

SPECIALTY TRAINING PROGRAM FOR THORACIC SURGERY

Title of the residency study program	State code
Thoracic surgery	733A30071

Academic awarding institution	Language
University of Health Sciences, Academy of Medicine, Clinic of Cardio-thoracic and Vascular surgery. A. Mickevičiaus str. 2, LT-44307 Kaunas	Lithuanian

Kind of studies	Cycle of studies	Level of qualification according to Lithuanian Qualification Structure (LKS)
University studies	Non-degree studies	Level VII

Mode of the studies and length in years	Volume of the program in ECTS credits	Total amount of student work	Formal teaching and practice hours	Independent self-direct learning hours
Full-time studies, 5 years	330	8800	7375	1425

Area of studies	Main field of study program	Parallel study program (if available)
Biomedical science	Medicine	-

Personal qualification awarded
Thoracic surgeon

Study program director	Director's contact information
Prof. dr. (HP) Romaldas Rubikas	8-37-327353

Institution of accreditation	Accredited until
Centre for Quality Assessment in Higher Education	Year 2014

Aim of residency program study
Basic aim of thoracic surgery residency program is to prepare a specialist doctor having qualification of thoracic surgeon with interest in scientific innovations, reaching a higher scientific qualification studies

Program profile		
Disciplines/subject areas	Orientation of the program	Distinctive features of the residency study program
The program consists of mandatory and optional cycles, covering theory, practical work and self-employment. Required Cycles: 1. General and urgent surgery. 2. Trauma and orthopedic surgery. 3. Urology. 4. Burns, Plastic and Reconstructive Surgery. 5. Intensive care and anesthesiology. 6. Vascular Surgery.	Applied program is focused on practical activities evolving research work and gives the doctor thoracic surgeon's professional qualification.	The program is designed according to the legislation of the Republic of Lithuania, the European Parliament and Council Directive 2005/36/EC, the European Union organized by medical professionals medical requirements for the preparation of Thoracic Surgeons (European Union of Medical Specialists, Division of General Thoracic Surgery: (http://www.uems.net/)).

<p>7. General thoracic surgery. 8. Urgent thoracic surgery. 9. Thoracic oncology. 10. Cardiac surgery. Selectable cycles: 1. Minimally invasive thoracic surgery. 2. Esophageal surgery. 3. Tracheal surgery.</p>		<p>The program is based on the theoretical study and practical integration. Practical skills are learned and absorbed in the theoretical course, under supervision of the University professors - residency database professionals. Thoracic surgery residency base - Lithuanian University of Health Sciences Clinic has all the structural units required for thoracic surgical pathology diagnosis and treatment. Residency Database is selected in university's medical residency Regulation. Scientific work skills schooled in the scientific work of the University of Cardiothoracic and Vascular Surgery clinic or other University departments. The possibility of residency (up to one year) in selected foreign clinic.</p>
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Admission requirements	Recognition of previous learning
<p>Master degree in medicine and medical doctor professional qualification are obligatory. Admission by the way of general competition. Competitive score structure of is given in the conditions for entrance to the LUHS residency programs. The main components of competitive score is the average assessment of all subjects, studied during integral studies, final exam assessment, clinical medicine practice assessment, student's scientific activities assessment (appointed by Student Science Association - SMD), motivational interview assessment. Motivational interview takes place according to the schedule set in advance. Motivation Committee is composed of academic thoracic surgery staff and residents representatives. Scientific activities in the field of thoracic surgery as well as qualities of human being are evaluated. Motivation letter addressed to the Commission, provided one day before the scheduled motivational interview.</p>	<p>Results of previous studies are accepted individually, taking into account the developed competencies and goals of program that correspond to thoracic surgery residency study program, with the guidance of procedures set by LUHS Senate.</p>

Access to further education
<p>Degree providing third cycle doctoral studies (are chosen by 10% with obtained thoracic surgery professional qualification).</p>

Access to professional activities (employability)
<p>Doctor with thoracic surgery speciality can do practical job in state as well as in private health care institutions, which have a licence to run thoracic surgery profile services, according to the licence obtained in Lithuania or abroad, can seek a scientific degree in doctoral studies, do pedagogical job. Thoracic surgeon licence is given by the State Health Care Accreditation Agency under the Ministry of Health of the Republic of Lithuania, after submitting diploma of completed medical studies program, internship certificate and certificate of completed residency.</p>

Learning and teaching approaches	Methods of assessment
<p>Learning and teaching includes formal teaching and work-</p>	<p>Participation in lectures, seminars, consulting activity and</p>

<p>based experiential learning. Formal teaching includes lectures and seminars, consultations, case presentations, journal clubs, grand rounds, clinical skills demonstration and teaching using simulators, research projects.</p> <p>Activities of independent self-directed learning may include reading, maintenance of personal portfolio (log-book, self-assessment, reflective learning, personal Development plan), research projects, reading journals.</p>	<p>group discussions. Required, that during the annual lectures, seminars and group discussions at least 75% of the theoretical sessions of the topics would be covered. Allowed equalization report with the previous year resident or under individual schedule.</p> <p>Settlements and interpretation takes place at the end of each cycle. Payment writing test takes place in the form presented in open and closed-ended questions / tasks in the clinical situation. 10 point grading system.</p>
<p>Skills and competences are acquired via their job as residents in Emergency Department, other specialty departments, Outpatient Department; Head of the Department led word-rounds, personal word-rounds, Multi-disciplinary team meetings, licensed thoracic surgeons led night shifts. Residents have supervised responsibility for the care of in-patients. This includes day-to-day review of clinical conditions, note keeping, and the initial management of the acutely ill patient with referral to and liaison with clinical colleagues as necessary.</p>	<p>Evaluation of continuous clinical work, diagnostic procedures.</p> <p>Evaluation of individual case studies on weekly visits signed by head of residency.</p> <p>Reviews (written in free form or questionnaire -based) of Residency Database staff (doctors and junior medical staff, other employees) on the activities of a resident physician working are recorded at end of each cycle.</p> <p>Practical skills and abilities gained in cycle are assessed by 10-point grading system, and recorded in the daily activity diary and residents credits book</p> <p>Literature review and clinical examination cases review is presented in morning medical conferences by individual schedule. Presentations are recorded in daily activity diary and approved by resident manager once every six months.</p> <p>Research work theme can be offered by same resident or the resident manager. Preliminary scientific subject, the subject matter and methods are discussed and approved in profiled clinic meeting. Research work and results are presented in Cardiothoracic and Vascular Surgery Clinic at the conference no later than one month before the final exam.</p> <p>Thoracic residency program concludes with the practical and theoretical examinations. The practical test takes place in the operating theatre. The theoretical test is 5 questions in writing form, discussing them orally after.</p>

General competencies (knowledge, abilities, values and attitudes)		Outcomes (results) of residency study program	
1.	Professional attributes	1.1	Be fair, honorable, respect medical ethics, comply with good medical practice, be critical to other and his own, be able to sympathize, be creative and initiative.

2.	Professional activity	2.1	Be able to assess the limits of own jurisdiction, and, if necessary, seek help, act in new situations, conditions and adapt to them, act alone, solve problems and make decisions, communicate and work in team with other experts, be able to organize and plan.
3.	Doctor as an expert	3.1	Be able to analyze and synthesize, seek for continuous improvement through learning, be able to apply theoretical knowledge in practice, be able to transfer knowledge and skills to others, be able to plan and carry out research.

Subject-specific competences (knowledge, abilities, values and attitudes)		Aims (results) of residency study program	
4.	Consultation with a patient	4.1	Be able to make an overall assessment of the patient's somatics, analyze and interpret the chest surgical pathology symptoms, collect history and interpret it, to perform selective and targeted patient (and unconscious) testing , to formulate chest surgical pathology diagnosis.
		4.2	Be able to explain to the patient and/or his relatives a goal and a meaning for the actions taken to the patient, to discuss further actions, to reassure and to motivate patient and/or his relatives, to understand legal aspects regarding informing patient and/or his relatives.
5.	Making a management plan	5.1	Recognize chest surgical pathology and to evaluate level of difficulty, to plan necessary diagnostic tests, to be able to interpret the results of studies carried out in primary (complaints , medical history , clinical examination) and secondary (when interpreting the results and planning , conduct and interpretation of further studies) causes the patient's symptoms differential diagnosis, to make treatment plan for an individual patient's and discuss it with the patient and his family, to be able to evaluate potential drug-drug interactions and possible side effects and the efficiency of treatment.
		5.2	To be able to communicate with the patient and his relatives in the critically ill case, to be able to gain the trust, to communicate in writing (medical paperwork), to communicate with an aggressive patient.
6.	Medical emergencies and resuscitation	6.1	To be able to recognize emergency requiring thoracic surgical pathology, do first aid under the existing guidelines.
7.	Performing or requesting of appropriate investigations and interpretation of the results	7.1	To be able to perform diagnostic procedures (pleural puncture and drainage) under thoracic surgery professional competence, to understand cytological, microbiological, histological material findings and to evaluate its clinical significance.
		7.2	To be able to evaluate the radiological (X-ray, computed tomography, magnetic resonance imaging, etc.), radioisotope, ultrasound, bronchoscope tests.
8.	Health promotion, engagement in population health issues and effective work in health care system	8.1	To be able to assess the risk of the patient's health and to apply appropriate measures to decrease this risk, to apply infection control measures, to assess the professional actions of his own health risks and take steps to avoid this risk.
		8.2	Participate in wellness programs in population and individual level.