

## **Educational Objectives: LHSC-VH (HN) and (HN-L) – Junior Level (PGY-2/3)**

The overall objective of this rotation will be to acquire basic clinical skills related to Head and Neck Oncologic and Reconstructive Surgery as well as Laryngology. There will also be the expectation to demonstrate skill in provision of consultative services, office and emergency therapeutics, ward care, as well as perform basic operative procedures.

### **Medical Expert**

#### General Skills:

1. Take a relevant, appropriately-detailed history from a patient presenting for otolaryngology assessment
2. Perform a detailed, thorough head and neck examination
3. Perform effective indirect laryngoscopy
4. Perform effective flexible nasopharyngoscopy with accurate interpretation of findings
5. Perform effective anterior and posterior nasal packing for epistaxis
6. Incise and drain a peritonsillar abscess including recognition of the signs and symptoms associated with a peritonsillar abscess
7. Incise and drain a wound abscess including indications for the procedure
8. Manage a tracheostomy/change a tracheostomy tube
9. Perform rigid esophagoscopy with or without removal foreign body
10. Promptly and effectively assess patients with airway emergencies including airway obstruction
11. Perform open and percutaneous tracheostomies
12. Accurately assess patients with deep neck space infection
13. Participate in the post-operative ward and office management of patients who have undergone head and neck surgery
14. Interpret cross-sectional imaging of the head and neck

#### Head and Neck Oncologic Surgery:

1. Diagnose and accurately stage malignancies of the upper aero-digestive tract
2. Perform fine needle aspiration of neck lesions
3. Effectively biopsy nasal cavity, oral cavity, and skin lesions
4. Manage head and neck oncology in-patients with attention to the unique airway and nutritional needs of these patients
5. Manage pain in post-operative head and neck oncology patients
6. Manage surgical airways (e.g. tracheotomy, laryngectomy stoma) in post-operative head and neck oncology patients
7. Effectively manage complex wounds including pharyngocutaneous fistula
8. Effectively assist at major head and neck ablative surgical procedures (pharyngolaryngectomy, neck dissection etc.)
9. Effectively assist at minor head and neck surgical procedures (thyroidectomy, salivary gland resection, etc.) with increasing autonomy

10. Demonstrate attention to issues surrounding end-stage malignancies such as end-of-life care and palliation
11. Demonstrate a basic grasp of adjuvant therapies for the treatment of head and neck malignancies (radiotherapy, chemotherapy) and management of their complications

#### Reconstructive Surgery:

1. Demonstrate basic understanding of the hierarchy of reconstructive options for defects in the head and neck
2. Excise cutaneous lesions of the head and neck with appropriate closure/reconstruction of the resulting defect.
3. Harvest split and full-thickness skin grafts
4. Effectively assist at major reconstructive surgical procedures (e.g. harvest of pedicled or free tissue transfer)
5. Become familiar with diagnosis and treatment of facial nerve disorders and reanimation strategies

#### Laryngology:

1. Perform rigid laryngoscopy and videostroboscopy
2. Participate actively in the Voice Lab including focused history and relevant physical examination
3. Develop a differential diagnosis of dysphonia
4. Develop a differential diagnosis for dysphagia
5. Diagnose basic pathology of the larynx
6. Become familiar with specialty clinics in Laryngology including spasmodic dysphonia and care of the professional voice, and understand the role of the speech language pathologist in the management of voice and swallowing disorders

### **Communicator**

1. Demonstrate effective establishment of therapeutic relationships with patients and their families
2. Present histories, physical findings, and management plan to consultants in an organized, efficient, and confident manner
3. Obtain and synthesize relevant history from patients, their families, and communities
4. Prepare clear, accurate, concise, appropriately detailed clinical notes, consultation notes, discharge summaries, and operative reports
5. Discuss common (e.g. tonsillectomy, thyroidectomy) procedures with patients and their families in a clear and understandable form including risks/benefits, informed consent, and post-operative care
6. Prepares, participates, and presents effectively in organized rounds and seminars

### **Collaborator**

1. Demonstrate an understanding of the team structure of an in-patient service ('the resident team') and fulfill his/her role in this structure

2. Demonstrate recognition and respect for the opinions and roles of other team members
3. Recognize the advantages for optimal patient care provided by an interdisciplinary head and neck oncology clinic
4. Identify appropriate situations where the interdisciplinary team is most useful
5. Identify the situations and instances where consultation of other physicians or health care professional is useful or appropriate
6. Demonstrate collegial and professional relationships with other physicians, office and clinic support staff, operating room personnel, and emergency room staff
7. Recognize the expertise and role of allied health professionals such as speech language pathologists, home care nurses, and social workers

### **Manager**

1. Utilize resources effectively to balance patient care duties, learning needs, educational/teaching responsibilities and outside activities
2. Allocate finite health care resources in a wise, equitable, and ethical fashion
3. Utilise information technology to optimize patient care and life-long learning including facile use of hospital IT resources (e.g. filmless radiology, electronic charting)
4. Demonstrate an appreciation of the importance of quality assurance/improvement
5. Actively participate in preparation, presentation, analysis, and reporting of morbidity and mortality rounds
6. Accurately identify criteria for patient admission to hospital in the urgent/emergent situation as well as the implications of such decisions

### **Health Advocate**

1. Recognize and respond to opportunities for advocacy within Otolaryngology, both for your patients as well as for the community in which we practice
2. Demonstrate familiarity with important determinants of health affecting head and neck surgery such as smoking and alcohol consumption

### **Scholar**

1. Actively participate in the teaching of medical students (didactic, in clinics, and on wards/in OR)
2. Facilitate learning in patients and other health professionals
3. Actively participate in preparation and presentation of weekly Grand Rounds
4. Demonstrate a critical appraisal of research methodology, biostatistics, and the medical literature as part of monthly Journal Clubs
5. Practice the skill of self-assessment
6. Develop, implement, and monitor a personal educational strategy and seek guidance for this educational strategy as appropriate
7. Demonstrate the evolving commitment to, and the ability to practice, life-long learning
8. Contribute to the development of new knowledge through participation in clinical or basic research studies
9. Demonstrate commitment to evidence based standards for care of common problems in Otolaryngology

10. Actively participate in weekly academic half-day seminar series including advance preparation for the topic(s)

### **Professional**

1. Deliver highest quality care with integrity, honesty, and compassion
2. Exhibit appropriate professional and interpersonal behaviours
3. Practice medicine and Otolaryngology in an ethically responsible manner
4. Recognize limitations and seek assistance as necessary
5. Seek out and reflect on constructive criticism of performance
6. Endeavour to develop an appropriate balance between personal and professional life to promote personal physical and mental health/well-being as an essential to effective, life-long practice