

**SUNNYBROOK BREAST & MELANOMA
ROTATION SPECIFIC COMPETENCIES/OBJECTIVES
INTERMEDIATE LEVEL (PGY3 RESIDENT)**

1. Medical Expert/Knowledge/Technical Skills

By the end of the rotation the resident will be able to:

1. Demonstrate an understanding of relevant breast, axilla, and groin anatomy and physiology.
2. Demonstrate an approach to the workup and management of benign and malignant breast and skin diseases.
3. Demonstrate an ability to carry out a sentinel lymph node biopsy, lumpectomy, simple mastectomy, and the indications/contraindications for each in the context of a breast lesion.
4. Demonstrate an approach to the workup and management of a pigmented lesion.
5. Demonstrates the ability to carry out a punch biopsy, incisional biopsy, excisional biopsy, wide local excision, and sentinel lymph node biopsy and the indications/contraindications of each in the management of a pigmented lesion.
6. Understand the indications and contraindications for axillary lymph node dissection and groin dissection in breast cancer and melanoma patients, and demonstrate the ability to perform the procedures with assistance.
7. Demonstrate an approach to the management of lymphedema.
8. Demonstrate appropriate preoperative planning and preparation, including patient marking, imaging display and completion of the peri-operative checklist.
9. Demonstrate the ability to recognize post-operative complications and demonstrate an approach to their management.

2. Communicator

By the end of the rotation the resident will be able to:

1. Deliver bad news in a compassionate and sensitive manner that takes into account the patient's unique psychological and social needs.
2. Obtain informed consent, including an effective explanation of the rationale for the recommended surgical approach and its possible complications.
3. Exhibit a sensitive and culturally appropriate style of communicating with patients and their families.
4. Explain and discuss all aspects of a patient's treatment and care plan in lay terms.
5. Effectively present cases at rounds.

3. Collaborator

By the end of the rotation the resident will be able to:

1. Effectively and appropriately consult other physicians and health care professionals.
2. Contribute effectively to interdisciplinary team activities, including patient review working rounds and tumor boards.

4. Manager

By the end of the rotation the resident will be able to:

1. Use healthcare resources appropriately and efficiently.
2. Demonstrate effective time management skills and punctuality.

5. Health Advocate

By the end of the rotation the resident will be able to:

1. Understand and promote the recommendations for breast cancer screening in Ontario.
2. Discuss with patients the way to minimize breast cancer recurrence when appropriate (e.g. exercise, weight reduction)
3. Discuss the importance of screening for melanoma and strategies to minimize melanoma recurrence (e.g. avoidance of excessive ultraviolet light exposure, sunscreen use).
4. Promote the standard of care in the surgical management of breast disease and melanoma.

6. Scholar

By the end of the rotation the resident will be able to:

1. Critically appraise relevant current literature on the surgical management of breast cancer and melanoma.
2. Demonstrate effective self-directed learning in-terms of reading around cases, asking questions, and recognizing need for life-long learning.
3. Appropriately research and present topics for teaching rounds.

7. Professional

By the end of the rotation the resident will be able to:

1. Demonstrate respect for colleagues, more junior trainees and other members of the healthcare team.
2. Demonstrate empathy, cultural sensitivity, honesty and compassion while performing high quality patient care.
3. Demonstrate insight into strengths and weaknesses and receive feedback appropriately.

Summary

The goal of this rotation is to afford intermediate-level residents the best possible opportunity to develop the foundational knowledge and skills necessary to assess the need for and safely deliver surgical care to patients with breast cancer and melanoma. We strive to make this rotation evidence-based with consistent exposure to complex multidisciplinary care.