**Otolaryngology – Head and Neck Surgery: Core EPA #16**

**Assessing and managing patients with nasal obstruction and/or septal deformities (JC)**

**Key Features:**
- The observation of this EPA is divided into two parts: patient assessments and performing procedures (septoplasty and turbinoplasty)
- This EPA should be achieved at the junior level of Core

**Assessment plan:**

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

Use Form 1. Form collects information on:
- Presentation: septal deformity; turbinate hypertrophy

Collect 3 observations of achievement
- At least 2 septal deformity
- At least 1 turbinate hypertrophy

**Part B: Procedure – Junior Core**
Supervisor does assessment based on direct observation

Use Form 2. (O-score criteria) Form collects information on:
- Septoplasty: yes; no
- Turbinoplasty: yes; no

Collect 3 observations of achievement
- At least 3 septoplasty
- At least 2 turbinoplasty

**Relevant milestones (Part A):**

1. C ME 1.4.1 Apply a broad base and depth of knowledge in the basic and clinical sciences relevant to Oto-HNS
2. C ME 2.2.9 Select and interpret appropriate investigations for any Oto-HNS presentation based on a differential diagnosis
3. 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
4. **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.

5. **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.

6. **C ME 3.1.1** Describe the indications, contraindications, risks, and alternatives for a given procedure or therapy.

7. **C ME 3.1.2** Integrate all sources of information to develop a procedural or therapeutic plan that is safe, patient-centred, and considers the risks and benefits of all approaches.

8. **C ME 3.2.2** Use shared decision-making in the consent process, taking risk and uncertainty into consideration.

9. **C COM 2.1.1** Use patient-centred interviewing skills to effectively gather relevant biomedical and psychosocial information.

10. **C COM 2.1.2** Integrate, summarize, and present the biopsychosocial information obtained from a patient-centred interview.

11. **C COM 2.1.3** Actively listen and respond to patient cues.

12. **C COM 4.3.1** Use communication skills and strategies that help the patient and family make informed decisions regarding their health.

13. **C P 1.2.2** Analyze how the system of care supports or jeopardizes excellence.