

So you want to be ... an otorhinolaryngologist

Ear, nose and throat surgery (ENT), now referred to as otorhinolaryngology, head and neck surgery, offers a multitude of opportunities and has been described as having all surgical skills under one umbrella. Open surgery of the salivary and thyroid glands, reconstructive surgery and free flap surgery following excision of head and neck cancer, skull base surgery, microsurgery of the middle ear, endoscopic sinus surgery, facial plastics, functional and aesthetic nasal surgery, phonosurgery and the advances of lasers and navigational surgery are all included within otorhinolaryngology, head and neck surgery. There are approximately 565 consultants and 337 specialist registrars in the UK.

Clinics are equipped with both flexible and rigid endoscopes, microscopes and camera equipment. Surgical skills include manual dexterity for open surgery and the ability to operate with a microscope or an endoscope. There is a strong academic element, particularly within head and neck cancer, and scientific audiological units provide interdisciplinary links.

The career pathway

Career pathways have changed considerably since the introduction of Modernising Medical Careers. Currently, in some deaneries, a period of ENT may be offered within foundation year rotational posts. Trainees wishing to enter basic otolaryngology training from foundation year 2 need to apply for a 2-year rotational core surgical training post that includes ENT within the rotation. These training schemes vary between individual deaneries: some rotations are specialty-themed, while others offer core generic training, but all offer at least 6 months specialist ENT training.

On completion of basic core training, the trainee needs to obtain a substantive

higher specialist training rotation at ST3 level. These posts are appointed by national selection after open competition. Key factors for success include the correct postgraduate qualifications, evidence of publications, audit and research.

Higher training is competency-based and extends from ST3 to ST8. This provides opportunities for high achievers to spend the last 1–2 years of training undertaking super-specialist training. There are also opportunities to do specialist fellowships for advanced super-specialist training.

Assessment

Competencies to be acquired are shown on the web-based Intercollegiate Surgical Curriculum Project (www.iscp.ac.uk). Formative work-based assessments and a formal summative assessment within the process of the annual review of competence progression (ARCP) are required. The certificate of completion of training is awarded during competence level ST8, providing that all ARCP assessments are satisfactory and the final Fellow of the Royal College of Surgeons (FRCS-ORL) examination has been passed.

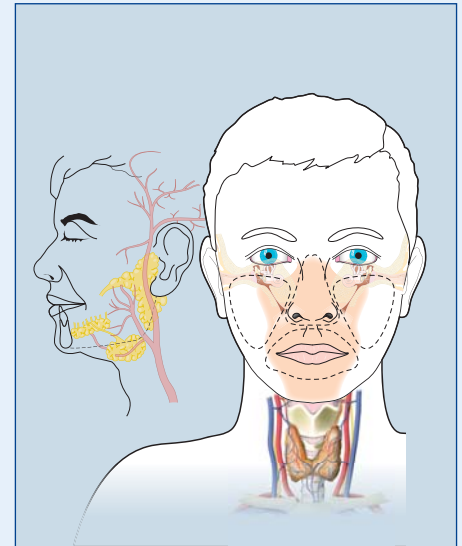
Postgraduate examinations

Currently, to attain an ST3 post, trainees must hold a combination of the MRCS and the Diploma of Otolaryngology, Head and Neck Surgery (DOHNS). The minimum requirement is MRCS Part A and the DOHNS but this is under discussion. The part B MRCS exam is themed and one can opt for the head and neck component. The DOHNS is intercollegiate and consists of a multiple choice question paper and a separate objective structured clinical examination.

Competence towards the end of higher surgical training is assessed by the intercollegiate exit examination leading to the FRCS-ORL.

Continuing medical education

Otorhinolaryngology, head and neck surgery has many educational opportunities. These include excellent regional training



courses, national meetings, national and international courses, dissection courses and conferences. There are also opportunities to travel and trainees who wish to spend part of their training period at an international centre of excellence are both encouraged and strongly supported.

Final advice

The specialty demands hard work and dedication but rewards are plentiful and patients are often very appreciative. Good communication and listening skills are important and a good investigative mind is a huge asset in solving the more challenging problems. Competition will be high but the rewards will be worth it. Advice is available from www.entuk.org. **BJHM**

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Conflict of interest: Mr Swift is an intercollegiate examiner for the DOHNS and the FRCS-ORL.

KEY POINTS

- Ear, nose and throat surgery has become otorhinolaryngology, head and neck surgery to reflect the diversity of the specialty.
- The specialty offers a wide range of diagnostic skills and surgical skills as well as work with both children and adults.
- There are good opportunities for academic experience, and many excellent training courses and conferences.

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