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Review of Surgery for ABSITE AND BOARDS

SECOND EDITION

EDITOR **Christian de Virgilio**
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Posted by BYU / [deleted] 3 years ago, sorry, this post was deleted by the person who originally posted it. Read/read each CH summary section and ask enough questions? There seems to be a lot of additional information that we don't need to know on the shelf. When trying to get through, nothing unusual. As with pediatric, internal medicine, family medicine, and neuroscience rotations, I will review my main rotational resources to help you succeed and earn rewards. Each resource also has a note on its quality and efficiency in preparing your shelf. Wait a minute! If you want this post in video format, check out 7 Most Popular Resources for Rotating Operation and YouTube Preservation Check. <https://www.youtube.com/watch?v=zg3vm7wRT5g> The best surgical rotation resources are those that I personally use and share with owners. I recommend it to those who work in companies OR are preparing for rotation and shelf exams. 1. Pestana Surgical Notes (A+) I think this is equivalent to Pathoma Pathology or First Aid Step 1 - everyone should use it. This is a high quality gold color material. Only about 140 pages (+ 180 practice questions). Honestly, you can read this in a few days. I recommend reading this in the first two weeks after surgery. This will help you build the necessary surgical knowledge base. Unfortunately, Pestana doesn't cover everything you need to know about the shelf; it's just a really good score. Below I suggest other texts that you can use while spinning. Try doing Pestana 1-2 more times in the last week. This time scanning will be much easier. The information will also be better received, because by then you have already had weeks of operations. A link to the book and many reviews can be found here. See reviews on Amazon 2. UWORLD (A) Use UWORLD for all clinical rotations. The questions are good practice for the rack and the upcoming Level 2 exam. You will hear that the shelf in the operating room is more like a medicine shelf. It's right. Not every patient admitted to the emergency room needs surgery. Therefore, you need to know who needs medical help, and not surgery, cases. The fact is that medical management requires you to remember the remedy and the diagnosis that you learned in step 1. If you have already switched to internal medicine, you will be in good shape. If not, first -150 questions about surgery and then some questions about the gastrointestinal tract, maps, and IM pulses. Do this only if you have time. Frankly, most of the medical management comes back to you after a lot of practical questions. 3. Devirgilio Surgery (A) Devirgilio Surgery was the textbook recommended by my school. It has several pros and cons, which I will discuss below. Overall, this is a great source and main text to rotate. Pros: The text points to high performance cases similar to a set of file files, but links to much more detailed information. He will also ask questions on each case and then provide an explanatory paragraph or two. This is a format that breaks the fabric well to learn it. There are also beautiful CT images and X-Ray Find. You will also find development charts useful in treating common conditions (thyroid, adrenal adenomas, pancreatitis, etc.). Whatever your learning style, Devirgil is a great combination of text and visuals to make learning easier. Each side also has questions at the end of the book. I chose them all at the end of my studies to help review all the material. The questions are a good mix of difficulty and will prepare you for what you see on the shelf. Cons: Deergil is long (~700 pages including questions/explanations). If your Q3 rotational surgery appointment is eight weeks, this book may not be for you. If so, I recommend the Pestan casebook, Uworld, and possibly NMS. There are also sections on controversial areas (choice of treatment) that are not needed for the shelf. You will not receive questions about the treatment plan, which is usually contested. So if you want to be efficient, you can skip or skip those areas. The book can also be redundant in the same chapter. In a way, this is good for backing up important arguments. You can also skip these parts as soon as you notice the repetition. This book can also be used for a paid program. I was lucky that I had an easier plan at the beginning of my 8 weeks and planned to finish the book within 3 weeks. There are about 60 chapters out, read 3+ chapters a night. On most nights this was not a problem as the text could be easily followed. Alternately from traditional surgery, you can still finish this book within 4-5 weeks. If you work for 8 weeks, you need to apply for 3-4 weeks and review it. Although the length of the text is deterred from many students, I think it was a good text that could be read and made again by making changes. It was quite suitable for me to take my shelf. You can find the link of the book here. To see, Amazon Reviews 4. Online Outlin (A+) was suggested by a senior representative and I would definitely recommend it. If you don't have time, this is a great tool. This requires subscription. If you can't pay, free videos are always worth it. (I recommended them the Peds platform.) Surgery has many small themes that can be shown on the shelf. Each section is 1-2 pages long and takes less than 10 minutes to read. When I finished my education, they were perfectly criticized. If you want to learn more about the great ome features that help me for the third year, watch the video review below! <https://www>.

