Research

Evaluation of Screening Tools to Identify Successful Residents 409
Program directors are tasked with identifying which applicants are likely to thrive in and complete residency. Gardner and Dunkin examined how emotional intelligence tests, personality profiles, and situational judgment tests predict resident performance 1 year after testing. Results indicated that situational judgment tests predicted residency performance above and beyond what traditional cognitive measures contribute. Little evidence was found for emotional intelligence tests or personality profiles.

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Linking Residency Training Type to Patient Outcomes 418
Despite increased focus on the quality of general surgery training, little data is available on outcomes after the transition to practice. Sellers et al used claims data to examine practice patterns and patient outcomes of surgeons trained in university-based and nonuniversity-based residency programs. They found differences in practice patterns but no significant differences in patient outcomes.

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Multicenter Study of 7-Year Bariatric Surgery Outcomes 427
Seven-year weight and health changes after gastric bypass and adjustable gastric banding were assessed in the Longitudinal Assessment of Bariatric Surgery study. Among the 2348 participants, the 7-year mean weight loss was 28.4% after gastric bypass and 14.9% after banding. Dyslipidemia prevalence was reduced 7 years after both procedures, and diabetes and hypertension were reduced after gastric bypass; remission of diabetes at 7 years was 60% after gastric bypass. Overall, weight loss for both procedures was durable, with variable fluctuations over the longer term, and comorbid health improvements were sustained after gastric bypass.

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Patient Preference: Surgery or Antibiotics for Appendicitis? 471
Although there is increasing evidence that acute appendicitis can be treated with antibiotics alone, little is known about how patients choose between antibiotics or surgery. In an internet-based simulation of informed consent, approximately 9 in every 10 participants chose surgery for themselves, but the remainder chose antibiotics. A sensitivity analysis of 220 participants interviewed identified failure and recurrence rates of antibiotic treatment as motivating factors in choosing surgery.

Clinical Review & Education

Venous Thromboembolism Prevention in Emergency Surgery 479
Patients with acute surgical conditions are at high risk for venous thromboembolism (VTE) and have unique considerations for VTE prevention. In this review, Murphy et al consider the best available evidence associated with mechanical and pharmacologic VTE prophylaxis for patients who were admitted with emergency general surgery conditions and underwent operative or nonoperative treatment. They recommend mandatory VTE risk assessment; optimal prophylaxis; and physician, nurse, and patient education.

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Association of Frailty With Failure to Rescue After Low-Risk and High-Risk Inpatient Surgery R Shah and Coauthors

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