

Surgery Rounds: What to Carry Checklist

Pocket Guide (1 of 2)

Developed by ACS CMSE Student Resource Task Force Members
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- pens
- penlight/flashlight
- stethoscope
- trauma shears/bandage scissors
- scalpel*
- steri-strips*
- paper tape*
- 2.0 polypropylene suture*
- large note cards
- reference pocket book
- alcohol wipes*
- cotton tip applicators*
- ABD pad*



- 4x4 gauze pads*
- suture/staple removal kit*



- transparent film dressing (small/med/large)*



*= these items commonly found in storeroom

Fold here. Then laminate.

Surgery Rounds: How to Excel

Pocket Guide (2 of 2)

Before You Start

- Ask your senior team member their expectations at the beginning.
- Ask the nurse on the floor for access to the stockroom to obtain supplies to carry in your lab coat pocket.
- Ask on the rotation's first day when you are expected to be at the hospital and when rounds take place. Be punctual, enthusiastic, and confident.
- Ask what expectations are for rounding, including how many patients to see, who should you present to, and should you write the patient progress note.

On Rotation: Busy Times

- Be willing and eager to take on responsibility. This will show the team that you are engaged and ready for more advanced opportunities.
- Aim to follow 2–5 patients depending on the service, and follow these patients to the OR.
- Know your patients and their course better than anyone on the team. Communicate efficiently with your team about your patients.
- For patient presentations, practice beforehand and prepare to deliver concise information.
- Report information accurately and develop and state your own assessment and plan. Learn from ideas of management and corrections to your plan.

On Rotation: Down Times

- Ask your team for constructive criticism on patient presentations.
- If time allows or during downtime, teach the team about a topic regarding patients. This will always be appreciated, and shows you are motivated to learn more.
- Before every OR case, review the relevant anatomy. Above all else, know why the operation is or is not indicated.
- Ask the OR staff for leftover suture to practice knot tying. Practice opening and closing various clamps with both hands.

Remember: Always tell the truth, even if it has consequences.