

Otolaryngology - Head and Neck Surgery: Foundations EPA #1

Providing initial clinical assessment, investigation and development of a management plan for patients with acute upper airway obstruction

Key Features:

- The observation of this EPA is divided into two parts: patient assessments and performing a procedure (elective tracheostomy: open tracheotomy, percutaneous tracheotomy, cricothyroidotomy).
- The patient assessment aspect of this EPA may include performing a flexible nasopharyngolaryngoscopy.

Assessment Plan:

Part A: Patient assessment

Direct or indirect observation by supervisor

Use Form 1. Form collects information on:

- Case scenario: emergent; elective

Collect 1 observations of achievement

- At least 1 emergent case

Part B: Procedure

Direct observation by supervisor

Use Form 2. Form collects information on:

- Type of procedure: elective tracheostomy; open tracheotomy; percutaneous tracheotomy; cricothyroidotomy
- Setting: clinical; simulation

Collect 3 observations of achievement

- At most 1 may be an assessment in simulation (cadaver or task trainer).
- At least 1 open tracheotomy

CanMEDs Milestones:

Part A: Patient assessment

- 1 ME 1.4** Apply knowledge of clinical and biomedical sciences as relevant to Oto-HNS
- 2 ME 1.4** Apply the principles of diagnostic imaging
- 3 ME 1.5 Recognize urgent issues that may need the involvement of more senior colleagues and engage them immediately**
- 4 ME 2.1** Identify and recognize life threatening or emergent issues
- 5 ME 2.2 Identify and differentiate normal and abnormal findings in history and physical exam**

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

- 6 **ME 2.2 Develop a specific differential diagnosis relevant to the patient's presentation, for common Oto-HNS presentations**
- 7 **ME 2.2 Select and interpret laboratory and imaging investigations**
- 8 **ME 3.3 Consider urgency and potential for deterioration in advocating for the timely execution of a procedure or therapy**
- 9 **ME 3.4** Establish and implement a plan for post-procedure care of the listed procedures
- 10 **ME 3.4** Seek advice or supervision as needed when unanticipated findings or changing clinical circumstances are encountered
- 11 **ME 4.1** Ensure follow-up on results of investigation and response to treatment
- 12 **ME 4.1 Recognize need for consultation of other healthcare professionals**
- 13 **COM 1.2** Optimize the physical environment for patient comfort, dignity, privacy, engagement, and safety
- 14 **COM 1.6** Assess patients' decision-making capacity
- 15 **COM 2.1** Conduct a patient-centred interview, gathering all relevant biomedical and psychosocial information for any clinical presentation
- 16 **COM 2.2** Conduct a focused and efficient patient interview, managing the flow of the encounter while being attentive to the patient's cues and responses
- 17 **COM 2.3** Seek and synthesize relevant information from other sources, including the patient's family, with the patient's consent
- 18 **COM 3.1** Use strategies to verify and validate the understanding of the patient and family with regard to the diagnosis, prognosis, and management plan
- 19 **COM 4.3 Answer questions from the patient and family about next steps**
- 20 **COM 5.1** Document information about patients and their medical conditions in a manner that enhances intra-and interprofessional care
- 21 **COM 5.1** Document clinical encounters to adequately convey clinical reasoning and the rationale for decisions
- 22 **COL 1.2** Describe the roles and scopes of practice of other health care providers related to Oto-HNS
- 23 **COL 1.3 Identify referral and consultation as opportunities to improve quality of care and patient safety by sharing expertise**
- 24 **COL 2.1** Actively listen to and engage in interactions with collaborators
- 25 **COL 2.2** Communicate clearly and directly to promote understanding, manage differences, and resolve conflicts
- 26 **COL 2.2** Listen to understand and find common ground with collaborators
- 27 **COL 3.1** Identify patients requiring handover to other physicians or health care professionals
- 28 **HA 1.3** Work with the patient and family to identify opportunities for disease prevention, health promotion, and health protection

Part B: Procedure

- 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**

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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**