Defining Rural General Surgery Practice

Overview

Rural General Surgeons form a unique group of General Surgeons with a broad scope of practice encompassing core General Surgery and a mix of other surgical subspecialties. In addition, Rural General Surgeons work within constrained perioperative and patient transport resources in the context of their local healthcare systems. Rural communities in Canada represent a spectrum of populations that differ in type, size, and location, characterized by impaired accessibility and availability of health care services. Health services in rural areas are typically provided by family practitioners and often lack immediate or appropriately distanced access to specialty care, ancillary care, and multi-disciplinary care teams.

Rural Perioperative Care and Surgical Resources

Rural General Surgeons provide core surgical services in smaller hospitals with limited to no access to additional on-site subspecialty surgical services. Perioperative resources in these environments include limited local access to Intensive Care resources and monitoring, and Anesthesia support commonly provided by Family Physicians with an extended scope of Anesthesia practice (FP-A). Rural General Surgeons often practice in locations where they are several hours or more from centres with higher levels of perioperative care and subspecialty support.

Rural General Surgery Scope of Practice:

The scope of practice of Rural General Surgeons is variable depending on local needs and service structures. Rural General Surgeons have a wide breadth of General Surgery practice encompassing most areas of core General Surgery, supporting local assessment and operative intervention locally for patients as appropriate within local healthcare resources. Rural General Surgeons also act as local expert specialists in initial consultation assessment and triage of complex subspeciality patients locally and facilitate referral to tertiary care. Depending on their resources and local care networks, Rural General Surgeons facilitate diagnostic work up and follow up of complex General Surgery patients in collaboration with tertiary subspecialists to facilitate care close to home. Rural General Surgeons typically provide subspecialty surgical assessment and operative services in one or more specialties outside of core General Surgery including Plastic Surgery, Orthopedics, Vascular Surgery, Head and Neck Surgery, Thoracic Surgery, Urology, Obstetrics and Gynecology, and Gastroenterology (see table 1).

Table 1. – Rural General Surgery Scope of Practice

Core General Surgery (Consultation and/or management as appropriate to centre/resources)	Additional Subspeciality Surgical Care (Includes one or more)
 Acute Care Surgery (appendicitis, cholecystitis, bowel obstruction, perforated viscus, etc) Trauma Endoscopy Breast Surgery Colorectal Surgery Surgical Oncology Hernia Repair/Abdominal Wall Reconstruction Hepatopancreatobiliary (HPB) Surgery Benign Foregut and Bariatric Surgery Pediatric Surgery 	 Complex Wound Care (Plastics, Vascular, Orthopedics) Complex Lacerations, Skin Flap and Graft Closure, Skin Cancer, Burn Care (Plastics) Carpal Tunnel, Trigger Finger, Hand Trauma (Plastics, Ortho) Vein Care (Vascular) Vascular Access (PICC, Port-a-Cath, dialysis catheter, central line, pacemaker insertion) Thyroid, Tracheostomy, H&N LN Bx, Tonsillectomy (ENT) GI Endoscopy (acute and elective), Advanced GI Endoscopy [ERCP] Bronchoscopy, Chest Tubes (Thoracics) Cystoscopy, Ureteric Stents, Vasectomy, Circumcision (Urology) C-Sections, Salpingectomy, D&C (OB/Gyn) Fracture Care (Orthopedics)