Otolaryngology – Head and Neck Surgery: Core EPA #8

Providing advanced management for patients with epistaxis (SC)

Key Features:

- The observation of this EPA is divided into two parts: patient assessments and performing procedures.
- This EPA builds on the abilities demonstrated in Foundations and focuses on recognizing the limits for non-surgical management, applying an algorithm for the management of epistaxis beyond nasal packing and chemical cautery (i.e. involving interventional radiology and/or surgical cautery/ligation).
- The surgical approach may include endoscopic cauterization as well as sphenopalatine artery ligation and/or ethmoid artery ligation. A procedure that only involves endoscopic cautery would not be sufficient for the achievement of this EPA.
- The procedural aspects of this EPA may be observed in simulation.

Assessment Plan:

Part A: Patient Assessment Direct observation by supervisor

Use Form 1. Form collects information on:

- Options: medical management; interventional radiology; surgical intervention

Collect 1 observation of achievement

Part B: Procedure Direct observation by supervisor

Use Form 2. Form collects information on:

- Sphenopalatine artery (SPA) ligation: yes; no
- Ethmoid artery ligation: yes; no
- Setting: clinical; simulation

Collect 3 observations of achievement

- Must be either SPA or ethmoid ligation or both

CanMEDS Milestones:

Part A: Patient Assessment

- **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
- 2 **ME 1.5** Perform clinical assessments that address the breadth and depth of issues in each case

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- 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 ME 2.4 Recognize and establish a management plan for life threatening or emergent issues
- 5 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
- **6 ME 4.1** Coordinate investigation, treatment, and follow-up plans when multiple physicians and healthcare professionals are involved
- 7 ME 4.1 Accurately identify situations that necessitate consultation of other health professionals to assist in the management of disorders encountered in Oto - HNS
- **8 COM 1.5** Recognize when strong emotions (such as anger, fear, anxiety, or sadness) are impacting an interaction and respond appropriately
- **9 COM 3.1** Provide information on diagnosis and prognosis in a clear, compassionate, respectful, and objective manner
- 10 COM 3.1 Convey information related to the patient's health status, care, and needs in a timely, honest, and transparent manner
- **11 COL 1.2** Consult as needed with other health care professionals, including other physicians or surgeons
- **12 COL 1.2** Recognize, value, and utilize the expertise of interprofessional team members
- **13 COL 1.2** Liaise with intersecting health professionals
- 14 COL 1.3 Communicate effectively with physicians and other colleagues in the health care professions
- **15 COL 2.1** Maintain positive relationships in all professional contexts
- **16 L 3.1** Assume the role of chief resident and lead junior residents in a hospital patient care team

Part B: Performing procedures

- **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