McGill University Department of Diagnostic Radiology Clinical Fellowship in Head and Neck Imaging FELLOWSHIP DIRECTOR: DR. CARLOS TORRES RESIDENCY PROGRAM DIRECTOR: DR. JANA TAYLOR PROGRAM ADMINISTRATOR: CATHY TORCHIA

General Overview

The Department of Radiology at the McGill University Health Centre offers a 1-year Clinical fellowship in Head and Neck Imaging. The fellowship program offers clinical exposure to all areas of head and neck cross-sectional imaging with a special focus on head and neck oncology and Emergency cases. Our section works closely with our colleagues in Otolaryngology, Radiation Oncology, Maxillofacial Surgery, Neurosurgery, and the Emergency Department, providing a wide range of clinical cases for interpretation. The fellowship provides an integrated experience of multidisciplinary clinical care through participation in tumor boards and teaching. Applicants must have completed at least one year of clinical fellowship or staff position in Neuroradiology to be eligible.

Duration: 1 Year

Objectives/Guidelines

At the end of the fellowship, the fellow will be able to:

1. Effectively approach and work up different head and neck pathology using CT, MRI, or US when appropriate.

2. Effectively protocol CT scans and be familiar with site specific maneuvers that results in optimal lesion visualization.

3. Be familiar with approaches for reducing artifact (eg dental), including angled image acquisition and high energy DECT reconstructions.

4. Recognize detailed normal head and neck anatomy in different planes and be familiar with the imaging classification of lymph nodes in the neck.

5. Recognize and effectively evaluate and characterize different benign and neoplastic head and neck pathologies.

6. Act as an effective consultant, providing a clinically relevant evaluation of head and neck pathology.

7. Appropriately stage head and neck tumors, including using the AJCC cancer staging system.

8. Be familiar with general treatment algorithms for different head and neck sites (eg, surgery, radiation/chemotherapy, etc.).

9. Effectively perform fluoroscopically guided lumbar punctures and instillation of intrathecal chemotherapy.

10. Depending on availability and specific arrangements, the fellow may also gain exposure to ultrasound guided procedures/biopsies of the neck and select myelographic procedures.

Fellow's Responsibilities & Schedule

• This advanced fellowship provides the fellow with the opportunity to gain the competence of a junior attending in an academic setting. As such, the fellow is expected to function as a diagnostic imaging expert, patient and quality advocate, manager and organizer, and teacher.

- Learn to function autonomously as an expert consultant in head and neck imaging.
- Learn how to manage the workload and prioritize cases daily.
- Perform image-guided invasive procedures.
- Learn how to manage on-call workload and identify / manage urgent cases.
- Collaborate and teach residents and medical students and organize teaching rounds.

• Prepare and participate in multi-disciplinary head and neck and neuroradiology rounds and tumour boards.

Structure

Typically, the caseload consists of 15 to 25 cross-sectional imaging cases per workday and 3-8 lumbar punctures per week. There is some variability in the workload depending on the day of the week, time of the year and number of trainees present in our section.

The fellow will participate in our department's neuroradiology call with a frequency of 1 every 4 to 5 weeks. On call, the fellow is expected to function as a junior staff but with the support and supervision of the attending staff. Typical on-call volumes are approximately 50 or more cross-sectional studies per day with a range of complexities. Occasionally, procedures will be requested on call. The fellow is expected to act as a backup for the resident on call and interpret the bulk of the studies, although this will be done in coordination with the attending staff, who will also help with the workload in addition to supervision of the fellow activities. For a weekend call, the fellow would typically be expected to start interpreting cases Friday evening.

Evaluation

• The fellow is evaluated daily by the attending staff. For clinical work, the focus is gradual development of expertise as a head and neck (including skull base) imaging consultant, focusing on the objectives outlined earlier which broadly include understanding different imaging techniques and effectively protocolling and supervising scans when needed, mastering head and neck imaging anatomy, become familiar with various head and neck pathologies and the AJCC cancer staging system, and developing the skills to work in a multi-disciplinary rounds and tumor boards as an effective consultant and team member. A formal written evaluation is completed every 3 months, using the CanMEDS roles scheme. The fellow will meet the Fellowship director of his section for direct feedback.

Vacations and Conference Time

- Vacations: 20 working days
- Conference: 7 days with proof of conference registration

Research

• As an option for fellows with research interests, up to one-half day a week may be allotted for a research project. The research project must pre-approved by the fellowship director and be completed and submitted by the end of the academic year. The project must culminate in a formal manuscript and must be presented at the annual McGill Radiology Research Day

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