Otolaryngology – Head and Neck Surgery: Foundation EPA #13

Identifying patients presenting with an anticipated difficult airway and preparing for initial management options

Key Features:
- The observation of this EPA is divided into two parts: patient assessments and performing a procedure (bag mask ventilation, insertion of laryngeal mask airway, videolaryngoscopy for endotracheal intubation)
- This EPA may be observed in a real or simulated case

Assessment plan:

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

Use Form 1.
Collect 2 observations of achievement
- At least 2 different assessors

Part B: Procedure
Supervisor does assessment based on direct observation

Use Form 2. (O-score criteria) Form collects information on:
- Setting: clinical; simulation
- Videolaryngoscopy: yes; no

Collect 2 observations of achievement
- At least one videolaryngoscopy for endotracheal intubation
- At least two assessors

Relevant milestones (Part A)

1. F ME 1.7.2 Recognize and respond to the complexity and uncertainty with managing an anticipated difficult airway by seeking proper assistance
2. F ME 2.1.3 Recognize patients at risk of aspiration of gastric contents into the airway
3. F ME 2.2.2 Elicit a focused history and perform a physical exam to identify patients with potential for a difficult airway
4. F ME 2.2.12 Identify predictors of a difficult airway on physical examination such as a large overbite, large tongue, narrow mouth opening, short chin and/or Mallampati score
5. F ME 2.4.2 Recognize and suggest an initial management plan for emergent issues
6. F ME 3.1.4 Understand the indications and risks of rapid sequence induction and intubation
and their steps of execution

7 F COM 5.1.4 Document the airway/intubation information accurately and comprehensively within an electronic or written medical record

8 F COL 1.3.3 Communicate effectively with physicians and other colleagues in the health care professions

9 F COL 2.1.1 Actively listen to and engage in interactions with collaborators

10 TD COL 2.1.2 Show respect towards collaborators

11 F L 2.2.2 Apply American Society of Anesthesiology (ASA) Guidelines for Management of the Difficult Airway

12 F S 1.1.3 Demonstrate a structured approach to monitoring progress of learning in the clinical setting

13 F S 1.2.3 Identify opportunities for learning and improvement by reflecting on and assessing performance and preparation

14 F S 3.1.1 Recognize uncertainty and knowledge gaps in clinical and other professional encounters relevant to Otolaryngology – Head and Neck Surgery