

Otolaryngology Intended Learning Outcomes (ILOs)

This document outlines the listed ILOs for Otolaryngology. This will be examined in the Year 5 summative written examinations. It is important that we impress upon you the limitation of any ILOs in their application to a vocational professional course such as medicine.

ILOs may be useful in providing a 'shopping list' of conditions that you will be expected to describe and anticipate. The depth and extent of your knowledge of each condition will be a joint function of the condition's frequency and its gravity.

These ILOs are based on those on the Student and Foundation Doctors in Otolaryngology (SFO UK) (Website: http://sfo.entuk.org/services/undergraduate-curriculum) and developed with extensive input from ENT surgeons, General Practitioners, General Medicine and Emergency Medicine physicians across the United Kingdom and reflects the Otolaryngology conditions that you will see in these specialties.

Please use the ILOs to make sure you are familiar with the top presentations, and have covered all common and important conditions. The list does not comprise of the entire coda for successful medical practice but will provide you with a solid platform from which to build upon. More detailed explanations and outlines will be available in the standard textbooks. Any elucidation or expansion can be obtained there.

Even more important is the point that ILOs will point you in the correct direction to pass our written exam, but that this is only part of the story. Final exams function as 'objective proof' for the general public that you have enough knowledge to function as a doctor. As you will see during your time on the wards, however, being a doctor requires much more than knowledge; as well as being able to imitate and build on the activities you witness in your clinical placements, it is imperative that you acquire skills, behaviours, specific attitudes, and commitment to your patients' well being. These are well described in GMC documents such as Tomorrow's Doctors 3, and will be 'proved' not by exams, but by our monitoring and the feedback you receive, culminating in the portfolio signed off at the end of the Preparation for Practice module.

Good luck and work hard!

Level Descriptor

This document sets out the core knowledge expected at the completion of Phase 4. At the completion of Preparation for Practice you will also be expected to describe the steps required to provide immediate care for the conditions designated with an asterisk (*) in the tables below. These tables will also provide descriptors of the level of knowledge required for all of the common and/or important surgical conditions and an outline of the level of knowledge for the common and/or important conditions within a valid differential diagnosis. These have been graded level A, B or C to acknowledge the joint function of the conditions frequency and gravity. Your level of knowledge should continue to improve with time in line with the principles of a spiral curriculum.

Level of Knowledge expected for Common/Important presentations

All	 Interpret findings from history and examination to recognise the presentation/s Demonstrate and apply knowledge of the causes of the presentation/s to support inclusion in a differential diagnosis Formulate a plan of investigation
С	 Interpret findings from history and examination to recognise the condition/s Demonstrate and apply knowledge of the condition/s to support inclusion in a differential diagnosis
В	= C + · Formulate a plan of investigation
A	 = B + · Synthesise a full assessment of the patient's problems · Define a likely final diagnosis · Formulate a plan for management · Recognise complications · Estimate prognosis and outline prevention (where relevant)

NOTE: These ILOs are based on those on the Student and Foundation Doctors in Otolaryngology (SFO UK) Website: http://sfo.entuk.org/services/undergraduate-curriculum.

CORE KNOWLEDGE FOR OTOLARYNGOLOGY

- Be able to describe the normal structure and function and pathophysiology in disease of the following.
- Understand how common ear disorders affect an individual's ability to contribute to family life, work and society especially hearing loss, loss of balance and tinnitus.
- Understand the incidence/prevalence and prognosis of common otolaryngology conditions
- Be aware of red flag symptoms and fast track referral of head and neck malignancy.
- Basic knowledge of different types of hearing aid available including bone anchored hearing aids and cochlear implants
- Be aware of the current criteria for recommending tonsillectomy:
- http://www.sign.ac.uk/pdf/sign117.pdf
- Have a basic knowledge of the following otolaryngology procedures, operative sequelae and aftercare: Tonsilectomy, adenoidectomy, laryngectomy, tracheostomy, thyroidectomy, endoscopic sinus surgery, septoplasty

Otology:

The Ear with particular reference to;

Tympanic Membrane

Middle ear

Labyrinth

Physiology of hearing and balance

Neck:

Neck

Oral cavity

Thyroid

Pharynx and Larynx

Salivary glands

Physiology of swallowing

Rhinology:

External nose

Nasal passages

Sinuses and paranasal sinuses

Physiology of taste and smell

OTOLARYNGOLOGICAL EMERGENCIES

Be able to provide immediate care including basic and advanced life support with appropriate referral to the specialist in ENT emergencies including:

Airway obstruction

Foreign body in: Throat, ear or nose

Head and Neck trauma: Tympanic membrane injury, fractured nose, and septal haematoma

Epistaxis

Resuscitation of a patient with a tracheostomy or laryngectomy

CORE HISTORY AND EXAMINATION FOR OTOLARYNGOLOGY

History:

Be able to take a full history relevant to common and or important presentation

Examinations:

Be able to perform the following specific examinations, obtaining appropriate consent and recognising the conditions required when conducting intimate examinations

Oral cavity and oropharynx with head torch and tongue depressor

Nose with head torch and Thudicum's speculum

Neck

Ear including the external auditory meatus using the otoscope

Hearing using clinical voice tests

Basic clinical balance tests including Romberg and Hallpike tests

Relevant cranial nerve

Be able to discuss the principles of the following specific examinations:

Flexible and rigid endoscopy of the upper airways Fine needle aspiration for cytology

Otology

Common and Important presentations

Hearing loss, loss of balance, vertigo, dizziness, tinnitus,

Learning Point	Phase 4	Paediatrics	Preparation
	Otolaryngology		for Practice
Otitis externa	A		*
Skull base osteomyelitis	В		*
Acute otitis media	A	A	*
Otitis media with effusion	В	В	
Tympanic membrane perforation	A	A	*
Chronic otitis media including cholesteatoma	A	A	*
Facial palsy	A	*	*
Otosclerosis	A		
Grommet insertion	С	С	
Benign Paroxysmal Positional Vertigo (BPPV)			
Vestibular neuronitis	В		
Meniere's Disease	A		
Vestibular schwannoma (acoustic neuroma)	С		

Otology - Paediatric specific topics

Learning Point	Paediatrics
Prominent ears	В
Neonatal screening	С
programme	
Speech and Language	С
development	

Head and Neck

Common and Important presentations

Goitre, neck lump, dysphagia, dysphonia, facial pain

Learning Point	Phase 4	Paediatrics	Preparation
	Otolaryngology		for Practice
Carcinoma of the	A		*
mouth, larynx,			
nasopharynx and			
pharynx			
Carcinoma of the	С		
oesophagus			
lymphoma	С		
Goitre	A		*
Thyroid malignancy	С		*
Thyroiditis	С		*
Thyroglossal cyst	С		
Salivary gland tumours	В		
Sialadenitis	В		
Salivary gland stones	С		
and strictures			
Acute tonsillitis	A	A	
Peritonsillar abscess	В		*
and parapharyngeal			
abscess			
Epiglottitis and	В	Α	
supraglottitis			
Acute viral infections	A	Α	
Obstructive sleep	С		
apnoea			
Acute laryngeal oedema	С		*
Branchial cyst	A		
Lesions of the oral	A		
cavity including			
leukoplakia			
Vocal cord paralysis	A		*
Vocal cord nodules and	A		
polyps			
Pharyngeal pouch	A		

Rhinology

Common and Important presentations

Rhinitis, epistaxis, facial pain

Learning Point	Phase 4 Otolaryngology	Paediatrics	Preparation for Practice
Rhinusinusitis	В	В	