

## University of Wisconsin School of Medicine and Public Health Rural General Surgery Residency Track

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**To apply for the rural general surgery residency track, apply through ERAS to our “General Surgery/Rural” track. The NRMP code is 1779440C1.**

Wisconsin, like many Midwestern states, has a large rural population served by small hospitals. These hospitals and the populations they serve have a need for general surgeons to care for their patients. The UW Rural Surgery track has the goal of providing excellent training for surgeons who desire to live and practice in rural areas. The University of Wisconsin School of Medicine and Public Health has a strong commitment to rural practice and sponsors the WARM (Wisconsin Academy of Rural Medicine) program for medical students interested in rural medicine.

The five-year Rural Track General Surgery Program trains the resident in the full breadth of clinical and procedural skills required to practice general surgery. In addition, our program is committed to providing the resident with the mentorship needed to identify the type of community and practice that best matches his or her career goals.



The rural general surgery track combines 42 to 48 months of residency training in Madison, WI and 12 to 18 months with partnering community general and subspecialty surgeons outside of Madison.

While in Madison, the rural track resident will have rotations identical to the academic track residents. At the main UW hospital in Madison, residents' clinical training is largely structured as progressive rotations on specialty surgery services under the supervision of fellowship-trained surgeons in that

specialty. Both academic and rural track residents also rotate in community hospitals in Madison under the training of board certified general surgeons.

The rural track starts to offer other experiences in the PGY-2 year. Starting that year, residents will spend much of their year in Madison but also rotate at Waupan Memorial Hospital, a 25-bed critical access hospital located around 60 miles northeast of Madison, and Theda Clark Medical Center in Neenah, Wisconsin, a large community hospital located around 100 miles northeast of Madison. They will work with surgeons who are dedicated to teaching and who will offer an outstanding experience. This training model immerses the resident in the full professional responsibilities and experiences of a rural/community surgeon, giving them an understanding of different community general surgeons' practices, lifestyles, patient populations and community involvement.

A representative example of the rotations is shown in this [block schedule](#). Each hospital provides a distinctive training experience, offering the resident experiences in different community sizes, practice sizes, and types, as well as different complements of general surgery and subspecialty procedures. The clinical and didactic training is structured around the national Surgical Council on Resident Education (SCORE) curriculum, ensuring that after five years of training the resident is prepared to independently perform "essential-common" and "essential-uncommon" procedures in the [SCORE curriculum](#) without additional formal training. All ACGME Surgery Residency Review Committee and American Board of Surgery requirements are fulfilled with the rural surgery track rotation schedule. Residents in the rural surgery track will not have the expectation of taking time off to perform research, but the opportunity to conduct clinical research concurrent with clinical rotations does exist.



During the latter years of their residency, the rural resident will have the opportunity to gain experience in other surgical disciplines including ortho, trauma, urology, and obstetrics, depending on the interests of the resident. The rural surgery track has the goal of giving the resident the training they need to have competency in whatever practice they desire. It is expected that the resident will have substantial input and flexibility in planning their senior clinical curriculum, to match their specific career interests.

The program also has the goal of mentoring the resident throughout the program and allowing them to meet surgeons from across the state in order to introduce them to potential partners as they decide on a practice. The UW Department of Surgery has a strong presence within the Wisconsin Surgical Society where surgeons from across the state meet in the fall each year in Kohler, WI, and the resident will have the opportunity to attend that meeting to meet those surgeons.

The formal didactic and simulation curriculum will be identical to that of residents in the academic surgery track. The rural sites are close enough to UW Hospital that the resident can attend most [educational conferences](#) and simulation training sessions. For times the resident cannot attend, the program provides synchronous and asynchronous web-based access to all didactic sessions. Each partner site also has didactic training, including regular M&M conference.

Lodging is provided at sites that require the resident to relocate during the rotation. Some sites, however, do not require the resident to relocate. Travel expenses are subsidized.

Presently, we are recruiting one resident per year into the rural surgery training track, to join six interns recruited into the traditional, academic track of our residency program.