

## Department of Surgery

## Supervision of Surgical Fellow Guidelines

**Date:** October 22, 2025

**Revised:** Amin Kherani, Director Office of Surgical Fellowships  
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**Reason For Policy:** To clarify the role, expectations and limitations of Surgical Fellows in the clinical setting such as the operating room, hospital ward/units and clinics/surgeon offices. It is recognized that Surgical Fellows will be a part of the clinical and surgical team.

### **Definitions:**

A “**Surgical Fellow**” has:

1. Completed appropriate training and credentialing for their surgical specialty (MD, FRCSC or equivalent for international trainees).
2. Registered in an approved surgical fellowship program with the Office of Surgical Fellowship, Department of Surgery.
3. Registered with the Post Graduate Medical Education (PGME) at the Cummings School of Medicine (CSM), University of Calgary (U of C), if eligible
4. Appropriate licensure with the College of Physicians and Surgeons
  - a. Non eligible fellows will register via their corresponding College and regulatory bodies (Podiatry, Dentistry etc.).
5. Been granted appropriate AHS Calgary zone hospital and chartered facility privileges as a Surgical Fellow (i.e. not full attending surgical privileges).

### **Policy Statement:**

- The staff surgeon will be the primary, most responsible (MRP), and attending surgeon of record for hospital admissions, operative procedures and consults.
- The staff surgeon will be the primary, most responsible (MRP), and attending surgeon of record for other non-hospital clinical settings including chartered facilities, clinics and surgeon offices.

- The surgical fellow may assist, support, contribute and/or operate under the staff surgeon's supervision and responsibility. The role of the surgical fellow should be known and communicated to all stakeholders including the patient and/or delegate.
  - The surgical fellow should identify themselves to the patient (or delegate) as a trainee/surgical fellow working under the supervision of a named supervisor.
- The staff surgeon and/or MRP designate must be on site, identified and immediately available for the duration of OR surgical cases and when the fellow is in the clinic.
  - The staff surgeon is **not** required to be on site when the fellow is seeing patients in the Emergency Department or conducting consultations on the ward.
- The surgical fellow may book operative procedures under a staff surgeon. The staff surgeon needs to be present for surgical briefing and time-out.
- The staff surgeon/supervisor must create a supportive learning environment that ensures safety for both trainees and patients.
- Concerns regarding inadequate supervision should be reported to one of the following: fellowship program director, section head, director OSF, vice-chair education DoS or the PGME Dean.
  - Trainees may be removed from clinical placements when risk to trainee safety or patient care is deemed unacceptable. Relevant stakeholders will then formulate an individualized plan to remediate the situation.
- The surgical fellow is expected to abide by relevant academic policies and AHS medical staff bylaws governing code of conduct and professional behaviour.

Relevant supporting policies and documents:

PGME Resident Supervision Policy:

<https://cumming.ucalgary.ca/sites/default/files/teams/6/policies/resident-supervision-policy-pgme-Jan22-v2.pdf>

CMPA Delegation and Supervision of Trainees:

<https://www.cmpa-acpm.ca/en/education-events/good-practices/physician-team/delegation-and-supervision-of-trainees>

CPSA Supervision of Restricted Activities:

<https://cpsa.ca/physicians/standards-of-practice/restricted-activities>