generative AI is a tool with positive and negative aspects. It is important to learn how to use it appropriately, responsibly, and ethically. Learners who use generative AI must understand that it can generate inaccurate or misleading content; use copyrighted material without proper attribution; and/or generate biased or discriminatory content that is not appropriate for any course.

LIFE SUPPORT TRAINING

The Sovie Institute of APPs provides opportunities to obtain required BLS/ ALCS/ training.

LIBRARY RESOURCES

There are three libraries available to Fellows in the program. The main University of Rochester Rush Rhees Library is a 10-minute walk from the Hospital on the main undergraduate campus. The Medical Center contains the Edward G. Miner Library on the 1st Floor of the Hospital. The Basil G. Bibby Dental Library is located in the Eastman Dental Center. Additional references are available in the Plato Schwartz Library (G-5527). VPN access will allow for Miner Library access from home.

- Surgery APP Fellows have access to medical references in several locations, the Miner Medical Library, Basil G. Bibby Dental Library, and the Plato Schwartz Library.
 - The Miner Medical Library at Strong Memorial Hospital is conveniently located in the hospital building. Its hours of operation are Monday-Thursday 7:30 am - 12 midnight; Friday 7:30 am - 8 pm; Saturday 10 am - 8 pm; and Sunday 12 noon - 12 midnight.
 - The Basil G. Bibby Dental Library is located next to the parking garage in the Eastman Dental Center. Its hours of operation are Monday-Thursday 8:30 am - 9 pm, Friday 8:30 am - 6 pm, Saturday 1 pm - 5 pm (Closed Saturdays June-August), and Sunday 3 pm - 8 pm.
 - Fellows at Strong Memorial Hospital also have 24-hours/day access to Med-Line and the Internet via computers located throughout the outpatient clinics.
 - Miner Medical Library offers an online service called Miner Digital Library that is available to all residents and faculty 24-hours/day. The Miner Digital Library provides access to *UpToDate*, *Micromedex*, *MD Consult*, *The Cochrane Database*, and more.

COMPUTER RESOURCES FOR FELLOWS

Experience with computerized literature searching is an integral part of fellowship training. Literature search services (MEDLINE, HEALTH, CANCERLIT, Current Contents, and CINAHL) are available from the Medical Center's Miner Library. Numerous on-line texts and journals are also available. You can access these via the Miner Library Site, through physician services on the Intranet, or through the Emergency Medicine page on the Intranet. Resource Medical Librarians are available in the Miner Library to assist with literature searches.

PRUDENT PERSONAL USE OF SOCIAL MEDIA

These guidelines apply to any URMIC employee using any social networking sites in a way that identifies him or her with URMIC. That is, if the individual lists themselves as a URMIC employee or volunteer, if their site contains a written or graphic reference (photos, etc.) to URMIC, or if the individual discuss events, people, or issues to which only a "URMIC insider" would be privy.*

Before engaging in blogs, Facebook, and other social networking sites, remember that the basic principles and policies that apply to your URMIC professional life *also* hold true in online forums. The guidelines below offer examples of how existing URMIC policies play out in realm of modern communication platforms.

- Personal use of social networking sites should be limited to non-work time, and should not interfere with your work or the mission of the University.
- Do not share confidential or proprietary information about the URM or its affiliates.
- In keeping with HIPAA regulations, never use or disclose Protected Health Information without official, signed consent from the patient or research subject. Even a casual reference—such as the fact that you were a patient’s nurse—amounts to a HIPAA violation, since it acknowledges that an individual was or is hospitalized. These rules apply even when a patient was specially profiled on (or if the patient directly posted a comment on) a URM blog or Facebook site.
- Also, in compliance with HIPAA privacy law, never post or publish photos relating to your patients or their care. Remember, even references to the care of a patient who is not identified by name, but who is identifiable to your co-workers or others in the URM community (due to knowledge of circumstances), are problematic. In fact, in general, we encourage you to err on the side of caution and refrain from even vague references to patient care duties, given the potential for HIPAA violations.
- Use a personal e-mail address (not your “urmc.rochester.edu” address) as your primary means of registering for entry into social media platforms.
- Personal use of social networking sites should not violate University policy as it relates to co-workers, supervisors, or other members of the University community. For example, social media should not be used to post comments or references to co-workers, supervisors or patients that are vulgar, obscene, threatening, intimidating or harassing (i.e., all examples of misconduct under the University’s corrective discipline policy, Policy 154), or a violation of the University’s workplace policies against discrimination, harassment, or hostility on account of a protected class, status or characteristic (e.g., age, disability, race, religion, sex, etc., under Policy 106). Behavior violating such policies can result in discipline.
- In some instances, the personal opinion of a URM faculty and staff member (who directly or indirectly identifies themselves as a member of the URM community) could be misconstrued as an official URM stance. In those circumstances, we strongly urge you to use this disclaimer: “The views expressed on this [blog; website] are my own and do not reflect the views of my employer.”) We suggest including this language in an “About me” section of your online profile.
- If discussing URM or URM-related matters over the Internet, we encourage you to specify your connection to URM, use good judgment, and strive for accuracy in your communications. Errors and omissions reflect poorly on URM. Again, to avoid confusion, it’s always prudent to distinguish between your personal views and an official URM position.
- Clinical caregivers should not provide consultation or medical advice online; in the same vein, we encourage caregivers to avoid muddying professional duties with personal social media accounts by “friending” or connecting with patients online.
 - On a related note, if you *must* connect with a patient by e-mail, plan to leverage a secure, institutionally sponsored tool (like MyChart, which is built to help you connect in an encrypted, private environment). These electronic exchanges, if systematic and thoughtful, can supplement a face-to-face relationship, enhancing the overall care experience; however, they should never stand alone.
- Some of the information you post online may be available more broadly than you expect (social media platforms are often less private than they seem), and could potentially be misconstrued. Since URM’s patients and the community see our faculty and staff as extensions of the organization itself, we advise you to exercise good judgment and take personal and professional responsibility for your online behavior. Consider the sage adage of

“pausing before posting” to think how your message or photo might be perceived by the general public. Remember, even once comments are deleted, and tweets are “recalled,” it’s practically impossible to completely erase content once it’s been published in cyberspace.

- Do not publish or post false information about URMC, its employees, its patients or its affiliates.
- Be courteous and professional when interfacing with URMC’s corporate social media platforms such as our official Facebook sites, Twitter feed, You Tube channels, etc.

A good rule of thumb: If you would not want a broad audience to see comments you share online, you might not want to post them to the internet.

Call URMC’s Office of Public Relations & Communications (585-275-3676) if you have further questions about what is appropriate to include in your personal blog or social networking profile. For URMC’s complete social media toolkit, visit <http://www.urmc.rochester.edu/news/social-media-toolkit>.

*Nothing in these guidelines is intended to prohibit employees from communicating in good faith about wages, hours, or other terms and conditions of their or their co-workers’ employment.

Surgical APP Fellowship Program Clinical Rotations

The Surgical APP Fellowship will be a one year extended and focused educational program in Surgery which will focus to provide a foundation of the care of the surgical patient. This program will be targeted to Nurse Practitioners and Physician Assistants that are interested in Surgery, but may or may not have any previous experience in the field.

The goals of the program include:

- Improving competency in APP's with respect to Surgery knowledge base and skill set.
- Improving patient care by providing standardized introduction to Surgery with evidence-based training in alignment with our General Surgery Physician Residency Program.
- Providing hands on procedural skills workshops and real life patient care
- Providing educational programs on the latest surgical topics, provided by certified surgeons and residents.
- Providing self-study educational opportunities and resources to expand knowledge base and up to date surgical practices.
- Promote teamwork with the interdisciplinary team (Physician's, general surgery Residents, APPs, Nursing staff and Administrative Staff) to ensure excellent patient care.
- Improve retention of APP's that have a shared passion and enthusiasm for Surgery.

DESCRIPTION OF OUTPATIENT CLINICAL EXPERIENCES AND RESPONSIBILITIES:

The Surgical APP Fellow will be responsible for the primary assessment of patients who present to the outpatient clinic with a wide range of complaints. The APP Fellow will take a directed history, perform a focused physical exam, develop appropriate differentials and develop a plan of care. The APP Fellow will then present each patient case to the APP, Physician Fellow and/or the Attending Physician, who will work collaboratively with the APP Fellow to further develop a diagnostic work-up and treatment plan. The Fellow will perform invasive diagnostic, therapeutic and monitoring procedures as indicated for patients under their care.

DESCRIPTION OF INPATIENT CLINICAL EXPERIENCES AND RESPONSIBILITIES:

The Surgical APP Fellow will be responsible for numerous tasks dependent of the primary role of the APP preceptor during each rotation. In general, responsibilities include daily rounding on admitted patients which includes a detailed interval history, focused physical exam, review of pertinent objective data, and formulation of plan and documenting accordingly in a progress note. Tasks also include completing a H&Ps on newly admitted patients or consult patients, wound care, hospital discharges, education with patients/ families, phone triage, among others.

COMPETENCY BASED GOALS AND OBJECTIVES:

Patient Care/Medical Knowledge:

- Each division will have knowledge and patient care-based goals and objectives associated with their specific rotation.

Interpersonal and Communication Skills:

- The APP Fellow will interact compassionately with patients and families during the stress of their illness
- The APP Fellow will communicate with other providers involved in the care of patients

Professionalism:

- The APP Fellow will participate actively in the educational experience in a professional matter that encompasses the ICARE values.

Practice-Based Learning and Improvement:

- The APP Fellow will demonstrate the ability to apply knowledge/readings to patient care.
- The APP Fellow will learn and incorporate new knowledge by reviewing Surgical patient management and subsequent patient diagnosis, treatment and outcomes of patients.

Systems-Based Practice:

- The APP Fellow will demonstrate a clear understanding of the role of Surgical providers in the ongoing care of patients in the outpatient clinics, Emergency Department, and inpatient units.

- The APP Fellow will participate as a member of the health care team to coordinate patient care.

Supervision:

APP Fellows are supervised at all times by on-site APPs, Physician Fellows or Attending Physicians.

DIDACTIC EXPERIENCES:

Fellows are excused to attend Surgery Resident Conferences. Hours will be adjusted to allow fellows to attend conference.

EVALUATION AND FEEDBACK:

- Evaluation tools will be provided to the supervising APP, Physician Fellow or Attending Physician on a monthly basis and will be confidentially returned to Director of the Surgical APP Fellowship Program for review.
- Fellows will be provided with feedback after the completion of the rotation.
- Supervising APPs, Resident Physicians or Attending Physicians may contact the Surgical APP Director, Alicia Frelier, FNP-C, at any time with questions or concerns about the performance of the Surgical APP Fellow during the rotation.
- Each fellow is asked to evaluate the educational value of each rotation in writing, at the completion of the rotation and as part of the annual program review. Fellows are asked to refer to the objectives of the rotation when filling out these evaluations. The program directors will review rotation evaluations annually. Feedback from fellows and faculty is taken into consideration when planning rotations for the following academic year.

ADMINISTRATIVE:

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Surgical APP Fellowship Program Director
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Cell: (585) 472-2713

Kara Mestnik, FNP-C
Division of Surgery APP Manager
Kara_Mestnik@URMC.Rochester.edu
Office: (585) 276-7806, room 2.6114d
Cell: (585) 217-7817

Appendix A

Surgical APP Fellowship Monthly Indications Presentation Format

- Patient presentation summary
 - Chief Complaint
- History:
 - Pertinent Past Medical History
 - Pertinent Past Surgical History
 - Pertinent Family History
 - Pertinent Social History
- Current Medications
- Physical Examination summary
 - Pertinent positive findings
- Differential Diagnoses
 - How did you develop these?
 - More/Less likely
- Plan
 - Labs
 - Imaging
 - Other testing
 - Procedures
 - Medications
 - Other therapies
 - Should be in alignment with your differential diagnoses
- Results of testing
 - General summary of findings
- Patient Course
 - Additional testing required
 - Additional therapies attempted
 - Plan for this patient?
- Things to do differently?
 - What went well?
 - What could have gone better?

Presentation Evaluation Rubric

Area of Evaluation	Exceeds Expectation	Meets Expectation	Needs improvement
<i>Pertinent Topic</i>	Topic pertinent to current rotation	Topic pertinent to current rotation	Topic not pertinent
<i>Quality of Information/ Presentation</i>	Presents information in clear concise way which promotes learning and inspires thought	Presents information in clear, concise way which promotes learning	Little pertinent information provided, Poor quality
<i>Sources cited (if applicable)</i>	Several peer reviewed sources cited	Peer reviewed sources cited.	Sources not used or of poor quality

