**Otolaryngology**

**Goals and Objectives**

**PGY 3**

**Goals:**

The Department of Head and Neck Surgery at Kaiser will provide a learning environment for the care, treatment and follow up of otolaryngology, head and neck surgery patients.  Surgical basic science, including fluids, electrolytes, wound healing and nutrition, will be emphasized.  Clinically, residents will assess surgical pathology pre-operatively, develop clinical judgment on managing these issues, and learn operative skills to address the problem.  Careful postoperative care and follow up will be emphasized.

**Objectives:**

**Medical Knowledge:**

* Define and describe the anatomic aspects of even the most complex general surgical operations such as bilateral radical neck dissection.
* Describe the examination for and treatment of dental/oral emergencies with which a general surgeon should be familiar:
	+ Cellulitis, including Ludwig’s Angina
	+ Peritonsillar abscess (Quinsy)
* Summarize the essential components of a focused history and physical examination for common otolaryngologic problems.
* Analyze the clinical management of ear, nose, and throat (ENT) patients in the intensive care unit (ICU), including:
	+ Respiratory infection management
	+ Airway management
	+ Wound care
* Common ENT diseases:
	+ Sinusitis
	+ Sialadenitis
	+ Neck abscess
	+ Epiglottitis
* Explain the principle causes of simple epistaxis and describe its management.
* Evaluate patients with facial trauma and develop a treatment plan for the management of:
	+ Fractures
	+ Lacerations
	+ Hemotympanum
	+ Epistaxis
* Describe the indications for tracheostomy in adults and children.
* Compare the use of the following procedures in evaluating ENT problems:
	+ Radiography
	+ Contrast studies
	+ Ultrasound
* Describe the indications for simple endoscopy and its diagnostic contributions such as:
	+ Nasopharyngoscopy
	+ Direct laryngoscopy
	+ Esophagoscopy
* Summarize the characteristics of the common neoplasms of the ear, nose, and throat, and describe appropriate surgical intervention.
* Outline the diagnostic approaches to otolaryngologic neoplasia, including:
	+ Direct visualization
	+ Indirect visualization
	+ Use of radiography
	+ Fine-needle biopsy
* Describe diagnostic and therapeutic procedures utilized in treating the following:
	+ Abscess
	+ Neck mass
	+ Oral ulcer
	+ Salivary gland mass
* Describe and demonstrate methods for removing foreign bodies from the trachea, bronchus, and esophagus.
* Compare surgical approaches using surgical flaps for repair of ENT defects and trauma of the lip, alar rim, and helix.
* Outline the diagnosis and repair of facial fractures of the mandible, nose, and frontal sinus.
* Summarize diagnostic and therapeutic considerations in the management of caustic injury to the mouth, nasopharynx, trachea, and esophagus.
* Discuss the management of airway in patients with terminal cancer of the thyroid and aero-digestive tract.
* Demonstrate understanding and use of laboratory and imaging modalities in diagnosis of thyroid and parathyroid disorders

**Patient Care:**

* Establish basic proficiency in providing pre-operative and post-operative care (writes appropriate pre-op and post-op orders for floor patients, handles nursing calls appropriately, and manages most routine post-operative care with minimal intervention by supervisor).
* Take an appropriate history to evaluate patients with otolaryngology/ head & neck surgical issues to include:
	+ A complete history of present illness
	+ Presence of any co-morbidities
	+ A review of social and family history impacting the present problem
	+ A complete review of systems
* Develop a proficiency in evaluation and interpretation of the different diagnostic modalities including: X-Rays, ultrasounds, CT scans, Contrast studies and MRIs.
* Discuss treatment options, risks and potential complications of patients with plastic surgery issues.
* Assist in the performance of head and neck surgery procedures.
* Recognize and manage postoperative surgical complications, including wound infection, dehiscence and leaks, and lymphocele, seroma and hematoma formation.
* Demonstrate skill in basic surgical techniques, including:
* Knot tying
* Exposure and retraction
* Knowledge of instrumentation
* Incisions
* Closure of incisions
* Coordinate pre and post-surgical operative care for patients in the ENT surgery rotation.
* Be able to apply and remove all types of dressings.
* Make and close a variety of incisions and tie knots using sterile technique.
* Be able to coordinate and identify appropriate pre-operative work-up needed to get the patient ready for surgery.

**Professionalism:**

* The Resident should be receptive to feedback on performance, attentive to ethical issues and be involved in end-of-life discussions and decisions.
* Understand the importance of honesty in the doctor-patient relationship and other medical interactions.
* Treat each patient, regardless of social or other circumstances, with the same degree of respect you would afford to your own family members.
* Learn how to participate in discussions and become an effective part of rounds, attending staff conference, etc.
* Complete all assigned patient care tasks for which you are responsible or provide complete sign out to the on-call resident.
* Maintain a presentable appearance that sets the standard for the hospital; this includes but is not limited to adequate hygiene and appropriate dress. Scrubs should be worn only when operating.
* Assist with families of critically injured/ill patients and guidance of families towards or through difficult decisions.
* Demonstrate mentoring and positive role-modeling skills.

**Systems-Based Practice:**

* Understand, review, and contribute to the refinement of clinical pathways
* Understand the cost implications of medical decision-making
* Partner with health care management to facilitate resource efficient utilization of the hospital’s resources.
* Describe in general terms the benefits of clinical pathway implementation
* Develop a cost-effective attitude toward patient management.
* Develop an appreciation for the benefits of a multi-disciplinary approach to management of critically ill surgical patients.
* Comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) regulations regarding patient privacy and confidentiality.
* Demonstrate knowledge in steps and conduct during major surgical procedures.
* Have clear indications and know when it is appropriate to perform a surgical procedure.
* Have an understanding of when it is not appropriate to operate.
* Demonstrate knowledge of steps to be taken to have a patient ready for surgery including pre-op workup and medical clearance.

**Practice Based Learning & Improvement:**

* Demonstrate the ability to:
	+ Evaluate published literature in critically acclaimed journals and texts
	+ Apply clinical trials data to patient management
	+ Participate in academic and clinical discussions
* Accept responsibility for all dimensions of routine patient management on the wards
* Apply knowledge of scientific data and best practices to the care of the surgical patient
* Use the library and databases on on-line resources to obtain up to date information and review recent advances in the care of the surgical patient.
* Demonstrate a consistent pattern of responsible patient care and application of new knowledge to patient management.
* Demonstrate a command and facility with on line educational tools.
* Complete the personal learning project as outlined in the PBLI curriculum

**Interpersonal & Communication Skills:**

* Work as effective team members
* Cultivate a culture of mutual respect with members of nursing and support staff
* Develop patterns of frequent and accurate communication with team members and attending staff
* Gain an appreciation for both verbal and non verbal communication from patients and staff
* Demonstrate consistent respectful interactions with members of nursing and support staff
* Demonstrate consistent, accurate and timely communication with members of the surgical team
* Demonstrate sensitivity and thoughtfulness to patients concerns, and anxieties, as well as cultural differences.
* The resident will demonstrate the ability to provide and request appropriate consultation from other medical specialists.

**Assessment**:

* Patient care and technical skills will be assessed by the attending surgeon on a daily basis
* During the formative evaluation at the end of the rotation

**Educational Conferences**:

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| **Conference** | **Date and Time** | **Location** |
| ACS Weekly  | Wednesday 7:00 am | RCRMC |
| M&M / Quality Management | Tuesday - Noon | Kaiser |
| Tumor Board (1x month) | Wednesday - Noon | Kaiser |
| Head & Neck monthly meeting | Wednesday – Noon | Kaiser |
| Journal Club (as scheduled) | Thursday – 7:00 am | RCRMC |
| Skills Lab (as scheduled) | Thursday – 7:00 am | RCRMC |

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