

Trainee Position Description and Essential Functions

University of Washington/Seattle Children's Hospital Pediatric Otolaryngology- Head and Neck Surgery Fellowship

Position Identification: Fellow

Position Summary:

The intent of our fellowship is to provide advanced training in complex pediatric otolaryngology-head and neck surgery with the goal of producing future leaders in academic pediatric otolaryngology. This training includes the development of clinical and surgical skill, as well as mentorship in research, leadership, and professionalism. Fellows will receive training in the management of airway obstruction, aerodigestive issues, chronic ear disease, aural atresia, deafness/hearing loss, cleft palate and craniofacial anomalies, velopharyngeal dysfunction, vascular anomalies, sleep disorders, obstructive sleep apnea, sinus disease, head and neck tumors, thyroid issues, microtia and voice disorders.

For the purpose of this document, the term "Resident" includes medical and dental residents and fellows, including those in ACGME, CODA and non-ACGME accredited programs.

This document is provided to give applicants and residents a clear description of the unique educational requirements, patient care responsibilities, and operational needs specific to our program for the purposes of transparency and ensuring that both the program and the applicants are matching appropriately.

General Overview of the Resident Role

A resident's responsibilities include patient care responsibilities within the scope of their clinical privileges commensurate with level of training and other responsibilities required of all members of the medical staff. Under the supervision of attendings, general responsibilities of the resident may include:

- Initial and ongoing assessment of patients' medical, physical and psychosocial status
- Performing history and physical examination
- Performing rounds
- Recording documentation, including progress notes, admission notes, procedure notes and discharge summaries
- Ordering and interpreting tests, laboratory studies, radiographic studies, pathology results, examinations.
- Prescribing medications and administering therapies
- Request and evaluation of external clinical information
- Integrating all clinical information to develop a differential diagnosis, comprehensive assessment, and appropriate treatment recommendations/plan.

- Arranging for discharge, referrals, follow up and after care – including discharge medications and supplies
- Providing patient education and counseling about health status, test results, disease processes and transition of care planning
- Assisting in surgical procedures
- Performing surgical procedures
- Teaching and evaluating other learners on the Otolaryngology team: residents, medical students, allied health care trainees, nursing trainees, visiting residents from other programs

UW GME Expectations for Professional Behavior

- All residents must comply with the [UW Medicine Policy on Professional Conduct](#) and the UW Medicine [Compliance Code of Conduct](#)
- ACGME Competencies in Professionalism, including fitness for duty (See [ACGME Common Program Requirements](#))
- All residents must comply with [GME Policies](#)[https://sites.uw.edu/uwgme/policies/\[LINK\]](https://sites.uw.edu/uwgme/policies/[LINK]), including the Resident and Fellow Position Appointment Agreement (RFPA)

Essential Program Administrative Functions

Onboarding

The Resident must:

- comply with all program and institutional tasks required for credentialing and onboarding by the requested deadlines
- comply with respirator fit testing and obtain appropriate vaccination

Program Tasks and Documentation

The Resident must:

- complete mandatory work hours reporting in MedHub
- participate in all requests for schedule preferences, requests for absence or schedule changes of requests for clinical/call coverage on the requested timelines or deadlines.
- complete in a timely manner all evaluations requested for medical students, peer residents, faculty or other members of the team
- complete MedHub clinical and educational hour logs
- complete case or procedure logs
- complete the annual ACGME Resident Survey
- complete the program's annual confidential internal survey
- complete required examination preparation and/or testing requirements, to include USMLE or COMLEX Step 3, in-training examinations and program-specific guidelines for national board certification
- attendance at all required program meetings, including semiannual meetings (Winter/Summer), Program Evaluation Committee meetings, etc.

- attendance and participation in fellowship applicant recruitment and interviews (interviews usually held for 2 days between February and March)

Essential Program Core Educational Functions

Didactics

The Resident must:

- Comply with all standards for participation and attendance at didactics and other core educational activities
 - Monday Didactics (6:45 AM – 8:00 AM)
- Adhere to the preferred mode of attendance (in-person, virtual, hybrid)

Scholarship

The Resident must:

- Comply with all program or specialty requirements for research or scholarship, quality improvement, national or regional conference presentation, publication or scholarly writing or teaching and presentations internal to the program (e.g. journal club, didactics, case conference, QI, etc.)
- Must demonstrate knowledge acquired from independent learning/reading.
- Must demonstrate commitment to scholarship.

Essential Patient Care Functions

Presence and preparedness

The Resident must:

- present to work as physically, mentally and emotionally fit for duty
- arrive at the patient care setting on schedule
- arrive at work in attire appropriate for the professional and safe delivery of patient care
- meet expectations for chart review or pre-rounding
- satisfy expectations that precede sign-out and/or departure from the clinical setting, including an appropriate handoff and follow up on all patient assessments/data/studies that will alter care in the near term.

Administrative

The Resident must:

- complete patient health record documentation on the schedule prescribed by the program or medical center. (Examples include but are not limited to progress notes/visit summaries, discharge summaries, operative or procedure notes, perioperative records, orders for admission, hospital care and discharge)
- comply with expectations for EHR inbox management, including timely responses to messages from patients, medical staff and tracking and patient follow up of expected results
- Must demonstrate effective utilization of outside resources to better patient care.
- Must understand and assist in development of clinical pathways and algorithms for system improvement.

Patient Care Communication

The Resident must:

- respond in a timely manner to pages, phone calls and Epic Secure Chat
- remain within the program-prescribed geographic range while on call or eligible for coverage
- must be able to communicate fluently in both written and spoken English
- Must be able to perform all aspects of residency while under stress

Patient Care Volumes

The Resident must:

- work toward (with supervision) or meet benchmarks for patient care volumes in all clinical settings, and demonstrate increasing speed and efficiency as they progress through residency
- complete assigned duties safely and completely within the work hour limitations
- appropriately request and utilize supervision
- work toward or ultimately meet procedure certification standards

Consultation

The Resident must:

- appropriately respond to, triage, and staff consultations in a timely manner
- document findings and recommendations in a timely manner
- communicate with the requesting service directly (e.g. in-person, phone) in advance of and following the assessment
- ensure that consultations are staffed and finalized with a faculty member in a timely manner

Essential Shift and Schedule Functions

Settings

- complete assigned shifts in settings deemed essential by the program, such as inpatient units, NICU, PICU, emergency department, and outpatient clinics

Shift length and timing

The Resident must:

- complete clinical shifts of all lengths deemed essential by the program, which may include daytime, swing, nights, weekends, and holidays
 - *Shifts must not exceed ACGME limits of up to 28 hours per shift, and up to 80 hours per week averaged over a 4 week period*
- participate in home call and back up call coverage – including nocturnal, holiday and weekend coverage.

- appropriately utilize designated breaks and rest periods in a manner that supports personal well-being, patient safety, continuity of patient care, and effective functioning of the resident care team.

Call Responsibilities

The Resident must:

- complete assigned shifts of home call, as deemed essential by the program
- remain within the prescribed geographic range while on call or eligible for coverage
- Must participate equitably in call schedule.
- Must have stamina to maintain health under stress and long work hours.

Essential Cognitive Functions

- Must have the intellectual ability to learn the data required by the ACGME for certification.
- Must be able to complete written and oral examinations in a reasonable time period.
- Must be able to pass certification tests such as the Boards, as evidenced by prior test results, in the standard time.
- Must be able to accept and learn from constructive criticism.
- Must be able and willing to teach others.
- Must be able to incorporate feedback to better professional skills.

Essential Communication Functions

(including verbal and written)

- Must be able to accurately assimilate and interpret signs, symptoms, and information conveyed through verbal and nonverbal communication within a timeframe appropriate to the patient's clinical condition.
- Must be able to follow instructions and communicate effectively, efficiently, and accurately in English during both routine and high-stress clinical situations, including in-person, telecommunication and written interactions.
- Must be able to use a translator both in person and via telecommunication
- Must treat patients, staff, faculty, and colleagues with respect, demonstrating cultural humility, sensitivity, professionalism, and trauma-informed communication in all interactions.

Essential Physical Functions

- Must have the ability to use both hands with appropriate hand-eye coordination to safely perform the core surgical procedures in Otolaryngology. These skills must be observable.
- Must have the physical ability to perform the tasks required by the ACGME for certification.

- Must have the ability to physically respond rapidly to evaluate and control emergency situations that require rapid mobility of the arms, legs, and body in a full sensory motor capacity.
- Must have the ability to perform above functions and demonstrate stamina under stressful emotional and physical conditions while not adversely impacting other members of the resident or medical team.
- Must have the ability to tie surgical knots and appropriately handle surgical instruments.
- Must have visual and spatial capabilities for endoscopic and open surgical procedures.
- Residents must not have current drug dependency problem.

ETHICS

Our department has a strong commitment to developing in our residents a firm foundation in medical ethics. Ethics is a distinct discipline with a set of terms, concepts, and theories. Residents' knowledge and practice of medical ethics will be assessed as follows:

- Residents must be familiar with basic ethical terms such as autonomy, justice, and non-maleficence.
- Must attempt to recognize and resolve clinically applicable ethical dilemmas through interaction with fellow residents, faculty, and all formally constituted ethics committees of their clinical practice sites.
- Must read and be familiar with the AMA Code of Ethics (<https://code-medical-ethics.ama-assn.org/>)
- Must read and be familiar with the AAO-HNSF Code of Ethics (<https://www.entnet.org/about-us/leadership-governance/ethics/code-of-ethics/>)

Statement Of Nondiscrimination

The University of Washington prohibits discrimination, harassment and sexual misconduct in any education program or activity that it operates. Individuals may report concerns, make complaints, or direct inquiries to the Civil Rights Compliance Office. [View the Statement of Nondiscrimination.](#)

Key Principles for ADA-Compliant Language:

- Focus on results, not methods
- Essential function is a completed task, not how that task is completed

More Inclusive Term	Example of Physical Demand
Move/traverse	Walk, run
Ascend/descend	Climb
Transport	Carry
Relocate	Lift

More Inclusive Term	Example of Physical Demand
Stationary position	Sit, stand
Position, detect, operate	Feel, handle
Maneuver	Pull, push
Attain	Reach
Retrieve from ground level	Squat
Repetitive movement	Performing a task repeatedly
Communicate	Speak, talk, hear
Communicate in written language	Write
Input data	Use keyboard
Position self (to move)	Crouching, stooping, crawling
Work atop	Balance
Determine, identify, assess, recognize	See
Assess	Hear
Review	Read
Adhere	Remember
Apply	Think

This document reflects requirements, established practices, policies, procedures, and resources as of the date of publication; however, parts of this document may be updated from time to time in accordance with changes in the law and applicable requirements, established practices, policies, procedures, and resources. Continued participation by a resident in the program will demonstrate agreement by the resident to adhere to the updates. The program will communicate such changes at the yearly resident orientation.