

UNC DIVISION OF PLASTIC AND RECONSTRUCTIVE SURGERY

AESTHETIC SURGERY ROTATION: COMPETENCY-BASED GOALS AND OBJECTIVES

Institution: UNC, the UNC Aesthetic and Laser Center, and various private-practice community offices, surgery centers, and local hospitals

Supervisors: UNC Faculty and approved faculty and instructors with adjunct UNC appointments: Joseph Hunstad (Charlotte), Brian Coan (Alamance), Glenn Davis and Jeremy Pyle (Raleigh), and Russell Stokes (Pinehurst). All locations have PLAs established and currently active.

MEDICAL KNOWLEDGE

A. Aesthetic Surgery of the Breast and Trunk

Goal: The resident will be thoroughly familiar with aesthetic surgery of the trunk and breast, and undertake comprehensive surgical management of such diagnoses.

- 1. Draw the normal anatomy of the breast and axillae.
- 2. Describe the pathologic anatomy and histology of the breast as it relates to mammary hyperplasia and hypoplasia.
- 3. Discuss the various surgical techniques for breast reduction, the indications for and contraindications to the procedures.
- 4. Discuss the complications of breast reduction, their prevention and management.
- 5. Describe the various surgical techniques for breast augmentation, the indications for an contraindications to the procedures.
- 6. Discuss the complications of augmentation mammoplasty, their prevention and management.
- 7. Discuss the different types of breast implants and the reasons for choosing a particular type for a particular problem.
- 8. Describe the basic techniques for mastopexy, the indications for and contraindications to these procedures.
- 9. Discuss the complications of mastopexy, their prevention and management.
- 10. Discuss techniques for treatment of aesthetic trunk deformity such as panniculectomy and abdominoplasty, the indications for them and contraindications to the procedures.
- 11. Discuss the complications of panniculectomies and abdominoplasties and their prevention and management.
- 12. Discuss the treatment options for congenital breast anomalies such as Pollands syndrome.
- 13. Describe the techniques of suction lipectomy as applied to aesthetic deformities of the trunk, as well as anesthetic management for these procedures.

- 14. Recite the principles of selection of mastopexy vs. augmentation mammoplasty.
- 15. Recite the principles of selection of abdominoplasty vs. liposuction.
- 16. Explain the basic principles and techniques for treating other aesthetic deformities of the breast and drunk such as inverted nipples, localized lipodystrophy, tubular breast deformity, etc.
- 17. List the long-term consequences of augmentation mammoplasty such as capsular contraction and its treatment as well as methods for follow-up including special techniques for mammography.
- 18. Discuss the post-obesity deformity and the options for body contouring surgery.
- 19. Describe the surgical techniques for buttock augmentation (fat grafting, pursestring gluteoplasty), the indications for and contraindications for the procedures.
- 20. Describe the surgical techniques for insertion of implants into various parts of the body, including pectoralis and calf, the indications for and contraindications to the procedures.

B. Aesthetic Surgery of the Head and Neck

Goal: The resident will be familiar with aesthetic diagnoses of the head and neck and understand the principles of surgical treatment of such problems.

- 1. Discuss the concepts of beauty and aesthetic principles of the facial structures.
- 2. Identify the principles and techniques of aesthetic rhinoplasty as well as the differences in approach between primary and secondary rhinoplasty.
- 3. Recite the diagnostic and therapeutic techniques in the management of nasal airway obstruction.
- 4. Discuss the application of aesthetic principles to the cleft patient.
- 5. Explain the complications of rhinoplasty and septoplasty, their prevention and treatment.
- 6. Discuss the varying effects of aging and sun exposure on the facial structures.
- 7. Demonstrates the techniques of rhytidectomy, suction lipectomy, genioplasty, blepharoplasty, and other methods for treatment of the aging face.
- 8. Discuss the complications of facial aesthetic surgery, their prevention and treatment.
- 9. Draw the various aesthetic deformities of the ear and know the techniques of their correction.
- 10. Discuss the aesthetic and functional problems of the eyelid, including blepharochalasis and ptosis; knows the treatment for these diagnoses, complications and prevention.
- 11. Discuss the diagnostic methods and treatment options for the patient with facial palsy.
- 12. Describe the diagnostic principles and treatment techniques for alopecia pattern baldness including tissue expansion, scalp flaps, and hair transplantation.
- 13. Discuss the principles and techniques of orthogonathic surgery for the treatment of craniofacial skeletal dysharmony.
- 14. Discuss the various ancillary techniques for management of the aging face, including chemical peel, Retin A, dermabrasion, collagen injection, laser resurfacing, injection of filling material, botulinum toxin, and skin care products.
- 15. Discuss the use of lasers for the treatment of unwanted hair, tattoo removal, and facial resurfacing.
- 16. Discuss the various techniques used for face lifting, including the role of platysma, SMAS, subperiosteal, deep plan, composite, etc.

PATIENT CARE

Goal:

- 1. Perform complete assessment of patients presenting for facial plastic surgery.
- 2. Perform the following breast surgeries with graduated operative independence including:
 - a. reduction mammoplasty
 - b. augmentation mammoplasty
 - c. ptosis correction and mastopexy.
- 3. Perform the following trunk surgeries with graduated operative independence, including:
 - a. suction lipectomy
 - b. panniculectomy
 - c. abdominoplasty.
- 4. Perform preoperative markings for reduction mammoplasty.
- 5. Perform a comprehensive (internal/external) nasal exam and participate in surgery of the nose including:
 - d. primary and secondary rhinoplasty
 - e. cleft lip nasal deformity
 - f. airway obstruction
 - g. septoplasty.
- 6. Participate in facial aesthetic surgery including:
 - h. rhytidectomy
 - i. brow lift
 - j. facial liposuction
 - k. blephanoplasty
 - I. gennioplasty
 - m. jaw disharmony
- 7. Perform both open and endoscopic surgical therapy for patients with aging face including rhytidectomy and brow lift.
- 8. Perform ancillary procedures for the aging face such as chemical peels, skin care, injection of fillers and botox, etc.
- 9. Participate in the treatment of patients with facial nerve palsy including:
 - n. nerve grafts
 - o. placement of gold weights
 - p. suspensory static procedures
 - q. dynamic procedures
 - r. free tissue transfer.
- 10. Evaluate the psychosocial status of the patient presenting for aesthetic plastic surgery and determine whether the patient is an appropriate candidate for surgery.

PRACTICE BASED LEARNING AND IMPROVEMENT

Goal: The resident will investigate and evaluate his or her own patient care practices, appraise and assimilate scientific evidence, and improve patient care practices.

Objectives:

- 1. Uses information technology to prepare for surgical cases, bringing to the OR the knowledge of current modalities of care and the scientific evidence for that care.
- 2. Routinely analyzes the effectiveness of own practices in caring for aesthetic and breast patients.
- 3. Improve own practices in the care of aesthetic and breast patients by integrating 4.
- 4. Educate medical students and other healthcare professionals in the practices of aesthetic and breast surgery.
- 5. Function independently with graduated advancement and appropriate faculty supervision. Continue to keep apprised of new techniques used in facial aesthetic surgery.

INTERPERSONAL AND COMMUNICATION SKILLS

Goal: The resident will demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and professional associates.

Objectives:

- 1. Educate patients and families in operative strategies for aesthetic surgery.
- 2. Provide adequate counseling and informed consent to patients.
- 3. Listen to patients and their families.
- 4. Chart and record accurate information.
- 5. Accurately assess patient's expectations of aesthetic plastic surgery and honestly educate them on appropriate surgical intervention.

SYSTEM BASED PRACTICE

Goal: The resident will demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.

Objectives:

- 1. Demonstrate knowledge of cost-effective strategies for breast surgery.
- 2. Facilitate the timely discharge of aesthetic and breast patients.
- 3. Understand the state, local and specialty requirements for outpatient surgical centers utilized in the care of aesthetic surgery patients.

PROFESSIONALISM

Goal: The resident will demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles and sensitivity to a diverse patient population.

- 1. Exhibit an unselfish regard for the welfare of patients presenting for cosmetic surgery.
- 2. Demonstrate firm adherence to a code of moral and ethical values.
- 3. Respect and appropriately integrate other member of the breast care team.

- 4. Demonstrate sensitivity to the individual patient's profession, life goals, and cultural background as they apply to aesthetic and breast surgery.
- 5. Be reliable, punctual, and accountable for own actions in the OR and clinic.
- 6. Provide non-biased consultations for patients presenting for aesthetic surgery. Understand the impact of psychological issues, such as body dysmorphic disorder and psychosocial stressors, in patients who present for cosmetic surgery.
- 7. Participate in the Chief Resident's Aesthetic Clinic, adhering to strict ethical principles and professionalism specifically with respect to advertising, recruiting, educating and treating patients.
- 8. Appreciate the potential conflict of interest that exists in the practice of aesthetic plastic surgery with respect to patient's surgical needs and expectations and the surgeon's financial rewards.