

NewYork-Presbyterian- Columbia and Weill Cornell campuses **Otolaryngology Residency Program**

Chief Residents (PGY5)

Educational Program

Knowledge Base: At the completion of PGY-5 of specialty training, the resident will have the following knowledge:

- Demonstrates mastery of the course content in Otolaryngology/Head and Neck Surgery
- Full understanding of complex clinical issues in the entire specialty
- Mastery of systems-based practice, and practice-based learning and improvement

Clinical Skills Development:

- Builds on clinical skills developed in prior years
- Demonstrates maturity in approach to patient care and follow-up
- Demonstrates mastery of the surgical techniques and medical management in Otolaryngology
- Demonstrates professionalism, and good interpersonal and communication skills

Resident Duties

Clinical:

- Under the supervision of the Attendings, manages the service and is responsible for all patients on the otolaryngology service
- Makes final decisions regarding management under Attending supervision
- Supervises the inpatient and consultation services under Attending supervision.

Administrative:

- Develops the resident call schedule
- Assigns cases, within parameters of junior resident rotations
- Ensures outpatient continuity attendance, and outpatient Hospital clinic coverage
- Administers the service under Attending supervision
- Works with Chairs and Site Directors to arrange grand rounds speakers and conference speakers

Educational:

- Participates in the education of junior residents
- Teaches the medical students
- Instructs junior residents in clinic and in the operating room.

Progression of Responsibilities

- Demonstrates independence in advanced surgical procedures, with appropriate supervision
- Teaches the junior residents surgical techniques, and supervises them in the operating room
- Supervises inpatient and outpatient care, and consultations, with attending supervision

Index Procedures – PGY-5

Procedure	Minimum number of cases required before resident can perform case under Direct supervision
Thyroidectomy	5
Glossectomy with or Without neck dissection	4