Otolaryngology – Head and Neck Surgery: Foundation EPA #2

Assessing and providing initial management for patients with a deep neck space infection or peritonsillar abscess

Key Features:
- The observation of this EPA is divided into two parts: patient assessments and draining a peritonsillar abscess. More advanced surgical procedures are included in the Core stage.

Assessment plan:

Part A: Patient Assessment
Supervisor does assessment based on direct or indirect observation

Use Form 1. Form collects information on:
- Type of observation: direct; indirect
- Case complexity: low; medium; high

Collect 3 observations of achievement
- At least 2 different assessors

Part B: Procedure – Drainage of Peritonsillar Abscess
Supervisor does assessment based on direct observation of the drainage of a peritonsillar abscess

Use Form 2 (O-score criteria)
Collect 2 observations of achievement

Relevant milestones (Part A)
1. **F ME 1.4.1** Apply knowledge of clinical and biomedical sciences as relevant to Otolaryngology Head and Neck Surgery
   - Anatomy and microbiology
2. **F ME 1.4.10** Apply clinical and biomedical sciences to manage patient presentations in Otolaryngology – Head and Neck Surgery
3. **F ME 1.5.2** Recognize urgent issues that may need the involvement of more senior colleagues and engage them immediately
4. **F ME 2.1.1** Identify and recognize life threatening or emergent issues
5. **F ME 2.2.7** Identify and differentiate normal and abnormal findings in history and physical exam
6. **F ME 2.2.14** Develop a specific differential diagnosis relevant to the patient’s presentation, for common Oto-HNS presentations
7. **F ME 2.2.15** Select and interpret appropriate investigations for common Otolaryngology-Head and Neck Surgery presentations, based on a differential diagnosis
8. **F ME 2.4.1** Develop, implement and document initial management plans for common problems in Otolaryngology – Head and Neck Surgery
9. **F ME 2.4.2** Recognize and suggest an initial management plan for emergent issues
10. **F 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
11  **F ME 3.3.1** Consider urgency and potential for deterioration in advocating for the timely execution of a procedure or therapy

12  **F COM 2.2.1** Conduct a focused and efficient patient interview, managing the flow of the encounter while being attentive to the patient’s cues and responses

13  **F COM 4.3.1** Answer questions from the patient and family about next steps

14  **F COM 5.1.3** Document clinical encounters to adequately convey clinical reasoning and the rationale for decisions