

OTOLARYNGOLOGY – HEAD & NECK SURGERY ROTATION PLAN

NAME OF ROTATION: Senior Core & Transition to Practice – Michael Garron Hospital

FOCUS OF THIS ROTATION

- A core clinical rotation for senior residents focusing on common community head and neck, rhinologic and otologic procedures with increasing graded responsibility. This is a key rotation of the Transition to Practice phase of training.

CBD stage(s) for this rotation:

- Core of Discipline – COD
- Transition to Practice – TTP

Length of this rotation:

- 3 Blocks

PGY Level(s) for this rotation:

- PGY4
- PGY5

Locations for rotation:

- Michael Garron Hospital

Required training experiences included in this rotation

- COD 1.1 Clinical Training Experiences
 - COD 1.1.1 Ambulatory Clinics
 - COD 1.1.2 Inpatient Service
 - COD 1.1.3 Operative Experience

Recommended training experiences included in this rotation:

Other training experiences that may be included in this rotation

- Grand rounds
- Journal Club
- On-call as per schedule
- Hospital Rounds

	EPA's Mapped to this rotation:	Total # of Entrustments are expected, or encouraged, during COD
1.	COD 1 Managing post-operative surgical complications or adverse events	2
2.	COD 2 Managing an inpatient surgical service	2
3.	COD 3 Participating in (or leading) quality improvement initiatives to enhance the system of patient care	2
4.	COD 4 Performing surgical drainage of deep neck space infections in adult and pediatric patients (JC)	2
5.	COD 5 Assessing patients with dysphagia or swallowing disorders (JC)	2
6.	COD 6 Assessing and managing adult and pediatric patients with sleep disordered breathing	2
7.	COD 8 Providing advanced management for patients with epistaxis (SC) Part A Patient Assessment Part B Procedure	Part A 2 Part B 2

	EPAs Mapped to this rotation:	Total # of Entrustments are expected, or encouraged, during COD
8.	COD 9 Assessing and managing patients presenting with rhinosinusitis Part A Initial Assessment Part B Procedure – Basic endoscopic sinus surgery (JC) Part C Procedure – Complete endoscopic sinus surgery (SC) Part D Follow-up with sinus cavity debridement	2
9.	COD 10 Providing surgical management for patients with nasal septal deformity (JC)	2
10.	COD 11 Providing surgical management for patients with chronic airway obstruction (SC)	2
11.	COD 14 Assessing and providing surgical management for patients with disorders of the thyroid glands and/or parathyroid glands Part A Patient assessment Part B Procedure	Part A 2 Part B 2
12.	COD 15 Performing superficial parotidectomy surgeries (SC)	2
13.	COD 18 Assessing and managing patients regarding cervicofacial aesthetic surgery (SC) Part A Patient assessment and discussion Part B Procedure – Rhinoplasty	Part A 2 Part B 2
14.	COD 19 Assessing adult and pediatric patients with hearing loss and providing an initial management plan, both surgical and non-surgical (JC/SC) Part A Assessment Part B Procedure – Junior Core Part C Procedures – Senior Core	2
15.	COD 20 Assessing patients with balance disorder/vertigo and providing initial management plan both surgical and nonsurgical (JC)	2
16.	TTP 1 Providing after hours coverage for an Oto-HNS practice Part A Patient Management Part B Working with referring physician	Part A 2 Part B 2
17.	TTP 2 Coordinating, organizing and executing the surgical day of Core procedures	2
18.	TTP 3 Organizing and managing general Oto-HNS clinics	2
19.	TTP 4 Participating in and/or leading educational or administrative activities	2
20.	TTP 5 Monitoring one's own practice and performance for quality assurance and improvement	2
21.	TTP 6 Developing a personal learning plan for continuing personal and professional development	2

	Other assessments during this rotation:	Tool Location / Platform (e.g. POWER, Entrada):
1.	ITAR	POWER
2.	Operative Log	Excel Workbook

	Key Objectives for this Rotation:	CanMEDS Role(s):
1.	Perform tympanoplasty and mastoidectomy with limited consultant intervention.	Medical Expert
2.	Perform the following (circle any procedure that you do not feel sufficiently comfortable with): lymph node and neck mass biopsy; excision of submandibular glands, branchial cleft cysts and thyroglossal duct cysts; excision of oral cavity lesions; parotidectomy, neck dissection, thyroidectomy and parathyroidectomy, with increasing degree of autonomy.	Medical Expert
3.	Conduct an assessment for septorhinoplasty, including demonstrating an appreciation of the nasal valve, open vs. closed approaches, as well as grafting techniques.	Medical Expert
4.	Provide surgical management of, and utilize appropriate approaches to, common sinus disease states, and demonstrate comfort with image guidance systems for intraoperative navigation.	Medical Expert
5.	Demonstrate ability to lead a health care team	Leader
6.	Utilize resources effectively to balance patient care duties, learning needs, educational/teaching responsibilities and outside activities	Leader