

**Bed-Side Technical Procedural Competence  
Otolaryngology Residency Program  
2019**

Barry Strasnick, MD, FACS  
Professor and Chairman

For a subset of bedside technical procedures, the department requires all trainees to demonstrate competence and safe performance prior to being permitted to perform the procedure without direct supervision. The performance of these technical procedures are observed, evaluated, and documented by supervising physicians.

All trainees must perform, under appropriate supervision, the requisite number of invasive procedures to demonstrate competency. The Competency Assessment Process used by this program to determine competency to perform without direct supervision is as follows: **To perform a procedure independently, a resident must perform the indicated minimum number of procedures under the supervision of a qualified resident or attending physician. An attending physician or Chief Resident must supervise at least one of the 3 procedures. Prior to graduation, all residents are expected to have successfully performed a core group of bedside procedures.**

**Procedural Documentation to Hospital Staff:**

It is understood that resident physicians require procedural supervision of any bedside or operative procedure **until there is documentation the residents has obtained competency in that procedure.** The following process is used for documentation purposes and is available to the nursing staff on a 24/7 basis. **The residency program uses the logger portion of New Innovations to document proficiency in these bedside procedures. New Innovations will maintain a log of procedures for which the resident is able to perform with and without direct supervision. Hospital staff may verify the resident's status by contacting the Chief Resident or Residency Coordinator if necessary.**

Residents may not administer conscious sedation without direct supervision of an attending physician that is credentialed by the Hospital for that procedure.

The set of procedures and associated number of required successful and supervised procedures to document acquisition of competence are provided below. If there is an expectation of achievement at a certain PGY level, that is so noted. Procedures not listed below require faculty supervision.

**A Clinical Practice of EVMS Medical Group**

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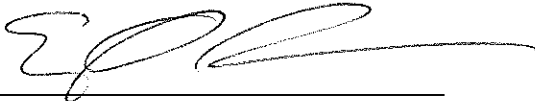
**LOCATIONS:**

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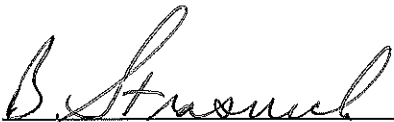
Procedure	Minimum number of Supervised Successfully Performed Procedures for Sign Off	PGY Level by which skill should be acquired
Flexible nasopharyngofaryngoscopy	5	2
Management of epistaxis	3	2
Maxillary sinus aspiration and lavage or middle meatus culture	2	3
Incision and drainage of peritonsillar and dental abscesses	2	2
Needle aspiration of head & Neck abscesses and masses	3	2
Removal of foreign body of the ear or nose	3	3
Ambulatory placement of tympanostomy tubes	2	4
Tracheostomy Tube Change	3	3



**Eric Dobratz, M.D.**  
 Director Residency Training  
 Department of Otolaryngology-Head and Neck Surgery

4/30/19

Date



**Barry Strasnick, M.D.**  
 Professor and Chairman  
 Department of Otolaryngology-Head and Neck Surgery

5/2/19

Date