RESIDENT ROTATION: CYTOPATHOLOGY – UPMC-Shadyside

Goals and Objectives:

The overall goal of the Cytopathology rotation is to help the resident to build a strong base in the discipline of cytopathology and get them acquainted with most technical and diagnostic aspects of cytopathology. The rotation is designed to build confidence by a gradual increase in responsibility.

1. Patient Care

   A. The resident should demonstrate the ability to examine and classify non-GYN cytology cases including FNA biopsies and exfoliative non-gynecologic cytopathology specimens from various body sites.

   B. The resident should be able to communicate the proper technique and complications of the FNA procedure to clinicians in a concise manner.

   C. The resident should have knowledge of on-site adequacy evaluation, as well as, the importance of rendering a preliminary diagnosis, of specimens obtained through FNA from clinicians, radiologists, and pathologists.

2. Medical Knowledge

   A. The resident should develop an analytical approach to clinical conditions and their cytologic manifestations.

   B. The resident should have knowledge about ancillary techniques and their application in cytology in various organs and cytological specimens.

   C. The resident will learn how to distinguish neoplasia from benign and reactive conditions of various organs, and be aware of the pitfalls and differential diagnoses in cytological diagnoses.

   D. The resident will prepare a slide-based conference to present about 5 cases from the rotation and present it to the attending, cytotechnologists, and other trainees during the final week of their rotation.

3. Practice-based Learning and Improvement

   A. The resident will preview and sign out select cases with the attending pathologist. The cases will be assigned to the resident with an increasing number and increasing complexity over time. It is the duty of the resident to bring the cases to the attending for sign out, once they have completed their review of the cases.
b. The resident should understand the basic technique of cytology specimen preparation and is expected to provide hands on assistance in the preparation of specimens at the time of on-site evaluation, whenever possible and whenever asked by the cytotechnologists, similar to the resident’s participation in frozen section preparation in surgical pathology.

d. The resident will attend a practical tutorial on how to perform an FNA and how to make aspirate smears.

4. Interpersonal and Communication Skills

A. The resident should be able to communicate effectively with clinicians and other health care personnel.

B. The resident should be comfortable discussing cases with the pathology faculty and to initiate surgical pathology-cytology correlation as needed.

C. The resident will interact with clinicians, medical technologists, nurses, cytotechnologists, other trainees, and other personnel during their rotation.

5. Professionalism

A. The resident must follow the highest standards of professionalism and ethics.

B. The resident must show respect for patients and members of the health care team. The resident is expected to dress appropriately for clinical service and patient care. This includes wearing a white coat to the FNA clinic and acting in a professional and appropriate manner.

C. The resident must adhere to patient confidentiality regulations.

D. The resident is expected to perform with diligence, honesty, and timeliness.

6. Systems-Based Practice

A. The resident must become familiar with the CoPath and learn how to use the system to access reports and clinical history.

b. The resident must understand the role of cytopathology in the practice of medicine.

c. The resident will understand the meaning of communication with ancillary personnel, physicians and regulatory agencies.
**Supervision and Evaluation:**

During the rotation, the resident will function with close supervision and instruction by the faculty assigned during those weeks. A formal meeting will occur on the first and last day of the rotation to orient the resident, and provide information about the goals, objectives, and expectations. The resident will sign the orientation paperwork to acknowledge that he/she understands the expectations of the rotation.

**Evaluation:**

Residents will be evaluated using the six core competencies established by the Accreditation Council for Graduate Medical Education (ACGME). Competency in each area will be assessed and documented using the following guidelines and with the use of a formal evaluation form completed at the conclusion of the rotation and placed on file in the resident’s chart.

1. **Patient Care:** Competency in this area will be based on the direct observation of the resident during patient care (i.e. in the fine-needle aspiration biopsy clinic, in the operating room and procedure rooms for on-site evaluations).

2. **Medical Knowledge:** Competency in this area will be based on direct observation and interaction with the resident at daily sign out of cytopathology cases that they have previewed and formed differential diagnoses. The knowledge will also be assessed by their final presentation on the rotation and performance on the post-rotation exam questions (provided on DVD).

3. **Practice Based Learning and Improvement:** Competency in this area will be based on the direct observation of the resident when performing fine-needle aspiration biopsies and when preparing cytology smears. The resident will learn how to do a fine-needle aspiration biopsy in a practical session and through observation, prior to performing an FNA with direct supervision. The resident will also be expected to investigate and assimilate evidence from the literature, which can be applied to the clinical cases. In addition, there will be graduated responsibility as the resident progresses through the rotation.

4. **Systems Based Practice:** Competency in this area will be based on the direct observation of the resident’s use of the available health care resources in the management of patient cases, as well as their teamwork within the system.

5. **Professionalism:** Competency in this area will be based on the direct observation of the resident's responsibility in carrying out their professional duties, including, but not limited to, their adherence to ethical principles and their interactions with others with an emphasis on integrity, respect, and compassion.
6. **Interpersonal Skills and Communication:** Competency in this area will be based on the direct observation of the resident during communications with other residents, residents, with attending physicians/surgeons, with non-physician clinical staff, and with patients and their families. It is essential for the resident to work effectively as a member of a team.