July 2011

**ROTATION: HEAD AND NECK SURGERY**

**ROTATION DIRECTOR:** Keith Blackwell, M.D.

**SITES:** RRUMC

**GOALS AND OBJECTIVES:** To provide trainees an opportunity to participate in the perioperative and operative aspects of head and neck surgery.

**LEVEL OF TRAINEE:** R1

**DESCRIPTION OF THE ROTATION:**

The Head and Neck Surgery rotation of 4-8 weeks PGY1.

1. All rotating will be part of the Head and Neck (H&N) Surgery team and responsible for the care of the H&N patients.
2. The surgery residents will provide in-patient care including routine admissions and critical care of patients.
3. Residents will further participate in surgical operations needed on these patients under direct supervision by the surgical faculty.
4. The rotating residents will participate in all Department of Surgery educational conferences and didactic presentations.
5. Residents are expected to actively participate and present at the weekly H&N Surgery Conference.

**ASSESSMENT:**

Monitoring of the accomplishment of the stated objectives will be performed using the following methods:

1. Global Rating: end of rotation evaluation of resident performance to assess the resident’s demonstration of Core Competencies with respect to the stated objectives by faculty, other team resident members, students, and nursing staff.
2. Case Logs: auditing of operative cases pertinent to the specialty in the Surgical Operative Log.
3. Written Examination: performance on the annual ABSITE examination, Gastrointestinal and Body as a whole (clinical management) systems section.
4. Patient Survey: performance will be assessed by patient surveys administered through the rotation.
5. For additional information please refer to the Resident Milestones document on the UCLA Surgical Education website:  [http://www.surgery.medsch.ucla.edu/resident/Documents/ResidentMilestones.pdf](http://www.surgery.medsch.ucla.edu/resident/Documents/ResidentMilestones.pdf)
<table>
<thead>
<tr>
<th>ACGME Competency</th>
<th>Developmental Milestones Informing ACGME Competencies</th>
<th>Time Frame</th>
<th>Assessment Methods/Tools</th>
</tr>
</thead>
</table>
| Patient Care     | 1. Perform a complete and thorough history and physical examination, with emphasis in elements unique to H&N surgery patients.  
2. Initiate the laboratory evaluation and any other initial diagnostic studies with an understanding of the tests to be ordered.  
3. Make informed decisions about diagnostic and therapeutic interventions on H&N surgery patients with the guidance of senior residents and faculty.  
4. Be proficient in the preoperative preparation of the patients for H&N surgery and routine postoperative care.  
5. Understand basic pathophysiology of H&N disease and begin to master the skills necessary to care for the ICU patient under the guidance of the senior residents and faculty members.  
6. Understand the basic indications for common radiological and interventional studies used in the care of H&N surgery patients such as CT scans.  
7. Demonstrate the ability to effectively set priorities and coordinate the care of H&N patients. | 4-8 weeks | Global Rating  
Case Logs  
Written Examinations  
Patient Survey  
Feedback from faculty/attending physicians at rounds and OR |
| Medical Knowledge | Anatomy  
1. Define and describe the anatomic aspects of even the most complex general surgical operations such as bilateral radical neck dissection.  
Emergency Medicine  
1. Describe the examination for and treatment of dental/oral emergencies with which a general surgeon should be familiar:  
a. Cellulitis, including Ludwig’s Angina  
b. Peritonsillar abscess (Quinsy)  
Otolaryngology  
1. Summarize the essential components of a focused history and physical examination for common otolaryngologic problems.  
2. Analyze the clinical management of ear, nose, and throat (ENT) patients in the intensive care unit (ICU), including:  
a. Respiratory infection management  
b. Airway management  
c. Wound care  
3. common ENT diseases:  
a. Sinusitis  
b. Sialadenitis  
c. Neck abscess  
d. Epiglottitis | 4-8 weeks | Global Rating  
Written Examinations  
Completion of rotation specific SCORE assignments  
Feedback from faculty/attending physicians at rounds and OR |
4. Explain the principle causes of simple epistaxis and describe its management.
5. Evaluate patients with facial trauma and develop a treatment plan for the management of:
   a. Fractures
   b. Lacerations
   c. Hemotympanum
   d. Epistaxis
6. Describe the indications for tracheostomy in adults and children.
7. Compare the use of the following procedures in evaluating ENT problems:
   a. Radiography
   b. Contrast studies
   c. Ultrasound
8. Describe the indications for simple endoscopy and its diagnostic contributions such as:
   a. Nasopharyngoscopy
   b. Direct laryngoscopy
   c. Esophagoscopy
9. Summarize the characteristics of the common neoplasms of the ear, nose, and throat, and describe appropriate surgical intervention.
10. Outline the diagnostic approaches to otolaryngologic neoplasia, including:
   a. Direct visualization
   b. Indirect visualization
   c. Use of radiography
   d. Fine-needle biopsy
11. Describe diagnostic and therapeutic procedures utilized in treating the following:
   a. Abscess
   b. Neck mass
   c. Oral ulcer
   d. Salivary gland mass
12. Describe and demonstrate methods for removing foreign bodies from the trachea, bronchus, and esophagus.
15. Summarize diagnostic and therapeutic considerations in the management of caustic injury to the mouth, nasopharynx, trachea, and esophagus.
16. Discuss the management of airway in patients with terminal carcinoma of the thyroid and trachea.
17. Complete all relevant modules of the SCORE curriculum:
    https://portal.surgicalcore.org/home
| Practice Based Learning | 1. Develop a personal program of self-study and professional growth with guidance from the teaching staff and senior residents. An understanding of the etiology, pathogenesis, pathophysiology, diagnosis and management of H&N surgery disorders will allow for sound surgical judgment, which relies on knowledge, rational thinking and the surgical literature.  
2. Utilize current literature resources to obtain up-to-date information in the H&N patients and practice evidence-based medicine.  
4. Participate in activities of the Department of Surgery (including all teaching conferences) and assume responsibility for teaching and supervision of subordinate surgical house staff, and medical students.  
5. Participate in the Department Morbidity & Mortality conference and utilize information to further improve patient care.  
6. Participate in daily teaching rounds and be able to present patients in an organized and complete fashion | 4-8 weeks | Global Rating  
Written Examinations  
Patient Survey  
Feedback from faculty/attending physicians at rounds and OR |
| Professionalism | 1. Practice compassionate patient care maintaining the highest moral and ethical values with a professional attitude.  
2. Demonstrate understanding of the needs and feelings of others, including the patient's family members, allied health care personnel (nurses, clerical staff, etc.), fellow residents, and medical students.  
3. Communicate and collaborate effectively in a team of health care providers  
4. Demonstrate respect, compassion and integrity in the care of H&N surgery patients on a daily basis  
5. Demonstrate mature and educated approach to ethical issues commonly encountered in a H&N surgery setting.  
6. Show sensitivity to patients culture, age, gender and disabilities  
7. Recognize and appropriately handle sensitive cases of abuse  
8. Be self-aware and have knowledge of professional limits by practicing on-going medical education and self-improvement.  
9. Be accountable to profession in their actions and decisions | 4-8 weeks | Global Rating  
Patient Survey  
Feedback from faculty/attending physicians /hospital staff /patients |
| Interpersonal Relationships And Communication | 1. Create and sustain a therapeutic and ethically sound relationship with patients and patient families  
2. Work effectively with other members of the medical team including allied health care personnel (nurses, clerical staff, etc.), fellow residents, and medical students.  
3. Maintain professional interactions with other health care providers and hospital staff | 4-8 weeks | Global Rating  
Written Examinations  
Patient Survey  
Feedback from faculty/attending physicians /hospital staff /patients |
| Systems Based Practice | 1. Understand how the health care organization affects surgical practice of H&N surgery  
2. Demonstrate cost effective health care | 4-8 weeks | Global Rating  
Case Logs  
Hour logs |
<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Be able to coordinate multi-specialty and multidisciplinary patient care practice including discharge planning, social service, rehabilitation, and long term care.</td>
<td>4. Follow established practices, procedures, and policies of the Department of Surgery and integrated and affiliated hospitals.</td>
<td>5. Maintain complete of medical records, operative notes, staff sheets and notes, patient database cards, and other patient care related documentation in a timely, accurate, and succinct manner.</td>
</tr>
<tr>
<td>Completion of required evaluations</td>
<td>Completion of medical records</td>
<td>Written Examinations</td>
</tr>
<tr>
<td>Feedback from faculty/attending physicians at rounds and OR</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>