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Handbook of Residency Training Program for Diplomate of Medical Knowledge and Expertise for Profession Practice in Otolaryngology, Department of Otolaryngology, Faculty of Medicine Siriraj Hospital, Mahidol University

Objective of Handbook for Residency Training Program

To be a guideline for the training program and practice of residents in otolaryngology, Department of Otolaryngology, Faculty of Medicine Siriraj Hospital

1. Vision and Mission

Vision

"Department of Otolaryngology, Faculty of Medicine Siriraj Hospital will be one of the top international institutes with advances in research, excellence in teaching, and best in treatment service."

- Moving forward and beyond
- Research update and advances
- Excellence in teaching and treatment service
- Becoming one of the top international institutes

Mission

"We are united in action and spirit to move Department of Otolaryngology, Faculty of Medicine Siriraj Hospital, forward to be excellent in teaching, service, research, and rehabilitation for equality of treatment to all people."

Mission of residency training program

To manage and administer the training program to produce otolaryngologists who are equipped with good quality and morals, up to date knowledge and self-responsibility to the society, through the empowerment of continuous learning, comprehensive research methodology, and accurate analysis of research results, towards a well-trained teamwork and a multidisciplinary team, with the ability to provide effective advice and communication to patients and relatives.

After having completed this training program, the trained otolaryngologists will comprehensively obtain knowledge, capability, and skills to perform interventions with good and mindful attitudes towards their self-development into the country's health system, taking into account the needs of community / society, overall responsibility, and capability to become social leaders as appropriate.

2. Objectives of residency training program and teaching guidelines

2.1 Objectives

Those who complete this residency training program as the specialized physicians in otolaryngology must have minimum qualifications and knowledge according to the following 6 major competences:

1) Patient Care
   a) Knowledge, abilities, and skills for the care of patients with diseases to the ear, throat, nose, head, facial, respiratory and upper gastrointestinal tracts (ENT diseases)
   b) Knowledge, abilities, and skills for the management of patients with preoperative and postoperative care
   c) Knowledge, abilities, and skills for the treatment of ENT emergencies
   d) Knowledge, abilities, and skills for patient care with multidisciplinary team

2) Medical Knowledge and Skills
   a) Knowledge and understanding of basic medical sciences related to ENT diseases
   b) Knowledge, competence, and abilities to perform interventions of ENT diseases, using diagnostic tools for treatment and rehabilitation of ENT patients

3) Practice-based Learning and Improvement
   a) Maintaining the capability to conduct medical and public health research
   b) Having the ability to provide comments on medical articles and research
   c) Possessing knowledge on research ethics
   d) Being able to learn and experience through self-practice

4) Interpersonal and Communication Skills
   a) Having the abilities and skills to communicate with patients and relatives
   b) Possessing the abilities and skills to present and discuss on patients' problems
   c) Maintaining the capabilities and skills to transfer knowledge to physicians, medical students, and medical personnel
   d) Having the abilities and skills to provide a consult / advice to physicians and other personnel, especially on the ENT diseases
   e) Possessing the capabilities and skills to work as a team with good interpersonal relations

5) Professionalism

a) Having appropriate manners towards colleagues, either the same profession or other professions, including patients and relatives
b) Being kind and generous,in particular with much attention to safety, troubleshooting, and patient-centered health promotion based on holistic care
c) Possessing non-technical skills and the ability to handle any circumstances or situations resulting from working operations
d) Maintaining a keen interest and the ability for continuous and life-long professional development
e) Being responsible for any assigned tasks / duties
f) Taking the public interest into account

6) System-based practice

a) Having knowledge on the national health system and taking part in the quality improvement of patient care
b) Being adjustable / adaptable to any working environments under proper conditions and allocation of time for the balance of self-care and family, physically and mentally
c) Maintaing the capability to use health resources with cost consciousness and adjustable to patient care, following the context of public health services under professional standards

2.2 Teaching guidelines

2.2.1 Training methods

1) Patient Care

a) Outpatient care

- All residents are regularly scheduled for ENT outpatients at least 2 days a week. They can examine and provide treatment / care to new patients, as well as do the follow-up of overall patients, with a consult from the instructors in case of any complicated cases.
- The 2nd and 3rdyear residents are assigned to provide patient care only for major diseases at the ENT clinics, including otology, neuro-otology, rhinology, allergy clinic, laryngology clinic, voice clinic, ENT oncology clinic, sleep clinic, swallowing clinic, and pediatric ENT clinic.

b) Inpatient care

- All residents are responsible for the outpatient care according to the clearly and appropriately assigned duties.
- The residents need to also provide their consult on patients to other departments, particularly the emergency cases or critically ill patients.
- They must as well have a prior experience in working with another multidisciplinary team for treatment planning.

c) Preoperative and postperative care

- All residents are responsible for the preoperative care of patients.
- The residents have also to perform the operations or assist in the surgical procedures of certain interventions which are appropriate to their level of knowledge.
- They must as well provide the postoperative care to patients and appropriately manage the postoperative complications.

2) Medical Knowledge and Skills

- The 1st year residents need to study on basic medical science and general diseases reated to otolaryngology.
- They must hold the Higher Graduate Diploma in Clinical Medical Sciences from Mahidol Unibversity.
- They have to learn the anatomy of head and neck, as well as practice to perform the operations from the cadavers prepared by Department of Anatomy.
- The 2nd year residents have to enhance their learning from the special cases of complicated ENT diseases, together with the applied knowledge on basic clinical science.
- The 3rd year residents must take the comprehensive courses on various diseases in otolaryngology.
- All residents need to always attend and have their presentation in academic activites throughout the residency training program, such as grand round, interesting case, topic review, morbidity-mortality conference, journal club , research forum, and so on.
- The residents have got a chance to practice on 5 temporal bone grafts with their individual mentor instructors.

- They should also participate in the interdisciplinary activities related to the diseases in ENT, such as tumor conference, x-ray conference, ENT pathological conference, and so on.
- The 3rd year residents will have a chance to participate in discussion during the interuniversity conference organized by the Royal College of Otolaryngologists – Head and Neck Surgeons of Thailand.
- All residents need to be trained on the surgical procedures and the use of diagnostic tools for treatment or rehabilitation of ENT patients.

3) Practice-based Learning and Improvement

All residents have to:

- Complete at least one research project, as the first author or with research contribution of at least 50%.
- Attend the medical journal seminars and join in the comments of critical articles or medical research.
- Participate in the training of research ethics.
- Experience in the organizing of mortality and morbidity conference.
- The 3rd year residents need to take turn as a chief resident, with their own responsibilities and decision-making while working in different units, such as chief resident ward, chief resident OR, and chief resident OPD.

4) Interpersonal and Communication Skills

All residents need to:

- Attend the activities that require interpersonal and communication skills, as well as some presentation and discussion experiences in academic seminars.
- Have some experiences in communication with patients who seek their decisions, advice, and health consultation.
- Work closely with medical students and help for bedside teaching.
- Develop communication skills to strengthen their relationships with peers and colleagues.
- Senior residents should be helpful to junior residents for their knowledge development and practice.

5). Professionalism

All residents should:

- Participate in activities to enhance their knowledge on medical professionalism, such as patient coaching, medical ethics, non-technical skills, and so on.
- Learn to become a life-long learner by using evidence-based practice and self-reflection for their own evaluation and development.
- Be self-responsible for any assigned duties, with complete pre- and post-operative care to patients.

6) System-based Practice

Department of Otolaryngology maintains friendly working environment with harmful-free to the health of all residents. All of them receive the annual health check-up. They are required to have self-adjustment to overall working environments towards their learning and enhancement of knowledge, experience, and participation in:

- The country's health system
- Hospital quality system
- Evaluation of the effectiveness and efficiency of healthcare and treatment

2.2.2 Contents of residency training program

1) Knowledge on the correlated basic medical science in ENT and other related systems (Appendix 1)

2) Diseases or patients' conditions (Appendix 2)

Residents must be able to diagnose, treat, care, and rehabilitate, or provide advice for patient transfer according to the level of ENT diseases as follows:

Level 1 Diseases or common conditions which residents can learn directly from patients

Level 2 Diseases or less common conditions than Level 1 which are important and that residents can learn from patients, but they do not directly give them the treatment, such as the joint-patient care in the ward

Level 3 Diseases or the least common conditions which are crucial and that residents can only learn through self-education or lectures, especially the trainings / workshops on diseases/conditions organized by several other institutes

3) Special Examination in Otolaryngology (Appendix 3)

Level 1 A simple and uncomplicated special examination which residents can examine and interpret the results by themselves

Level 2 A more complicated and special examination which residents need to know the indications and can interpret the results by themselves

Level 3 A special examination which the indications must be learnt by residents and can be applied for treatment of patients

4) Interventions in otolaryngology (Appendix 4)

Level 1 Innovations that residents must perform by themselves

Level 2 Innovations that residents should be able to perform by themselves or under supervision of specialists

Level 3 Innovations that residents may be able to perform or assist or observe or identify the indications, precautions, complications, advantages and disadvantages

5) Research (Appendix 5)

- Residents must complete at least one research study during the 3-year training period, as principal investigator or at least 50% contribution.
- The research must be conducted in accordance with international standards (good clinical practice).
- Department of Otolaryngology and Faculty of Medicine Siriraj Hospital provide the teaching on basic knowledge of research study, including research ethics, research presentation, and research proposal writing to all residents.
- Department of Otolaryngology would assign advisiors, instructors, and research staffs to support and assist residents for their research study, including research proposal writing, ethics approval, request for funding, research data collection, report of complete research study and submission to The Royal College of Otolaryngologists – Head and Neck Surgeons of Thailand.
- Department of Otolaryngology organizes a research forum to ensure that the research can be carried out accordingly to timing schedule.

6) Integrated Learning

1. Interpersonal and Communication Skills
    - Communication and good relationships between physicians, colleagues, patients and relatives
    - Factors promoting good relationships between physicians and patients

- Care for patients and relatives during the end stage of life
- Communicating bad news
- Management of difficult cases
- Basic perceptions on different health beliefs

2. Professionalism

a) Patient-centered care
   - Benefits and safety of patients
   - Patient's rights

b) Behaviors / natures / habits
   - Having good responsibility, punctuality, honesty, and discipline
   - Wearing appropriate clothes with suitable attires and manners
   - Maintaing proper self-healthcare

c) Medical ethics: Department of Otolaryngology adopts and follows the policies in consistence with the guidelines of Faculty of Medicine, Siriraj Hospital.
   - Obtaining the consent from patients for their treatments and interventions, especially those who cannot make their own decisions and must then seek the consent from legal decision-makers
   - Confidentiality and disclosure of patients' data
   - Issuing the medical certificate
   - Practice and considerations following patients' request for non-necessary or harmful treatments, which must be considered by the Board of Committee of Otolaryngology Department
   - Self-assessment and accepatance of their own mistakes
   - Accepting gifts or personal benefits
   - Conflict of interest
   - Interpersonal relations among physicians on duties

3. Continuous learning
   - Search for empirical research
   - Analysis and criticism of academic articles
   - Use of quality data
   - Applied data on patient care
   - Application of electronic databases and computerized learning programs
   - Knowledge transfer to physicians, medical personnel, medical students, patients and relatives

4. Working with health systems
    - Knowledge of health systems and national health development
    - Knowledge of health insurance systems, such as national health insurance, social security, medical benefits of government officers, and so on
    - Knowledge of quality assurance and hospital accreditation processes, as well as the evaluation of efficacy and effectiveness of care, including:
        - Multidisciplinary care team
        - Rational use of drugs and resources
        - Complete medical records
        - Set up of Clinical Practice Guideline (CPG)
        - Infectious control and prevention within the hospital
        - Health promotion and disease prevention
        - Evaluation of patient satisfaction
    - Knowledge of medicine and cost consciousness, such as national drug use policy, national list of essential medicines, rational use of drugs and resources, and so on
    - Knowledge of medical laws and other related legal regulations to medical profession
5. Self development and learning from practice
    - Research methodology
    - Basic statistics for medical research
    - Writing a research proposal
    - Research ethics
    - Manuscript writing

3. Qualifications, Rights and Duties of residents

3.1 Qualifications of residents

Being a licensed medical practitioner according to the Medical Profession Act 2525, with completion of all duties under the requirements of the Medical Council to enhance medical skills, and the followings:

3.1.1) Affiliated medical doctors can be eligible for residency training program after having obtained their licensed medical profession not less than 1 year.

3.1.2) Non-affiliated medical doctors can be eligible for residency training program after having obtained their licensed medical profession not less than 3 years.

3.1.3) For medical doctors with a medical degree from an international institution accredited by the Medical Council and a licensed medical profession, they are required to complete all duties under the requirements of the Medical Council to enhance medical skills, prior to being consisderd as 3.1.1 and 3.1.2.

3.2 Rights of residents

3.2.1) Residents are involved in the program training plans and the set up of working and learning agreement. On the last Friday of each month, there will be a meeting between all residents and the postgraduate education committee to present overall problems during the training for the joined solutions.

3.2.2) Residents have the rights to appeal or investigate on the results of their examinations and assessments.

3.2.3) Residents are entitled to all types of taking leave / day-ff, including vacation, personal/casual leave, sick leave, and emergency leave with the following requirements:

Vacation

1) Residents are entitled to the annual 10 working days of vacation. Department of Education will provide a vacation schedule to allow all residents for their vacation leave of 5 days a year (offset-working required if taking more days leave than the schedule).

2) The table of scheduled vacation will be provided to all residents before July 1st of the next semester.

Personal/casual leave

1) Residents can take personal/casual leave no more than 5 working days per year.

2) They must have a written request at least 2 weeks in advance and be approved by the chief resident and signed by the advisor to acknowledge before submitting to Departmrent of Education and Head of Otolaryngology Department for considerations.

3) If the date of taking leave falls on the outpatient scheduled date, notify the chief resident with a written note to acknowledge at the Office of Otolaryngology Department, and inform the staff member in charge of the outpatient department about 1 week in advance.

Sick leave and emergency leave

1) Call the chief resident before 8 am so that the working schedule can be adjusted in a timely manner.

2) If the date of taking leave is on the outpatient scheduled date, call the Office of Otolaryngology Department before 8.00 am to change in the computer system.

3) Submit the written request of a sick leave or an emergency leave signed by the chief resident and Head of Postgraduate Division, on the date back to duty, at Office of Otolaryngology Department. For the sick leave, a medical certificate must be attached.

Medical benefits and doctor's fees for residents are in accordance with the requirements of Faculty of Medicine Siriraj Hospital.

3.3 Rights after completion of residency training program

- 1-year completion : The Higher Graduate Diploma in Clinical Medical Sciences, Mahidol University
- 3-year completion : Certificate of Residency Training Program in Otorhinolaryngology, Faculty of Medicine Siriraj Hospital
- Qualifiication exam : Diploma of The Thai Board of Otolaryngology, Medical Council

3.4 Duties of residents in general

1) Providing care to the patients of Otolaryngology Department with full capacity

2) Doing any assigned duties of the 1st – 3rd year residents, with rotated working schedules as follows: (Appendix 6)

6.30 am – 8.00 am	Morning round ward
8.00 am – 9.00 am	Academic activity
9.00 am – 15.00 pm	Duties at OPD or OR
15.00 pm – 17.00 pm	Academic activity
17.00 pm – 18.00 pm	Evening round ward

3) Seeing patients at OPD Building, 5th floor, not later than 9:15 pm, with at least 7 residents each day and one of the 3rd year residents to be included.

4) Doing or assisting with the operation cases according to the schedule assigned by the chief resident each day.

5) Recording their own intervention or operation cases by themselves every time in the website of the Royal College of Otolaryngologists – Head and Neck Surgeon of Thailand (www. rcot.org/index.php) within 1 month after those intervention and operation cases.

6) Conducting at least 1 research study to be presented to the Examination Committee of the Royal College of Otolaryngologists – Head and Neck Surgeon of Thailand.

7) Working with medical students in Otolaryngology Department. (Appendix 7)

8) Performing other duties assigned by Faculty of Medicine Siriraj Hospital or Otolaryngology Department.

3.4.1 Duties of the (1^{st} – 3^{rd} year) residents

The 1^{st} – 3^{rd} year residents maintain different duties that relate to one another for the benefits and efficacies in providing the utmost patient care towards their knowledge, experience, and self-capability development as follows:

Duties of the 1^{st} year resident

Academics

1. Review of basic academic knowledge and self-study in otolaryngology from standard textbooks available in libraries, medical research journals, and teaching handouts.

2. Study/training according to the certificate of clinical medical science program in otolaryncology organized by Office of Graduate Studies and Division of Continuing Education, Faculty of Medicine Siriraj Hospital, Mahidol University, including:

- Courses of Faculty of Medicine Siriraj Hospital for the core subjects and elective subjects (study with residents in other departments) 7 credits

  Core subjects

  - SIID 521 Basic medical sciences and clinical correlation
    Wednesday 15.00 pm – 17.00 pm 2 credits
  - SIID 522 English for Physicians
    Saturday 09.00 am – 13.00 pm 2 credits
  - SIID 524 Research Methodology for Physicians
    Wednesday 15.00 pm – 17.00 pm 1 credit
  - SIID 526 Medical Ethics 1 credit

  Elective subjects

  - SIID 523 Administration in Medical Practice
    Wednesday 15.00 pm – 17.00 pm 1 credit
  - SIID 523 Biomedical Informatics Communication
    Wednesday 15.00 pm – 17.00 pm 1 credit

- Courses of Otolaryngology Department as core subjects (only residents of Otolaryngology Department)

23 credits

- SIOT 541 Basic otolaryngology 2 credits
- SIOT 542 Basic intervention in otolaryngology 2 credits
- SIOT 543 Medical emergency in otolaryngology 1 credit
- SIOT 545 Sleep medicine 1 credit
- SIOT 551 Outpatient care in otolaryngology 4 credits
- SIOT 552 Inpatient care in otolaryngology 4 credits
- SIOT 561 Rhinology and Allergology 3 credits
- SIOT 571 Audiology 3 credits
- SIOT 581 Laryngology and swallowing 3 credits

3. Attending academic activities of Otolaryngology Department according to the assigned schedules, such as preparing of patient's medical history with full details of physical examination, laboratory tests, imaging, as well as pathological biopsy and radiological results for the Interesting Case Conference with the 2nd and 3rd year residents, along with doing their presentations from academic journals in the Journal Club, and up to date knowledge in the Topic Review.

4. Studying the anatomy of the ear and surgical training in the temporal bone course with self-practice at the temporal bone lab (Chalermprakiet Building : Room 103).

5. Doing self-study on anatomy of the head and neck from cadavers prepared by Department of Anatomy.

6. Preparing data for research work, ethics approval from the Human Research Ethics Committee, and research grants & funding proposal with at least 1 research advisor.

Elective subjects

Attending duties at Department of Anesthesiology, Faculty of Medicine Siriraj Hospital (1 month), including the OR of Otolaryngology, ICU (Symindra Building), SiPAC, and Acute pain clinic (1 week for each duty)

Working / Performance

Working (Office hours)

1. Performing the work assigned by Faculty of Medicine Siriraj Hospital – The 1st year residents have to join the mobile medical unit to receive blood donation with Department of Blood Transfusion Medicine according the the schedule of Siriraj Hospital.

2. Duties of Otolaryngology Department

2.1 Working in patient ward

1) Working in patient ward is rotated according to the schedule assigned by the chief resident (Appendix 6)

2) Doing ward round with the 2nd, 3rd year residents and the attending physician is scheduled every day between 6.15 am – 8.00 am and 17.00 pm – 18.00 pm. The 1st year residents have to do wound dressing to all patients and following on the results of each patient's investigation before the morning and evening ward round, as well as providing approprate patient care to prevent possible surgical complications under the supervision of the 2nd, 3rd year residents and the attending physician.

3) Recording new patients' medical history and physical examination needs to be initially done with thorough diagnosis for treatment plans and symptomatic changes every day (daily progress note).

4) Preparing patients for the operation, including patient's medical history, physical examination, routine lab, x-rays, EKG, should be complete. All patients with otologic surgery need audiogram. Those with sinus surgery must have film x-rays or CT PNS. Blood request must be ordered to Blood Bank in advance for necessary cases (Appendix 7), and so on. If any problems arise, report to the chief resident and/or physician in charge 1 day before operation.

5) Writing medical certificate and completing medical insurance claim must be done before patient discharge. Whilst, all patients' medical records should be briefed and completed within 3 days after patient discharge.

6) Patient reports and short medical records are based on the criteria announced by Otolaryngology Departmental, Volumes 6, 10 and 17/2004 (Appendix 8).

7) If any cases of the patients need a consult from other departments, the consult form must be completed during the evening round ward. Also, a special investigation should be done for urgent cases, with appropriate treatment approved by the chief resident and / or physician in charge or director or representative.

8) Any inquiries about patient care or any symptomatic changes of a patient, the prompt and immediate medical consult from the 2nd and 3rd year residents and the department's instructors needs to be concerned and do not use self-judgement/decision.

9) The 1st year residents must provide advice and suggestions to medical students, especially for inpatients and wound dressing, as well as assign patient cases for them to write patient reports (Appendix 9).

10) Filling the request form for laboratory and radiological tests is needed in the e-his system , with adding patient schedules for the operation in OSS.

2.2 Working at Outpatient (OPD) Building

1) Seeing outpatients of Otolaryngology Department, Faculty of Medicine at OPD Buidling, 5th floor, with the schedules as follows: (Appendix 6).

- Morning 9.00 am – 12.00 am every working days
- Afternoon 12.00 pm – 15.00 pm Monday and Wednesday (some weeks)
- Afternoon 13.00 pm – 15.00 pm (View the results of special investigations of patients in the morning, and provide appropriate treatment every working days)

2) All cases of outpatients have to be consulted with the 3rd year residents during the first 3 months of residency training. Afterwards, the outpatient cases should be cared and assisted by the 2nd and 3rd year residents, the chief resident, and the instructor in charge, respectively.

3) Patient admission in the IPD ward or any advice for all operation cases should be consulted with the 3rd year residents and signed by the instructor in charge.

4) Referring patients to continue treatment in a special clinic has to be firstly consulted with the 3rd year residents.

5) Studying of methods and joining in patient treatment at a special clinic of various units should be done together with the instructor in charge, such as Allergy Clinic, Voice Clinic, Neuro-Otology Clinic, Otology Clinic, Nasal Endoscopy Clinic, Pediatric Otolaryngology Clinic, ENT Oncology Clinic, Sleep clinic, and so on.

6) Studying of methods and interpretations of special investigations need to be performed with the instructor in charge and the 2nd and 3rd year residents, including Audiogram, Vestibular function test, Rhinomanometry, Operating microscope, Telescopy, and so on.

7. Interventions at OPD Building that the 1st year resident can perform include:

- Complete ENT examination
- Nasal Telescopy, operating microscopy, pneumatic otoscopy
- Nasal mass biopsy, Nasopharyngeal biopsy and Intraoral biopsy
- Remove foreign body in the ear, nose and throat
- Incision and drainage in patients with superficial abscess and peritonsillar abscess
- Chemical cauterization and Anterior nasal packing in those with anterior epistaxis
- Fine Needle Aspiration (FNA) neck mass, thyroid nodules
- Interpretation of special investigations, such as x-ray, audiogram, tympanogram, ABR, ASSR, OAE, posturogram, caloric test, Facial nerve tests, Rhinomanometry, Allergic skin test, Acoustic rhinometry, and so on

2.3 Working in Operation Room (OR)

1) Working in the operation room is daily scheduled and can be subjected to change by the chief resident.

2) Those performing the operation themselves have to always prepare the preoperative cases, with the summarized indications for surgery, procedures, and treatment plans to the instructor in charge. Also, they can perform the operation after receiving the residency training for 3 months.

3) Helping with the operation and studying the procedures are from the instructor in charge, the 2nd and 3rd year residents.

4) If desiring the instructor to evaluate the operation plan according to the established intervention criteria, the notification shuld be at least 1 day in advance. Also, the evaluation form needs to be printed out for scoring before sending to Education Division of Otolaryncology Department on the following day.

5) Recording all cases of lesions found from the operation and the detailed procedures in the report form if done or assisted by the residents. If a patient is not hospitalized after the operation, write down a brief operation record in the outpatient record form.

6) Writing tissue biopsy, microbiological culture, IPD treatment order, and ICD code in the request forms to be put in the e-his system for patients undergoing the surgery. If a patient is not hospitalized after the surgery, write a prescription and an appointment.

7) List of the operations that the 1st year residents can perform on their own after receiving the residency training for 3 months include:

- Excision of benign lesion of external auditory canal (EAC) / pinna / periauricular area
- FB removal from EAC
- I&D abscess of EAC / periauricular area, seroma / hematoma / perichondritis
- Myringotomy with PE tube insertion in adults (teaching and taking the exams from cadavers in the temporal bone course, with passing in the the evaluation form approved by the instructor in charge for the intervention)
- Excision of preauricular pit / cyst
- FB removal from the oral cavity / pharynx
- I&D peritonsillar abscess
- Lymph node biopsy
- Tonsillectomy, adenoidectomy (required for passing in the evaluation form approved by the instructor in charge for the intervention)
- Tracheostomy (required for passing in the evaluation form approved by the instructor in charge for the intervention)
- Excision of benign neck mass
- Flexible nasopharyngolaryngoscopy (FOL)
- Panendoscopy :Bronchoscopy, Esophagoscopy, Direct laryngoscopy and biopsy (required for passing in the evaluation form approved by the instructor in charge for the intervention)
- Anterior & posterior nasal packing (teaching and taking the exams in the Rhinology Update Course, with passing in the the evaluation form approved by the instructor in charge for the intervention)
- Telescopic exam / biopsy of nose & nasopharynx

- Antrostomy – puncture / nasoantral window (Teaching in the Rhinology Update course)
- FB removal from the nasal cavity

2.4 Consult of ENT emergency operation cases on working days

1) The 1st year residents are responsible for the consult of ENT emergency operation cases inside and outside Department of Otolaryngology, with the duty code 1501 (mobile phone VPN 095765) during 8.00 am – 15.00 pm.

2) Calling the 3rd year residents (Duty code 1503) to help with the evaluation and treatment of all cases during the first 3 months of residency training. Aftter that priod, only call when having emergency cases or any complicated problems.

3) In case of no consuling cases, attend the learning from the instructors in special clinics of each day.

4) Receiving the consult forms of patients outside Otolaryngology Department from the chief resident before 12.00 am (in the morning) and at IPD ward of Chalermprakiet 1 in the evening. During the first 3 months of residency training, the evaluation of all cases needs to be done with the 2nd year residents (Duty code 1502). After that period, each case can be performed on their own, but still require the consult with senior residents (Duty code 1502 and 1503).

Working (Non-office hours)

1. Working as assigned by Faculty of Medicine Siriraj Hospital – The 1st year residents have to be on duties at the rooms specified by Siriraj Hospital.

2. Working on duties of Otolaryngology Department

2.1 Weekdays and holidays – During the first 3 months of residency trainng, the 1st year residents at IPD wards need to come for round ward with the 2nd year residents who are rotated to work in each ward. The round ward should be done before 8.00 am. The 1st year residents on IPD duties then have to be also rotated for round ward. Any problems with patient treatment, consult the 2nd and 3rd year residents who are on duties each day.

2.2 The 1st year residents are on duties out of working days as follows:

- Consulting IPD cases of Otolaryngology Department during 15.00 pm – 24.00 pm on weekdays and 8.00 am – 24.00 pm on holidays (contact number 063-903-4255).
- Consulting OPD cases outside Department of Otolaryngology and emergency cases duting 15.00 pm – 8.00 am of the next day on weekdays and 8.00 am – 8.00 am of the following day on holidays, together with consulting IPD cases of

Otolaryngology Department during 24.00 pm – 8.00 am every day (stand-by duty code 1501 and VPN 095765) and staying in the hospital at all time while on duties if there are emergency cases or any symptomatic chages of patients.

- In case of those on IPD duties are called for emergency cases, the ones on IPD duties can also assist with patient evaluation as always.
- If changing shifts of duty with others, notify the 2nd and 3rd year residents who are on duties on each day, as well as the nurses in charge of different wards. In case of no notifications or no show-up, the residents who are firstly scheduled for such shifts have to be responsible for all circumstances.

Duties of the 2nd year residents

Academics

1. Having good knowledge on otolaryngology
2. Reading more international textbooks and medical journals as assigned
3. Joining the discussion in various academic activities of Otolaryngology Department
4. Morning academic activities that include knowledge presentation from literature review in the Interesting Case Conference, discussion and comments on academic journals in the Journal Club, Rhino Round, Oto Round, Morbidity & Mortality conference, Patho conference, and X-ray conference, as scheduled
5. Studying the anatomy of the nose, sinus cavity, and skull base in the Rhinology Update Course
6. Continuing the research study from the 1st year
7. Being a mentor for the 1st year residents and medical students (Appendix 9)

Elective subjects

1. Observational visit to the affiliated institutions or related working units, such as Ramathibodi Hospital, Chulalongkorn Hospital, Rajavithi Hospital, Division of Radiotherapy, Faculty of Radiology, Siriraj Hospital, etc. or 1-month observational visit to an institution overseas (or 2 institutions for a period of 2 weeks per one institution)

2. Notification about the observational visit to Department of Education approximately 2 months ahead of time to process a request letter for the visit permission to those institutions, together with the evaluation of the visiting residents by the institution's instructor after the visit

Working / Duties

Working (Office hours)

1. Working at Inpatient (IPD) Building

- Working at the IPD is rotated according to the schedule assigned by the chief resident (Appendix 6).
- Doing ward round with the 1st, the 3rd year residents, and the attending instructor every day during 6.15 am – 8.00 am and 17.00 pm – 18.00 pm.
- Taking care inpatients with the 1st and the 3rd year residents, giving consult/advice to the 1st year resident on treatment and request for investigations.
- Helping the 1st year residents with new patients, especially at special wards, such as records of patient history, physical examination, and treatment order, in case that the 1st year residents are on other duties such as studying or assisting at the OR.
- Monitoring wound dressing and physical examination of the 1st year resident, as well as assisting with the assessment of surgical wounds during the first 3 months of residency training.

2. Working at Outpatient (OPD) Building

2.1 Seeing outpatients at OPD Building, 5th floor, with the 1st and the 3rd year residents, as scheduled (Appendix 6)

- Morning 9.00 am – 12.00 am on weekdays
- Afternoon 12.00 am – 15.00 pm on Monday and Wednesday (some weeks)
- Afternoon 13.00 pm – 15.00 pm (looking at the results of special investigations in the morning to provide appropriate treatment on weekdays with the 1st year resident during the first 3 months of residency training)

2.2 Being a mentor to the 1st year resident with accurate consult and advice on physical examination, investigation request, and interpretations.

2.3 Consulting with the 3rd year residents, the chief resident, or the instructor in charge respectively, in case of any problems for making decisions.

2.4 Consulting with the instructor in charge as always for all preoperative cases.

2.5 Joining patients' examination and treatment in the special clinics of different units, such as Allergy Clinic, Voice Clinic, Neuro-Otology Clinic, Otology Clinic, Nasal

Endoscopy Clinic, Pediatric Otolaryngology Clinic, Tumor Clinic, ENT Oncology Clinic, and Sleep clinic as assigned.

3. Working in Operation Room (OR)

3.1 Working in the OR as scheduled by the chief resident each day, which can be subjected to change if considered as appropriate.

3.2 Those performing the operation themselves have to always prepare the preoperative cases, with the summarized indications for surgery, procedures, and treatment plans to the instructor in charge.

3.3 If desiring the instructor to evaluate the operation according to the established intervention criteria, the notification shuld be at least 1 day in advance. Also, the evaluation form needs to be printed out for scoring before sending to Education Division of Otolaryncology Department on the following day.

3.4 Helping the instructor in charge and the 3rd year resident in monitoring the operation, teaching surgical procedures and OR assistance to the 1st year residents.

3.5 Recording all cases of lesions found from the operation and the detailed procedures in the report form if done or assisted by the residents. If a patient is not hospitalized after the operation, write down a brief operation record in the outpatient record form.

3.6 Interventions of the 2nd year residents

- Excision nasolabial cyst / thyroglossal duct cyst
- Maxillary sinuscopy
- Caldwell – Luc operation
- RF (radiofrequency) of inferior turbinate
- I&D parotid / deep neck abscess
- Bronchoscopy – FB removal / surgery
- Esophagoscopy – FB removal / surgery
- Microsurgery of larynx
- Thyroid surgery (passing the evaluation signed by the instructor in charge)
- Myringotomy ± pressure equalization tube in pediatrics (passing the evaluation signed by the instructor in charge)
- Lateral rhinotomy
- Submandibular extirpation
- Myringoplasty / Tympanoplasty

- SimpleMastoidectomy
- SMR / Septoplasty
- Laryngeal laser surgery

Working (Non-office hours)

1. During the first 3 months, the 2nd year residents at different IPD wards are rotated for morning round ward to be a mentor of the 1st year resident in each ward.
2. Doing round ward of patients in other wards, intensive care units, and physician's on call rooms with the 3rd year residents on that day.
3. Being on call 1502 (VPN 095763) and a mentor of the 1st year resident at the same time for the consult and advice on the examination and treatment of emergency ENT patients in the wards before asking the 3rd year residents and the instructor in charge. They need to be in the hospital all the time for duties and on call in case of emergency patients or any symptomatic chages of patients.
4. If changing shifts of duty with others, notify the 3rd year residents who are on duties on each day, as well as the nurses in charge of different wards. In case of no notifications or no show-up, the residents who are firstly scheduled for such shifts have to be responsible for all circumstances.

Duties of the 3rd year residents

Academics

1. Reviewing textbooks and up to date knowledge from academic journals at all time
2. Analyzing the results of research study, summarizing the report of research study, and submitting to the committee meeting in preparation for the Board of Examination, Royal College of Otolaryngologists – Head and Neck Surgeons of Thailand
3. Being a mentor for medical consult and knowledge to the 1st year, the 3rd year residents, and medical students
4. The chief resident of each month is responsible for teaching medical students during 7.00 am – 8.00 am (Appendix 9)
5. Doing the presentation and discussion in academic activities of Otolaryngology Department as follows:
    - Doing presentation and discussion of patient cases in the Interesting Case Conference
    - Doing presention and discussion of academic journals in the Journal Club.

6. Making the presentation of patient cases during the Interuniversity Conference, such as preparation of complete information for patient cases, review of literature relating to the patient cases, and coordination of conference venue, activities, and invited instructors from other departments for knowledge enhancement.

Elective subjects

1. Division of Trauma and Facial Surgery, Department of Surgery, Faculty of Medicine Siriraj Hospital, or Department of Oral and Maxillofacial Surgery, Faculty of Dentistry, Mahidol University (for a period of 2 months)

2. Training on additional surgical skills at Chanthaburi Hospital, Surat Thani Hospital, or Samutsakhon Hospital for a period of one month, with notification to Department of Education (2 months in advance) for a letter of request to the ENT unit of those hospitals and the evaluation after the training.

Working office hours

1. Working at Inpatient Building (IPD)

- Providing supervision and advice on duties and knowledge to the 1st and the 2nd year residents during round ward from 6:15 am to 8:00 am and from 17:00 pm to 18:00 pm every day, as well as doing treatment plan with the attending physicians and the physician in charge.
- Managing and evaluating patients for the operation to ensure any problems or any changes of lesions, so that the surgical plan can be adjusted with notification to the physician in charge ahead of time.
- Caring for all postoperative patients, closely with self-monitoring for any complications and prompt treatment.

2. Working at Outpatient Building (OPD)

2.1 Seeing patients at OPD Buidling, the 5th floor, with the 1st and the 2nd year residents as scheduled (Appendix 6).

- Morning 9.00 am – 12.00 am on weekdays
- Afternoon 12.00 am – 15.00 pm on Monday and Wednesday (some weeks)

2.2 Providing consult to the 1st and the 2nd year residents, especially for all outpatient cases to the 1st year residents during the first 3 months of residency training.

2.3 Seeing and providing treatment to patients at special clinics with the physican in charge, including ENT Oncology Clinic, Pediatric Otolaryngology Clinic, Tumor Clinic, Allergy Clinic, Neuro-Otology Clinic, Voice Clinic, Laryngology Clinic, Otology Clinic, Audiology& Speech Clinic, Swallowing Clinic and Sleep clinic.

2.4 Arrangoing appointments for patients' operations with the consult from the physician in charge of all cases.

2.5 Being the chief resident each month and recording patients' appointments for the operations, completing schedules for the next day's operations before 14.00 pm, planning the rooms in OR for the following weeks with nurses every Thursday at 15.00 pm, and managing patients' transfer from other hospitals.

3. Working in Operation Room (OR)

3.1 Working in the OR as scheduled by the chief resident each day, which can be subjected to change if considered as appropriate.

3.2 Those performing the operation themselves have to always prepare the preoperative cases, with the summarized indications for surgery, procedures, and treatment plans to the instructor in charge.

3.3 If desiring the instructor to evaluate the operation according to the established intervention criteria, the notification shuld be at least 1 day in advance. Also, the evaluation form needs to be printed out for scoring before sending to Education Division of Otolaryncology Department on the following day.

3.4 Helping the instructor in charge and the 3rd year resident in monitoring the operation, teaching surgical procedures and OR assistance to the 1st year residents.

3.5 Recording all cases of lesions found from the operation and the detailed procedures in the report form if done or assisted by the residents. If a patient is not hospitalized after the operation, write down a brief operation record in the outpatient record form.

3.6 Interventions for the 3rd year residents

- Excision of branchial cleft cyst
- Facial fracture surgery
- Reconstructive surgery
- Frontal sinus surgery
- Sphenoidotomy & Sphenoidectomy
- Ethmoidectomy – intranasal / extranasal
- Endoscopic Sinus Surgery (passing the evaluation signed by the instructor in charge)

- Rhinoplasty
- Maxillectomy
- Laryngotracheal surgery
- Neck dissection
- Uvelopalatopharyngoplasty (UPPP)หรือ Laser Assisted Uvelopalatoplasty (LAUP)
- Parotidectomy
- Total laryngectomy

- Tympanoplasty (passing the evaluation signed by the instructor in charge)
  - Radical / Modified radical mastoidectomy
  - Ossicular chain reconstruction

- Assisting with the interventions
  - Skull base surgery
  - Conservation surgery of larynx

Working non-office hours

1. Being on call 1502 (VPN 095763) and a mentor of the 1st and the 2nd year residents for the consult and advice on the examination and treatment of emergency ENT patients or those with symptomatic changes. In case of any complicated conditions or any emergency operations required or any admission, consult the instructor in charge.

2. Doing round ward of patients in other wards, intensive care units, and physician's on call rooms with the 2nd residents.

3. Needing to be in the hospital at all time for duties and on call in case of emergency patients or any symptomatic chages of patients.

4. If changing shifts of duty with others, notify the 1st and the 2nd residents who are on duties on each day, as well as the nurses in charge of different wards. In case of no notifications or no show-up, the residents who are firstly scheduled for such shifts have to be responsible for all circumstances.

The Chief Resident

Qualifications of the chief resident

1. Being the 3rd year resident accepted by all residents to be nominated for approval from the committee meeting.
2. Having good leadership, responsibility, and dedication with the ability to manage various tasks effectively.
3. Possessing good interpersonal relationships with instructors, residents, and other colleagues.

Rights of the chief residents

1. Assigning various duties to other residents as appropriate.
2. Changing or canceling operation lists of other residents as appropriate.
3. Moving residents for duties in other units if necessary without prior permission from instructors, such as those from the OR (if very few cases) to help with patients at the OPD, and so on.
4. Approving the request of residents for taking leaves/day-off together with the chief resident of each month, to be later approved by the instructor in charge.
5. Assigning other 3rd year residents to replace duties during the elective period.

Duties of the chief resident

1. Managing all duties in academics, courses, and working performance of all residents during office and non-office hours.
2. Coordinating between the residents, medical students, Otolaryngology Department, Education Department, and Faculty of Medicine Siriraj Hospital in term of policies, education, yearly schedules of residents' duties, academic activities, and medical students' supervision.
3. Managing other different courses in addition to those scheduled by Otolaryngology Department for the 1st, the 2nd, and the 3rd year residents, such as special lectures, group discussion, self-learning, or teaching by invited instructors from Otolaryngology Department and others, both inside and outside the institution.
4. Voting for representatives of residents as the committee in various units of Otolaryngology Department, such as OR, OPD, IPD, and ENT patient care team (CLT) for the meeting, opinions, and agreements towards effective administration in each unit

Penalties for ENT residents

Minor penalty

This is not a serious penalty. The 3rd year residents will judge in the meeting and impose the penalty with a written notice to Head of Postgraduate Education Department.

Penalties are based on the seriousness of misconducts, such as receiving the request form for tracheostomy consult throughout the week, increasing number of days for clear lab during the week, etc.

Major penalty

This is a serious penalty or the careless misconducts that affect the life of patients. The 3rd year residents will judge the penalty case by case and notify Head of Postgraduate Education Department to consider the appropriateness of such penalty.

Penalties could be a one-time increase of the number of days on duty, the reduction of monthly payment for duty, etc. The 3rd year residents will judge the misconducts, with 1-time warning. If such misconducts are still repeated, the penalty such as above will be considered with written notice to Depatment of Postgraduate Education.

4. Places for Instructions and Duties of Residents (Classified by Building)

1. Department of Otolaryngology, Siamindra Building, 15th floor, including:
    - Office of Otolaryngology Department: For contact of changing OPD schedule
    - Education Office: For contact of taking leave/day-off, courses, duty schedule, etc.
    - Research Office: For contact of research information
    - Library of Otolaryngology Department: For books or academic textbooks (with first contact and permission from an instructor)
    - Chern Saekararit Meeting Room: For academic activities, such as Interesting case, Journal club, Courses for Higher Graduate Diploma of the 1st year residents, etc.
    - Porn Varavech Meeting Room: For academic activities with larger groups of participants in addition to Chern Saekararit Meeting Room
2. OPD Unit, OPD Buidling, 5th floor, including:
    - 20 rooms of OPD
    - Treatment room (No. 23) for outpatients with wheelchair or stretcher troller, some interventions such as FNA, cutting the suture, etc.
    - Endoscopic Room (No. 12) with Rigid Telescope, Flexible scope and Microscope

- Room of the chief resident for operation appointment (No. 21), then coordinating with the nurse room (No. 36) which is in charge of rooms for patients, patient's health coverage, and charges of treatment
- Rooms for Special Clinics:
  - Rhinology and Allergy Clinic (No. 23 – 25)
  - Laryngology Clinic, Tumor Clinic, Voice Clinic, Swallowing Clinic, Speech Clinic (3 rooms)
  - Otology Clinic with special tools for examination (No. 31, 32), Hearing Clinic (No. 33) and a room for audio-aid kit testing (No. 32/1)

3. Operation Room, Siamindra Building, 4th floor, with 8 rooms (No. 401-408)
   There are 5 rooms for anesthesia services, one cancer surgery room (No. 407), one infectious disease room (No. 405), and one operation room using local anesthetic (No. 403).
4. Inpatient Ward, including:
   - General Male Ward: Chalermprakiet Buiding, 1st floor (North)
   - General Female Ward (and 4 special rooms with non-singled bed): Chalermprakiet Building, 2nd floor (North)
   - General Children Ward (with Opthemology Unit): Chalermprakiet Buidling, 2nd floor (South)
   - Two Special Wards (with Opthemology Unit)
     - 84 Year Buidling, 9th floor (West)
     - Chalermprakiet, 5th floor (North)
5. Rooms for residents, including:
   - On-duty Room
     - The 1st year residents (No. 105)
     - The 2nd year residents (No. 102)
     - The 3rd year residents (No. 104)
6. Other rooms, including:
   - Temporal bone lab, Chalermprakiet Building, 1st floor (South), Room No. 103
   - Reading/Meeting/Leisure Rooms, No. 106, 107, 108 (Prasit Meeting Room)
   - Meeting Rooms, including:
     - Siamindra Building, 15th floor
       - Chern Saekararit Meeting Room
       - Porn Varavech Meeting Room
     - Chalermprakiet Building, 1st floor (South)
       - Meeting room (No. 118/119)
       - Meeting room (No. 106)
       - Prasit Meeting Room (No. 108)

5. Residency Research

- **Recommendations and steps for residency research**

All residents have to conduct one research study, which should be completed before the Board Certification Exam. To successfully complete the residency research, the following steps should be taken:

1. The 1st year residents a research topic of their interest, then consult with the expertise instructors in such particular subjects for the feasibility of research completion within a 1-year period, and ask the instructors to be their advisors for research supervision. As required by the Royal College of Otolaryngists – Head and Neck Surgeons in Thailand, the residency research has to be a fully complete research study, not a case report.

2. The research unit of Otolaryngology Department and the research section of Faculty of Medicine Siriraj Hospital would provide a lecture on residency research for principles and guidelines.

3. All residents are required to write a research proposal to the instructors in Otolaryngology Department for their considerations in the research forum, which shouid include background and rationale or research questions, objectives, methods, and evaluation.

4. Advisors would provide some advice to the residents in the followings: submission of research protocol to the Ethical Committee of Faculty of Medicine Siriraj Hospital, and request for assistance from the Faculty's Research Promotion Office, such as sample size calculation, research funding for residents, etc.

5. After completion of their research study according to the time frame of the Royal College of Otolaryngologists – Head and Neck Surgeons of Thailand, all residents need to summarize and submit a written report before January 31 of each year.

6. All residents have to present their research study on behalf of Faculty of Medicine Siriraj Hospital to the Board of Certification Exam. The presentation is as part of the qualification exam to receive the Board's certification.

All instructors of Otolaryngology Department can supervise only one research study of one resident per one resident's academic year (not more than 3 residents in total per one advisor). In addition, Department of Otolaryngology has the research and academic unit to provide consults on research methodology or others to the residents as follows:

1. Assoc. Prof. Choakchai Metheetrairut
2. Assoc. Prof. Kitirat Ungkanont
3. Assoc. Prof. Dr. Pongsakorn Tantilipikorn

- **Steps and time frame of residency research (Appendix 10)**

6. Academic activities for residents

Activity	Date	Time	Notes
1. Lectures			
1.1 Basic ENT for the 1st year resident		15.00-16.30	July-December
2. Conferences (* peer review)			
2.1 Interesting Cases*	Monday	8.00-9.00	Every week
2.2 Journal Club	Tuesday	8.00-9.00	Every week
2.3 Planning Conference*	Wednesday	8.00-9.00	1st week of the month
2.4 Mortality and Morbidity (M&M) Conference*	Wednesday	8.00-9.00	3rd week of the month
2.5 Tumor Clinic Conference*	Thursday	13.00-15.00	Every week
2.6 ENT X-rays Conference	Friday	8.00-9.00	1st week of the month
2.7 ENT Pathological Conference	Friday	8.00-9.00	2nd week of the month
2.8 Interdepartmental Conference	Friday	8.00-9.00	1 time/year
2.9 Meeting of all residents	Friday	8.00-9.00	1 time/month
2.10 Inter University Conference	Friday	13.00-16.00	6 times/year
2.11 Research forum	Wednesday or Thursday	8.00-9.00	
2.12 Academic Meeting of Royal College of Otolaryngology – Head and Neck Surgeons of Thailand			2 times/year
2.13 Meeting of The Allergy and Immunology Association			2 times/year
2.14 Academic Meeting of Thai Rhinologic Society			1 time/year
2.15 Academic Meeting of Faculty of Medicine Siriraj Hospital			1 time/year
3. Teaching Round			
3.1 Head & Neck Surgery Round (Grand round)	Monday	17.00-20.00	Every week
3.2 Otology round	Thursday	8.00-9.00	1st week or 3rd week of each month
3.3 Interuniversity Rhinology Conference	Wedenesday	8.00-9.00	3rd week of each month
3.4 Rhinology round	Thursday	8.00-9.00	2nd week of each month
๓.๕ Pediatric ENT conference	Wednesday	8.00-9.00	1st week or 4th week of each month
4. International Workshops/Short courses			
4.1 Temporal bone dissection courses (ศิริราช)			1 time/year
4.2 Temporal bone dissection courses			1 time/year
4.3 Rhinology Update courses			1 time/year

Schedule of Academic Activities for Residents

Day / Time	Monday	Tuesday	Wednesday	Thursday	Friday
Morning 8.00-9.00	Interesting Case Conference	Journal Club	1st week H&N Planning Conference 2nd week M & M Conference 3rd week Interuniversity Rhinology Conference 1st or 4th week Pediatric ENT case of the month	1st / 3rd week Otology Round 2nd week Rhinology Round	1st week ENT X-ray Conference 2nd week ENT-Pathological Conference 3rd week Resident Meeting
9.00-15.00	Working at OPD or OR as scheduled				
Afternoon 15.00-16.30	Lecture		H&N Round (Grand Round)	Lecture	Lecture 13.00-15.00 Inter - University Conference 6 times/year

7. Preparation for Residents in Academic Activities

- **Interesting case conference**

Day-Time : Monday (8.00-9.00)

Place : Chern Saekararit Lecture Room, Siamindra Building, 15th floor

For : All residents, with the 3rd year residents as the leading team for presentation, the 2nd year residents doing the topic review of presentation, and the 1st / 2nd year residents helping to prepare cases for presentation

Preparing case : - Choosing interesting cases or those with problems of management or diagnosis

- Being the cases in the wards, OPD or consulting cases from other departments
- Consulting with the physicians in charge of those cases at least 2 weeks ahead of time
- Notifying the education unit of Otolaryngology Department for an invitation letter if needing to invite the instructors from other departments for discussion, **at least 2 weeks ahead of time**
- Preparing medical history, physical examiniation, laboratory results or other special tests, as well as records of treatment and details of follow-up
- Thinking about questions for discussion and summary
- Consulting with the physicians in charge of the cases and the invited instructors from other departments (if any) for details of case presentation and time for discussion of each resident
- Making the protocol for instructors and residents about 1 week in advance

Media : Power Point for presentation

Presentation : - The 3rd year resident is a moderator to control the time within an hour and set the appropriate time for contents and questions. For example, patient's profile (5 minutes), discussion (15 minutes), summary (5 minutes), etc.

- The 1st year resident present the patient's history, physical examination, laboratory results, special tests, treatment, and follow-up.
- Other residents, especially the 3rd year residents and instructors, join the discussion.
- The 2nd year residents do the related literature review.
- The 3rd year resident who presents the case will do the case summary.

Documentation : Giving the file to the staffs in Education Unit of Otolaryngology Department before presentation every time

Evaluation : Getting the evaluation form for Interesting case at Education Unit, Otolaryngology Department (with the file)

➢ **Journal Club**

Day-Time : Tuesday (8.00-9.00)

Place : Chern Saekararit Lecture Room, Siamindra Building, 15th floor

Preparation : 4 weeks (28 days)

- Contacting the instructor in charge to consult on choosing the article for presentation in term of topic and main contents
- Finding out more information from the references that are important but no details in the article about 3 weeks in advance
- Giving the Power Point presentation and script to the instructor in charge for any modifications to suit the time for presentation
- Inviting other instructors as appropriate outside Otolaryngology Department about 2 weeks in advance
- Sending the electronic file of the article by e-mail to all instructors
- Giving the copy of the article to Otolaryngology Department for the copies to all instructors and residents for the day of presentation

Presentation : Using the Power Point presentation through LCD Projector, with appropriate fonts, figures, and pictures to be clearly seen as much as possible from the point away from the screen (or size of 4:3 recommended in the lecture room)

Main Topics in presentation

- Titles of article, journal (name, issue, month, year)
- Name of author/main report
- Institution/Hospital, city, country of research/study
- Type of research, reasons for presentation
- Background, Rational & Research questions
- Materials & Methods
- Results and Summary
- Opinions on the research study, type and methods, results, and summary
- Benefits from the article
- Suggestions for possible development
  - *Answer the research questions?*
  - *New knowledge?*
  - *Clinical benefits?*

Details:

- Presentation of journal for the 1st year residents is in August of the year.
- Presentation of journal is scheduled in advance throughout the year, managed by the instructors in charge.

- Residents select and retrieve the journal, then consult with the instructors in charge.

Documentation : Sending the file of journal to the staffs of Education Unit of Otolaryngology Department before the presentation each time

Evaluation : Getting the evaluation of Journal club at Education Unit, Otolaryngology Department (electronic file)

➢ **Planning Conference**

Day-Time : Wednesday (8.00-9.00), the 1st week of the month

Place : Chern Saekararit Lecture Room, Siamindra Building, 15th floor

For : Instructors and the assigned residents

Preparation : The instructors bring interesting cases of patients to the meeting for opinions and problem-solving on treatment plans, with the help from the assigned residents in preparing data of patients, medical history, laboratory results or special tests.

Morbidity & Mortality Conference

Day-Time : Wednesday (8.00-9.00), the 2nd week of the month
(Continuing on the next Wednesady If not finished in one day)

Place : Chern Saekararit, Siamindra Building, 15th floor

For : The 2nd year residents

Preparation :

- ♦ The chief residents of all wards conclude the number of M&M and interesting cases in the previous month to the meeting, for discussion with the physicians in charge. The OPD cards and IPD of all patients need to be well prepared for presentation in the following month after the complete treatments of all cases. The date of presentation should be informed by the assigned residents to the physicians in charge and other related residents in treatments. The instructors are also invited for discussion.
- ♦ In case of any problems on patient cases with other related departments, make a detailed request and invites the instructors from those departments to join the discussion at least 1 week in advance.
- ♦ The results of discussion should be written in the report form for causes, problems, and precautions, or practice guidelines towards learning and care map.

- ♦ The report of M&M and the monthly report would be kept at Otolaryngology Department, with no permission for any copies, but can be requested at the secretary office of Otolaryngology Department.
- ♦ Brief summary of M&M needs to be given to the secretary office of Otolaryngology Department for the monthly statistics (without identifying the patients' names).

Documentation : Giving the electronic file to the staffs of Otolaryngology Department before the presentation every time.

➢ **ENT X-ray Conference**

Day-Time : Friday (8.00-9.00), the 1st week of the month

Place : Chern Saekararit Lecture Room, Siamindra Building, 15th floor

For : The 2nd year residents

Preparation :
- For any interesting cases of X-ray, CT, MRI, angiography, or radiograph results, make a request to the responsible residents or the instructors of Otolaryngology Department for case presentation (3 cases per one time).
- The residents of Otolaryngology Department would do the presentation, while the residents of Radiology Department interpret the films with the rediologists and the physicians in charge report on tissue biopsy and surgical results through videos or photos during the presentation.

Documentation : Giving the electronic file to the staffs of Education Unit of Otolaryngology Department before presentation every time.

➢ **ENT-Pathological Conference**

Day-Time : Friday (8.00-9.00), the 2nd week of the month

Place : Satit Nimankarn Meeting Room, Adulyadejvikrom Building, 8th floor

For : The 2nd year residents

Preparation : The residents select interesting cases within the same disease groups

Presentation :
- Dr. Kanchana would be responsible for the section slide with ENT residents and pathologists to do pathological reading and review pathological slides.
- Dr. Kanchana teaches pathological slides additionally with other pathologists.
- The physicains in charge summarize the management.

Documentation : Giving the electronic file to the staffs of Education Unit of Otolaryngology Department before presentation every time.

➢ **Rhinology Round**

Day-Time : Thursday (8.00-9.00), the 2nd and 4th week of the month

Place : Chern Saekararit Lecture Room, Siamindra Building, 15th floor

For : The 2nd year residents

Preparation : Risidents select the interesting rhinological cases and consult with the physicians in charge.

Presentation : Presentation must be in English with power point, similar to the interesting case conference.
Discussion and questions to residents would be done mainly by the instructions of Rhinology Unit.

Documentation : Giving the electronic file to the staffs of Education Unit of Otolaryngology Department before presentation every time.

➢ **Oto/Neuro-otology Round**

Day-Time : Thursday (8.00-9.00), the 1st or 3rd week of the month

Place : Chern Saekararit, Siamindra Building, 15th floor

For : The 2nd year residents

Preparation : Residents select interesting cases or review the knowledge in otology, neuro-otology and audiology, then consult with the instructors in charge.

Presentation : Presentation must be in English with power point presentation, similar to the interesting case conference. Discussion and questions to residents would be done mainly by the instructions of otology, neuro-otology and audiology unit.

Documentation : Giving the electronic file to the staffs of Education Unit of Otolaryngology Department before presentation every time.

➢ **Pediatric ENT case of the month**

Day-Time : Wednesday (8.00-9.00), the 1st or 4th week of the month

Place : Chern Saekararit Lecture Room, Siamindra Building, 15th floor

For : The 2nd year residents

Preparation : Residents select interesting cases in pediatric ENT, then consult with the instructors in charge.

Presentation : Presentation must be in English with power point presentation, similar to the interesting case conference. Discussion and questions to residents would be done mainly by the instructions of pediatric ENT unit.

Documentation : Giving the electronic file to the staffs of Education Unit of Otolaryngology Department before presentation every time.

➢ **Laryngology Head & Neck Surgery Round (Grand round)**

Day-Time : Monday (17.00-20.00)

Place : IPD ward (male), Chalermprakiet Building, 1st floor

For : All residents working at IPD ward, Chalermprakiet 1

Preparation : Residents present the IPD cases to Clin. Prof. Choakchai Metheetrairut and other interested instructors, with questions on related knowledge and topics for further study.

8. Patient Admission

1. All patients must have their primary doctors. This may be outpatient doctors, attending physicians for patient care at general wards. (Chalermprakiet 1, Chalermprakiet 2 -North and South), OR managers, or daily physicians on-duty, according to Appendix 11 (Notification No. 27/2559).

2. Admission of emergency patients during non-office hours must be at general wards. Those required admission to special wards during holidays or non-office hours should be in accordance with Appendix 11. (Notification No. 1/2548).

3. If patients with primary doctors have problems during non-office hours, the residents on duty must report to those primary doctors. If the primary doctors are not available or can't be reached, it is recommended to consult the on-duty physicians for the temporarily critical care. However, the patients are still with their primary doctors.

Example

1. For the admission of a non-problem patient with Doctor A in charge on Friday, the report can be done to Doctor A in the morning of Saturday and Doctor A becomes the primary physician. Then, the patients have problems on Sunday with Doctor B in charge. So, the 3rd year residents need to report to Doctor A. Any decisions regarding the treatments should be considered by Doctor A. In case of emergencies, the consult must be sought from Doctor B and Doctor A is still the primary doctor.

2. Admission of a patient is on Wednesday with Doctor A in ch arge, but no report during the on-duty. On the next day, Doctor B as the attending physician comes for the round ward and the patient has problems. Though Doctor A is the primary physician, Doctor B can provide consult for the benefit of treatment to this patient before reporting to Doctor A for further care.

9. Assessment of Knowledge and Skills of Residents

1. Knowledge Assessment – Department of Otolaryngology will announce the exam dates at the beginning of each academic year. The examination and evaluation in the residency program can be divided into:

1) Assessment during the training program for learning development (Formative Assessment)

2) Measurement and assessment on the results of learning (Summative Assessment)

These 2 types of assessments cover MCQ, MEQ, Essay, and Oral exam.

3. Assessment on the intervention capability, using competency base assessment

4. Work place base assessment and entrustable professional activity (EPA), with milestones of the training program according to the requirements of Royal College of Otolaryngologists – Head and Neck Surgeons of Thailand **(Appendix 12)**

The assessment results of each resident will be kept in the portfolio. It is required by Otolaryngology Department that all residents have to pass the assessment on their knowledge, intervention skills, and attitudes.

Records of Residents' Assessment

Department of Otolaryngology records the data of all residents' assessment in various dimensions according to the results of training program, and would organize them in a computerized system with a security code and can be retrieved for verification at all time.

All residents have to record the data on their interventions in the electronic log book prepared by the Royal College of Otolaryngologists – Head and Neck Surgeons of Thailand.

The assessment results can be implemented as follows:

1. To monitor the progress of the skills on interventions and various types of surgery in practice
2. To move up the level of each resident's year
3. To qualify the residents for the Board Certification Exam

Department of Otolaryngology regularly performs the evaluation of the residency training program and reports the results to all residents and their instructors to enhance the comprehensive development of each resident.

For the 1st year resident, the examination will be based on the 9 core subjects. The examination of those subjects is periodically divided into 5-6 times with multiple choices and oral examination. Besides, the examination would be also on basic science as required by the Royal College of Otolaryngologists – Head and Neck Surgeons of Thailand and Department of Otolaryngology (basic medical science and clinical relations, English, etc).

2. Assessment on Working Performance

The attending physicians will assess knowledge and skills of the 1st year residents while working at the general IPD wards every two weeks. The assessment is done in the following areas: punctuality, report writing skills, treatment and patient care skills, problem solving, knowledge and learning ability, ethics, and social etiquette. While, more focuses as the mentors in providing guidances to junior resdents and leadership skills will be for the 2nd and 3rd year residents.

The assessment on the participation in education activities of all residents includes Interesting case conference, Journal club, Topic Review, and so on. The participation can enhance presentation skills, discussions, reading / summarizing and briefing skills of textbooks and medical journals.

In addition, there is a 1-time yearly assessment of all residents on morality, ethics, responsibility, interpersonal relations, knowledge and intellectual skills by the instructors and colleges (such as friends, nurses in OPD wards / OR / outpatient clinics, etc). The assessment will be in accordance with the standards of Medical Council.

3. Assessment Results

3.1 Criteria for assessment of the 1st year residents

3.1.1 Passing the 9 core subjects of Otolaryngology Department

3.1.2 Considerations for the up-level year <u>with passing in the 3 areas</u> as follows:

3.1.2.1 Knowledge – from written and oral examinations of core subjects in 3.1.1 with 60% passing or grouping scores

3.1.2.2 Intervention – from the Portfolio with passing

3.1.2.3 Attitudes – from the assessments by Interesting Case, Journal club, colleges, etc with passing

For 3.1.2.2 and 3.1.2.3, the considerations would be by passing and not passing.

Requirements

1. In case that the 1st year residents do not pass certain core subjects, they can be considered for the up-level to the 2nd year, but still required for the re-enrollement and passing the eaxamnation of those certain core subjects in the following academic year.
2. In case that the 1st year residents pass the core subjects, but not considered for the up-level to the 2nd year, they must perform their duties as the 1st year residents for one more academic year without re-enrollement. Alternatively, they can be considered for the up-level to the 2nd year, but under special conditions for their performance and assistance authorized by the Postgraduate Education Committee.

3.2 Criteria for assessment of the 2nd and 3rd year residents with passing in 3 areas as follows:

3.2.1 Knowledge – from the scores of written examination (60%) and oral examination (40%)

- The 3rd year residents – with 60% passing or scoring not less than $\bar{x}$-1.5 SD
- The 2nd year residents – with 50% passing or scoring not less than $\bar{x}$-1.5 SD

3.2.2 Intervention – from the work place based assessment, EPA, and Portfolio

3.2.3 Attitudes – from the assessments, including the Interesting Case, Journal club, and performance at IPD wards by colleges such as nurses, instructors, and residents

For 3.2.2 and 3.2.3, the considerations would be by passing and not passing.

Requirements

In case that the 2nd and 3rd year residents do not pass the passing criteria for their up-level year, they must receive the failing or alternatively obtain special conditions. For the 3rd year residents, Department of Ololaryngology would not consider their application for Board Certification Exam in that year. These considerations are authorized by the Postgraduate Education Committee.