

Otolaryngology – Head and Neck Surgery: Core EPA #29

Assessing adult and pediatric patients with hearing loss and providing an initial management plan, both surgical and non-surgical (JC/SC)

Key Features:

- The observation of this EPA is divided into three parts: patient assessments including the full spectrum of hearing assessment, performing procedures at the junior level of Core (myringoplasty, tympanoplasty, and intratympanic injections) and performing procedures at the senior level of Core (ossiculoplasty, canaloplasty, and mastoidectomy)

Assessment plan:

Part A: Assessment

Supervisor does assessment based on direct or indirect observation

Use Form 1. Form collects information on:

- Age group: Adult; Pediatric
- Category: sudden sensorineural hearing loss; congenital; chronic otitis media; otosclerosis; other
- Rapidly progressive: yes; no

Collect 8 observations of achievement

- At least 2 adult
- At least 2 pediatric
- At least 1 sudden sensorineural hearing loss
- At least 1 congenital
- At least 1 chronic otitis media
- At least 1 otosclerosis
- At least 1 rapidly progressive

Part B: Procedure – Junior Core

Supervisor does assessment based on direct observation

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

- Procedure: myringoplasty; tympanoplasty; intratympanic injections

Collect 6 observations of achievement

- At least 2 myringoplasty
- At least 2 tympanoplasty
- At least 2 intratympanic injections

Part C: Procedure – Senior Core

Supervisor does assessment based on direct observation

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

- Procedure: ossiculoplasty; canaloplasty; mastoidectomy (canal-wall-up); mastoidectomy (canal-wall-down)

Collect 8 observations of achievement (for individual supervisor assessments)

- At least 2 ossiculoplasty
- At least 2 canaloplasty
- At least 2 mastoidectomy (canal-wall-up)
- At least 2 mastoidectomy (canal-wall-down)

Relevant milestones (Part A)

- 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, cortical auditory evoked response, impedance/tympanometry
- 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 non-surgical assistive devices for hearing loss, including but not limited to hearing aids, bone conduction hearing devices cochlear and middle ear implants
 - principles underlying the effect of topical and systemic medications and their therapeutic and ototoxic implications including but not limited to intratympanic injections
- 4 C ME 2.2.6 Perform and interpret findings of office and /or clinic based exams**
 - **Neuro-otological examination**
- 5 C ME 2.2.11 Select and interpret vestibular and/or audiological investigations**
- 6 C ME 2.3.2 Address the impact of the medical condition on the patient's ability to pursue life goals and purposes**
- 7 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
- 8 C ME 2.4.6 Establish patient-centred management plans**
- 9 C ME 2.4.3 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, including procedures for which the patient is referred to other surgeons**
- 10 C COM 1.6.2 Recognize the communication requirements relevant to patients who are deaf, hard of hearing or who have speech and/or voice disorders**
- 11 C HA 1.1.1 Facilitate access to the local and national services and resources that are available for patients, including but not limited to those who are deaf and hard of hearing**
- 12 C HA 1.3.8** Recognize importance and understand principles of newborn/universal hearing screening