

AMERICAN OSTEOPATHIC ASSOCIATION PROGRAM DIRECTOR'S ANNUAL REPORT FOR OTOLARYNGOLOGY/FACIAL PLASTIC SURGERY

Training Institution _____

Mailing Address _____

Name of Program Director _____

Daytime Phone (_____) _____ Email _____

Name of Resident _____ AOA # _____

Report Year of Training (circle) 1st 2nd 3rd 4th 5th Report Period: From _____ To: _____
mo/day/yr mo/day/yr

INSTRUCTIONS:

As part of its effort to monitor the educational progress of residents, the American Osteopathic Association and the AOCOO-HNS Council of Medical Education requires that you complete a program director's annual report on each osteopathic resident in your program. These reports will be reviewed by the Council of Medical Education and become part of the resident's permanent file. Completion of a residency program requires an annual report from the resident and program director for each year of training.

Please evaluate the performance of the resident within thirty (30) days of completion of the training year. **The completed report should be sent directly to the American Osteopathic Colleges of Ophthalmology and Otolaryngology-Head and Neck Surgery (AOCOO-HNS), 4764 Fishburg Road, Suite F, Huber Heights, OH 45424.** For additional information contact the Administrative Offices at 800-455-9404 or 937-233-5653, fax 937-233-5673.

This report includes observations of the resident in both in-hospital and ambulatory care settings. Please evaluate the resident based on each of the required elements of the following seven Core Competencies of the Osteopathic Profession.

COMPETENCY 1: Osteopathic Philosophy and Osteopathic Manipulative Medicine: Residents are expected to demonstrate and apply knowledge of accepted standards in Osteopathic Manipulative Treatment (OMT) **appropriate to Otolaryngology/Facial Plastic Surgery.** The educational goal is to train a skilled and competent osteopathic practitioner who remains dedicated to life-long learning and to practice habits in osteopathic philosophy and manipulative medicine.

Required Element #1: This resident demonstrated competency in understanding and application of OMT as it relates to Otolaryngology/Facial Plastic Surgery.

Check the box(es) for the methods, outcomes, or demonstrations of compliance that were utilized.

THE RESIDENT:

- participate in OMT training at hospital and ambulatory site.
- is able to perform a critical appraisal of medical literature related to OMT.
- was observed and credentialed in the performance of OMT through the assessment of diagnostic skills, medical knowledge, and problem-solving abilities.
- Complete OMT computer educational modules.

Check the box(es) for the evaluation tool used to document methods, outcomes, or demonstrations of compliance.

- Monthly Service Rotation Evaluations
- Objective Structured Clinical Examinations (OSCE)
- Portfolio
- Other:

Check the appropriate rating box and comment on this resident's performance for this element:

- Deficient
 - Usually meets competencies
 - Consistently meets competencies
 - Exceptional
- Comments:

Required Element #2: This resident integrated Osteopathic Concepts and OMT into the medical care provided to patients as appropriate.

<p>Check the box(es) for the <u>methods, outcomes, or demonstrations</u> of compliance that were utilized.</p>	<p>Check the box(es) for the <u>evaluation tool</u> used to document methods, outcomes, or demonstrations of compliance.</p>	<p>Check the appropriate rating box and comment on this resident's performance for this element:</p>
<p>THE RESIDENT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> assumed increased responsibility for the incorporation of osteopathic concepts in patient management. <input type="checkbox"/> participated in activities that provided educational programs at the student and intern levels. <input type="checkbox"/> participated in CME programs provided by COMS, the AAO, and the specialty college. <input type="checkbox"/> completed OMT computer teaching modules. 	<ul style="list-style-type: none"> <input type="checkbox"/> Monthly Service Rotation Evaluations <input type="checkbox"/> Objective Structured Clinical Examinations (OSCE) <input type="checkbox"/> Portfolio <input type="checkbox"/> Procedure/case logs <input type="checkbox"/> Other: 	<ul style="list-style-type: none"> <input type="checkbox"/> Deficient <input type="checkbox"/> Usually meets competencies <input type="checkbox"/> Consistently meets competencies <input type="checkbox"/> Exceptional <p>Comments:</p>

Required Element #3: This resident understood and integrated Osteopathic Principles and Philosophy into all clinical and patient care activities.

<p>Check the box(es) for the <u>methods, outcomes, or demonstrations</u> of compliance that were utilized.</p>	<p>Check the box(es) for the <u>evaluation tool</u> used to document methods, outcomes, or demonstrations of compliance.</p>	<p>Check the appropriate rating box and comment on this resident's performance for this element:</p>
<p>THE RESIDENT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> utilized caring, compassionate behavior with patients. <input type="checkbox"/> demonstrated the treatment of people rather than symptoms. <input type="checkbox"/> demonstrated understanding of somato-visceral relationships and the role of the musculoskeletal system in disease. <input type="checkbox"/> demonstrated listening skills in interaction with patients. <input type="checkbox"/> Demonstrated knowledge of and behavior in accordance with the Osteopathic Oath and AOA Code of Ethics. 	<ul style="list-style-type: none"> <input type="checkbox"/> 360° Evaluation Instruments <input type="checkbox"/> Monthly Service Rotation Evaluations <input type="checkbox"/> Objective Structured Clinical Examinations (OSCE) <input type="checkbox"/> Other: 	<ul style="list-style-type: none"> <input type="checkbox"/> Deficient <input type="checkbox"/> Usually meets competencies <input type="checkbox"/> Consistently meets competencies <input type="checkbox"/> Exceptional <p>Comments:</p>

COMPETENCY 2: Medical Knowledge: Residents are expected to demonstrate and apply knowledge of accepted standards of clinical medicine as it relates to Otolaryngology/Facial Plastic Surgery, remain current with new developments in medicine, and participate in life-long learning activities, including research.

Required Element #1: This resident demonstrated competency in the understanding and application of clinical medicine to patient care.

Check the box(es) for the <u>methods, outcomes, or demonstrations</u> of compliance that were utilized.	Check the box(es) for the <u>evaluation tool</u> used to document methods, outcomes, or demonstrations of compliance.	Check the appropriate rating box and comment on this resident's performance for this element:
<p>THE RESIDENT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> complete COMLEX Part III and/or In-Service Examination this year. <input type="checkbox"/> demonstrated improved clinical decision-making and problem-solving abilities. <input type="checkbox"/> attended seminars, CME programs, Grand Rounds, or Lectures. <input type="checkbox"/> participated in a directed reading program and/or journal club. 	<ul style="list-style-type: none"> <input type="checkbox"/> 360° Evaluation Instruments <input type="checkbox"/> Chart Stimulated Recall Oral Examinations (CSR) <input type="checkbox"/> Monthly Service Rotation Evaluations <input type="checkbox"/> Portfolio <input type="checkbox"/> Written Examinations (i.e., in-training exam) <input type="checkbox"/> Other: 	<ul style="list-style-type: none"> <input type="checkbox"/> Deficient <input type="checkbox"/> Usually meets competencies <input type="checkbox"/> Consistently meets competencies <input type="checkbox"/> Exceptional <p>Comments:</p>

Required Element #2: This resident knows and applies the foundations of clinical and behavioral medicine appropriate to Otolaryngology/Facial Plastic Surgery.

Check the box(es) for the <u>methods, outcomes, or demonstrations</u> of compliance that were utilized.	Check the box(es) for the <u>evaluation tool</u> used to document methods, outcomes, or demonstrations of compliance.	Check the appropriate rating box and comment on this resident's performance for this element:
<p>THE RESIDENT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Participated in research activities that allowed the critical evaluation of current medical information and scientific evidence. <input type="checkbox"/> Developed as a medical educator by giving presentations before peers and faculty, and participated in the instruction of medical students. <input type="checkbox"/> Was routinely assessed on performance of Life Long Learning. <input type="checkbox"/> Participated in lectures and workshops on behavioral psychosocial multi-cultural issues as appropriate to otolaryngology/facial plastic surgery. 	<ul style="list-style-type: none"> <input type="checkbox"/> 360° Evaluation Instruments <input type="checkbox"/> Chart Stimulated Recall Oral Examinations (CSR) <input type="checkbox"/> Monthly Service Rotation Evaluations <input type="checkbox"/> Portfolio <input type="checkbox"/> Written Examinations (i.e., in-training exam) <input type="checkbox"/> Other: 	<ul style="list-style-type: none"> <input type="checkbox"/> Deficient <input type="checkbox"/> Usually meets competencies <input type="checkbox"/> Consistently meets competencies <input type="checkbox"/> Exceptional <p>Comments:</p>

COMPETENCY 3: Patient Care: Residents must demonstrate the ability to effectively treat patients, provide medical care that incorporates the osteopathic philosophy, patient empathy, awareness of behavioral issues, the incorporation of preventive medicine, and health promotion.

Required Element #1: Gather accurate, essential information from all sources, including medical interviews, physical examinations, medical records, diagnostic/therapeutic plans, and treatments.

<p>Check the box(es) for the <u>methods, outcomes, or demonstrations</u> of compliance that were utilized.</p> <p>THE RESIDENT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> was routinely observed for assessment of performance of medical interviewing techniques. <input type="checkbox"/> was routinely observed for assessment of performance of effective patient management plans. <input type="checkbox"/> was routinely observed for assessment of performance of requesting and sequencing diagnostic tests and consultative services. <input type="checkbox"/> was routinely observed for assessment of performance of caring attitude that is mindful of cultural sensitivities, patient apprehensions, and accuracy of information. <input type="checkbox"/> was routinely observed for assessment of performance at bedside rounds. 	<p>Check the box(es) for the <u>evaluation tool</u> used to document methods, outcomes, or demonstrations of compliance.</p> <ul style="list-style-type: none"> <input type="checkbox"/> 360° Evaluation Instruments <input type="checkbox"/> Chart Stimulated Recall Oral Examinations (CSR) <input type="checkbox"/> Checklist Evaluations <input type="checkbox"/> Monthly Service Rotation Evaluations <input type="checkbox"/> Objective Structured Clinical Examinations (OSCE) <input type="checkbox"/> Other: 	<p>Check the appropriate rating box and comment on this resident's performance for this element:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Deficient <input type="checkbox"/> Usually meets competencies <input type="checkbox"/> Consistently meets competencies <input type="checkbox"/> Exceptional <p>Comments:</p>
--	--	--

Required Element #2: This resident validated competency in the performance of diagnosis, treatment and procedures appropriate to Otolaryngology/Facial Plastic Surgery.

<p>Check the box(es) for the <u>methods, outcomes, or demonstrations</u> of compliance that were utilized.</p> <p>THE RESIDENT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> completed a program for instruction and credentialing to validate their competency in the performance of medical procedures, where appropriate. <input type="checkbox"/> understands and gives patient's instructions on potential complications and known risks (informed consent). <input type="checkbox"/> participated in bedside teaching rounds. 	<p>Check the box(es) for the <u>evaluation tool</u> used to document methods, outcomes, or demonstrations of compliance.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Checklist Evaluations <input type="checkbox"/> Monthly Service Rotation Evaluations <input type="checkbox"/> Objective Structured Clinical Examinations (OSCE) <input type="checkbox"/> Procedure/case logs <input type="checkbox"/> Other: 	<p>Check the appropriate rating box and comment on this resident's performance for this element:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Deficient <input type="checkbox"/> Usually meets competencies <input type="checkbox"/> Consistently meets competencies <input type="checkbox"/> Exceptional <p>Comments:</p>
---	--	--

Required Element #3: This resident provided health care services consistent with osteopathic philosophy, including preventative medicine and health promotion based on current scientific evidence.

Check the box(es) for the <u>methods, outcomes, or demonstrations</u> of compliance that were utilized.	Check the box(es) for the <u>evaluation tool</u> used to document methods, outcomes, or demonstrations of compliance.	Check the appropriate rating box and comment on this resident's performance for this element:
<p>THE RESIDENT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Demonstrates effective skills in counseling patients and their families on health promotion and lifestyle activities related to good health maintenance. <input type="checkbox"/> Demonstrates effective skills in referring patients to non-for-profit and community service organizations that support health promotion and behavioral modification programs. <input type="checkbox"/> Demonstrates the ability to work with professionals from varied disciplines as a team to provide effective medical care to patients that address their diverse healthcare needs. <input type="checkbox"/> Participates effectively in bedside teaching rounds. 	<ul style="list-style-type: none"> <input type="checkbox"/> Checklist Evaluations <input type="checkbox"/> Monthly Service Rotation Evaluations <input type="checkbox"/> Objective Structured Clinical Examinations (OSCE) <input type="checkbox"/> Procedure/Case Logs <input type="checkbox"/> Simulations and Models <input type="checkbox"/> Other: 	<ul style="list-style-type: none"> <input type="checkbox"/> Deficient <input type="checkbox"/> Usually meets competencies <input type="checkbox"/> Consistently meets competencies <input type="checkbox"/> Exceptional <p>Comments:</p>

COMPETENCY 4: Interpersonal and Communication Skills: Residents are expected to demonstrate interpersonal and communication skills that enable them to establish and maintain professional relationships with patients, families, and other members of health care teams.

Required Element #1: This resident demonstrated effectiveness in developing appropriate doctor-patient relationships.

Check the box(es) for the <u>methods, outcomes, or demonstrations</u> of compliance that were utilized.	Check the box(es) for the <u>evaluation tool</u> used to document methods, outcomes, or demonstrations of compliance.	Check the appropriate rating box and comment on this resident's performance for this element:
<p>THE RESIDENT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> demonstrates effective patient interviewing techniques. <input type="checkbox"/> demonstrates ability in assessing the health of non-English-speaking and deaf patients. <input type="checkbox"/> demonstrates the ability to involve patients and families in decision-making. <input type="checkbox"/> illustrates the use of appropriate verbal and non-verbal skills when communicating with patients, families, and faculty. <input type="checkbox"/> demonstrates an understanding of cultural and religious issues and sensitivities in the doctor-patient relationship. <input type="checkbox"/> participated in videos, workshops, bedside/clinic/office teaching about interpersonal and communications skills. 	<ul style="list-style-type: none"> <input type="checkbox"/> 360° Evaluation Instruments <input type="checkbox"/> Checklist Evaluation <input type="checkbox"/> Monthly Service Rotation Evaluations <input type="checkbox"/> Objective Structured Clinical Examinations (OSCE) <input type="checkbox"/> Portfolio <input type="checkbox"/> Other: 	<ul style="list-style-type: none"> <input type="checkbox"/> Deficient <input type="checkbox"/> Usually meets competencies <input type="checkbox"/> Consistently meets competencies <input type="checkbox"/> Exceptional <p>Comments:</p>

Required Element #2: This resident exhibited effective listening, written and oral communication skills in professional interactions with patients, families and other health professionals.

Check the box(es) for the <u>methods, outcomes, or demonstrations</u> of compliance that were utilized.	Check the box(es) for the <u>evaluation tool</u> used to document methods, outcomes, or demonstrations of compliance.	Check the appropriate rating box and comment on this resident's performance for this element:
<p>THE RESIDENT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> communicated medical problems and patient options at the appropriate level of understanding. <input type="checkbox"/> maintained comprehensive, timely, and legible medical records. <input type="checkbox"/> demonstrated respectful interactions with health practitioners, patients, and families of patients. <input type="checkbox"/> elicited medical information effectively. <input type="checkbox"/> demonstrated an understanding of resources available to physicians to assist with appropriate assessment of communication-impaired patients. <input type="checkbox"/> worked effectively with others as a member or leader of a healthcare team. <input type="checkbox"/> participated in workshops/videos, bedside/clinic/office teaching on effective oral/written communication skills. 	<ul style="list-style-type: none"> <input type="checkbox"/> Checklist Evaluations <input type="checkbox"/> Monthly Service Rotation Evaluations <input type="checkbox"/> Objective Structured Clinical Examinations (OSCE) <input type="checkbox"/> Procedure/case logs <input type="checkbox"/> Other: 	<ul style="list-style-type: none"> <input type="checkbox"/> Deficient <input type="checkbox"/> Usually meets competencies <input type="checkbox"/> Consistently meets competencies <input type="checkbox"/> Exceptional <p>Comments:</p>

COMPETENCY 5: Professionalism: Residents are expected to uphold the Osteopathic Oath in the conduct of their professional activities that promote advocacy of patient welfare, adherence to ethical principles, collaboration with health professionals, life-long learning, and sensitivity to a diverse patient population. Residents should be cognizant of their own physical and mental health in order to care effectively for patients.

Required Element #1: This resident demonstrated respect for patients and families and advocated for the primacy of patient's welfare and autonomy.

Check the box(es) for the <u>methods, outcomes, or demonstrations</u> of compliance that were utilized.	Check the box(es) for the <u>evaluation tool</u> used to document methods, outcomes, or demonstrations of compliance.	Check the appropriate rating box and comment on this resident's performance for this element:
<p>THE RESIDENT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> presented an honest presentation of a patient's medical status and the implication of informed consent to medical treatment plans. <input type="checkbox"/> maintained patient's confidentiality and demonstrated proper fulfillment of the physician's role in the doctor-patient relationship. <input type="checkbox"/> maintained appropriate and non-exploitive relationship with patients. <input type="checkbox"/> informed patients accurately of the risks associated with medical research projects, the potential consequences of treatment plans, and the realities of medical errors in medicine. <input type="checkbox"/> treated the terminally ill with compassion in the management of pain, palliative care, and preparation for death. <input type="checkbox"/> participated in course/program (compliance and end of life), workshops, lectures, bedside, and clinical/office teaching. <input type="checkbox"/> participated in mentor/mentee sessions on professionalism, ethics, and cultural diversity. 	<ul style="list-style-type: none"> <input type="checkbox"/> 360° Evaluation Instruments <input type="checkbox"/> Checklist Evaluations <input type="checkbox"/> Monthly Service Rotation Evaluations <input type="checkbox"/> Objective Structured Clinical Examinations (OSCE) <input type="checkbox"/> Portfolio <input type="checkbox"/> Other: 	<ul style="list-style-type: none"> <input type="checkbox"/> Deficient <input type="checkbox"/> Usually meets competencies <input type="checkbox"/> Consistently meets competencies <input type="checkbox"/> Exceptional <p>Comments:</p>

Required Element #2: This resident adhered to ethical principles in the practice of medicine.

Check the box(es) for the methods, outcomes, or demonstrations of compliance that were utilized.

THE RESIDENT:

- had an increased understanding of conflicts of interest inherent in medicine and the appropriate responses to societal, community, and healthcare industry pressures.
- used limited medical resources effectively and avoided the utilization of unnecessary tests and procedures.
- recognized the inherent vulnerability and trust accorded by patients to physicians and upheld the highest moral principles that avoid exploitation for sexual, financial, or other private gain.
- pursued life-long learning goals in medicine, humanism, ethics, and gained insight into the understanding of patient concerns and the proper relationship with the medical industry.
- participated in workshops, lectures, bedside, and clinic/office teaching.
- participated in a mentor/mentee program on professionalism.

Check the box(es) for the evaluation tool used to document methods, outcomes, or demonstrations of compliance.

- 360° Evaluation Instruments
- Checklist Evaluations
- Monthly Service Rotation Evaluations
- Objective Structured Clinical Examinations (OSCE)
- Portfolio
- Other:

Check the appropriate rating box and comment on this resident's performance for this element:

- Deficient
 - Usually meets competencies
 - Consistently meets competencies
 - Exceptional
- Comments:

Required Element #3: This resident demonstrated awareness and proper attention to issues of culture, religion, age, gender, sexual orientation, and mental and physical disabilities.

Check the box(es) for the methods, outcomes, or demonstrations of compliance that were utilized.

THE RESIDENT:

- became more knowledgeable and more responsive to the special needs and cultural origins of patients.
- advocated for continuous quality of care for all patients.
- prevented the discrimination of patients based on defined characteristics.
- had an increased understanding of the legal obligations of physicians in the care of patients.
- attended lectures/workshops on multicultural medicine.
- demonstrated competency by modeling it for other residents and house staff.

Check the box(es) for the evaluation tool used to document methods, outcomes, or demonstrations of compliance.

- 360° Evaluation Instruments
- Checklist Evaluations
- Monthly Service Rotation Evaluations
- Objective Structured Clinical Examinations (OSCE)
- Portfolio
- Other:

Check the appropriate rating box and comment on this resident's performance for this element:

- Deficient
 - Usually meets competencies
 - Consistently meets competencies
 - Exceptional
- Comments:

COMPETENCY 6: Practice-Based Learning and Improvement: Residents must demonstrate the ability to critically evaluate their methods of clinical practice, integrate evidence-based medicine into patient care, show an understanding of research methods, and improve patient care practices.

Required Element #1: This resident treated patients in a manner consistent with the most up-to-date information on diagnostic and therapeutic effectiveness.

<p>Check the box(es) for the <u>methods, outcomes, or demonstrations</u> of compliance that were utilized.</p>	<p>Check the box(es) for the <u>evaluation tool</u> used to document methods, outcomes, or demonstrations of compliance.</p>	<p>Check the appropriate rating box and comment on this resident's performance for this element:</p>
<p>THE RESIDENT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Used reliable and current information in diagnosis and treatment. <input type="checkbox"/> Understands how to use the medical library and electronically mediated resources to discover pertinent medical information. <input type="checkbox"/> Demonstrated the ability to extract and apply evidence from scientific studies to patient care. <input type="checkbox"/> Seeks feedback on presentations and reports. <input type="checkbox"/> Participated in evidence-based medicine journal clubs. 	<ul style="list-style-type: none"> <input type="checkbox"/> Chart Stimulated Recall Oral Examinations (CSR) <input type="checkbox"/> Objective Structured Clinical Examinations (OSCE) <input type="checkbox"/> Monthly Service Rotation Evaluations <input type="checkbox"/> Portfolio <input type="checkbox"/> Written Examinations (i.e., in-training exam) <input type="checkbox"/> Other: 	<ul style="list-style-type: none"> <input type="checkbox"/> Deficient <input type="checkbox"/> Usually meets competencies <input type="checkbox"/> Consistently meets competencies <input type="checkbox"/> Exceptional <p>Comments:</p>

Required Element #2: This resident performed self-evaluations of clinical practice patterns and practice-based improvement activities using a systematic methodology.

<p>Check the box(es) for the <u>methods, outcomes, or demonstrations</u> of compliance that were utilized.</p>	<p>Check the box(es) for the <u>evaluation tool</u> used to document methods, outcomes, or demonstrations of compliance.</p>	<p>Check the appropriate rating box and comment on this resident's performance for this element:</p>
<p>THE RESIDENT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Understood and participated in <i>quality assurance</i> activities at the hospital and at ambulatory sites. <input type="checkbox"/> Applied the principles of evidence-based medicine in the diagnosis and treatment of patients. <input type="checkbox"/> Compared/studied the effectiveness of practice patterns against the results obtained with other population groups in terms of effectiveness and outcomes. 	<ul style="list-style-type: none"> <input type="checkbox"/> Chart Stimulated Recall Oral Examinations (CSR) <input type="checkbox"/> Objective Structured Clinical Examinations (OSCE) <input type="checkbox"/> Portfolio <input type="checkbox"/> Other: 	<ul style="list-style-type: none"> <input type="checkbox"/> Deficient <input type="checkbox"/> Usually meets competencies <input type="checkbox"/> Consistently meets competencies <input type="checkbox"/> Exceptional <p>Comments:</p>

Required Element #3: This resident understood research methods, medical informatics, and the application of technology as applied to medicine.

<p>Check the box(es) for the <u>methods, outcomes, or demonstrations</u> of compliance that were utilized.</p>	<p>Check the box(es) for the <u>evaluation tool</u> used to document methods, outcomes, or demonstrations of compliance.</p>	<p>Check the appropriate rating box and comment on this resident's performance for this element:</p>
<p>THE RESIDENT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Participated in research activities as required by the respective specialty college. <input type="checkbox"/> Demonstrated computer literacy, information retrieval skills, and an understanding of computer technology that applies to patient care and hospital systems. <input type="checkbox"/> Applied study designs and statistical methods to the appraisal of clinical studies. <input type="checkbox"/> Participated in journal clubs and evidence-based medicine programs. <input type="checkbox"/> Sought feedback on presentations and reports. <input type="checkbox"/> Provided effective and thoughtful feedback to others on their presentations and conclusions. 	<ul style="list-style-type: none"> <input type="checkbox"/> Monthly Service Rotation Evaluations <input type="checkbox"/> Objective Structured Clinical Examinations (OSCE) <input type="checkbox"/> Portfolio <input type="checkbox"/> Procedure/case logs <input type="checkbox"/> Other: 	<ul style="list-style-type: none"> <input type="checkbox"/> Deficient <input type="checkbox"/> Usually meets competencies <input type="checkbox"/> Consistently meets competencies <input type="checkbox"/> Exceptional <p>Comments:</p>

COMPETENCY 7: System-Based Practice: Residents are expected to demonstrate an understanding of health care delivery systems, provide effective and qualitative patient care within the system, and practice cost-effective medicine.

Required Element #1: This resident understands national and local health care delivery systems and how they affect patient care and professional practice.

<p>Check the box(es) for the <u>methods, outcomes, or demonstrations</u> of compliance that were utilized.</p>	<p>Check the box(es) for the <u>evaluation tool</u> used to document methods, outcomes, or demonstrations of compliance.</p>	<p>Check the appropriate rating box and comment on this resident's performance for this element:</p>
<p>THE RESIDENT:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Attended instruction in matters of health policy and structure. <input type="checkbox"/> Has an increased understanding of business applications in medical practice. <input type="checkbox"/> Demonstrated operational knowledge of health care organizations, and state and federal programs. <input type="checkbox"/> Demonstrated an increased understanding of role as member of the health care team in the hospital, ambulatory clinic and community. <input type="checkbox"/> Attended guest lectures/seminars with policy makers. <input type="checkbox"/> Attended hospital utilization review, quality and other administrative and multi-disciplinary meetings. 	<ul style="list-style-type: none"> <input type="checkbox"/> 360° Evaluations <input type="checkbox"/> Chart Stimulated Recall Oral Examinations (CSR) <input type="checkbox"/> Monthly Service Rotation Evaluations <input type="checkbox"/> Objective Structured Clinical Examinations (OSCE) <input type="checkbox"/> Portfolio <input type="checkbox"/> Other: 	<ul style="list-style-type: none"> <input type="checkbox"/> Deficient <input type="checkbox"/> Usually meets competencies <input type="checkbox"/> Consistently meets competencies <input type="checkbox"/> Exceptional <p>Comments:</p>

Required Element #2: This resident advocated for quality health care on behalf of patients and assisted them in their interactions with the complexities of the medical system.

Check the box(es) for the methods, outcomes, or demonstrations of compliance that were utilized.

THE RESIDENT:

- Has an increased understanding of local medical resources available to patients for treatment and referral.
- Participated in advocacy activities that enhance the quality of care provided to patients.
- Practiced clinical decision-making in the context of cost, allocation of resources, and outcomes.

Check the box(es) for the evaluation tool used to document methods, outcomes, or demonstrations of compliance.

- 360° Evaluations
- Checklist Evaluations
- Objective Structured Clinical Examinations (OSCE)
- Portfolio
- Other:

Check the appropriate rating box and comment on this resident's performance for this element:

- Deficient
 - Usually meets competencies
 - Consistently meets competencies
 - Exceptional
- Comments: _____

Resident Assessment

1. Have you reviewed and approved the resident's research assignment (e.g., professional paper, etc.)? Professional paper assessment form and checklist must be filled-out and signed (see page _____).

- Yes No N/A

Comment: _____

2. Did the resident participate in the annual resident examination, as required by the specialty college?

- Yes No N/A

Comment: _____

3. Have you reviewed the results of the COMLEX III or the resident's in-service examination with the resident?

- Yes No N/A

Comment: _____

4. Has the resident met the requirement of the management of a panel of patients followed throughout the year in an ambulatory continuity setting?

- Yes No N/A

Comment: _____

5. Has the resident completed all other specialty specific requirements for this year?

- Yes No N/A

Comment: _____

6. Did the resident require any special counseling for deficiencies?

Yes No N/A

If yes, were the counseling sessions documented?

Yes No N/A

Comment: _____

7. Has the institution and residency training program fulfilled all of its responsibilities to the resident?

Yes No N/A

Comment: _____

8. Have any unfulfilled responsibilities to the resident been address?

Yes No N/A

Comment: _____

9. During the training year, did the resident have any extended leave?

Yes No N/A

If yes, has the amount of time taken during the extended leave been added to the end of the program?

Comment: _____

10. Please comment on this resident in terms of progress in the program, promise as a physician, and in other areas not specifically mentioned above.

This trainee has made satisfactory progress in this training program and is capable to proceed to the next year.

Yes No N/A If no, please attach quarterly evaluations.

This confirms that this trained has completed this year of training.

Yes No N/A

Comment: _____

I certify that the information on this form is correct and accurate.

(Signature of Program Director)

(Date)

(PRINTED NAME of Program Director)

The following signature verifies that the resident has had the opportunity to review this report.

(Signature of Resident)

(Date)

(PRINTED NAME of Resident)

**“PROGRAM COMPLETE” SUMMARY – FNAL RESIDENT ASSESSMENT
FOR OTOLARYNGOLOGY/FACIAL PLASTIC SURGERY**

This resident has been assessed with **at least two (2)** evaluation tools **for each required element of each of the seven competencies.**

Yes No N/A

The summary assessment documenting this resident’s “best performance” evaluations for each competency is indicated below.

Yes No N/A

Please mark a summary assessment for each competency at Residency Program Completion.

	Deficient	Usually meets Competencies	Consistently meets Competencies	Exceptional
1. Osteopathic Philosophy and Osteopathic Manipulative Medicine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Medical Knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Patient Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Interpersonal and Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Practice-based Learning and Improvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. System-based Practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I HEREBY ATTEST THAT THE GRADUATING RESIDENT HAS SUCCESSFULLY COMPLETED ALL THE REQUIREMENTS OF THE TRAINING PROGRAM, AND IS RECOMMENDED FOR PROGRAM COMPLETE STATUS.

Yes No

If no, explain: _____

(Signature of Program Director)

(Date)

(PRINTED NAME of Program Director)

(AOA Training Site)

The following signature verifies that the resident has had the opportunity to review this report.

(Signature of Resident)

(Date)

(PRINTED NAME of Resident)

**American Osteopathic Colleges of Ophthalmology and Otolaryngology-
Head and Neck Surgery**

Check List for the Otolaryngology/Facial Plastic Surgery Resident Professional Paper Requirement

Resident: _____

Training Site: _____

Paper Title: _____

Training Year: 1st 2nd 3rd 4th 5th

Program Director: _____

Project type: (check one) _____ Paper* _____ Scientific Poster* _____ Statistics Course*
(*Requires program directors signature for approval.)

Format:

1. Type of paper

- a. _____ Review of literature
- b. _____ Case study
- c. _____ Technical report
- d. _____ Original research paper
- e. _____ Scientific Poster

2. Abstract

- | | | |
|-------|-------|------------------------|
| Yes | No | |
| _____ | _____ | Well-written |
| _____ | _____ | Key-words noted |
| _____ | _____ | Defines scope of paper |

3. General Structure

- | | | |
|-------|-------|--|
| Yes | No | |
| _____ | _____ | Correct use of language |
| _____ | _____ | Correct punctuation |
| _____ | _____ | Proper footnoting |
| _____ | _____ | 1500 words or more |
| _____ | _____ | Appropriate use of charts, graphs, figures, tables or photos |
| _____ | _____ | Type-written or computer formatted |
| _____ | _____ | Adheres to recommended format for type of paper chosen |
| _____ | _____ | Bibliography properly written and annotated |
| _____ | _____ | Was appropriate contact made with IRB when needed. |

Originality:

- | | | |
|-------|-------|--|
| Yes | No | |
| _____ | _____ | Introduction and abstract |
| _____ | _____ | Clearly defined the objective(s) of the paper |
| _____ | _____ | Literature review and references are appropriate in scope, and number for the paper's subject |
| _____ | _____ | Accurate reporting of case findings and/or data is accomplished |
| _____ | _____ | Discussion demonstrates critical comment, reflects on interpretation of data, cross references literature and shows mastery of subject, or demonstrates direction for reader |

- _____ _____ Results for data collection are appropriately analyzed and references are clearly drawn
- _____ _____ Paper presents good evidence for the conclusions that are drawn
- _____ _____ Conclusion is concise, clear and relevant
- _____ _____ The paper offers a new paradigm or shows a new direction for the reader (i.e., Was this an important study? Is there a take-home message?)

Overall Evaluation:

- _____ Acceptable for publication
- _____ Acceptable paper but not for publication (e.g. Hypothesis failed but paper met all other expectations)
- _____ Not acceptable in present format but would be acceptable with the following revisions. Explain suggested revisions.

- _____ Unacceptable – Must be re-written or entirely new subject chosen. Provide an explanation below.

*Program Director's Signature: _____ Date: _____

OTOLARYNGOLOGY/FACIAL PLASTIC SURGERY RESIDENCY TRAINING REQUIREMENTS CHECKLIST

Program Director _____

Training Institution _____

Active Residents _____

New Resident _____ Dates: _____ to _____

New Resident _____ Dates: _____ to _____

INSTRUCTIONS: As part of its effort to monitor the educational progress of residents, specifically the requirements of the institution, the overall training program, and the program director, the American Osteopathic Colleges of Ophthalmology and Otolaryngology-Head and Neck Surgery requires that the program director complete this "Residency Training Requirements Checklist" as part of the annual program director's report for the entire training program.

The institution shall:

- _____ 1. maintain an adequate medical library containing carefully selected texts, latest editions of medical journals, and appropriate publications pertaining to otolaryngology/facial plastic surgery
- _____ 2. be properly equipped with access to a temporal bone lab facility, appropriately staffed, and properly organized
- _____ 3. provide ample working area, study space, and instruments and equipment essential to the conduct of residency training in otolaryngology/facial plastic surgery
- _____ 4. provide a teaching faculty, certified or board eligible, in otolaryngology/ facial plastic surgery and qualified by personality and nature to train residents
- _____ 5. provide a written selection policy to any osteopathic physician interested in its program
- _____ 6. execute a contract with each resident in accordance with the AOA
- _____ 7. provide resources sufficient to maintain a quality training program, and must commit to an equitable and reasonable balance between education and service
- _____ 8. upon satisfactory completion of the training program, shall award an appropriate certificate
- _____ 9. provide a written policy and procedure defining academic or disciplinary dismissal of a resident
- _____ 10. offer exposure to osteopathic principles and practice in clinical and didactic settings
- _____ 11. have at least two physicians certified in otolaryngology/facial plastic surgery by the AOA, one of which shall be designated the program director
- _____ 12. have supervised outpatient clinics or a formal arrangement for rotations in an outpatient facility

Comment(s): _____

The program shall:

- _____ 1. be approved by the AOA Council of Postdoctoral Training
- _____ 2. consist of one (1) year of traditional rotating internship followed by one (1) year of general surgery, and four (4) years of otolaryngology/facial plastic surgery OR consist of one (1) year of specialty track internship and four (4) years of otolaryngology/facial plastic surgery
- _____ 3. maintain the following general content of the program
 - a. utilization of osteopathic principles and practice relating to the specialty
 - b. basic and allied sciences as they pertain to otolaryngology/facial plastic surgery
 - c. clinical training in head and neck surgery, otology, rhinology and laryngology, general areas will include surgical exposure to procedures of the nose, maxilla salivary glands, lips, oral cavity, neck, larynx, thyroid, middle ear, facial nerve, inner ear, nasal endoscopy, bronchoscopy, esophagoscopy, and congenital anomaly, also including exposure to otoplasty, rhinoplasty, blepharoplasty, facial trauma, flaps and grafts in their application to head and neck surgery
 - d. exposure to issues which the resident will face as a practicing clinician, including health policy, managed care, health administration, medical ethics, medical liability and practice management
- _____ 4. provide the resident with responsibility in the care of patients, under the supervision of the attending
- _____ 5. allow the resident to examine patients under the care of the department of otolaryngology/facial plastic surgery and appropriately record the physical findings and diagnosis in the patient record
- _____ 6. allow the resident to act as first assistant in all otolaryngology/facial plastic surgical procedures
- _____ 7. allow the resident to attend professional activities related to otolaryngology/facial plastic surgery

- _____ 8. encourage the resident to engage in investigate work, research in the hospital laboratories or records, and preparation of statistical analysis, based on case records
- _____ 9. include post graduate courses in allergy, facial plastic surgery, head and neck surgery, laser surgery, sinus surgery and temporal bone surgery
- _____ 10. include a basic sciences course related to otolaryngology/facial plastic surgery, which shall be no less than 100 clock hours of study
- _____ 11. suitable out-rotations, as needed, to insure the broadening of scope of training
- _____ 12. accept only those osteopathic physicians who meet the AOA residency requirement prerequisite
- _____ 13. provide faculty to complete and review a resident performance evaluation at the conclusion of each rotation
- _____ 14. provide teaching faculty, based on commitment to teaching, quality of teaching and experience
- _____ 15. offer important research opportunities in basic sciences and clinical problems

Comment(s): _____

The program director shall:

- _____ 1. be certified in otolaryngology/facial plastic surgery by the AOA through the AOBOO-HNS
- _____ 2. be a member in good standing of the AOA
- _____ 3. be qualified by nature and temperament to be a teacher and offer quality training in both scientific and clinical aspects
- _____ 4. meet the standards of the position as formulated by the AOA
- _____ 5. continue to meet the CME requirements of the AOA and the AOCCO-HNS
- _____ 6. have a minimum of three (3) years of clinical experience following certification and must demonstrate active participation in the AOCCO-HNS
- _____ 7. be approved by the AOA upon recommendation of the Council of Medical Education
- _____ 8. define residency training responsibilities in the documents of the institution
- _____ 9. work with other departments of the institution in the training of the resident
- _____ 10. arrange affiliations and/or out rotations necessary to meet the program objectives
- _____ 11. prepare required materials for inspections of the program
- _____ 12. provide the resident with all documents pertaining to the overall training program, as well as the requirements for satisfactory completion
- _____ 13. submit quarterly program reports to the DME and administrator of the institution, and an annual report to the AOCCO-HNS within 30 days following completion of each training year
- _____ 14. be responsible for all schedules, including lectures and educational sessions, and allow the resident appropriate time for participation in these programs
- _____ 15. review and approve the resident's annual scientific paper
- _____ 16. attend at least alternate meetings of the AOCCO-HNS annual program director's meeting
- _____ 17. notify the AOCCO-HNS of the entry of residents by submitting an annual list

Comment(s): _____

I certify that the information on this checklist is correct and accurate.

 (Signature of Program Director)

 (Date)