ENTRUSTABLE PROFESSIONAL ACTIVITIES FOR OTOLARYNGOLOGY - HEAD AND NECK SURGERY (2022)

Otolaryngology - Head and Neck Surgery: Core EPA #13

Assessing and providing surgical management for patients with mucosal squamous cell carcinoma of the head and neck

Key Features:

- This EPA includes performing a complete history and head and neck examination including flexible endoscopy, synthesizing the information obtained into a working (or confirmed) diagnosis including clinical TNM staging of the tumour, and proposing a patient management plan including additional investigations, referrals and treatment options. This includes presenting the management plan to the supervisor as well as the patient and family.
- The procedural aspects of the EPA include neck dissection and mucosal resection.
- The observation of this EPA is divided into two parts: assessment (achievement expected at junior core), and surgical management (achievement expected at senior core).
- The surgical aspects of this EPA may be observed in the clinical setting or in simulation.

Assessment Plan:

Part A: Patient Assessment
Direct observation or case review by supervisor

Use Form 1. Form collects information on:

- Site: nasopharynx; oral cavity; oropharynx; larynx; hypopharynx
- Advanced disease: yes; no

Collect 3 observations of achievement

- 3 different sites; at least 1 oropharynx
- At least 1 case with advanced disease
- At least 2 different assessors

Part B: Surgical Management Direct observation by supervisor

Use Form 2. Form collects information on:

- Type of procedure (select all that apply): neck dissection; mucosal resection
- Setting: clinical; simulation

Collect 4 observations of achievement

- At least 2 neck dissections
- At least 2 mucosal resections
- No more than 1 in simulation

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CanMEDS Milestones:

Part A: Patient Assessment

- 1 ME 1.4 Apply knowledge of tumorigenesis of benign neoplasms and cancers of the head and neck
- **ME 1.4** Apply a broad base and depth of knowledge in clinical and biomedical sciences to the medical and surgical management of the breadth of patient presentations in Oto HNS
- ME 1.4 Apply a broad base and depth of knowledge in clinical and biomedical sciences as they apply to the therapeutic techniques/procedures relevant to Oto HNS
 - Principles of different oncologic treatment modalities, including surgery, radiation therapy, chemotherapy and immunotherapy
 - Principles of laser microsurgical resection, cryotherapy, robotic surgery and/or electrosurgery
- 4 ME 2.2 Identify risk factors pertaining to individual cases of head and neck neoplasia
- 5 ME 3.4 Competently perform core Oto HNS procedures in a timely manner
 - Upper aerodigestive flexible endoscopies with or without biopsy as it relates to tumour staging and treatment planning
- **COM 1.4** Respond to patients' non-verbal communication and use appropriate non-verbal behaviours to enhance communication with patients
- **COM 1.5** Recognize when strong emotions (such as anger, fear, anxiety, or sadness) are impacting an interaction and respond appropriately
- 8 COM 1.5 Manage conversations that are emotionally charged
- **9 COM 2.2** Manage the flow of challenging patient encounters, including those with angry, distressed, or excessively talkative individuals
- 10 COM 3.1 Provide information on diagnosis and prognosis in a clear, compassionate, respectful, and objective manner
- **11 COM 5.1** Adapt record keeping to specific guidelines of Otolaryngology Head and Neck Surgery and the clinical context
- **COL 1.2** Recognize, value, and utilize the expertise of interprofessional team members
- 13 COL 1.2 Consult as needed with other health care professionals, including other physicians or surgeons
- **COL 1.2** Liaise with intersecting health professionals
- **COL 1.3** Communicate effectively with physicians and other colleagues in the health care professions

Part B: Surgical Management

- ME 1.4 Knowledge of specific procedural steps: Understands steps of procedure, potential risks, and means to avoid/overcome them
- 2 ME 3.1 Pre-procedure plan: Gather/assess required information to reach diagnosis and determine correct procedure required
- 3 ME 3.4 Case preparation: Patient correctly prepared and positioned, understands approach and required instruments, prepared to deal with probable complications
- 4 ME 3.4 Technical performance: Efficiently performs steps, avoiding pitfalls and respecting soft tissues

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- 5 ME 3.4 Visuospatial skills: 3D spatial orientation and able to position instruments/hardware where intended
- 6 ME 3.4 Post-procedure plan: Appropriate complete post procedure plan
- 7 ME 3.4 Efficiency and flow: Obvious planned course of procedure with economy of movement and flow
- 8 COL 1.3 Professional and effective communication/utilization of staff