First Year Post-Residency – Now What? Fair Winds and Following Seas



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Presenter Disclosures

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No conflicts to disclose.





Communication

Scheduling

Central Supply

• In the O.R.

In Recovery





Communication

--- Kindness





What Can You do Now as a Resident

Clinical setting

- Protocol for conservative treatment
- Postop protocols
- Brush up on orthotics/biomechanics
 - Less common pathology







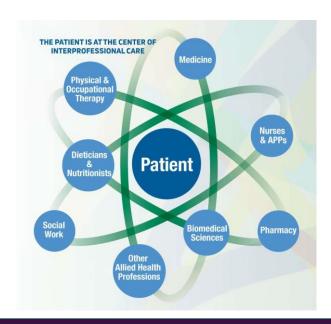




What Can You do Now as a Resident

Geography

Establish a referral system









Surgery 101

Hospital

- Pros
 - Support departments
 - More resources
- Cons
 - Slower
 - More expensive



ASC

- Pros
 - Fewer delays
 - Cheaper
- Cons
 - Fewer resources

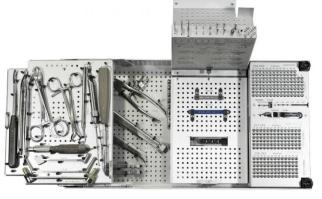


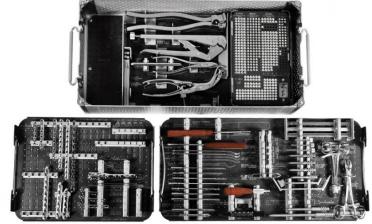




Other Considerations

- Is there another podiatrist on staff?
- OR equipment → What's on the shelf?
- Special equipment
- Sets can be modified/customized









Other Considerations: OR Efficiency

- Know your staff: scrub tech, circulator, rad tech
- Do you have residents or assistants
- Anesthesia protocol → popliteal blocks
- Positioning materials → foam blocks, instruments, thigh holders
- Find out how your procedure time is calculated
 - Average time per procedure
- Do you have OR block time?
 - Use it or lose it
 - Typically earned











DON'T FORGET TO LOG YOUR CASES!!!

THANK YOU!

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