

UBC/VGH Rhinology, Endoscopic Sinus and Skull Base Surgery Fellowship

Fellowship Position Description

Vancouver General Hospital
UBC Division of Otolaryngology

Fellowship Director: Dr Arif Janjua
Number of positions: One annually

Eligibility:

The eligible candidate must have sufficient knowledge and technical skills to manage Otolaryngology patients with minimal supervision. The fellowship position requires the applicant to have completed residency training in Otolaryngology and to have successfully passed (or at minimum, be eligible to write) licensing examinations in their country of origin. The fellowship is open to Canadian Otolaryngologists, as well as non-Canadian trained Otolaryngologists who are able to obtain an educational Visa for Canada and an educational medical license for the province of British Columbia.

Objectives And Training

Clinical

The VGH Rhinology, Endoscopic Sinus and Skull Base Surgery Fellowship Program at the University of British Columbia (UBC) offers a one-year clinical experience to provide comprehensive medical and surgical care of patients with all types of Rhinologic, Sino-nasal and Skull Base disorders.

The Otolaryngology - Head and Neck Surgery unit at the Vancouver General Hospital (VGH) receives tertiary referrals for and manages a large array of nasal, sinus and skull base pathologies. Dr Janjua performs a significant volume of nasal, sinus and skull base surgeries annually. The skull base procedures are done in conjunction with the Neurosurgeons at VGH.

A wide range of endoscopic and selected open procedures are performed for the management of chronic rhinosinusitis, benign & malignant sino-nasal tumours, anterior cranial base pathologies (i.e. CSF leak repairs, meningoencephaloceles), as well as a variety of skull base tumours. The majority of the endoscopic skull base cases are Pittsburgh classification level 1-3 in difficulty, with some level 4 cases. The fellow will also have the opportunity for exposure to endoscopic-assisted and/or open skull base resections and reconstructions. Further opportunities exist to gain exposure to community-based Rhinology practice, if desired.

The fellow will be actively involved in: the supervision and teaching of residents within the UBC Division of Otolaryngology, medical students rotating in Otolaryngology, the management of Rhinology and Skull

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Base Surgery in-patients on the hospital wards (in conjunction with Otolaryngology residents) and coverage of emergency room and in-patient consultations for patients with Rhinology disorders.

The residents have priority on surgical cases that are not designated as subspecialty in nature. The fellow has priority on surgical cases that are beyond the scope of the general Otolaryngologist. Owing to Dr. Janjua's operative volume, the fellow is expected to have significant opportunity for hands-on surgical exposure. The level of practical involvement will be commensurate with initial level of training and skill progression during fellowship training. The impact on and by resident trainees is intended to be additive to the training experience, via the creation of a positive environment centred on teaching and learning for both parties. Fellow supervision of residents is expected, and mutually beneficial, as it is integral to fulfilling the training goals for a future surgical educator.

Case Mix:

- Approximately 250-300 endoscopic sino-nasal cases per year, including:
 - Approximately 200 image-guided Endoscopic Sinus Surgeries,
 - Approximately 30-40 sino-nasal tumour resections,
 - Approximately 50-60 skull base approaches,
 - Approximately 20 expanded endoscopic approaches to the skull base.
- As desired, the fellow may also have exposure to: i) Major head and neck oncology cases, including open skull base resections and reconstructions, ii) A community rhinology practice.

Research

The fellow is expected to play an active part in clinical rhinology research during their time at UBC. Part of their training will include improvement in skills related to critical appraisal of the literature, research design, manuscript completion and application of evidence-based decision-making to patient management decisions.

Basic science research is additionally possible and encouraged. The program is affiliated with a basic science laboratory conducting rhinology-related cytokine research. Numerous clinical projects are on-going. Fellows will be expected to develop a research plan within the first 2 months of their fellowship. Minimally, it is expected that three research projects will be completed and submitted for publication. A second dedicated research year is possible as part of the fellowship – arrangements may be made on a case by case basis.

Academic Activity

Clinical fellows are expected to participate fully in the academic activity at VGH, SPH and UBC. The fellows are expected to give one Grand Rounds presentation during the year to the entire UBC Division of Otolaryngology - Head and Neck Surgery. Additionally, they will present at City-wide Rhinology rounds, which occur once per month. Fellows may be involved in formal Rhinology lectures held in conjunction with the UBC Resident Educational Curriculum, and are also expected to give informal teaching seminars for residents. Fellows are expected to present a research topic at the UBC

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Otolaryngology Division's P.J. Doyle Annual Research Day and submit research for presentation at the Canadian National Meeting and/or an International Meetings (i.e. ARS/ERS/NASBS). Any publications arising out of their fellowship will specifically acknowledge their position as a "Fellow, Division of Otolaryngology - Head and Neck Surgery at the University of British Columbia".

Mentors

- Dr Arif Janjua (Principal supervisor)
- Dr. Peter Gooderham (Neurosurgery)

Potential additional fellowship experience may be garnered with the following clinicians:

- Dr. Andrew Thamboo
- Dr. Eitan Prisman
- Dr. Don Anderson
- Dr. Scott Durham

Locations

- Vancouver General Hospital (VGH) – Ambulatory clinic, hospital inpatient, on-call and Operative
- St Paul's Hospital (SPH) - Hospital inpatient, on-call and Operative
- University of British Columbia Hospital (UBCH) – Operative and on-call
- False Creek Health Care Centre (FCHCC) - Operative

Objectives

At the completion of the fellowship, the fellow will be expected to have gained sufficient knowledge and skills to function as an independent tertiary-referral Rhinologist. In general, this includes the acquisition of appropriate critical diagnostic and operative skills in order to effectively manage rhinology patients from the initial clinic evaluation to subsequent operative intervention and appropriate follow up care. Fellows will gain training and experience in the diagnosis and management of common and rare nasal and sinus conditions, gain experience in performing basic and advanced endoscopic sinus surgery (including a very significant exposure to Frontal Sinus Surgery) and basic endoscopic skull base surgery.

Fellows are expected to contribute to the rhinology literature during their fellowship by undertaking and completing a minimum of 3 clinical research projects published in an international peer-reviewed journal and/or presented at a national or international Otolaryngology meeting. Additionally, they will participate in on-going surgical education within the division, and are expected to gain critical appraisal skills and be able to critique and comment on peer-reviewed rhinology literature.

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Course Structure

The course structure will vary from week to week, depending on Dr Janjua's operating room allocations (which are set in three month blocks). Generally, the fellowship will include:

- Approximately 2-3 days per week in the operating room, assisting Dr Janjua
- 1-2 days per week with Dr Janjua in the VGH ENT ambulatory clinic
- Approximately 1 independent 'fellow clinic' day in the VGH ENT clinic
- +/- 0.5 research days per week
- During the academic year, participation in:
 - Monthly UBC Rhinology rounds
 - Rhinology Journal Club
 - Weekly Otolaryngology Grand Rounds, including presenting one session during the academic year
 - Bi-weekly research meetings

Financial Arrangements for Fellows

No formal funding exists for the fellowship position. If applicants do not have funding from another source, they are still encouraged to apply. Some ad hoc funding (i.e. through on-call stipends and/or remuneration for educational clinic supervision) has been successfully obtained for previous fellows. If available, this 'soft' support should not be expected to exceed \$2000 CDN per month and would require 0.5 days of additional educational clinic supervision, on top of the baseline fellowship workload.

Duration of fellowship:

The duration of the fellowship is for a minimum of 1 year + 2 weeks with a usual start date of September 1st. This may be adjusted depending on situation. It is important to allow sufficient time to obtain the appropriate medical registration prior to that time. The expectation is that there is a short overlap with the outgoing fellow to smooth transition – This routinely occurs in the first 2 weeks of September.

Application Process

Applications should be submitted to Dr Janjua, and include the following:

- Updated curriculum vitae
- Three references (with their contact information) – please arrange for letters to be sent directly to Dr. Janjua (mailing address and email below)
- A copy of any recent and/or relevant publications
- A personal letter outlining the candidates interest in the fellowship, as well as future plans upon completion of the fellowship

Rolling interviews will be conducted throughout the year (including interviews by web teleconference, where required). Successful candidate may be informed at any point throughout the year. Routinely, decisions about the fellowship position are made at least one year in advance (i.e. September 2019 for a

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September 2020 start date). This is to allow for adequate time for BC licensure and application to external funding sources.

Applicants are encouraged to visit Vancouver and tour the facilities at any time during the year. Completion of an elective rotation is also encouraged. Visiting physicians must apply to the BC College of Physicians and Surgeons (www.cpsbc.ca) for privileges in order to observe/assist Dr. Janjua in the ambulatory clinics and operating rooms (in any capacity). For those physicians who hold medical degrees from a country in which the first and native language (as well as the language of instruction and patient contact) is not English, completion of the TOEFL examination is mandatory for elective/observership licensing. The licensing process takes at least 6-8 weeks. Although not mandatory, in person visits provide an improved opportunity for discussion about the applicant's interest and suitability for the fellowship position.

To submit your application or for further information, please contact:

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