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Surgical Training in Practice

An Inside View from a Swiss Cantonal Hospital



Dr. med. Marie Klein

Surgical training is increasingly discussed in an international context, as healthcare systems across Europe face similar pressures while pursuing different educational models. As part of this Swiss Knife Focus, initiated through exchanges led by Swiss Young Surgeons with colleagues from multiple countries, this interview series aims to explore how surgical residency is experienced across different systems.

To begin, we spoke with Dr. med. Marie Klein, a fifth-year surgical resident approaching board certification, about training within a large Swiss cantonal hospital — including autonomy, supervision, operative exposure and the culture of surgical education in Switzerland.

You are currently in your fifth year of surgical residency and close to completing your board certification. How would you summarise your overall training experience at the Cantonal Hospital St. Gallen so far?

I experienced my surgical residency at the Cantonal Hospital St. Gallen as highly structured. The broad surgical spectrum, dedicated teachers, and numerous training opportunities helped me to improve my clinical and operative skills. Especially during challenging periods of residency, good mentorship and a strong team spirit supported me.

For international readers, could you briefly outline the structure of surgical residency in Switzerland and where you currently stand within that pathway?

Surgical residency in Switzerland comprises six years of postgraduate training. During this time, residents must spend at least two years in a large hospital (category A, tertiary referral center) and at least one year in a smaller hospital (category B, secondary care hospital). During the first years of residency, residents are required to complete a multiple-choice examination covering basic surgical knowledge, followed by a final oral examination at the end of training. In addition to performing a defined number of mandatory surgical procedures, residents must attend several courses and conferences and complete a scientific publication. I am currently in my fifth year of residency and completed the final oral exam recently.

What opportunities does the Cantonal Hospital St. Gallen offer for residents who are motivated to develop surgically and professionally?

The Cantonal Hospital St. Gallen offers highly structured training and - as part of a network of affiliated hospitals (Health Ostschweiz, HOCH) - allows residents to complete all components of surgical residency within the same

organization. A major advantage of surgical training at HOCH is the "Schweizer Trainings-Zentrum" (STZ, Swiss Training Center), a skills lab where surgical courses are conducted and where residents can practice on simulation models, such as laparoscopic trainers, free of charge. In addition, HOCH is currently developing a structured surgical education curriculum using an adaptive learning platform called "Area 9", designed to support and guide surgical residents throughout their theoretical and clinical training. Although the Cantonal Hospital St. Gallen is not a university hospital, there are still various research projects, and residents are always encouraged to participate. The department also supports attendance at courses and conferences by providing five additional days of educational leave and providing partial financial funding.

Alongside these opportunities, what responsibilities and expectations are placed on surgical residents, and how clearly are these communicated?

As surgical residents, we are expected to be committed and reliable in our work. Compared to other European countries, working hours are relatively long. In addition to our daily clinical duties, it is essential that we continue our education in our free time to deepen our theoretical knowledge and further develop our surgical skills. Engagement within the department, such as participation in the organization of internal lectures and events, is also highly encouraged.

How does operative responsibility typically evolve during residency at Cantonal Hospital St. Gallen?

Usually, young residents begin by performing minor procedures or components of more complex operations, always under supervision of an attending surgeon. As training progresses, residents are gradually entrusted with greater responsibility and increased exposure in the operating room. Experienced residents who demonstrate motivation, reliability, and professional development may be promoted to senior resident positions. In this role, they receive more intensive surgical training, particularly during night shifts, where they benefit from close supervision and one-on-one teaching by an attending surgeon, mainly during emergency procedures.

Looking back, did the balance between supervision and autonomy feel appropriate at different stages of your training?

From my personal experience, supervision and autonomy are well balanced at Cantonal Hospital St. Gallen. At the beginning of training, new residents are introduced to their daily responsibilities by more senior colleagues. Junior residents receive close supervision on the wards and in the emergency department from attending surgeons and senior residents. I found this close supervision at the beginning of my training really helpful. As training progresses, increasing autonomy is gradually granted, supporting steady professional growth. Surgical procedures are generally performed under supervision, and only experienced senior residents carry out selected procedures or components of procedures independently. Nevertheless, a supervising surgeon is always available, and asking for advice is actively encouraged.

What role do structured educational tools — such as digital learning platforms, skills labs, or simulation training — play in surgical training at Cantonal Hospital St. Gallen?

As mentioned, the Swiss Training Center (STZ) is highly beneficial to enhance surgical skills. While "Area 9" is still being implemented and will be fully available later this year, the first modules already look very promising, and I believe it will become a valuable tool for residents.

Tumour board participation is often cited as an educational opportunity. How are residents involved, and what does this contribute to surgical training?

Interdisciplinary tumor boards play an important role in our daily clinical practice. Residents attend these boards and present the patients under their care. Regular participation in these meetings helps to develop an understanding of interdisciplinary, evidence-based decision-making.

How would you describe the culture of feedback and evaluation during surgical training at Cantonal Hospital St. Gallen?

The main tool for feedback is the annual evaluation of residents. All attending surgeons and consultants are asked to assess residents in all aspects of surgical training, including performance in the OR, clinical decision-making, and teamwork. Following statistical analysis of the results, benchmarks are established to provide residents with a clear understanding of their relative performance. In addition, a formal meeting is held during which the performance and scores of all residents are reviewed, mentors present each resident's self-evaluation, and individual development goals are defined. Beyond this annual evaluation, residents can approach their mentors, attending surgeons or consultants for feedback at any time.

Finally, at Cantonal Hospital St. Gallen, residents can choose their own mentors rather than being assigned one. Why is this approach particularly valuable in surgical training?

Within the first three months at Cantonal Hospital St. Gallen, each resident can choose a mentor. This is very important, as mentors support "their" assigned residents throughout the entire residency. A personal connection helps to establish a trusting relationship, which is essential for effective mentorship. In addition to the assigned mentor, many residents also find experienced surgeons within the team who support them during their residency and serve as additional mentors.

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