OUTPATIENT OTOLARYNGOLOGY

INTRODUCTION:

Many common problems seen in the day to day practice of internal medicine involve the ears, nose, mouth and throat. On this two-week elective rotation, the resident will have the opportunity to observe, manage and participate in procedures involved in an outpatient setting. When appropriate, the resident will also have the opportunity to visit the OR on more complicated cases.

EDUCATIONAL GOALS AND OBJECTIVES:

Patient Care

The resident will work closely with the attending physician while caring for patients in the office setting.

By the end of this rotation, R2 residents should be able to:

- Understand and weigh alternatives for diagnosis and treatment
- Uses diagnostic procedures and therapies appropriately
- Elicit subtle findings on physical examination
- Obtain a precise, logical and efficient history
- Interpret results of procedures appropriately
- Manage multiple problems simultaneously
- Develop and carry out management plans
- Consider patient preferences when making medical decisions
- Triage patients to an appropriate location

In addition to those listed above, R3 residents should be able to:

- Reason well in ambiguous situations
- Spend time appropriate to the complexity of the problem

Medical Knowledge

The resident will learn the pathophysiology and be able to relate it to the diagnosis and management of the following problems:

- Hearing Loss
- Tinnitus
- Otitis Media and Externa
• Cerumen Impaction
• Epistaxis
• Sinusitis
• Dental Disease
• Abnormal Taste and Smell
• Oral Cancer
• Oral Ulcers
• Hoarseness

By the end of this rotation, R2 residents should be able to:

✓ Recognize indications, contraindications and risks of commonly used medications and procedures
✓ Demonstrate and apply knowledge of epidemiologic and social behavioral sciences to the care of the patient

In addition to those listed above, R3 residents should be able to:

✓ Demonstrate an investigatory and analytic approach to clinical situations

**Practice-based Learning**

Residents must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices. Residents are expected to:

• analyze practice experience and perform practice-based improvement activities using a systematic methodology
• locate, appraise, and assimilate evidence from scientific studies related to their patients’ health problems
• obtain and use information about their own population of patients and the larger population from which their patients are drawn
• apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness
• use information technology to manage information, access on-line medical information; and support their own education
• facilitate the learning of students and other health care professionals

By the end of this rotation, R2 residents should be able to:

✓ Undertake self evaluation with insight
✓ Facilitate the learning of students and other health care professionals
In addition to those listed above, R3 residents should be able to:

- Analyze personal practice patterns systematically and strive to improve.
- Compare personal practice patterns to larger populations.
- Locate, appraise and assimilate scientific literature appropriate to specialty.
- Apply knowledge of study.

**Interpersonal and Communication Skills**

Residents must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients families, and professional associates. Residents are expected to:

- create and sustain a therapeutic and ethically sound relationship with patients.
- use effective listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills.
- work effectively with others as a member or leader of a health care team or other professional group.

By the end of this rotation, R2 and R3 residents should be able to:

- Create and sustain therapeutic and ethically sound relationships with patient and families.
- Provide education and counseling to patients, families and colleagues.
- Discuss end of life care with patients/families.

**Professionalism**

Residents must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population. Residents are expected to:

- demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest; accountability to patients, society and the profession; and a commitment to excellence and on-going professional development.
- demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.
- demonstrate sensitivity and responsiveness to patients’ culture, age, gender, and disabilities.
By the end of this rotation, R2 and R3 residents should be able to:

- Display initiative and leadership
- Delegate responsibility to others
- Demonstrate commitment to on-going professional development
- Demonstrate commitment to ethical principals pertaining to the provision or withholding of care, patient confidentiality, and informed consent and business practices
- Demonstrate sensitivity to patient culture, gender, age, preferences and disabilities
- Acknowledge errors and works to minimize them

**Systems-based Practice**

Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value. Residents are expected to:

- understand how their patient care and other professional practices affect other health care professionals, the health care organization, and the larger society and how these elements of the system affect their own practice
- know how types of medical practice and delivery systems differ from one another, including methods of controlling health care costs and allocating resources
- practice cost-effective health care and resource allocation that does not compromise quality of care
- advocate for quality patient care and assist patients in dealing with system complexities
- know how to partner with health care managers and health care providers to assess, coordinate, and improve health care and know how these activities can affect system performance

By the end of this rotation, R2 residents should be able to:

- Apply knowledge of how to partner with other health care providers to assess, coordinate and improve patient care
- Use systematic approaches to reduce errors
- Participate in developing ways to improve systems of practice and health management

In addition to those listed above, R3 residents should be able to:
✓ Demonstrate ability to adapt to change
✓ Provide cost effective care
✓ Understand how individual practices affect other health care professionals, organizations and society
✓ Demonstrate knowledge of types of medical practice and delivery systems
✓ Practice effective allocation of health care resources

IMPLEMENTATION:

- Daily interaction and observation with the attending physician
- Experience and instruction in the procedures used in the office setting
- Observation of surgery at the attending physician’s discretion
- Discussion of the cases as time permits
- Reading from the resources suggested by the attending physician

EVALUATION:

The attending physician will evaluate the resident for competence in Patient Care, Medical Knowledge, Practice-based Learning, Communication Skills, Professionalism and Systems-based Practice. The resident’s performance will be discussed during and at the end of the rotation.