

## OTOLARYNGOLOGY – HEAD & NECK SURGERY ROTATION PLAN

**NAME OF ROTATION:** Senior Core – Hospital for Sick Children

**FOCUS OF THIS ROTATION**

- Core clinical rotation in paediatrics that focuses on foundational and advanced OHNS surgery in children such as myringotomy & tubes, tonsillectomy and adenoidectomy, congenital anomalies, airway management and biopsy of suspicious lesions.

**CBD stage(s) for this rotation:**

- Core of Discipline – COD

**Length of this rotation:**

- 3 Blocks

**PGY Level(s) for this rotation:**

- PGY4

**Locations for rotation:**

- Hospital for Sick Children (HSC)

**Required training experiences included in this rotation**

- COD 1.1 Clinical Training Experiences, pediatric otolaryngology
  - COD 1.1.1 Outpatient Clinics; new consultations and follow patients
  - COD 1.1.2 Inpatient Service
  - COD 1.1.3 Operating areas
  - COD 1.1.4 Consultative service to the emergency department and other clinical services

**Other training experiences that may be included in this rotation**

- ✓ Grand rounds
- ✓ Journal Club
- ✓ On-call per schedule
- ✓ Hospital Rounds
- ✓ Pediatric OHNS Sx
- ✓ Paediatrics

	<b>EPAs Mapped to this rotation:</b>	<b>Total # of Entrustment s Expected by the end of COD</b>
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 7 Managing pediatric patients with airway obstruction (acute or chronic) (JC)	2

	<b>EPAs Mapped to this rotation:</b>	<b>Total # of Entrustments Expected by the end of COD</b>
8.	COD 8 Providing advanced management for patients with epistaxis (SC) Part A Patient Assessment Part B Procedure	Part A 2 Part B 2
9.	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	Part A 2 Part B 2 Part C 2 Part D 2
10.	COD 10 Providing surgical management for patients with nasal septal deformity (JC)	2
11.	COD 11 Providing surgical management for patients with chronic airway obstruction (SC)	2
12.	COD 15 Performing superficial parotidectomy surgeries (SC)	2
13.	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 Part C Procedures	Part A 2 Part B 2 Part C 2
14.	COD 20 Assessing patients with balance disorder/vertigo and providing initial management plan both surgical and nonsurgical (JC)	2

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

	<b>Key Objectives for this Rotation:</b> By the end of the rotation the resident should be able to ...	<b>CanMEDS Role(s):</b>
1.	Promptly and effectively assess patients with airway emergencies including airway obstruction and supervise junior colleagues in this situation.	Medical Expert
2.	Interpret conventional audiometry and tympanometry in children; demonstrate a classification scheme and approach to management of congenital and acquired causes of paediatric hearing loss.	Medical Expert
3.	Develop a differential diagnosis and management of a paediatric neck mass.	Medical Expert
4.	Demonstrate expertise in assessing and managing conductive and sensorineural hearing loss, and the counselling of patients regarding treatment options.	Medical Expert
5.	Raise a tympanomeatal flap, perform tympanoplasty, mastoidectomy and facial recess approach with consultant supervision.	Medical Expert
6.	Perform the following: lymph node and neck mass biopsy; excision of branchial cleft cysts and thyroglossal duct cysts, with increasing degree of autonomy.	Medical Expert
7.	Demonstrate understanding of intraoperative airway management; perform rigid suspension laryngoscopy, microlaryngeal surgery, CO2 Laser, microdebrider.	Medical Expert

	<b>Key Objectives for this Rotation:</b> By the end of the rotation the resident should be able to ...	<b>CanMEDS Role(s):</b>
8.	Effectively communicate information regarding treatments to patients and families. Discuss all basic and more complex Otolaryngology procedures with patients and their families in a clear and understandable form, including risks/benefits, informed consent, and post-operative care. Communicate follow-up plans to patients and families.	Communicator
9.	Interact with and examine children of all age groups and interact with their caregivers, including demonstrating the ability to engage children to make them feel comfortable during the encounter and demonstrate some techniques for dealing with children who are frightened or who are unable to cooperate with the exam. Demonstrate an understanding of the specific needs of adolescents – privacy, confidentiality, ability to consent and incorporate them into the patient encounter.	Communicator
10.	Deliver “bad news” in a compassionate and sensitive manner that takes into account the patient’s special psychological and social needs.	Communicator