

Otolaryngology – Head and Neck Surgery: Core EPA #5

Assessing patients with dysphagia or swallowing disorders (JC)

Key Features:

- This EPA is focused on patient assessment and may include, as relevant, performance of flexible nasopharyngolaryngoscopy and fiberoptic endoscopic evaluation of swallowing (FEES) as well as interpretation of diagnostic imaging (e.g. barium swallow) and laboratory tests (e.g. manometry, pH monitoring).

Assessment Plan:

Direct observation by supervisor

Use Form 1. Form collects information on:

- Cause: neurological; obstructive; neuromuscular (functional); inflammatory
- Age group: pediatric; adult
- Plan for management: surgical; medical

Collect 2 observations of achievement

CanMEDS Milestones:

- 1 ME 1.4** Apply a broad base and depth of knowledge in the basic and clinical sciences relevant to Oto - HNS
 - Anatomy and physiology of upper aerodigestive system related to swallowing, including phases of normal swallowing
- 2 ME 1.4** Apply a broad base and depth of knowledge in clinical and biomedical sciences as they apply to the diagnostic techniques/procedures relevant to Otolaryngology – Head and Neck Surgery
- 3 ME 2.1** Consider clinical urgency, feasibility, availability of resources, and comorbidities in determining priorities to be addressed during the current encounter or during future visits or with other health care practitioners
- 4 COM 2.1** Conduct a patient-centred interview, gathering all relevant biomedical and psychosocial information for any clinical presentation
- 5 ME 2.2** Perform a focused history and physical exam to classify phase of dysphagia: oral; oro-pharyngeal; esophageal
- 6 ME 2.2** Identify patients experiencing or at risk for aspiration
- 7 ME 2.2** Select and interpret appropriate investigations for any Oto-HNS presentation based on a differential diagnosis
 - Diagnostic imaging (barium swallow, modified barium swallow, CT, MRI)
 - Laboratory testing (manometry, pH monitor)
- 8 ME 3.4** Perform flexible nasopharyngolaryngoscopy and/or FEES, as relevant, and interpret the results
- 9 ME 2.3** Establish goals of care, which may include achieving cure, improving function, slowing disease progression, treating symptoms, and palliation, in

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- collaboration with patients and their families
- 10 COL 1.1** Anticipate, identify, and respond to patient safety issues related to the function of a team
- 11 COL 1.2** Consult as needed with other health care professionals, including other physicians or surgeons
- 12 HA 1.2** Apply the principles of behaviour change during conversations with patients about adopting healthy behaviours
- 13 HA 1.3** Work with families to implement foreign body aspiration prevention
- 14 HA 1.3** Promote choking prevention in children