Advanced Techniques in Transplantation and Liver Disease Fellowship

McGill University Health Centre

Length 1 year Number of positions 1 Fellowship Director Dr. Marc Deschenes

Candidates must securfeunding in order to apply for this Fellowship.

Candidates must be fluent in English and be board certified in GI

- 1. Training Outline
- 2. Objectives
- 3. Roles of the trainee

1.

Liver Transplant service (at leastnoths)

b. Hepatologyoutpatient clinic with supervision of viral therapy of at least 30 Hepatitis B and 30 Hepatitis @atients

- C. Independention gitudinal transplant clinic with care of at least patients
- d. Primary on-call coverage (at least one week **pen**th)
- e. Attend at least three living donor evaluation discussions (Dr. PM/dipg)
- f. Attend multidisciplinary hepatocellular / malignant liver disealiseic
- g. Attend pediatric hepatology clinic (at least omenth)

During the course of the 12 month fellowship, candidates willradtet least one internationaliver meeting (generally AASLD).

2. TrainingObjectives

The advanced fellowship in Transplantation and Liver Disease is intended totmaining over and above that received in a basic hepatology and liver mathematical fellowship. The expectation is that the candidate will obtain certification n Transplant Hepatology from the American Board of Internal Medicine (or equivalent dian certification should it become available).

3. Roles of the Trainee

1. MEDICAL EXPERT/CLINICAL DECISION MAKERee should demonstrate:

1.1 Diagnostic and therapeutic skills for independent care of patients with II common and uncommon hepatobiliarglisorders

1.2 Advanced knowledge of the molecular biology and genetics of livelisease including liver virology. Advanced knowledge of the immunology of liver transplantation and immuneuspression

1.3 The trainee should independently manage the care of at least 30 transplant recipients, including the decision to perform invasive diagnostic and interventid**nea**hniques.

The trainee should be versed in all aspects of:

I. Acute and fulminant hepatitis: Viral, drug, toxic.

II.Chronic hepatitis and cirrhosis with its complications

III. Prevention of complications of cirrhosis

- IV. Advanced therapeutic options of hepatocellular carcinoma.
- V. Advanced diagnostic and therapeutic options of tumours of the biliary system such as cholangiocarcinoma, including molecular diagnostic techniques and he role of transplantation, chemotherapy and photodynamic therapy
- VIAII aspects of the care of chronic liver diseases such as: alcohol, Wilson's disease, primary biliary cirrhosis, autoimmune hepatitis, hemochromatosis, and alpha 1-antitrypsin deficiency. This care should include the management of **extr**epatic complications

VII.Congenital and acquired biliary disease including hepatic fibrosis, Caroli's disease, and biliary stones.

- VIII.Hepatobiliary disorders associated with or incidental to pregnancy.
- IX.Preoperative evaluation of known liver disease patientdergoing surgery, including assessment techniques for measuring hepatic reserve, and techniques for improving hepatic reserve X.Pediatric and congenital hepatobiliary disorders.
- XIComprehensive management of the literansplant recipient, including immune suppression and assess.4 (pl)5.1 (a)2.1 (nt)2.6 (r)4.4p1 Td [(a)-6alehiTd [(a)-6o3T305 Tc -0.002 Tw 0.337 0]TJ.3 ru(l)5.1 (r)4.6