

SURG 771 - Otolaryngology – Head & Neck Surgery Elective for Third Year Medical Students

Length of Rotation:

Two weeks

Brief outline

This course will introduce third year medical students to basic concepts in the evaluation of head and neck symptoms and diseases.

Learning opportunities will include:

- a. The student will plan an integral role on inpatient Otolaryngology team rounds, both for inpatient service and consultations.
- b. Students will work with the faculty in the outpatient clinic, both playing a role of initial evaluation of new patients, as well as discussion of patients after evaluation.
- c. Attendance at Otolaryngology – Head & Neck Surgery conferences, including Grand Rounds, Board Review, Journal Club, Multidisciplinary Tumor Board, pre-operative conference, Head & Neck Radiology, and Morbidity and Mortality conference are required.
- e. Emphasis will be placed on common otolaryngologic diagnoses seen both in a general medical practice, as well as subspecialty clinic.

Topics which will be covered include:

- a. Complete head and neck examination.
- b. Adenotonsillar disease in children.
- c. Sleep apnea in children and adults.
- e. Neck Masses
- f. Hearing Loss
- g. Vertigo
- h. Surgical thyroid and parathyroid disease
- i. Trauma

Course Description

This course is designed to introduce third year medical students to the basics of evaluation and management of patients with ear, nose, throat and neck problems. Students on this elective will serve as an integral part of the Otolaryngology – Head & Neck Surgery team. This rotation should serve to enhance the head and neck history and examination skills of the student. Student will be expected to personally evaluate patients in the clinic, as well as possibly through the emergency room and inpatient consultation service. Management of these patients will be discussed with resident and attending faculty in formulating a treatment plan. Operative experience will be directed mostly towards routine ear, nose, throat, and neck surgeries. More intense head and neck cases may be utilized as opportunities for head and neck anatomy experiences for all students. For those expressing an interest in otolaryngology – head & neck surgery as a potential career, operative

experience can be tailored for the exposure necessary to demonstrate the breadth of otolaryngology – head & neck surgery. Daily conferences and lectures will serve as formal didactics, in addition to the teaching opportunities provided in outpatient clinics and inpatient rounds.

The goals of this elective rotation are to enhance head and neck skills and to reinforce for students the otolaryngologic pathology they are likely to see in their clinical practice, regardless of specialty.

Evaluation methods will include subjective evaluation of students' funds of knowledge and patient care skills by the attending otolaryngology - head and neck surgery faculty. This course will be offered throughout the entire academic year.

Course Objectives

The student should be able to perform the following by the end of the two week rotation:

1. List the indications for adeno-tonsillectomy / tonsillectomy.
2. Discuss the pathogenesis of rhinosinusitis.
3. Identify risk factors for head and neck malignancies.
4. Correctly interpret an audiogram in regards to type of hearing losses.
5. Perform a detailed head and neck examination.

SURG 770 - Otolaryngology – Head & Neck Surgery Acting Internship for Fourth Year Medical Students

Length of Rotation:

Four weeks

Brief outline

This course will expose students to the key concepts in the evaluation of head and neck symptoms and diseases.

Learning opportunities will include:

- a. The student will plan an integral role on inpatient Otolaryngology team rounds, both for inpatient service and consultations.
- b. Students will work with the faculty in the outpatient clinic, both playing a role of initial evaluation of new patients, as well as discussion of patients after evaluation.
- c. Attendance at Otolaryngology – Head & Neck Surgery conferences, including Grand Rounds, Board Review, Journal Club, Multidisciplinary Tumor Board, pre-operative conference, and Morbidity and Mortality conference are required.
- e. Emphasis will be placed on common otolaryngologic diagnoses seen both in a general medical practice, as well as subspecialty clinic.

Topics which will be covered include:

- a. Complete head and neck examination.
- b. Adenotonsillar disease in children.
- c. Sleep apnea in children and adults.
- e. Neck Masses
- f. Hearing Loss
- g. Vertigo
- h. Surgical thyroid and parathyroid disease
- i. Trauma

Course Description

This course is designed to expand the fourth year students understanding of the evaluation and management of patients with ear, nose, throat and neck problems. Students on this AI will serve as an integral part of the Otolaryngology – Head & Neck Surgery team. This rotation should serve to enhance the head and neck history and examination skills of the student. Student will be expected to personally evaluate patients in the clinic, as well as possibly through the emergency room and inpatient consultation service. Management of these patients will be discussed with resident and attending faculty in formulating a treatment plan. Operative experience will be directed mostly towards routine ear, nose, throat, and neck surgeries. More intense head and neck cases may be utilized as opportunities for head and neck anatomy experiences for all students. For those expressing an interest in otolaryngology – head & neck surgery as a potential career, operative experience can be tailored for the exposure necessary to demonstrate the breadth of

otolaryngology – head & neck surgery. Daily conferences and lectures will serve as formal didactics, in addition to the teaching opportunities provided in outpatient clinics and inpatient rounds.

The purpose of this rotation is to enhance head and neck skills and to reinforce for students the otolaryngologic pathology which they are likely to see in their clinical practice, regardless of specialty.

Course Goals:

1. To solidify the basic knowledge of surgical diseases and trauma acquired during the third year clerkship. This involves the evaluation of patients in the Emergency Department, the Surgical Intensive Care unit, the outpatient office, and on the wards.
2. To expand the fund of knowledge acquired during the third year clerkship, including pathophysiology, anatomy, and surgical principles.
3. To expand the recognition of clinical presentations of a variety of surgical diseases and develop a broad differential diagnosis.
4. To critically design an appropriate diagnostic plan to rule in or rule out diseases in the differential diagnosis.
5. To know the medical and surgical options to treat surgical diseases and trauma.
6. To understand the principles of evidence based therapeutic options for patients with surgical diseases and trauma patients.
7. To assume the care of several patients with a variety of surgical diseases, to observe the course of the disease and how it is modified by medical or surgical intervention.
8. To assume the total care, as appropriate, of patients initially seen in the clinic or Emergency Department and admitted to the hospital: attending to their needs, developing rapport with them, being with them in the operating room and participating in their disposition at discharge.
9. To further develop interpersonal skills with patients, students, residents, and faculty.
10. To understand the financial aspects and ramifications of surgical intervention and the concept of "best practice".

Course Objectives

The student should be able to perform the following by the end of the four week rotation:

1. List the indications for adeno-tonsillectomy / tonsillectomy.
2. Discuss the pathogenesis of rhinosinusitis and rationale for surgical treatment.
3. Identify risk factors for head and neck malignancies.
4. Correctly interpret an audiogram in regards to type of hearing losses.
5. Perform a detailed head and neck examination.
6. Present a patient history and examination in detailed, but succinct manner.
7. Perform flexible fiberoptic laryngoscopy.