Otolaryngology – Head and Neck Surgery: Core EPA #10

Assessing patients with facial paralysis, and providing recommendations for both surgical and non-surgical treatment options

Key Features:
- This EPA focuses on patient assessment, including the role of electrophysiologic assessment as well as imaging
- This EPA may include the use of antiviral therapy and corticosteroids as well as eye care in collaboration with Ophthalmology
- This EPA may be observed in a broad range of etiologies of facial paralysis

Assessment plan:

Supervisor does assessment based on direct or indirect observation

Use Form 1. Form collects information on:
- Acuity of issue: acute; chronic
- Etiology: Bell’s palsy; traumatic; iatrogenic; other

Collect 3 observations of achievement
- At least one chronic case
- At least one acute Bell’s palsy

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 Otolaryngology – Head and Neck Surgery

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 Otolaryngology – Head and Neck Surgery
   - Electrophysiological assessments, including but not limited to intraoperative monitoring of cranial nerves and electroneurography

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 Otolaryngology – Head and Neck Surgery
   - Use of antiviral therapy and corticosteroids

4. **C ME 2.2.9** Select and interpret appropriate investigations for any Oto-HNS presentation based on a differential diagnosis

5. **F ME 2.3.1** Work with patients and their families to understand relevant options for care
6  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

7  C ME 4.1.3 Accurately identify situations that necessitate consultation of other health professionals to assist in the management of disorders encountered in Otolaryngology – Head and Neck Surgery

8  C ME 5.1.3 Incorporate, as appropriate, into a differential diagnoses, harm from health care delivery

9  C COL 1.2.2 Liaise with intersecting health professions