

DESCRIPTION OF THE NEUROLOGY RESIDENCY TRAINING PROGRAM AT UNIVERSITY OF MANITOBA

CURRICULUM:

Training in Adult Neurology at the University of Manitoba is a 5-year program with entry at the PGY-1 level. This program has **full approval** of the Royal College of Physicians and Surgeons of Canada.

PGY-1:

Exposure to Neurology during the first two blocks (each block is four weeks) of the PGY-1 year introduces the resident to fellow residents and staff, as well as the goals and objectives of their “home base” program. The resident establishes basic skills in neurological history taking and examination. An introduction to neurological problem solving, investigation and management is also acquired, although it is recognized that at this stage the resident usually needs considerable guidance and in most instances does not initiate major clinical decisions independently. At this year resident will also have exposed to four blocks of Internal Medicine, two blocks of Psychiatry, one block of Rheumatology, one block of Endocrinology, one block of infectious Disease, and one block of Cardiology.

PGY-2

During this PGY-2 year, the resident will have exposure to four blocks of Adult Neurology is performed at the PGY-2 year. At this point, the resident has completed their basic clinical training and internal medicine subspecialty rotations, has acquired confidence in diagnosing, investigating and managing major medical problems, and is ready for a more in-depth approach to neurological problems and practice. During this year, the resident will have exposure to two blocks of Medical Rehabilitation, Neurosurgery, and Intensive Care Unit and also one block of Neuroradiology, and one block of the Emergency Room.

PGY-3

During this year the resident will have exposure to five blocks of Neurology, three blocks of Neuropediatrics, three blocks of Neuropathology, and one block of Neuroradiology.

PGY-4

During this year, the resident will have exposure to three blocks of EEG/Epilepsy, three blocks of EMG/Neuromuscular disease and six blocks of elective rotations. Residents choose their elective rotations in consultation with the Program Director and the neurology postgraduate committee. Many residents choose an additional three blocks of EEG/Epilepsy and/or three blocks of EMG/Neuromuscular in order to be qualified to take EEG and EMG examinations.

PGY-5

At this point, the resident should function very close to a consultant level. By the end of the the fifth year, the resident should, at minimum, have achieved a level of competence in bedside skills and patient management that would enable him/her to successfully pass the Royal College examination in Neurology. This phase of training represents an important opportunity to consolidate clinical skills and integrate knowledge acquired during the previous Adult Neurology rotations, subspecialty rotations, and basic science seminars. During this yea, the resident will have exposure to seven blocks of Neurology and five blocks of outpatient clinics.

OVERALL GOAL AND OBJECTIVES OF THE PROGRAM:

The main goal of the program is to train skilled neurologists and to foster an interest in academic pursuits and life long learning. The Mission of the Neurology Program is to provide an environment which will assist resident to become competent, caring, ethical physicians with the ability to think critically.

Medical expert/clinical decision-maker:

The Neurology resident will become an expert in managing and treating the broad range of neurological disorders they will encounter in the practice of Neurology.

Communicator:

The neurology resident learns communication skills required to transmit information about diagnosis, investigations and management to patients, their families and referring physicians and other health care professionals.

Collaborator:

The Neurology resident learns how to interact with other medical professionals, medical support personnel and community agencies to promote timely diagnosis, investigation and effective management of neurological conditions.

Manager:

The Neurology resident learns methods by which health care services provide a broad range of patient care services and methods by which physicians must co-operate within the health care system in order to utilize those services effectively and appropriately. The Neurology resident develops an understanding of the limitations of available resources and effective time management skills, both for themselves and for other health care professionals by utilizing effective means of prioritizing tasks.

Health Advocate:

The Neurology resident will practice principles of disease prevention where applicable to certain categories of neurological disease and will learn the responsibility neurologists have to other health care professionals and services with respect to disease prevention strategies. The neurology resident learns to identify the important determinants of health in patients with neurological disorders. As well, the resident learns to contribute effectively to improved health of patients through education, treatment, and health promotion, and to recognize and respond to those issues where advocacy is appropriate.

Scholar:

The Neurology resident is stimulated to learn more about neurological diseases and their management. The Neurology resident learns how to conduct personal learning projects and to participate in joint research efforts, related to disease diagnosis, investigation and management. All residents must initiate and complete a research project during their neurology training. Resident travel to conferences is financially supported, as is junior membership in the American Academy of Neurology.

Professional:

The Neurology resident learns and practices the full range of professional, ethical, moral standards required of a neurologist.

RESIDENT SELECTION CRITERIA:

The Neurology Postgraduate Committee will select candidates based on:

- Academic achievement.
- Communication and interpersonal skills.
- References letters (three).
- Interest in neurology demonstrated by elective and research experience in neurology and related fields.

INTERVIEW:

After review of all candidate applications, short-listed candidates will be invited for in-person interviews. Phone and video conferencing interviews are not available.

The interviews take place at the Health Sciences Centre and are conducted by member of the Neurology Postgraduate Committee. Lunch, meeting with neurology residents and a tour of the facility are also arranged.

TEACHING SITES:

The Adult Neurology rotations take place at the Health Sciences Centre (<http://www.hsc.mb.ca>) and St. Boniface General Hospital (<http://www.sbgf.mb.ca>) and include the care of patients admitted under the Neurology service, as well as care of patients seen in consultation and in out-patient clinics.

NEUROLOGY POSTGRADUATE COMMITTEE:

Name	Major Site Affiliation	Major Function with the Program
Yahya Agha-Khani Alan Jackson Brian Schmidt Doug Hobson	Health Sciences Centre Health Sciences Centre Health Sciences Centre Community-based neurologist	Program Director Section Head Research Director Representative of community neurologists and St. Boniface Hospital
Marc Del Bigio	Health Sciences Centre	Representative of neuropathology
Fran Booth	Childrens' Hospital	Representative of paediatric neurology
Marylou Solbrig	Health Sciences Centre	Representative of GFT neurologists
Myles Horton	Health Sciences Centre	Chief resident and PARIM representative
Peter Hughes	Health Sciences Centre	Resident representative

FORMAL ACADEMIC ACTIVITIES:

- Academic half day is held on Friday mornings and includes
 - Neurosurgery Case by neurosurgery residents (0800 – 08:30)
 - Neurology Case by neurology residents (08:30 – 09:00)
 - Didactic Presentation by faculty members or guest speakers (09:15 – 10:00)
 - Basic science lectures by residents (10:00-11:00)
 - Clinical/basic science didactic lectures by faculty members (11:00-12:00)
- Walk (bedside) Rounds 09:00 – 10:00 weekly (Wednesday)
- Noon Rounds* at 12:00 – 13:00 weekly (Thursday)
- Movement Disorders Rounds 09:00 – 10:00 weekly (Tuesday)
- Neuroradiology Rounds at 12:00 – 13:00 Bi-weekly (Wednesday)
- Journal Clubs at 17:30 – 18:30 (1st Tuesday of the month)
- Seizure conferences at 12:00 – 13:00 Monthly (Wednesday)
- Neuromuscular rounds at 12:00 – 13:00 Monthly (Wednesday)
- Neuropathology Rounds at 10:15 – 11:00 last week of month

*Focused on residents presenting cases and plans for investigation, differential diagnosis and management.

EVALUATION:

Attending staff provide feedback after each patient is presented. Areas of weakness are pointed out in a constructive manner and methods of improvement are discussed. Informal feedback is provided by the program director and other staff members on the quality of the resident's participation in presentations or discussions at Neurology Rounds. In some instances, patients or their families may serve as a source of information on the performance of the resident. The end-of-rotation in-training evaluation report (ITER) incorporates feedback from all attending staff in contact with the resident. The ITER addresses items outlined in the objectives. The program director reviews the ITER with the resident. For PGY1-5 residents, annual in-training examinations set by the American Academy of Neurology must be taken (the program covers the costs). In addition, mock Royal College practice written and oral examinations are administered to PGY1-5 residents. Feedback and recommendations are provided. At the completion of the program, a final ITER (FITER) is prepared and forwarded to the Royal College as a requirement for examination eligibility.