

MCGILL LARYNGOLOGY FELLOWSHIP APPLICATION

Fellowship Director: Dr. Karen M Kost, MD, FRCSC, Director of the McGill University Voice and Dysphagia Laboratory.

Preamble

Currently, otolaryngology residents are not eligible to write the certification exams for the American Board of Otolaryngology. As a direct consequence, American fellowships are largely unavailable to Canadian otolaryngology graduates wishing to pursue additional training. This situation has generated a demand, and need, to provide Canadian fellowships. At the present time, there is only one half-time laryngology fellowship available in Canada. McGill is uniquely positioned to offer a fellowship in laryngology.

Eligibility Criteria

Eligible APPLICANTS must be certified otolaryngologists in practice in Canada wishing to undergo advanced training.

The McGill University Voice and Swallowing Laboratory

The Voice and Swallowing Laboratory at the Montreal General Hospital is widely recognized as a center of excellence and provides services to almost 3000 referred patients annually. The Lab contains state of the art equipment complete with an integrated database and digitized recording system. There are clinics five days/week and one to two laryngology OR days per week. This volume is such that the residents have ample exposure to laryngology throughout their training and cannot attend more than a maximum of 2-3 clinics/week. As a result the majority of the clinics are run by the staff alone. Similarly, complex surgical cases are performed by the attending staff. As such, there is ample clinical material to provide excellent training for the residents and one fellow. A fellowship in laryngology would not, in any way, interfere with or compromise resident training in the subspecialty of laryngology.

Terms

There will be a maximum of one available fellowship position per year. The fellowship will last one year and consist of clinical, teaching and research responsibilities. The division of activities will be roughly 50% clinical and 50% research.

Goals and objectives

1. Clinical and research conferences as well as journal clubs are, and will continue to be conducted regularly. These include laryngology rounds and research conferences in collaboration with a McGill basic scientist (Dr L Mongeau). The fellow will participate in the planning and conducting of these conferences.
2. The fellow will have supervised opportunities to develop skills in providing consultation and communicating with colleagues and referring physicians. The fellow is expected to teach medical students, residents, and other healthcare professionals. Teaching will occur at the bedside, in the Voice and Dysphagia Lab, as well as in the OR. Furthermore, the fellow will provide both interactive and didactic laryngology lectures to the Otolaryngology residents and Master's students. The fellow will also participate in the planning and execution of a 'Hands-on' Voice and Dysphagia Course for residents at the McGill Simulation centre.
3. The fellow will interact with related disciplines and engage in educational activities to further his/her role as an educator and communicator in the subspecialty of laryngology. There are ample such opportunities at McGill with the multidisciplinary dysphagia clinic (run with the occupational therapist and speech-language pathologist) as one example.
4. As an option a one month rotation at the Montreal Children's Hospital will be provided for pediatric voice and dysphagia exposure.

Clinical

- (a) The fellowship will provide structured clinical opportunities for fellows to develop advanced diagnostic, therapeutic and phonosurgical skills.
- (b) A sufficient number and variety of cases will be available for each fellow to assure adequate exposure to the broad range of conditions associated with the management of voice disorders and dysphagia, without in any way compromising the experience or exposure of residents.
- (c) At the end of the fellowship, the fellow will have had a cumulative experience as operating or teaching surgeon on at least 80-100 phonosurgery cases.
- (d) Lines of responsibility will be clearly delineated for trainees and other residents as related to areas of training and clinical duties.

Research

- (a) An active research component will enhance and compliment the educational experience. Although the clinical experience is essential, a

supervised research experience is expected. The integrated database allows for almost unlimited clinical research possibilities. In addition, collaboration between the Dr Mongeau's lab and the voice lab provides opportunities for basic science research.

Fundamental Components Of The Fellowship

- (a) The fellow must participate in the evaluation, management, and care of a minimum of 200 cases of voice disorders/dysphagia.
- (b) Participation in 80-100 surgical procedures, representing the full scope of phonosurgery in voice and swallowing.
- (c) Participation in at least 50 outpatient phonosurgery procedures performed in the clinic. These include vocal fold augmentations and Botox injections.
- (d) Intensive exposure to the interdisciplinary management of patients with voice disorders/dysphagia.
 - (i) Multi-disciplinary clinic participation with Speech-Language Pathologists
 - (ii) Dysphagia management team
- (e) Participation in the development and implementation of research in Laryngology.
- (f) The above objectives will be attained in the context of the seven CanMeds roles: medical expert, communicator, collaborator, manager, health advocate, scholar, professional.

Fellowship Clinical Curriculum

The fellowship will provide clinical and/or didactic exposure to:

- (a) Videostrobolaryngoscopy
- (b) Full range of voice disorders
- (c) Vocal nodules, cysts, polyps
- (d) Laryngopharyngeal reflux
- (e) Functional voice disorders
- (f) Muscle tension dysphonias
- (g) Speech-Language vocal rehabilitation
- (h) Neurologic voice disorders, including dystonias
- (i) Benign neoplasms, including papillomatosis
- (j) Malignant neoplasms, including squamous cell carcinoma
- (k) Vocal fold paresis/paralysis
- (l) Vocal fold bowing/presbylarynx
- (m) Sulcus Vocalis
- (n) Vocal fold granulomas/ulcers
- (o) Vocal fold scarring
- (p) Glottic stenosis

- (q) Laryngeal manifestations of systemic disease
- (r) Vocal fold injection/augmentation/thyroplasty
- (s) Polypoidal degeneration
- (t) Laryngeal electromyography
- (u) Botox injection
- (v) Applications of CO2 laser
- (w) Microflap techniques
- (x) Endoscopic resection of early glottic cancers
- (y) Functional Endoscopic Evaluation of Swallowing
- (z) Morbidity and mortality conferences
- (aa) Journal clubs
- (bb) Clinical research protocols

Evaluation of the fellow and of the staff

The fellow will be evaluated twice a year. An early informal assessment will be provided in the first 6 weeks. Evaluations will be based on the current CanMeds roles and modified as appropriate to Laryngology. The fellow will be evaluated on clinical, teaching and research activities as set out in the fellowship curriculum. Evaluations will be performed online and reviewed with the fellow.

The fellow will evaluate the staff and fellowship experience twice yearly anonymously online.

Summary

The McGill Voice and Dysphagia Laboratory, with its large and varied clinical volume, is uniquely positioned to provide a much needed high-quality laryngology fellowship in Canada. This fellowship will not in any way compromise resident training and experience. On the contrary, it is expected to enhance resident training through additional clinical and didactic teaching.