

**2017**

**EDITORIAL REVISION – MARCH 2019  
VERSION 1.0**

*Effective for residents who enter training on or after July 1, 2017.*

The following training experiences are required, recommended, or suggested, as indicated:

## **TRANSITION TO DISCIPLINE**

### **Required training experiences:**

1. Clinical training experiences:
  - 1.1. Otolaryngology-Head and Neck Surgery
    - 1.1.1. Outpatient clinics and/or inpatient service
2. Other training experiences:
  - 2.1. Formal instruction in:
    - 2.1.1. Operating room procedures
  - 2.2. Orientation to institutional policies and procedures
  - 2.3. Orientation to Competence by Design

## **FOUNDATIONS OF DISCIPLINE**

### **Required training experiences:**

1. Clinical training experiences:
  - 1.1. Otolaryngology – Head and Neck Surgery
    - 1.1.1. Outpatient clinics
    - 1.1.2. Inpatient service
    - 1.1.3. Operating areas
    - 1.1.4. Consultative service to the emergency department and other clinical services
  - 1.2. Neurosurgery inpatient service
  - 1.3. Anesthesiology

- 1.4. Service that provides initial trauma management which may be emergency medicine, general surgery, trauma team, oral and maxillofacial surgery, or plastic surgery
- 1.5. Critical care unit
2. Other training experiences:
  - 2.1. Formal instruction and assessment in the basic sciences relevant to Otolaryngology – Head and Neck Surgery which must include anatomy, histology, physiology, pathology, microbiology, biochemistry, and pharmacology, as well as the physics of sound and the physiology of balance

**Recommended training experiences:**

3. Clinical training experiences:
  - 3.1. Plastic Surgery and/or facial reconstructive surgery (inpatient or clinics or both)
  - 3.2. General Surgery inpatient service and operative experience
4. Other training experiences include:
  - 4.1. Formal instruction in critical appraisal, such as journal club

**Suggested training experiences:**

5. Clinical training experiences:
  - 5.1. Emergency Medicine
  - 5.2. Oral and maxillofacial surgery
  - 5.3. Radiation Oncology
  - 5.4. Thoracic Surgery

**CORE OF DISCIPLINE**

**Required training experiences:**

1. Clinical training experiences:
  - 1.1. Otolaryngology – Head and Neck Surgery clinical experience in the full breadth of the discipline, which must include general otolaryngology, pediatric otolaryngology, otology, neurotology, rhinology, laryngology, head and neck surgery, and facial plastic and reconstructive surgery
    - 1.1.1. Outpatient clinics; new consultations and followup patients
    - 1.1.2. Inpatient service

- 1.1.3. Operating areas
- 1.1.4. Consultative service to the emergency department and other clinical services
  
- 2. Other training experiences:
  - 2.1. Clinicopathologic conferences
  - 2.2. Simulation experiences with temporal bone surgery
  - 2.3. Teaching and clinical supervision of junior learners
  - 2.4. Formal instruction in diagnostic, medical and surgical management
    - 2.4.1. General otolaryngology
      - 2.4.1.1. Inflammatory and infectious diseases of the head and neck, epistaxis, sleep disordered breathing, and airway emergencies
    - 2.4.2. Pediatric otolaryngology
      - 2.4.2.1. Congenital, inflammatory, traumatic and neoplastic disorders of the head and neck in children
    - 2.4.3. Otology
      - 2.4.3.1. Audiological assessment
      - 2.4.3.2. Microsurgery of the external and middle ear, and mastoid
    - 2.4.4. Neurotology
      - 2.4.4.1. Audiological and vestibular assessment
      - 2.4.4.2. Microsurgery of the inner ear and lateral skull base
      - 2.4.4.3. Management of patients with profound hearing loss, specifically including the assessment of candidacy for cochlear implantation
    - 2.4.5. Rhinology
      - 2.4.5.1. Allergic and non-allergic conditions of the nasal mucosa
      - 2.4.5.2. Congenital and inflammatory diseases of the nose and paranasal sinuses
      - 2.4.5.3. Techniques of endoscopic sinus surgery
      - 2.4.5.4. Techniques of open sinus surgery
    - 2.4.6. Laryngology
      - 2.4.6.1. Voice and swallowing disorders
      - 2.4.6.2. Advanced diagnostic techniques of voice and swallowing disorders including videostroboscopy
      - 2.4.6.3. Benign and malignant disease of the larynx and upper airway

- 2.4.6.4. Neurologic disorders of the pharynx and larynx
- 2.4.7. Head and neck surgery
  - 2.4.7.1. Benign and malignant lesions of the skin, upper aerodigestive tract, and salivary, thyroid and parathyroid glands
- 2.4.8. Facial plastic and reconstructive surgery
  - 2.4.8.1. Aesthetic and reconstructive surgery of the face, head, and neck
  - 2.4.8.2. Trauma to the face, head, and neck, including facial lacerations, auricular injuries, and facial fractures
  - 2.4.8.3. Techniques for facial, and head and neck reconstruction
- 2.4.9. Communication skills, including communication with persons with hearing loss
- 2.5. Scholarly activity

**Recommended training experiences:**

- 3. Clinical training experiences:
  - 3.1. Interdisciplinary clinics for management of patients with head and neck neoplasms
  - 3.2. Otolaryngology – Head and Neck Surgery in the community setting
- 4. Other training experiences:
  - 4.1. Simulation experiences with endoscopic sinus surgery

**Suggested training experiences:**

- 5. Clinical training experiences:
  - 5.1. Audiology
  - 5.2. Speech language pathology
  - 5.3. Head and neck imaging
  - 5.4. Head and neck pathology

## **TRANSITION TO PRACTICE**

### **Required training experiences:**

1. Clinical training experiences:
  - 1.1. Otolaryngology – Head and Neck Surgery
    - 1.1.1. Outpatient clinics
    - 1.1.2. Inpatient service
    - 1.1.3. Operating areas
    - 1.1.4. After hours coverage
    - 1.1.5. Patient triage
  
2. Other training experiences:
  - 2.1. Leadership, organization and management of otolaryngology – head and neck surgery services
  - 2.2. Leading multidisciplinary conferences
  - 2.3. Clinical supervision of junior learners
  - 2.4. Formal instruction in:
    - 2.4.1. Practice management and billing
    - 2.4.2. Physician well-being

### **Recommended training experiences:**

3. Clinical training experiences:
  - 3.1. Observation or participation in advanced surgical procedures
  - 3.2. Otolaryngology – Head and Neck Surgery in the community setting
  
4. Other training experiences:
  - 4.1. Participation or completion of a continuing quality improvement activity

## **CERTIFICATION REQUIREMENTS**

Royal College certification in Otolaryngology – Head and Neck Surgery requires all of the following:

1. Successful completion of the Royal College examination in Surgical Foundations;
2. Successful completion of the Royal College examination in Otolaryngology – Head and Neck Surgery; and
3. Successful completion of the Otolaryngology – Head and Neck Surgery Portfolio.

## **NOTES:**

The Otolaryngology – Head and Neck Surgery Portfolio refers to the list of entrustable professional activities across all 4 stages of the residency Competence Continuum, and associated national standards for assessment and achievement.

## **MODEL DURATION OF TRAINING**

Progress in training occurs through demonstration of competence and advancement through the stages of the Competence Continuum. Historically, training in Otolaryngology – Head and Neck Surgery has required five years. There is no mandated period of training. Individual duration of training may be influenced by many factors, which may include but are not limited to the student's singular progression through the stages, the availability of teaching and learning resources, and/or differences in program implementation. Duration of training for any one individual is therefore at the discretion of the Faculty of Medicine, the Competence Committee, and program director.

### Guidance for programs

The Royal College Specialty Committee in Otolaryngology – Head and Neck Surgery suggested course of training, for the purposes of planning learning experiences and schedules, is as follows:

- One month in Transition to Discipline
- 17 months in Foundations
- 36 months in Core
- Six months in Transition to Practice

Guidance for postgraduate medical offices

For planning purposes, the stages of the Competence Continuum in Otolaryngology – Head and Neck Surgery are generally no longer than two months for Transition to Discipline, 18 months for Foundations, 40 months for Core and six months for Transition to Practice.

*This document is to be reviewed by the Specialty Committee in Otolaryngology – Head and Neck Surgery by December 2020.*

**APPROVED** – Specialty Standards Review Committee – January 2017

**EDITORIAL REVISION** – Office of Specialty Education – March 2019