Assessing patients with tinnitus and providing initial management

Key Features:
- This EPA focuses on the assessment of patients with tinnitus, including hearing assessment and role of imaging. It includes the decision making regarding management across the spectrum of emergent, surgical and non-surgical options which may include assistive devices for masking tinnitus, cognitive behavioural therapy and other therapeutic options.

Assessment plan:
Supervisor does assessment based on direct or indirect observation.

Use Form 1. Form collects information on:
- Category: pulsatile; non-pulsatile

Collect 2 observations of achievement
- At least 1 pulsatile
- At least 1 non-pulsatile

Relevant milestones

1. **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 Oto - HNS.
2. **C ME 1.4.3** Apply a broad base and depth of knowledge in clinical and biomedical sciences as they apply to the diagnostic techniques/procedures relevant to Oto - HNS.
   - Hearing assessment, including but not limited to otoacoustic emissions, electrocochleography, auditory brainstem response and cortical auditory evoked response.
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 use of surgical and nonsurgical assistive devices, including but not limited to hearing aids, bone conduction hearing devices, cochlear implants, and middle ear implants.
   - Tinnitus maskers and environmental masking.
   - Cognitive behavioural therapy, tinnitus retraining therapy.
   - Other therapeutic options including interventional radiology.
4. **C ME 2.2.11** Select and interpret vestibular and/or audiological investigations.
5. **C ME 2.3.2** Address the impact of the medical condition on the patient’s ability to pursue life goals and purposes.
6. **C ME 2.3.3** Share concerns (in a constructive and respectful manner) with patients and their families about their goals of care when they are not felt to be achievable.
7. **C ME 2.4.6** Establish patient-centred management plans.
8. **C ME 2.4.5** Provide timely and adequate responses to complications and undesired side effects of treatment.
9. **C COM 1.5.1** Recognize when strong emotions (such as anger, fear, anxiety, or sadness) are impacting an interaction and respond appropriately.
10. **C COL 1.2.1** Recognize, value, and utilize the expertise of interprofessional team members.
11. **C HA 1.3.2** Promote hearing protection and conservation at home and at work.