

## **Otolaryngology – Head and Neck Surgery: Core EPA #19**

### **Assessing and managing patients with mucosal squamous cell carcinoma of the head and neck (JC)**

#### **a. Providing surgical management for patients with mucosal squamous cell carcinoma (SC)**

##### Key Features:

- This EPA focuses on the full spectrum of care for patients with mucosal squamous cell carcinoma: patient assessment, surgical management and/or ongoing care. The observation of this EPA is divided into four parts
- The patient assessments include flexible diagnostic endoscopies as they relate to tumour staging and treatment planning
- The procedural aspects at the junior level of Core include rigid endoscopy, and at the senior level of Core include neck and mucosal dissections
- Ongoing care includes follow-up, further surgical treatment, multimodal treatment and/or end of life/supportive care

##### Assessment plan:

###### Part A: Patient Assessment

Supervisor does assessment based on direct or indirect observation

Use Form 1. Form collects information on:

- Site: nasopharynx; oral cavity; oropharynx; larynx; hypopharynx
- Advanced disease: yes; no

Collect 3 observations of achievement

- 3 different sites; at least one oropharynx
- At least one advanced case
- At least 2 different assessors

###### Part B: Procedure- Rigid Endoscopy

Supervisor does assessment based on direct observation

Use Form 2. (O-score criteria)

Collect 2 observations of achievement

###### Part C: Procedure – Dissection

Supervisor does assessment based on direct observation

Use Form 2. (O-score criteria) Form collects information on:

- Type of procedure: neck dissection; mucosal dissection

Collect 4 observations of achievement

- at least 2 neck dissection

- at least 2 mucosal dissection

Part D: Follow-up

Supervisor does assessment based on direct or indirect observation

Use Form 1. Form collects information on:

- Type of follow-up plan: ongoing follow-up; further surgical treatment; multimodal treatment; end of life/supportive care

Collect 4 observations of achievement

- At least one multimodality treatment
- At least one total laryngectomy with voice restoration
- At least one end of life/supportive care

Relevant milestones (Part A)

- 1 F ME 1.4.2 Apply knowledge of tumorigenesis of benign neoplasms and cancers of the head and neck**
- 2 C ME 1.4.2** 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 Otolaryngology – Head and Neck Surgery
- 3 C ME 1.4.4 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 different oncologic treatment modalities, including surgery, radiation therapy, chemotherapy and immunotherapy
  - Principles of laser microsurgical resection, cryotherapy, robotic surgery and/or electrosurgery
- 4 C ME 2.2.4 Identify risk factors pertaining to individual cases of head and neck neoplasia**
- 5 C ME 3.4.1 Competently perform core Oto - HNS procedures in a timely manner**
  - Upper aerodigestive flexible endoscopies with or without biopsy as it relates to tumour staging and treatment planning
- 6 C COM 1.4.1** Respond to patients' non-verbal communication and use appropriate non-verbal behaviours to enhance communication with patients
- 7 C COM 1.5.1** Recognize when strong emotions (such as anger, fear, anxiety, or sadness) are impacting an interaction and respond appropriately
- 8 C COM 1.5.3 Manage emotionally charged conversations**
- 9 C COM 2.2.1** Manage the flow of challenging patient encounters, including those with angry, distressed, or excessively talkative individuals
- 10 C COM 3.1.1 Provide information on diagnosis and prognosis in a clear, compassionate, respectful, and objective manner**
- 11 C COM 5.1.1** Adapt record keeping to specific guidelines of Otolaryngology – Head and Neck Surgery and the clinical context
- 12 C COL 1.2.2** Recognize, value, and utilize the expertise of interprofessional team members
- 13 F COL 1.2.3 Consult as needed with other health care professionals, including but not limited to other physicians or surgeons**
- 14 C COL 1.3.2** Liaise with intersecting health professions
- 15 F COL 1.3.3** Communicate effectively with physicians and other colleagues in the health care professions

Relevant milestones (Part D)

- 1 **C ME 2.3.1 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**
- 2 **C ME 2.4.1** Develop , implement, and document management plans that consider all of the patient’s health problems and context in collaboration with patients and their families and, when appropriate, the interprofessional team
- 3 **C ME 2.4.5** Provide timely and adequate responses to complications and undesired side effects of treatment
- 4 **C ME 4.1.2 Establish plans for ongoing care**
- 5 **C ME 4.1.3 Accurately identify situations that necessitate consultation of other health professionals to assist in the management of disorders encountered in Oto-HNS**
- 6 **C ME 4.1.5 Address end-of-life issues in patients with head and neck cancer**
- 7 **C COM 2.1.3 Actively listen and respond to patient cues**
- 8 **C COM 3.1.1** Provide information on diagnosis and prognosis in a clear, compassionate, respectful, and objective manner
- 9 **C COM 3.1.2** Convey information related to the patient’s health status, care, and needs in a timely, honest, and transparent manner
- 10 **C COM 4.3.1 Use communication skills and strategies that help the patient and family make informed decisions regarding their health**
- 11 **F COL 1.2.3** Consult as needed with other health care professionals, including but not limited to other physicians or surgeons
- 12 **C COL 1.2.1** Recognize, value, and utilize the expertise of interprofessional team members
- 13 **C COL 1.2.2** Liaise with intersecting health professions
- 14 **C COL 1.3.1** Provide timely and necessary information to colleagues to enable effective relationship-centered care
- 15 **F COL 1.3.3 Communicate effectively with physicians and other colleagues in the health care professions**
- 16 **TTP HA 1.1.2 Work with patients to improve their timely access to diagnostic and therapeutic care**