Welcome to Mizzou

We wholeheartedly welcome you to the University of Missouri General Surgery Residency Program. For over a hundred years, the Department of Surgery at Mizzou has trained leaders in surgery. Our long-lasting dedication to resident education has produced a plethora of highly proficient, clinically astute and professionally successful surgeons. Our program, which graduates four residents annually, emphasizes graduated resident responsibility, with early entry into the operating room. Our faculty are dedicated and devoted to advancing the technical skill and decision-making abilities of our residents.

Laboratory and clinical research opportunities abound within the Department of Surgery and the MU School of Medicine. We are well-positioned to both create and maintain high quality research collaborations, and lead multi-institutional studies. Mentorship is a focus of our faculty, who publish prolifically, and welcome resident involvement with enthusiasm.

Our focus on educational growth coincides with the great pride we take in our trainees. All of our graduates from the past five years have passed both the ABS Qualifying and Certifying Examinations on their first attempt. They have obtained their desired fellowships, and employment following graduation. Half of our graduates pursue additional training, while half join practices immediately following graduation.

Settled in the heart of America, Columbia is a wonderful place to live, work and play. We have all the offerings of a metropolitan center, set in a beautiful town full of recreational and cultural offerings, with easy access to larger cities.

Thank you for your interest in our General Surgery Residency Program. We are dedicated to preparing our graduates to excel in their chosen fields.

Kevin Staveley-O’Carroll MD PhD
Chairman, Department of Surgery
Professor of Surgery

Arthur Rawlings MD MDiv
Program Director
Associate Professor of Surgery

Jacob Quick MD
Associate Program Director
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History of Mizzou Surgery

Our rich history began in 1872, as the first surgeon educator, Dr. Andrew W. McAlester, began teaching courses without pay. At that time, the Medical Department was a gathering of just a handful of faculty dedicated to providing quality care to the people of Missouri. With a mediocre budget, and a strong will to succeed, the faculty set upon the task of training future surgeons and physicians with strict adherence to high ethical and technical standards. Within those first few years, Missouri trained surgeons such as William W. Mayo, who later founded the Mayo Clinic, and Justus Ohage, the first person to perform a cholecystectomy in the Western Hemisphere.

Throughout the over 140-year history of Mizzou surgery, there have been several different hospitals on campus. Parker Hospital (now Parker Hall) was constructed in 1900 as one of the nation’s first teaching hospitals. McAlester Hall was inaugurated shortly thereafter in honor of Dr. McAlester and became the home of the medical school. Twenty years later, Noyes Hospital (now Noyes Hall) was built to accommodate growing patient needs. Ellis Fischel Cancer Center, one of the first cancer centers in the country, was added in 1940. Its namesake, Dr. Fischel was a renowned cancer surgeon. In 1953, the MU School of Medicine transitioned to a four-year program, and the first of several buildings that would be known as University Hospital were constructed. Today, University Hospital comprises several buildings, including a new tower dedicated to cancer care and a standalone Women’s and Children’s Hospital.

Mizzou surgeons have fostered a tradition of innovation. Former chair and dean, Dr. Hugh Stephenson Jr., considered the founder of the current medical school, is also credited with devising the code cart concept. The first surgically treated coronary aneurysm was performed at MU, as well as the first pediatric angioplasty. Former chair, Dr. Donald Silver was the first describe heparin-induced thrombocytopenia. Dr. Frank L. Mitchell, a national leader in trauma care, developed the first ambulance and air ambulance services in the state. Currently, we are at the forefront of burgeoning treatments in all aspects of surgical care.
Respect
The foundation of honor, integrity and trust, mutual respect for one's peers, mentors, patients and oneself is necessary to realize our mission to train tomorrow's surgical leaders.

Responsibility
We hold the ultimate responsibility for our patient's well-being and health as surgeons. Proper recognition of the obligations we have to our patients and peers, allows us to exercise calculated decision-making involving consideration of the risks and benefits of our craft.

Discovery
Advancing the care of our patients requires a dedication to discovery of contemporary treatment methodologies that challenge current techniques and proposed truths. Our indelible goal is to improve the lives of others, which requires research, study and discovery.

Excellence
Excellent care requires dedication and commitment to perpetual improvement and knowledge growth. We must not be satisfied with the mediocre and mundane, but rather strive to attain excellence in all that we do.
Targeted Surgical Education

The University of Missouri curriculum is focused on the development, advancement and mastery of core surgical concepts – both in the abstract and physical environment. Residents will embark on a lifetime of dedication to science and personal betterment by immersing themselves in the surgical realm. Curricula are guides to focus young minds to learn the important points, but true learning only occurs when the learner is actively engaged in his or her own education. For that to occur, it takes dedication to developing one’s mind to not only think like a surgeon, but also to act like one.

Personal academic success has likely already taken place at the time of medical school matriculation, however up until the first day of residency training it is likely that many surgical trainees have thought like students, rather than attending surgeons responsible for patient’s lives. Our task is to teach residents to think through problems logically, swiftly and definitively. The Department of Surgery curriculum is designed to inspire learners to approach their educational efforts in a way that promotes active problem solving. For instance, when a patient presents with a complex problem, the learner should be excited at the opportunity set before them. We expect our residents to delve into the problem, reading actively and developing a few, well-thought out plans of action for the patient, then act upon them with the precision and decisiveness of a surgeon.

We teach through traditional methods dating back thousands of years. The Socratic Method capitalizes upon curiosity and excitement to create an environment of inquiry that promotes analytical and creative thought. While these two seemingly competing processes – analytics and creativity – may differ in their approach, both are necessary to nurture and grow the young surgeon to the point of confidence and competence. As faculty, we question residents and students in order to ignite the right and left brain to work in harmony, deducing answers to questions that often have no single correct solution.
Invaluable Mentorship

We honor the time-tested benefits of mentorship at the University of Missouri. Mentoring is a powerful, essential component of professional and personal success and growth throughout training and beyond. Resident surgeons often cite their mentors as reasons for entering their chosen field, attending certain training programs and joining surgical societies. Practicing surgery in the manner of their mentors, mentees often seek to emulate their mentors, consciously and subconsciously. Successful mentorship relationships need not be only with those surgeons who have achieved prestigious accolades, mentorship may, and should, exist with peers as well. Senior residents mentoring junior residents, junior faculty guiding residents, and faculty mentoring students are all possible mentorship relationships.

Successful identification a mentor is not often accomplished through assignment. It requires a relationship built upon common ideals, goals and attitudes of which both parties exhibit strength. However, many neophyte surgeons find difficulty initiating contact and beginning the relationship. For this reason, we assist residents to identify a potential mentor by the end of their first year of residency. The chosen mentor will be responsible for completing the resident’s biannual evaluation starting the second year of training. Frequent meetings, both formal and informal, are encouraged to begin developing the all-important mentee-mentor relationship.
Progressive Research

Mizzou’s faculty are dedicated to advancing the care of surgical patients, not only by training tomorrow’s surgeons, but also through rigorous study and research. Funded faculty operate in each Division of the Department of Surgery and multiple opportunities for research abound within the training program. Over 75 active investigational projects are currently underway with focus on a variety of topics, including tumor immunology, surgical oncology, vascular surgery, trauma and acute care surgery, surgical education and surgical technology.

Experienced researchers from around the globe conduct basic and clinical science research in the Department of Surgery at Mizzou. Campus, multi-institutional and multi-global collaborations exist to aid in the completion of complex and meaningful research contributions to the surgical and medical community at large. Resident participation is encouraged and opportunities exist for those who choose research as a significant portion of their career. Each resident is required at least one research project during the five years of training, although many pursue multiple opportunities.
Mizzou continues to be at the forefront of surgical simulation. With funded faculty dedicated to improving surgical education, our simulation curriculum is cutting edge. Monthly simulation courses are held for PGY 1-3 residents that encompass a variety of surgical topics, including laparoscopic skills, FLS training, hernia, foregut, hepatobiliary, vascular, trauma and thoracic.

We utilize simulation to improve competency in both basic skills, and surgical decision-making through experiential learning and focused feedback. Employing the state-of-the-art Sheldon Clinical Simulation Center, we utilize a number of methods to augment surgical training. High-fidelity simulation mannequins provide real-time physiologic feedback during simulations, allowing resident surgeons to see immediate results of their interventions. Virtual reality trainers, complete with haptic responses, present simulated realism to immerse learners and improve engagement, allowing for increased learning. We have multiple task trainers, including low-fidelity mechanisms for learning basic skills, and combined simulators that allow the use of ultrasound and other adjuncts to increase learning. Hybrid simulations with standardized patients and high-fidelity simulators provide a unique methods of working through surgical problems.

Senior residents participate in biannual aggressive trauma surgical skills simulations that replicates the fast pace and high stress of the multisystem environment, and are a favorite of Mizzou residents. We utilize live tissue models to address multi-cavity trauma in an immersive environment complete with triage and surgical decision-making.
Successful Graduates

100% Board Pass Rate
For the last five years, all of our residents have achieved a first-time American Board of Surgery pass rate of 100% for both the Qualifying Examination and the Certifying Examination. We are the top program in our state, region and nation in regard to board pass rates.

>90th Percentile Operative Experience
Extensive operative experience is crucial to the development of competent and capable surgeons. Our residents have consistently remained in >90th percentile for operative case volumes at time of graduation. The mean number of major cases for our residents is more than 150% greater than required by the RRC, and chief cases are 170% greater.

50/50 Practice Pattern
We train residents to become accomplished surgeons. With strong training, approximately half of our residents go straight into practice. As an academic center with a plethora of academic opportunities, half of our residents pursue additional training in specialized surgical professions.
Innovative Centers

Frank L. Mitchell, Jr., MD Trauma Center
As mid-Missouri’s only ACS-Verified Level 1 Trauma Center, Mizzou has a large catchment area and receives patients via air and ground ambulance from more than 200 miles away. A large multidisciplinary team, led by six trauma and acute care surgeons, cares for approximately 1500 critically-injured patients annually.

Ellis Fischel Cancer Center
As Missouri’s first cancer center, Ellis Fischel has remained at the front of cancer care. Multidisciplinary teams work to improve care through excellent patient care, and innovative research.

George David Peak Memorial Burn Center
Since 1977, Mizzou’s burn center has cared for patients across the state who have suffered thermal injury. Using new and developing techniques in resuscitation and dermal substitutes, we provide exemplary care.

Robotics Program
Robotic surgery is one of the newest breakthroughs of minimally invasive surgery. Embracing the newest technology, we have several da Vinci® robots, located at both University Hospital and Women’s and Children’s Hospital, and utilize them to perform complex abdominal and thoracic surgery.
Training Locations

University Hospital
The flagship training center for the General Surgery Residency, University Hospital has over 250 patient beds, with additional dedicated Surgical, Cardiac, Neurosciences and Medical Intensive Care Units. The Emergency Department sees over 30,000 visits annually, with over 1500 trauma team activations. There are 26 operating rooms, including specialized operating environments.

Ellis Fischel Cancer Center
As Missouri’s first cancer center, the new Ellis Fischel tower at the University is a comprehensive cancer center with specialists providing multidisciplinary cancer care.

Women’s & Children’s Hospital
Located a few minutes away from the University, Women’s and Children’s hospital is the only hospital dedicated to women’s health and pediatric care in mid-Missouri. With 10 operating rooms and 80 ward beds, it provides excellent facilities for surgical training.

Harry S. Truman Veteran’s Hospital
The HSTVA is one of the nation’s best veteran’s hospitals. Recently renovated, it houses expanded operating rooms fitted with the latest technology and offers resident surgeons opportunities not available at other centers.

Cox Health, Springfield, Missouri
Our PGY 4 resident surgeons rotate to Springfield, Missouri to engage in a high-volume, private practice experience with a number of highly-qualified and revered surgeons at one of the largest hospitals in the state.

Missouri Center for Outpatient Surgery
The University manages a dedicated outpatient surgery center. With quick case turnover, it is highly efficient and offers residents an outpatient experience similar to private practice, with benefits of academia.
Our Department of Surgery is divided into multiple divisions of specialized surgical care. Resident surgeons spend time with each division throughout their training to ensure a wide breadth of surgical knowledge and skill. Affluent and renowned faculty teach residents and students in every area of General Surgery, providing operative and non-operative education for residents who care for adults and pediatrics with the widest variety of surgical disorders.

- General Surgery
- Surgical Oncology
- Acute Care Surgery
- Burn
- Cardiac Surgery
- Thoracic Surgery
- Vascular Surgery
- Neurological Surgery
- Urology
- Surgical Critical Care
**Didactics**

**SCORE**
We utilize and provide a subscription to SCORE, a curriculum developed by the American College of Surgeons. Our educational program follows a weekly schedule outlined in the score curriculum.

**Mortality & Morbidity Conference**
M&M has long been revered as one of our most valued conferences. Selected cases are submitted and presented by residents. Lively discussion is often generated in an educationally inspiring manner.

**Basic Science Conferences**
Monthly conferences range from lectures, to interactive group discussion and are given by faculty and residents. Resident presentations are designed to improve knowledge via a thorough understanding of a chosen topic.

**Journal Club**
We utilize surgical questions to drive journal club discussions. Residents compete as groups through presentations of peer-chosen manuscripts to determine the best answer to a clinical question.

**Grand Rounds**
Speakers from around the world are invited by the Department of Surgery to give lectures on a variety of topics. Grand Rounds are held on a monthly basis and are an educational feast for our residents.

**Mock Orals**
At least annually, mock orals are administered to PGY 3-5 residents to aid them in preparation for the ABS Certifying Examination. Alumni are invited to give the exam in the same manner as the actual examination.

**Socratic Circle**
The Socratic Circle conference utilizes open-ended questions to each level of resident while working through a specific case that is presented in a format similar to oral boards. Virtual complications are guaranteed and must be addressed by the resident cadre.

**Service Specific Educational Opportunities**
Each service has its own, individually-directed educational opportunities for residents. All are welcome to attend any of the many conferences held throughout each week:

- Acute Care Surgery – Twice weekly conferences
- Cardiothoracic – Divisional M&M, Case conference, CT Journal Club
- Pediatric Surgery – Twice monthly conferences
- Surgical Critical Care – Weekly conference
- Surgical Oncology – Weekly Tumor Board and Breast Conference
- Vascular – Twice weekly conferences
Clinical Rotations

Rotations are designed to enable residents graduated responsibility throughout their training, while being exposed to a variety of surgical subspecialties. We foster growth of surgical skills by expecting an early entry into the operating theatre. All residents are expected to participate in operations from the first day of residency. Our goal is to provide a uniform experience to ensure our graduates are prepared to operate independently as consummate surgeons.

PGY 1
Acute Care Surgery – 2 blocks
General Surgery – 1-2 blocks
Surgical Oncology – 1-2 blocks
VA General & Vascular Surgery – 3-4 blocks
Night Float – 2 blocks
Pediatric Surgery – 1 block
Cardiothoracic Surgery – 1 block
Burn – 1 block
Vascular Surgery – 1-2 blocks

PGY 2
Acute Care Surgery – 2 blocks
General Surgery – 2-3 blocks
Surgical Oncology – 1 block
VA General & Vascular Surgery – 2 blocks
Night Float – 2 blocks
Pediatric Surgery – 1-2 blocks
Surgical Critical Care – 2 blocks

PGY 3
Acute Care Surgery – 2-3 blocks
General Surgery – 2 blocks
Surgical Oncology – 1-2 blocks
VA General & Vascular Surgery – 2 blocks
Night Float – 2 blocks
Pediatric Surgery – 1 block
Surgical Critical Care – 0-1 block
Vascular Surgery – 0-1 block

PGY 4
Acute Care Surgery – 2 blocks
General Surgery – 1 block
Surgical Oncology – 1-2 blocks
VA General & Vascular Surgery – 1-2 blocks
Night Float – 2 blocks
Pediatric Surgery – 1 block
Cardiothoracic Surgery – 2 blocks
Vascular Surgery – 1-2 blocks
Off-site Private Practice Rotation – 1 block

PGY 5
Acute Care Surgery – 2 blocks
General Surgery – 3-4 blocks
Surgical Oncology – 2-3 blocks
VA General & Vascular Surgery – 3 blocks
Night Float – 2-3 blocks
About Columbia

Abundant cultural offerings, a plethora of outdoor activities, low cost of living, and an award-winning school system make Columbia, Missouri a great place to live and work.

As the fourth largest city in Missouri, Columbia has been named as a Top City to Live and Work by Forbes, US News and others for more than 20 consecutive years. Columbia also holds the distinction of being the 13th most-educated city in the country.

Over 40 city and state parks combine with over 150 miles of hiking and biking trails to create an outdoor paradise. Additionally, theatres, art galleries and local entertainment venues provide cultural outlets.
Join the Mizzou Family

Quick Stats
- Graduate 4 chief residents annually
- 5-year program with options for research
- 100% ABS Board pass rate
- 50% go into private practice
- 50% pursue fellowship
- Participate in NRMP-ERAS

House Officer Salary & Benefits
Resident salaries are similar for all trainees within the Mizzou system, and are adjusted frequently to account for cost of living. Training conditions and work schedules follow the guidelines of the Surgery Residency Review Committee of the Accreditation Council on Graduate Medical Education. The program provides a wide range of benefits, including malpractice insurance, personal health insurance, short and long-term disability insurance, and a 24-hour physicians lounge with self-serve food. Each resident is allotted 3 weeks of vacation per year. Conference and educational stipends are also provided as a portion of the Department benefit package. Additionally, we pride ourselves on being a family-oriented program, and offer liberal leave for necessary emergencies or child birth in accordance with ABS guidelines regarding necessary training times.

Licensure
All residents must have a current Missouri license to practice medicine prior to the first day of service. Applications will be coordinated through our office to ensure compliance. We do not sponsor work or training visas for foreign trainees.

Application Process
Mizzou surgery participates in the National Resident Matching Program (NRMP), and follows all NRMP guidelines. Applications are only considered through the Electronic Residency Application Service (ERAS). Each application is reviewed with focus on academic excellence, leadership experience and potential and applicant resilience. Qualified individuals will be invited to interview during selected dates in November, December, with variable dates in January.

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