VA SENIOR RESIDENT ROTATION
GOALS AND OBJECTIVES

The Veterans Administration offers the resident the opportunity to develop confidence in their clinical decision skills by allowing them to function independently under the supervision of an attending physician. The senior resident assigned to the Veterans Administration Hospital shall during their three-month rotation achieve the following skills.

Patient care skills to be developed include the ability

1. To develop the ability to take a complete history including co-morbid conditions and complete a thorough physical in patients with head and neck cancer.
2. At each stage in the planning process to explain treatment methods and goals to patients and their families, and to communicate effectively the clinical needs to the other members of the care team.
3. To become confident in the clinical evaluation of patients under treatment and in follow-up.
4. To teach effectively the principles of radiation oncology and clinical practice to a junior resident in radiation oncology.

Medical knowledge requirements include demonstrating the ability:

5. To develop a comprehensive understanding of the literature and current clinical research in tumors of the head and neck and central nervous system, including the effects of co-morbid conditions on treatment plans. The senior resident will be responsible for head and neck cancers, and the junior resident will treat most of the prostate cancers. The remaining cancers (lung, GI, CNS, breast, etc,) will be divided between the junior and senior residents on a case-by-case basis.
6. To achieve a comprehensive knowledge base in the areas of pathology, radiology, surgery, medical oncology, oral and maxillofacial dentistry, nutrition, speech and swallow physical therapy, psycho-oncology, physical rehabilitation, pain management and palliative medicine required for the multidisciplinary care of head and neck cancer patients.
   Residents will acquire knowledge and experience of the various systemic therapeutic options, including the use of targeted biologic agents, for local-regional recurrent and metastatic head and neck cancers.
   Residents will acquire knowledge and experience in the integrated delivery of chemotherapy with radiotherapy
7. Because many patients are referred to this facility from institutions that do not have cancer programs or have comprehensive cancer services, the trainee will determine the appropriate pretreatment evaluation and arrange for the studies.
8. To integrate the information obtained to determine the potential effects of both uncontrolled tumor and treatment and will use this information in the development of a treatment plan.

Practice based learning improvement will be demonstrated by the ability:

9. To achieve technical skills in the head and neck examination including techniques in indirect laryngoscopy, and flexible fiberoptic nasopharyngoscopy.
10. To define the planning target volume and treatment constraints for 3D conformal radiation therapy and to direct a dosimetrist in the development of a treatment plan for presentation to the attending for approval.
11. To incorporate date from CT and MRI in the planning process to define the target volume and critical organs at risk.
12. To complete conventional simulation including the use of immobilization devices and treatment aids.
13. Residents will develop proficiency in the use of 3D-IMRT coplanar and non-coplanar radiotherapy techniques to the head and neck. This will include a practical experience in the use of current treatment planning systems to understand the strengths and weaknesses of this technique compared to traditional radiotherapy techniques.
14. Residents will develop proficiency in the set-up of non-IMRT and IMRT radiotherapy fields with an understanding of the weekly variation in set-up accuracy and precision.
15. To take a lead role in the treatment planning process in the multimodality tumor board directed jointly by radiation oncology and otorhinolaryngology with the support of pathology and radiology.

The development of communication skill requires the resident demonstrate the ability:

16. To work with medical physics and dosimetry in developing a useable treatment plan.
17. To work with nursing, nutrition, and social service to assure that the patients personal needs are met during treatment

The resident will accomplish the above tasks while demonstrating:

18. Adherence to a high standard of ethical and professional behavior and to conduct themselves in a manner that inspires confidence and trust in patients and their families as well as other members of the cancer care team.

The resident will demonstrate an understanding of health system issues and coordination of care during this time with the ability:

19. To take a leadership position in coordinating the relations with other oncologic specialties to develop multidisciplinary treatment plans to optimize the care delivered.
20. To work with system constraints to assure appropriate use of resources and personnel to improve efficiency in the system to maximize the potential amount of care delivered and to optimize the care of all patients.

The above stated goals and objectives are to be reviewed by the resident prior to the start of the rotation.