

OTOLARYNGOLOGY JUNIOR ELECTIVE

William Collins, MD
Course Director

Name: _____

Medical Student Junior Rotation

Print this information handout for your use throughout the rotation.
At the end of the rotation you will be asked to turn this first page in
for a grade to be issued:

1. Returned head mirror (have Gaby sign below)

2. Returned borrowed books (have Gaby sign below)

3. The date I wore unilateral earplugs:

4. Date that I reviewed ENT questions with Dr. Collins:

Return this sheet to Gaby in the ENT office, M228.
Thank you.

Getting Started

Gaby will generate a schedule for your rotation. You will be assigned to work with one of the ENT teams each week, rotating with the different ENT physicians in clinic. If you have particular interest in a given area please let Gaby and/or Dr. Collins know before the rotation starts. Ample time for reading and assisting in the OR will be provided. Please come to the Academic office (M2-228) the Friday before your rotation starts to pick up your schedule. Gaby will help you contact the senior resident on your first service so that you know where to meet the team for rounds your first day on service. It is also very important that you read about the surgical cases including those you will see on your first day.

Course Requirements

1. Participate in all clinic and didactic activities.
2. Completion of the course objectives
3. Coverage of the majority of core topics with the faculty or residents & documentation sheet turned in at the end of your rotation
4. Live with a hearing loss for one day as instructed below.
5. Return head mirror loaned to you.
6. Complete and discuss Otolaryngology questions with Dr. Collins.

Objectives

- Improve understanding of otolaryngologic pathology and normal variants
- Improve diagnostic skills for otolaryngologic pathology

General head and neck exam

Mirror examination of the upper aerodigestive tract

- Exposure to office-based otolaryngologic procedures, both diagnostic & therapeutic
 - Foreign body removal
 - Cerumen disimpaction
 - Flexible laryngoscopy
 - Fine needle aspiration
- Improve understanding of otolaryngologic laboratory evaluations, including Behavioral Audiometry and Tympanometry
- Establish evaluation and treatment algorithms for otolaryngologic pathology, including need for surgical referral
- Develop a sound fund of knowledge for the core subjects listed below:

Core Subjects

Ear

Otitis media (including cholesteatoma)
Otitis externa

Hearing loss
Dizziness
Facial nerve disorders

Nose

Epistaxis
Rhinitis
Sinusitis & nasal polyposis
Chronic obstruction

Throat

Pharyngitis & tonsillitis
Sleep apnea
Hoarseness
Dysphagia
Upper airway obstruction (Epiglottitis, Subglottic stenosis, Respiratory papillomatosis)
Cancer

Neck

Neck masses
Cancer

Head and Neck Trauma

Facial fractures and lacerations
Penetrating trauma

Lectures

All students should attend Otolaryngology department resident didactic sessions and lectures when their schedule allows. A schedule will be provided in your orientation packet.

Students who rotate 4 weeks will be asked to present a short (15 min) talk on a topic of their choice for the Otolaryngology residents and faculty.

*****Recommended Reading

You may borrow Ear, Nose, and Throat Diseases, a Pocket Reference, by W Becker, HH Naumann, & CR Pfaltz. It is a brief primer on otolaryngology. Introductory textbooks are necessarily not encyclopedic. You should seek out additional sources of information, such as more topic-specific textbooks and journal articles. The Online Text section of the web contains other suggested information sources and references.

Otolaryngology Examination

One of the most important things that you should take away from this rotation is the "head & neck" exam. Aside from the otoscope, the instruments used in the otolaryngology clinic are different from those used in most other clinics. This starts with the head mirror. Gaby will loan you a head mirror. They are fragile,

please be careful. If you do not return the mirror loaned to you, you will not receive credit for this course.

Even though you may have had some exposure to the head and neck examination during your first year of medical school, you should have a senior otolaryngology resident, faculty member, or physician's assistant go over this with you again. Please ask one of these members of your first assigned service to go over the head and neck exam with you right away. The sooner you get started, the more you will learn.

Special Requirements

Experience Hearing Loss: Most of you do not know what it is like to live with a hearing impairment. People with even modest degrees of hearing loss may complain bitterly of this problem. Children and elderly patients may either not be able to call attention to this problem, or they may not have the resources to do anything about it. In order for you to better understand the significance of mild, unilateral hearing loss, we will provide you with a single foam ear plug. Please wear this for one day while on the service and discuss your experience with a faculty member.

Call

Students are not required to take call but should participate completely with the service activities. If you have an interest in taking call with the residents or seeing patients in the emergency room with the residents, let the junior resident on call know.

Schedules

Your rotation will be divided into clinic experiences with various subspecialty services: Head and Neck, Otology, Pediatrics and Plastics. If you have a particular interest in a given area please let Gaby know before the rotation starts.

Dictation

As a result of changes in the medicolegal world, the attending physician, or an involved resident or physician assistant must do dictation. When in a new clinic please discuss with the attending what their protocol is for junior medical students in their clinic.
