

SPECIALITY TRAINING PROGRAM FOR OTORHINOLARYNGOLOGY

Title of the residency study program	State code
Otorhinolaryngology	73307B179

Academic awarding institution	Language
Lithuanian University of Health Sciences, Medical Academy, Otorhinolaryngology Department, A. Mickevičiaus g. 2, LT-44307 Kaunas, Lithuania	Lithuanian

Kind of studies	Cycle of studies	Level of qualification according to Lithuanian Qualification Structure (LKS)
University studies	Non-degree studies	7 th level

Mode of the studies and length in years	Volume of the program in ECTS credits	Total amount of student work	Formal teaching and practice hours	Independent self-direct learning hours
Full-time studies, 3 years	198	5280	4610	670

Area of studies	Main field of the study program	Parallel study program (if available)
Biomedical sciences	Medicine	-

Professional qualification awarded
Otorhinolaryngologist

Study program director	Director's contact information
Professor, habil. dr. Virgilijus Ulozas (residency program coordinator associate professor dr. Saulius Vaitkus)	Office tel.: (+370 37) 326862 E-mail: virgilijus.ulozas@kmuk.lt

Institution of accreditation	Accreditation until
Centre for Quality Assessment in Higher Education	Year 2014

Aim of the residency study program
The main otorhinolaryngology residency program goal is to prepare a specialist, having otorhinolaryngologist professional qualification, able to apply acquired knowledge, skills and abilities in practical job, correspondent to Lithuanian Medicine Norm "Otorhinolaryngologist. Rights, duties, competency, responsibility", having an interest in scientific innovations, and reaching a higher scientific qualification studies.

Program profile		
Disciplines/subject areas	Orientation of the program	Distinctive features of the residency study program
Program consists of obligatory and optional cycles including theory, practice and self-sustaining job. Obligatory cycles are oriented to otorhinolaryngologist knowledge and skills dredging in the field of otorhinolaryngology. Residents acquire theoretical and practical knowledge in: Otorhinolaryngological ambulatory assistance; Emergency otorhinolaryngology; Ambulatory assistance in head and neck oncology; Ambulatory assistance in children's otorhinolaryngology; Pharyngology;	Applied orientation program, orientated to practical activity and developing abilities for scientific research work, providing otorhinolaryngologist professional qualification.	The program is designed according to the legislation of the Republic of Lithuania, the European Parliament and Council Directive 2005/36/EC; EFNS/EBN recommendations for otorhinolaryngologist preparation: <ul style="list-style-type: none"> • Pontes C. Recommended core curriculum for a specialist training in otorhinolaryngology. • Consensus document of the EFNS/EBN: Final Draft Paris September. Eur J Neurol 2005;12:743-6; • European Union of Medical

<p>Rhinology; Otology; Laryngology; Children's otorhinolaryngology Head and neck oncology cycles. Optional cycles: Contemporary voice research and it's practical applications; Endonasal microsurgery; Allergology – immunology; Plastic and reconstructive surgery; Neurosurgery; Maxillofacial surgery; Head and neck radiology.</p>		<p>Specialists. OTO-RHINO-LARYNGOLOGY – HEAD AND NECK SURGERY Training programme. UEMS 2009.</p> <p>The program is based on the theoretical study and practical work integration from the first study year. Practical skills and theoretical course are learned and absorbed by helping LUHS professors - residency database specialists. The Republican Hospital of Kaunas , Republican Šiauliai Hospital and Republican Vilnius University Hospital are accredited for the individual cycles of otorhinolaryngology residency program.</p> <p>The main otorhinolaryngology residency study base - Hospital of Lithuanian University of Health Sciences Kaunas Clinics has all necessary departments and levels of laboratory services in one place required for otorhinolaryngology residency studies. LUHS Otorhinolaryngology department operates out patient department and clinical department with the operating rooms, specialized phoniatory and otoneurology offices; radiological, laboratory medicine, pathological anatomy, and intensive care services are available round the clock. Residency base is selected in accordance with LUHS Medical residency regulation. Scientific work skills are schooled in scientific work at LUHS Otorhinolaryngology department. There is an opportunity provided to accomplish part of the residency (up to one year) in accredited clinics abroad (for separate residency cycles studies).</p>
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Admission requirements	Recognition of previous learning
<p>Master degree in medicine and medical doctor professional qualification are obligatory. Admission by the way of general competition. Competitive score structure of is given in the conditions for entrance to the LUHS residency programs. The main components of competitive score is the average assessment of all subjects, studied during integral studies, final exam assessment, clinical medicine practice assessment, student's scientific activities assessment (appointed by Student Science Association (SMD)), motivational interview assessment. Motivational interview takes place according to the schedule set in advance. Motivation Committee is composed of academic otorhinolaryngology staff and residents representatives. Scientific activities in the field of otorhinolaryngology as well as qualities of human being are evaluated. Competition is public and takes place separately to every residential study program in two stages (main and additional). Second or additional stage can be organised if after the main admission free places are still available.</p>	<p>Results of previous studies are accepted individually, taking into account the developed competencies and goals of program that correspond to „Otorhinolaryngology“ residency study program, with the guidance of procedures set by LUHS Senate.</p>

Access to further education
<p>PhD degree-awarding third cycle degree studies (up to 10-15% of specialists with otorhinolaryngologist professional qualification choose).</p>

Access to professional activities (employability)
<p>Doctor with otorhinolaryngology speciality can do practical job in state as well as in private health care institutions,</p>

which have a licence to run otorhinlaryngology profile services, according to the licence obtained in Lithuania or abroad, can seek a scientific degree in doctoral studies, do pedagogical job. Otorhinolaryngologist licence is given by the State Health Care Accreditation Agency under the Ministry of Health of the Republic of Lithuania, after submitting diploma of completed medical studies program, internship certificate and certificate of completed residency.

Learning and teaching approaches	Methods of assessment (<i>of learning achievements</i>)
<p>Teaching and learning methods include: lectures, seminars, consultations, group discussions with residents, work in the operating room, logbook filling, clinical cases preparation and presentation in medical conferences, educational videos review. Activities of independent self-directed learning may include reading, maintenance of personal portfolio (log-book, self-assessment, reflective learning, personal development plan), research projects, reading journals. Personal development plan and execution.</p> <p>Abilities and skills are acquired in examining and treating otorhinolaryngological patients at Otorhinolaryngology and other hospital departments and outpatient clinics; participating in daily and weekly clinics, department and sectors heads patient visits and discussions, mentoring patients under the resident manager control, night shifts at residency base units in accordance under the residency manager or the designated licensed physician control.</p>	<p>Participation in lectures, activity in seminars, consultations and group discussions are noted in logbook. At least 85 % of the theoretical sessions must be taken.</p> <p>Knowledge is assessed at the end of each cycle. Theoretical knowledge assesment at the end of the cycle consists of two parts: oral and writing. Writing test consists of open and closed-ended questions/tasks and clinical situations.</p> <p>Practical knowledge assesment at the end of the cycle: patient's self- examination, syndromological diagnosis formulation, making further research - a treatment plan and diagnostic/therapeutic procedures/operations performance of the relevant competence level.</p> <p>The final cycle knowledge assesment consists of theoretical knowledge and practical skills assessments average.</p> <p>Resident performance evaluation of the investigation - treatment plan and task execution is confirmed by stamp in Residency logbook .</p> <p>Individual clinical cases analysis and presentation at the end of the cycle approved by stamp in Residency logbook.</p> <p>Residency Database staff (doctors and junior medical staff, other employees) reviews (anonymous questionnaire-based) on the activities of a resident work on his/her-self at end of the cycle . Reviews are additionally recorded in the Residency logbook.</p> <p>Practical skills and abilities gained during the cycle are assessed by mark in ten-point grading system, and recorded in the Residency logbook and resident credits booklet .</p> <p>Literature review and clinical cases interpretation, with the literature review, preparation and presentation at the end of the cycle. Presentations are recorded in the Residency logbook and approved by stamp once every six months.</p> <p>During the first year of residency resident begins to collect data for the final residency study, which is presented at the end of the third year of residency. Final residency study (FRS) must be original study, corresponding to the requirements for research papers . Residency comitee offers and approves FRS topic, delivery time and work schedule in the first year of residency. Appointed supervisor advises resident on all FRS issues. If necessary, the resident may contact the residency coordinator, the head of the department or other department professor, having an academic degree for advise. FRS must be presented in correct Lithuanian language . Coverage - up to 40 000 characters. FRS must be presented in printed work. If FRS is not published in the scientific journal, it will be presented at the department conference, at the end of the third study year. The exact date is set with a resident manager, residency coordinator and the head of the department. Residency program concludes with the practical and theoretical examinations.</p> <p>The practical test carried out on 1 - 3 weeks before the</p>

	<p>theory exam: the diagnostic and therapeutic procedures are performed on the patient, and certain operations or its stages are performed at the operating room.</p> <p>The theoretical test must be conducted in written form, all examinees in response to no more than ten of the same questions, randomly selected during the exam.</p> <p>Both exams are assessed in 10 points under the criteria named in the residency program. The final exam score is the average of two parts of the exam.</p>
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General competencies (knowledge, abilities, values and attitudes)		Outcomes (results) of residency study program	
1.	Professional attributes	1.1	Be honest and honourable with patients, follow medicine ethics norms and requirements for good medicine practice, be critical toward others and himself/herself, be able to feel compassion for the patient, be creative and initiative.
2.	Professional activity	2.1	Have ability to evaluate the boundaries of his/her competencies in otorhinolaryngology, to act independently, if there is a need, seek for a help, solve problems and take decisions, communicate and work in a team with specialists from other fields, be able to organise work and to plan time properly.
3.	Doctor as an expert	3.1	Be able to choose and to apply the most optimal methods of otorhinolaryngology, constantly seek perfection in otorhinolaryngology while continuing lifelong learning, be able to apply theoretical knowledge in practice, to pass own knowledge and abilities to colleges that have less practice, abilities to plan and to do scientific research.

Subject-specific competences (knowledge, abilities, values and attitudes)		Aims (results) of residency study program	
4.	Patient and/or relatives consultation	4.1	To make an otorhinolaryngology patient's examination plan, interpret research results, evaluate patient's physical condition and treatment risk, explain to the patient treatment plan and method and possible complications.
		4.2	Be able to explain to the patient and/or his relatives a goal and a meaning for the actions taken to the patient, to discuss further actions, to reassure and to motivate patient and/or his relatives, to understand legal aspects regarding informing patient and/or his relatives.
5.	Patient's diagnostics and formation of treatment plan	5.1	To recognise conditions that have impact on otorhinolaryngology, to make a plan for necessary diagnostic tests, be able to interpret test results, to perform primary (complaints, anamnesis, total examination) and secondary (interpreting tests' results and planning, performing and interpreting complementary tests' results) differential diagnostics on patients symptoms reasons; to make a relevant treatment plan for an individual patient, to discuss it with a patient and/or his relatives, be able to evaluate possible pharmaceutical mutual interactions and possible side effects as well as evaluate affectivity of prescribed treatment; to inform properly and objectively about possible complications, about treatment alternatives.
		5.2	Ability to communicate with patient and his/her relatives in case of critical condition; to gain confidence and written agreement from informed person, communicate in writing (filling up medical documents), communicate with aggressive patient.
6.	Medical emergencies and resuscitation	6.1	Be able to recognise conditions that need emergency medical treatment, provide first aid, provide intensive care according to the valid recommendations, provide aid in case of trauma, have abilities to treat conditions that require emergency assistance.
7.	Executing procedures, evaluation and interpretation of results	7.1	Be able to perform life saving procedures according to valid norms, according to his/her competencies perform and evaluate data of invasive and non-invasive tests, hereunder to choose the most optimal possible patient treatment.
8.	Health promotion, engagement in population health issues and effective work in health care system	8.1	Be able to assess risk for patient's health and apply proper and rational remedies to lower the risk, apply infection control precautions, asses professional activities risk for his/her own health and take precautions to avoid this risk.
		8.2	To participate in health programs on the level of population and of an individual.