Surgeons in rural practice encounter a wider range of conditions requiring surgical intervention compared to their urban counterparts. The majority of the cases they perform include endoscopic procedures, cholecystectomy, hernia repair, appendectomy, and colon resection. Due to limited availability of surgical subspecialists, rural surgeons are also called upon to address various issues that would otherwise be referred to urologists, plastic surgeons, surgical oncologists, etc. This expanded scope of practice may also include the care of pediatric and obstetric patients. Our aim was to provide rural surgeons with a resource that corresponded to their expanded scope of practice.

Much discussion and deliberation went into choosing which topics to include. There were numerous conversations with surgeons in rural practice and with surgical subspecialists. The list of chapters was revised repeatedly. The topics that we ultimately choose consisted of urgent surgical issues requiring immediate intervention and elective subspecialty procedures that were unlikely to be included in other general surgery references. We also included topics addressing recent updates in relatively common procedures such as polypectomy and central line insertion. Although central venous catheter insertion is a relatively basic procedure, we thought that the insight of a surgeon who has such vast experience with this procedure would be of value. Most surgeons in rural practice were trained long before ultrasound was used as a routine adjunct to central venous catheter insertion.

The authors were chosen based on their expertise in a given specialty. Most authors have either direct experience working in rural areas or experience caring for patients transferred to regional centers from outlying rural areas. We are extremely grateful to the authors for the many thoughtful discussions about what topics are appropriate for this book. We appreciate their efforts to share information that is most supportive to surgeons who will likely encounter many of these procedures only rarely.

We worked under the assumption that our audience would have a solid foundation of knowledge regarding surgical principles in general. We choose the format of a narrative atlas to provide surgeons an accessible guide to various procedures. Each chapter discusses the indications for a particular procedure. The overall operative strategy is summarized, and a step-by-step description of the procedure is accompanied by exquisite illustrations. Common complications and postoperative care are also explained. Unique to this book is a discussion about prudent limitations of care and when to transfer a patient to a specialist.

The determination of appropriateness of surgical intervention should be based on the surgeon’s comfort with the procedure and the resources of the local hospital. Surgical emergencies such as massive gastrointestinal hemorrhage, testicular torsion, and obstetric emergencies require urgent intervention even if subsequent transfer is planned. In some cases transfer may be warranted, but not possible due to weather or transportation limitations. Another consideration regarding transfer to a regional center is the additional burden on the patient and the patient’s family in terms of travel costs and time away from work.
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