

Otolaryngology – Head and Neck Surgery: Core EPA #16

Assessing and managing patients with benign or malignant skin lesions of the head and neck (JC/SC)

Key Features:

- The observation of this EPA is divided into two parts: patient assessments and performing a procedure.
- This EPA includes performing a complete history and head and neck examination, 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. It is expected that this part of the EPA will be achieved in the junior core stage
- The procedural aspects of this EPA include resection of early skin cancer with clear margins and reconstruction with graft or local flap, as appropriate, and should be achieved at the senior level of Core.

Assessment Plan:

Part A: Patient Assessment

Direct observation or case review by supervisor

Use Form 1. Form collects information on:

- Type of cancer: melanoma; squamous cell; other
- Advanced disease: yes; no

Collect 3 observations of achievement

Part B: Resection with clear margins and reconstruction with graft or local flap

Direct observation by supervisor

Use Form 2. Form collects information on:

- Location: auricle; nose; periorbital; lip; other
- Procedure (select all that apply): resection; reconstruction

Collect 6 observations of achievement

- At least 3 resections
- At least 3 reconstructions

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

CanMEDS Milestones:

Part A: Patient Assessment

- 1 ME 1.4** Apply a broad base and depth of knowledge in the basic and clinical sciences relevant to Oto-HNS
 - Principles of restoration and enhancement of form and function including but not limited to:
 - Principles of cervicofacial surgery
 - Biomechanical characteristics of skin and bone in the facial region as they relate to techniques used in facial plastic and reconstructive surgery including tissue expansion and plating maxillofacial fractures
 - Principles and techniques of facial reconstruction, including local and regional flaps and grafts
- 2 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
- 3 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 laser microsurgical resection, cryotherapy, robotic surgery and/or electro surgery
 - principles governing use of local and systemic chemo- and immunotherapeutic agents
 - principles of oncologic management of cutaneous malignancies of the face, head and neck
 - principles of therapeutic radiation
 - principles and techniques of frozen section diagnosis and Mohs micrographic surgery
- 4 ME 2.2** Elicit a history, perform a physical exam, select appropriate investigations, and interpret their results
- 5 ME 2.2** **Select and interpret appropriate investigations for any Oto-HNS presentation based on a differential diagnosis**
- 6 ME 2.3** Establish goals of care, which may include achieving cure, improving function, slowing disease progression, treating symptoms, and palliation, in collaboration with patients and their families
- 7 ME 2.4** Develop, implement, and document a management plan
- 8 ME 3.1** **Integrate all sources of information to develop a procedural or therapeutic plan that is safe, patient-centred, and considers the risks and benefits of all approaches**
- 9 ME 3.1** **Integrate planned procedures or therapies into global assessment and management plans**
- 10 ME 3.2** Obtain informed consent for complex medical and surgical procedures and therapies
- 11 COM 2.1** Use patient-centred interviewing skills to effectively gather relevant biomedical and psychosocial information
- 12 COM 2.1** Integrate, summarize, and present the biopsychosocial information obtained from a patient-centred interview
- 13 COM 2.1** Actively listen and respond to patient cues
- 14 COM 3.1** **Provide information on diagnosis and prognosis in a clear, compassionate, respectful, and objective manner**

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- 15 COM 3.1** Convey information related to the patient's health status, care, and needs in a timely, honest, and transparent manner
- 16 COM 4.1** Facilitate discussions with the patient and family in a way that is respectful, non-judgmental, and culturally safe
- 17 COM 4.3** Use communication skills and strategies that help the patient and family make informed decisions regarding their health
- 18 COM 5.2** Communicate effectively using a written health record, electronic medical record, or other digital technology
- 19 COL 1.2 Consult as needed with other health care professionals, including other physicians or surgeons**
- 20 HA 1.3** Evaluate with the patient the potential benefits and harms of health screening
- 21 HA 1.3 Promote risk reduction through smoking cessation, responsible alcohol use, UVA/UVB protection, and/or promotion of HPV vaccination for girls and boys**
- 22 P 1.1** Exhibit appropriate professional behaviours and relationships in all aspects of practice, reflecting honesty, integrity, humility, commitment, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality
- 23 P 1.2** Demonstrate a commitment to excellence in all aspects of practice

Part B: Resection with clear margins and reconstruction with graft or local flap

- 1 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**
- 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**