

Otolaryngology – Head and Neck Surgery: Foundation EPA #5

Assessing and providing initial management for patients with hearing loss

Key Features:

- The observation of this EPA is divided into two parts: patient assessments and performing a myringotomy and tube insertion.
- The patient assessment aspect of this EPA includes otomicroscopy and must include the interpretation of an audiogram.

Assessment Plan:

Part A: Patient assessment

Direct or indirect observation by supervisor

Use Form 1

Collect 4 observations of achievement

Part B: Myringotomy and tube insertion

Direct observation by supervisor

Use Form 2.

Collect 4 observations of achievement

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 knowledge of neurophysiology and neuropsychology of hearing perception**
- 3 ME 1.4** Apply knowledge in clinical and biomedical sciences as they apply to the diagnostic techniques/procedures relevant to Oto-HNS
 - Conventional audiometry (including but not limited to tympanometry and stapedial reflex testing) and otoacoustic emission testing, and their applications
 - Audiological assessment in different age groups
 - Tuning forks
- 4 ME 1.4** Apply clinical and biomedical sciences to manage patient presentations in Oto-HNS
- 5 ME 1.5** Recognize urgent issues that may need the involvement of more senior colleagues and engage them immediately
- 6 ME 2.2** Identify and differentiate normal and abnormal findings in history and physical exam
- 7 ME 2.2 Perform and interpret findings of office-based exams**

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

- **Perform otomicroscopy**
 - **Interpret basic puretone audiogram/tympanogram**
- 8 **ME 2.2** Develop a specific differential diagnosis relevant to the patient's presentation, for common Oto-HNS presentations
- 9 **ME 2.2** Select and interpret appropriate investigations for common Oto-HNS presentations, based on a differential diagnosis
- 10 **ME 2.4 Ensure that the patient and family are informed about the risks and benefits of each treatment option in the context of best evidence and guidelines**
- 11 **ME 3.1** Describe the indications, contraindications, risks, and/or alternatives for a given procedure or therapy
- 12 **ME 3.1** Describe to patients common procedures or therapies for common conditions in their discipline
- 13 **ME 3.2** Obtain informed consent for commonly performed medical and surgical procedures and therapies, under supervision
- 14 **ME 3.2** Document the consent discussion accurately
- 15 **ME 3.4 Establish and implement a plan for post-procedure care**
- 16 **ME 4.1 Ensure follow-up on results of investigation and response to treatment**
- 17 **ME 4.1** Recognize need for consultations of other healthcare professionals
- 18 **COM 1.6** Assess patients' decision-making capacity
- 19 **COM 2.1** Conduct a patient-centred interview, gathering all relevant biomedical and psychosocial information for any clinical presentation
- 20 **COM 2.1** Demonstrate knowledge of techniques for eliciting health information from children and their families
- 21 **COM 2.1** Recognize the psychological, occupational, and social consequences of sensory or communication disorders
- 22 **L 2.1** Consider costs when choosing care options
- 23 **L 2.2 Apply evidence and guidelines with respect to resource utilization relevant to common clinical scenarios**
- 24 **HA 1.3** Work with the patient and family to identify opportunities for disease prevention, health promotion, and health protection

Part B: Myringotomy and tube insertion

- 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**