

## POLICY ON EVALUATION OF RESIDENTS 2015

Resident performance will be assessed throughout his/her tenure in the training program to ensure appropriate development of skills and competencies. Methods used will provide assessment of competencies in patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice. Evaluation of resident performance on each rotation will address each of these areas as appropriate while addressing the specific learning objectives of the rotations.

### Formative Assessment Tools:

#### Data to be considered in the resident evaluations include:

- Rotation based evaluations of the resident
- In-service scores
- Procedures logs
- Education conference attendance records
- Scholarly activity
- Reviews by faculty/chief resident/residents
- Formal resident self-assessment
- Nursing assessment data
- Patient satisfaction data

### Rotation Evaluations:

Residents will be evaluated by appropriate faculty members during and at the end of each assigned rotation. These evaluations will be based on the objectives for that assignment and appropriate to the PGY level of the resident. It is recommended that the supervising attending review the resident's evaluations with the resident at the conclusion of the rotation. When this is not possible, the resident is encouraged to review the evaluation. When possible, evaluation data will be gained from a variety of sources including but not limited to peers, other health care providers, and/or patients. Completed evaluations will be forwarded to the program director to be used in the semi-annual evaluation meeting.

#### A Clinical Practice of EVMS Medical Group

##### OTOLOGY/NEUROTOLOGY

Barry Strasnick, MD, FACS  
Professor and Chairman  
Stephanie Moody Antonio, MD, FACS  
Associate Professor

##### LARYNGOLOGY

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Benjamin Rubinstein, MD  
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##### PEDIATRIC OTOLARYNGOLOGY

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David Darrow, MD, DDS, FAAP  
Professor

##### Cristina Baldassari, MD, FAAP, FACS

Associate Professor  
Thomas Gallagher, DO, FAAP  
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##### HEAD AND NECK CANCER

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##### Matthew Bak, MD, FACS

Assistant Professor  
Jonathan Mark, MD, FACS  
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##### Pam Kennedy, FNP-C

Nurse Practitioner  
VASCULAR ANOMALIES/  
HEMANGIOMAS  
David Darrow, MD, DDS, FAAP  
Director

##### RHINOLOGY/ALLERGY

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Professor

##### Kent Lam, MD

Assistant Professor

##### FACIAL PLASTIC AND

##### RECONSTRUCTIVE SURGERY

Eric Dobratz, MD  
Associate Professor  
William Dougherty, MD  
Assistant Professor

##### SKULL BASE SURGERY

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##### Stephanie Moody Antonio, MD, FACS

Joseph Han, MD, FARS, FACS

##### Kent Lam, MD

##### GENERAL OTOLARYNGOLOGY

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##### COCHLEAR IMPLANT PROGRAM

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##### Barry Strasnick, MD, FACS

##### HEARING AND BALANCE CENTER

Barry Strasnick, MD, FACS

##### Director

Stephanie Moody Antonio, MD, FACS

Nathan Michalak, AUD, CCC-A

#### LOCATIONS:

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**In-Service Examination:**

Residents will take the annual American Board of Otolaryngology Training Examination. This data will be used to monitor the acquisition of medical knowledge acquired. This data will be used to determine how the resident is progressing throughout the PGY years but will not be used for promotional purposes. The Otolaryngology Training Exam (OTE) is intended to be used as an educational instrument to assist individuals in evaluating their educational progress as compared with others of the same level of experience or training.

**Procedure Logs:**

Residents will be required to keep a log of their procedures and this log will be monitored by the program director or his/her designee. This information will be used in the semi-annual resident review. The program utilizes the ACGME procedure log system. Residents should stay up to date with their logs and should have current date for review every month.

**Other:**

Faculty members also comment verbally in quarterly evaluations on resident performance. Research summaries are reviewed with our Research Director and with ongoing interaction with the resident's research merits.

**Performance Feedback:**

Regular and timely performance feedback to residents will be provided through a semi-annual evaluation with the individual resident physicians by the program director and a written report will be provided to the resident physician. The resident physician and the program director (or his/her designee) will both sign the document confirming the information has been reviewed. Signature does not confer agreement by the resident physician. A copy of the document will be placed in the resident's permanent file, which the resident has the right to review. The program director is responsible for reviewing the evaluations in a timely fashion to ensure identification of residents who are experiencing difficulties in the program.

The Residency Education Committee will monitor resident progress through reports provided by the program director. The Residency Education Committee and the Program Director will also monitor the stress and fatigue levels of the residents to ensure stress and fatigue are not impeding resident progress or patient care. (See the policy on Monitoring Well-being and Stress of Residents).

**Clinical Competency Committee:**

A semi-annual meeting is held with one faculty representative from each subspecialty within Otolaryngology. These meetings are held to perform milestone evaluations and technical skills assessments. This data is used as benchmarks to determine eligibility for promotion. (See Policy on Promotion)