Otolaryngology

Specialty Overview
Overview

ORL is the third largest surgical specialty in the UK.

ORL deals with the diagnosis and treatment of the whole range of medical and surgical problems affecting the ear, nose and throat.

There has been a trend towards specialisation within ORL. These areas of special interest do not have a separate specialty advisory committee (SAC) within the surgical collegiate structure.

The areas of special interest in ORL at the time of writing are as follows:

- Head and neck oncology
- Benign head and neck surgery
- Paediatric otorhinolaryngology
- Otology
- Neuro-otology
- Skull base surgery
- Medical rhinology
- Surgical rhinology
- Facial plastics
- Phoniatrics
- Cleft lip and palate

In addition trainees will be expected to pursue activities which support professional development, for example:

- Academic ORL
- Management
- Education
The Purposes of Training in ORL

The purpose of training in the specialty of ORL surgery is to produce clinicians competent to work as consultant ORL surgeons in the UK.

This includes:

- Competence to manage patients presenting on an unselected emergency ORL ‘take’, diagnosing, assessing and treating or referring on as appropriate.
- Competence in the management of patients presenting with a range of symptoms and elective conditions as specified in the core syllabus for ORL.
- Knowledge of the subject in depth and breadth, which supports accurate diagnosis, assessment and onward referral where appropriate.
- Competence to manage an additional range of elective and emergency conditions by virtue of appropriate training and assessment opportunities obtained during training.
- Through appropriate training and experience, to contribute to the development of a body of consultant surgeons capable of delivering the wide range of medical, managerial and educational skills required by the health services in the UK.
- To impart the professional competences as outlined in the syllabus and derived from the CanMEDS framework of the Canadian Medical Association and Good Medical Practice of the General Medical Council of the UK.
The Training Pathway in the Specialty of ORL Surgery

The syllabus is linked with a number of related surgical specialties during the first two years of training (themed training). Thereafter training is conducted solely within the specialty unless interface modules are taken during the final years.

The minimum objective of training is to produce specialist surgeons who are emergency safe and can manage the common conditions set out in the syllabus, from start to finish. At successful completion of training, CCT holders will also possess a depth and breadth of knowledge that permits accurate diagnosis and assessment of a wide range of conditions and onwards referral as appropriate.

Each trainee should be able to develop an area of special interest to a higher standard. He/she will contribute to the development of the service in its broadest terms in line with the principles laid out in CanMEDS framework of the Canadian Medical Association and Good Medical Practice of the General Medical Council of the UK.

The purposes of training in the specialty of ORL surgery are defined elsewhere.

The syllabus supports a curriculum that is divided into three Stages, which together form the training continuum through to the level of a CCT in the Specialty of ORL.

The curriculum is competence based and progress is regulated by the acquisition of specific gaols set for each stage. Assessments occur at a national, regional or local level.

Variation in the time to achieve the specified learning outcomes is permitted, but an indicative time-frame is set within each stage and these are conveniently considered as annual periods (i.e. ST1, ST2, etc. to fit with the annual review of competence progression panels.

The indicative time frames for each stage are as follows:

- The initial stage of training in the specialty of ORL: 2 years
- The final stage of training in the specialty of ORL: 4 - 5 years
- The special interest training in the specialty of ORL surgery: 1- 2 years

Giving an overall predicted length of training of 7 - 8 years for the majority of trainees entering the specialty.

Within the syllabus, related areas of learning and training are integrated in the form a series of modules designated as Key Topics.
The Scope And Standards Of ORL Practice At CCT

This list defines, in general terms the essential skills and levels of clinical expertise expected of an ORL surgeon emerging from training having completed the surgical specialty CCT. It is unlikely that the expertise will be confined to the descriptions that follow as most ORL surgeons will have developed additional interests and competences by the time that they emerge from training. There is flexibility within the curricula to accommodate this.

Where the specialty encompasses areas of special interest that require additional training, these are expressed in lists that build on the essential components of the CCT syllabus.

Those pursuing a career in ORL surgery should undertake further professional development following the acquisition of the CCT. The range and levels of expertise will change in response to the demands of the service, personal aspirations and the needs of patients.

Taking into account the present and future requirements of the service, the ORL surgeon emerging from training at CCT level will expect to deal with patients presenting with a range of problems. As it is used here, the term ‘manage’ equates to diagnosis, assessment and treatment or referral as appropriate. The levels of expertise expected are further expressed within the detail of the syllabus.

At CCT, the ORL surgeon will be able to:

1. Manage patients presenting with the common ORL emergencies
   1. Able to diagnose and treat patients presenting with foreign bodies in the ear, nose and throat including the oral cavity and airway
   2. Able to diagnose and treat acute infections of the head and neck, oral cavity, ear and sinuses. This would include managing the complications and onward referral where appropriate.
   3. Able to manage epistaxis, emergency airway problems, acute dysphagia, sudden hearing loss, facial palsy, facial and neck trauma.

2. Manage paediatric conditions.
   1. Congenital conditions including adenoid obstruction
   2. Obstructive sleep apnoea
   3. Sinusitis and its complications
   4. Otitis media and its complications
   5. Hearing and development problems
   6. Upper airway conditions affecting the larynx and pharynx.

3. Manage conditions of the external and middle ear.
   1. Infections of the external and middle ear
   2. Acute and chronic inflammatory conditions including cholesteatoma,
   3. Conditions affecting hearing
   4. Facial nerve palsy
   5. Tumours of the skin and middle ear mucosa
   6. Other congenital and vascular abnormalities.

4. Manage conditions of the inner ear.
   1. Deafness due to ageing
   2. Infections
   3. Noise trauma
   4. Ototoxicity and development problems
   5. Meniere’s syndrome
   6. Acoustic neuroma
   7. Benign positional vertigo
8. Vestibular neuronitis.

5. Manage conditions of the nose and paranasal sinuses.
   1. Acute infections
   2. Chronic facial pain
   3. Allergic rhinitis
   4. Non-allergic rhinitis
   5. Nasal polyps
   6. Granulomatous rhinitis
   7. Nasal tumours both benign and malignant
   8. Disorders of the sense of smell and occupational rhinitis

6. Manage conditions of the oral cavity
   1. Infections of the oral cavity including tonsillitis, peritonsilar abscess, oral ulceration
   2. Carcinoma
   3. Temperomandibular joint dysfunction
   4. Dental conditions
   5. Lesions of the minor salivary glands.

7. Manage conditions of the larynx and pharynx.
   1. Pharyngeal pouches
   2. Stridor, acute and chronic
   3. Laryngitis
   4. Disorders of the voice
   5. Carcinoma and other tumours of the larynx and hypopharynx
   6. Lesions of the lower oesophagus and tracheostomy.

8. Manage conditions of the neck, thyroid and salivary glands.
   1. The differential diagnosis of head and neck lymphadenopathy
   2. Benign and malignant skin lesions
   3. Sialadenitis
   4. Benign and malignant salivary lesions
   5. Thyroid conditions

9. Professional skills and behaviours
   1. And will demonstrate the professional skills and behaviours associated with consultant practice in the UK (including those outlined in CanMEDS and Good Medical Practice).
Areas of Special Interest

Head and Neck oncology

The majority of the activity in this area involves the management of patients with malignancy of the skin and structures of the head and neck, larynx and pharynx, oral cavity and paranasal sinuses.

The specialist should work in a team comprising maxillofacial surgeons and oncologists as well as supporting and diagnostic staff. Such specialists may well have undertaken an interdisciplinary fellowship (interface module).

Benign Head and Neck Surgery

Management of benign tumours of the salivary glands, thyroid and other head and neck structures form the main part of the workload.

Surgeons who have developed this area of special interest should work as part of the relevant multidisciplinary team e.g. endocrine services.

Paediatric Otorhinolaryngology

While paediatric ORL accounts for approximately a third of routine ORL practice, it is recognised that children with congenital lesions, airway problems and developmental conditions including speech and hearing deficits, require more specialist input.

These specialists will often work in a multidisciplinary team in order to provide such services.

The specialist may focus on one area such as paediatric cochlear implantation or airway problems.

Otology

Complex middle ear surgery and the management of hearing problems form the major part of practice in this area.

Neuro-otology

This specialty focuses on the management of disorders of the cochlea and vestibular apparatus and the rehabilitation of patients thus affected. In this area, the function of the ORL specialist is usually one of investigation and non-operative management, but some specialists will practice skull base surgery in circumscribed areas such as acoustic neuroma.

Skull Base Surgery

Specialists in this area work with neurosurgeons and other colleagues as a member of a multi-disciplinary team, which tackles conditions such as tumours of the lateral and anterior skull base.

Typical work would include repairing cerebrospinal fluid leaks, acoustic neuroma excision and endoscopic pituitary work.
Medical Rhinology

This area involves the management of nasal and sinus conditions, including undertaking the full range of treatments for allergy such as desensitization.

Surgical Rhinology

Although comprising conventional and endoscopic surgery, the surgical specialist in this area will have additional expertise to that required for routine ORL practice. For example the specialist working in this area may undertake surgery in the frontal recess, or more complex rhinoplasty.

Such specialists may work in teams with the neurosurgeons or endocrinologists when undertaking pituitary surgery or CSF leaks.

Facial Plastic Surgery

The majority of practice in this area involves the selection and management of patients for cosmetic rhinoplasty. Soft tissue face and neck work may form part of the practice such as the surgery for ageing.

Phoniatics

This is a developing area focussing on the management of patients with voice disorders, often relating to work their occupation such as professional voice users and performers.

Practice in this area involves working closely with speech therapists and other specialist workers in the field, as there are often other issues such as psychological factors that require consideration and management.

Treatments may range from rehabilitation through to active interventions such as Botox injections into the muscles of phonation or endoscopic surgery.

Cleft Lip and Palate

At the time of writing, in order to provide the UK service there are three interface training fellowships offered each year. These are open to ORL, maxillofacial and plastic surgical trainee by application following advertisement.

The ORL surgeon may form part of the team managing the ear and nasal conditions.

Academic Surgery

Academic surgery provides an exciting and challenging career for those who wish to combine clinical surgery with a major commitment to research and undergraduate teaching.

Trainees interested in this career pathway will, in addition to completing clinical training in ORL, acquire a high level of competency in research. After completing their clinical training those committed to an academic career will pursue a position in a university department as senior lecturer with a longer-term view to promotion to a chair in surgery.
Trainees must complete the full requirements of the specialty curriculum in order to gain the CCT.

Management

The importance that all consultants are trained in management and leadership skills is well recognised. Trainees who wish to undertake further development in this area will be encouraged to undertake further studies in parallel with their clinical and professional training.

Education

It is imperative that the surgical profession maintains its reputation for high quality teaching, training and assessment.

All consultants receive training in this area and there are now available courses that will lead to the acquisition of further qualifications such as Cert. Ed, M.Sc. or Masters in these disciplines for trainees wishing to develop these skills further in parallel with their clinical studies.
The Configuration and Delivery of ORL Services

- The service comprises emergency and elective elements both of which require significant supporting infrastructure in order to deliver them to modern standards.
- Some specialists may work outside the current hospital structure.
- A full range of outpatient diagnostic services such as audiology and diagnostic endoscopy are required. Many of the surgical services may be delivered through short stay facilities.
Future Trends in ORL

- It is likely that the emphasis towards greater subspecialisation will continue, especially in the sphere of elective practice.
- The government has signalled its intention to devolve the delivery of surgical services for elective conditions into smaller, independent units, including primary care, where at all possible.
Key Topics

Key Topics in Otolaryngology

Otology

- Congenital and acquired deformity of the ear and temporal bone
- Deafness in adults and children
- Disorders of the external ear
- Acute and Chronic middle ear disease including Otitis media with effusion
- Disorders of equilibrium
- Tinnitus
- Disorders of the facial nerve
- Cerebello-pontine angle tumours

Rhinology and Facial Plastics

- Rhinitis/Sinusitis ~ including allergy, inflammation and infection
- Congenital and acquired deformities of the facial and nasal skeleton
- Tumours of the nose and paranasal sinuses including skin tumours of the face, head and neck
- Epistaxis
- Facial pain

Head and Neck

- Congenital and acquired deformity of the larynx
- Voice disorders
- Disorders of the thyroid and salivary glands
- Head and neck cancer and other causes of neck masses
- Disorders of the pharynx and oesophagus including diseases of the tonsils
- Upper airway obstruction
- Infections of the soft tissues of the Head and Neck
- Sleep apnoea in adults

Paediatric Otolaryngology

- Deafness in childhood including congenital deformities of the temporal bone
- Upper airway disorders and sleep apnoea in children
- Neck masses in children
- Acute and chronic ear disease in children
- Disorders and deformity of the external ear
Initial Stage

The purpose of the initial phase is to allow the trainee to develop the key skills and knowledge that will allow further progress in the specialty.

By the end of ST2 the trainee will have acquired the following:

- Generic Skills to allow team working, and management of both adult and paediatric patients with disorders of the ears nose and throat
- Clear understanding of the basic sciences (anatomy, physiology, pathology, embryology and genetics) as they relate to disorders of the ears nose and throat and the practice of ORL Surgery
- Competence in both diagnosis and management of common ear nose and throat surgical conditions including an understanding of acoustics and basic audiology.
- Competence in the operative management of a range of common abnormalities of the ears nose and throat.

During the initial stage the trainee will be expected to understand the aetiology, presenting signs, symptoms and management of common ORL conditions as listed below. The detail of the level of competence required in knowledge, clinical skills, technical skills and procedures and professional skills are defined in the syllabus.

Otology

- Deafness in adults
- Facial Paralysis
- Tinnitus
- Trauma
- Middle ear
- Non infective conditions of the external ear
- Infective conditions of the external ear including otitis externa, furunculosis, otomycosis, myringitis granular and benign / herpetic
- Dizziness

Paediatric

- Neck Masses
- Airway Disorders
- Congenital deformities affecting the head and neck
- Deafness excluding otitis media and its complications
- Facial Palsy
- Otitis media and its complications
- Disorders of the external ear in children
- Nose and Sinus infections
- Inflammatory nasal disease (including allergic rhinitis)
- Nasal Polyps in Children
- Foreign bodies in the ear nose and throat
- Epistaxis
- Trauma to the head and neck
- Tonsils and adenoids
- Speech and language development
- Oncology
Head and Neck

- Aetiology and management of congenital abnormalities of the head and neck affecting adults
- Oral pathology
- Airway obstruction in adults
- Voice disorders
- Disorders of swallowing
- Sleep related breathing disorders
- Adenoid and tonsillar pathology in adults
- Neoplastic salivary gland disease
- Benign salivary gland disease
- Thyroid and parathyroid disease
- Head and neck malignancies in the upper aerodigestive tract excluding the oral cavity
- Aetiology and management of the craniocervical trauma in adults
- Aetiology and management of cervical sepsis
- Cervical lymphadenopathy in adults
- Investigation and management of the neck lump

Rhinology

- Congenital abnormalities
- Nose and sinus infections
- Nose and sinus inflammation including allergy
- Nasal polyps
- Facial pain
- Epistaxis
- Nasal trauma and deformity
- Rhinological oncology
- Granulomatous conditions
- Septorhinoplasty
- Congenital abnormalities
- Cosmetic surgery
- Reconstruction

**ST1 Placement**

The purpose of a four or six month placement in ORL surgery is to provide:

- trainees with insight into the specialty, and the role of the ORL surgeon
- skills which may be a basis for further training in the specialty, or which may be transferable and creditable to other specialties or disciplines

**Knowledge**

- An introduction to the anatomy, physiology and pathology of the ears, nose, throat and neck
- An introduction to the signs, symptoms and management of common ORL disorders

**Clinical Skills**

- An ability to carry out a comprehensive clinical examination of the ears, nose, throat and neck
• An introduction to treatment planning in the management of head and neck malignancies, and other complex ORL and head and neck disorders.
• Ability to manage common ORL emergencies which include:
  - Simple epistaxis
  - Otitis externa
  - Foreign bodies in the ear, nose and oropharynx
  - Acute oropharyngeal infections
  - Simple fractures of the facial skeleton

**Technical Skills**

• Endoscopic or microscopic examination in the outpatient clinic
• Endoscopic or microscopic examination in the operating theatre with biopsy as appropriate of the ears, nose and throat
• An acquisition of basic surgical skills in disorders of the ears, nose, throat head and neck and upper aerodigestive tract
• Specific skills in relation to the management of common ORL conditions which include:
  - Nasal cautery
  - Foreign body removal from the ear canal, nose and oropharynx
  - Microsuction of the ears
  - Drainage of a quinsy
  - Reduction of simple nasal fractures

**Professional skills and behaviours**

• As specified in the professional skills and behaviour syllabus

Click on [Workplace Based Assessments](#) to view the assessment forms including DOPS and PBAs

**Topics**

- **Topic**
- **Category**
- **Sub-category:** None

**Objective**

- *Basic sciences*
  - *Underpinning basic science knowledge appropriate for the practice of surgery.*
  - *Applied anatomy: Knowledge of anatomy appropriate for surgery*
  - *Physiology: Knowledge of physiology relevant to surgical practice*
  - *Pathology: Knowledge of pathological principles underlying system specific pathology*
  - *Microbiology: Knowledge of microbiology relevant to surgical practice*
  - *Radiology: Knowledge of diagnostic and interventional radiology*
  - *Applied anatomy:*

**Knowledge**

- 4 Development, organs and structures, surface and imaging anatomy of thorax, abdomen, pelvis, perineum, limbs, neck as appropriate for surgical operations
4 Homeostasis
3 Thermoregulation
3 Metabolic pathways
4 Blood loss
4 Sepsis
4 Fluid balance and fluid replacement therapy
3 Metabolic abnormalities

Pathology:

4 Inflammation
4 Wound healing
4 Cellular injury
4 Vascular disorders
4 Disorders of growth, differentiation and morphogenesis
4 Tumours
3 Surgical immunology
3 Surgical haematology

Microbiology:

4 Surgically important microorganisms
4 Sources of infection
4 Asepsis and antisepsis
4 Sterilisation
4 Antibiotics
4 High risk patient management

Radiology:

3 Principles of diagnostic and interventional radiology

Clinical Skills: No content
Technical Skills and Procedures: No content
Professional Skills: Please see the Professional Skills and Behaviour » Initial section for these skills

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<th>Basic surgical skills</th>
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<tr>
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Acquisition of basic surgical skills in instrument and tissue handling.

Incision of skin and subcutaneous tissue: Ability to incise superficial tissues accurately with suitable instruments.

Closure of skin and subcutaneous tissue: Ability to close superficial tissues accurately.

Knot tying: Ability to tie secure knots.

Haemostasis: Ability to achieve haemostasis of superficial vessels.
Tissue retraction: Use of suitable methods of retraction.

Use of drains: Knowledge of when to use a drain and which to choose.

Tissue handling: Ability to handle tissues gently with appropriate instruments.

Skill as assistant: Ability to assist helpfully, even when the operation is not familiar.

Incision of skin and subcutaneous tissue:

- 4 Langer’s lines
- 4 Healing mechanism
- 4 Choice of instrument
- 4 Safe practice
- 4 Basic Surgical Skills course

Closure of skin and subcutaneous tissue:

- 4 Options for closure
- 4 Suture and needle choice
- 4 Safe practice

Knot tying:

- 4 Choice of material

Knowledge

Haemostasis:

- 4 Techniques

Tissue retraction:

- 4 Choice of instruments

Use of drains:

- 4 Indications
- 4 Types
- 4 Management/removal

Tissue handling:

- 4 Choice of instruments

Incision of skin and subcutaneous tissue:

- 4 Ability to use scalpel, diathermy and scissors

Clinical Skills

Closure of skin and subcutaneous tissue:

- 4 Accurate and tension free apposition of wound edges

Knot tying:
4 Single handed
4 Double handed
4 Instrument
4 Superficial
4 Deep

Haemostasis:
4 Control of bleeding vessel (superficial)
4 Diathermy
4 Suture ligation
4 Tie ligation
4 Clip application

Tissue retraction:
4 Tissue forceps
4 Placement of wound retractors

Use of drains:
4 Insertion
4 Fixation
4 Removal

Tissue handling:
4 Appropriate application of instruments and respect for tissues

Skill as assistant:
4 Anticipation of needs of surgeon when assisting

Technical Skills and Procedures
No content

Professional Skills
Please see the Professional Skills and Behaviour » Initial section for these skills

Topic The Assessment and Management of the Surgical Patient
Category Core Surgical Skills and Knowledge for All Specialties
Sub-category: None
Objective Ability to assess the patient and manage the patient, and propose surgical or non-surgical management.
Knowledge No content
3 Surgical history and examination (elective and emergency)
3 Construct a differential diagnosis
3 Plan investigations

Clinical Skills
3 Clinical decision making
3 Case work up and evaluation; risk management
3 Active participation in MDTs
3 Taking consent for intermediate level intervention; emergency and elective
Technical Skills and Procedures
No content

Professional Skills
Please see the Professional Skills and Behaviour » Initial section for these skills

Topic Peri-operative care
Category Core Surgical Skills and Knowledge for All Specialties
Sub-category: None

Ability to manage patient care in the peri-operative period.

Pre-operative assessment and management: Ability to assess the patient adequately prior to operation and manage any pre-operative problems appropriately.

Intraoperative care: Ability to conduct safe surgery in the operating theatre environment.

Post-operative care: Ability to care for the patient in the post-operative period.

Blood Products: Appropriate use of blood products.

Antibiotics: Appropriate use of antibiotics.

Pre-operative assessment and management:

4 Cardiorespiratory physiology
3 Diabetes mellitus
3 Renal failure
4 Pathophysiology of blood loss
4 Pathophysiology of sepsis
4 Risk factors for surgery and scoring systems
3 Principles of day surgery

Intraoperative care:

4 Safety in theatre
4 Sharps safety
4 Diathermy, laser use
4 Infection risks
3 Radiation use and risks
4 Tourniquets
3 Principles of local, regional and general anaesthesia

Post-operative care:

4 Cardiorespiratory physiology
3 Diabetes mellitus
3 Renal failure
4 Pathophysiology of blood loss
4 Pathophysiology of sepsis
4 Complications specific to particular operation
2 Critical care

Blood Products:

4 Components of blood
4 Alternatives to use of blood products

Antibiotics:

4 Common pathogens in surgical patients
4 Antibiotic sensitivities
4 Antibiotic side-effects
4 Principles of prophylaxis and treatment
Pre-operative assessment and management:

4 History and examination
4 Interpretation of pre-operative investigations
3 Management of comorbidity
4 Resuscitation

Intraoperative care:

4 Safe conduct of intraoperative care

Post-operative care:

4 Assessment of patient’s condition
4 Post-operative analgesia
4 Fluid and electrolyte management
4 Monitoring of post-operative patient
4 Detection of impending organ failure
4 Initial management of organ failure
4 Use of MDT meetings

Blood Products:

4 Appropriate use of blood products
4 Management of the complications of blood product transfusion

Antibiotics:

4 Appropriate prescription of antibiotics

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills
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<tr>
<td>Objective</td>
<td>Understanding of practice in the prevention and management of Venous</td>
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Knowledge:

- 3 Pathogenesis of shock
- 1 Differences In Children
- 4 History and examination
- 3 Investigation
- 4 Resuscitation and early management according to ATLS and APLS guidelines
- 3 Referral to appropriate surgical subspecialties

Clinical Skills

- 4 Recognition of conditions likely to lead to the diathesis
- 3 Recognition of abnormal bleeding during surgery

Technical Skills and Procedures

- No content

Professional Skills

Please see the Professional Skills and Behaviour » Initial section for these skills

Knowledge:

- 3 Mechanism of haemostasis
- 3 Pathology of impaired haemostasis e.g. haemophilia, liver disease, massive haemorrhage

Clinical Skills

Treatment:

- 3 Avoidance by correct surgical techniques
- 3 Corrective measures, e.g. warming, packing

Professional Skills

Please see the Professional Skills and Behaviour » Initial section for these skills
thrombosis and Embolism.

Coagulation: Understanding of the physiology and pathophysiology of coagulation.

Diagnosis: Able to arrange basic investigation of patients with suspected venous thrombosis and embolism.

Treatment: Ability to initiate treatment of venous thrombosis and embolism.

Prophylaxis: Use of common methods of prophylaxis against venous thrombosis and embolism.

Coagulation:

2 Clotting mechanism (Virchow Triad)
2 Effect of surgery and trauma on coagulation
2 Tests for thrombophilia and other disorders of coagulation

Diagnosis:

2 Methods of investigation for suspected thromboembolic disease

Knowledge

Treatment:

4 Anticoagulation, heparin and warfarin
2 Role of V/Q scanning, CT angiography and thrombolysis
2 Place of pulmonary embolectomy

Prophylaxis:

3 Knowledge of methods of prevention, mechanical and pharmacological

Coagulation:

4 Recognition of patients at risk

Diagnosis:

3 Awareness of symptoms and signs associated with pulmonary embolism and DVT

Clinical Skills

2 Role of duplex scanning, venography and d-dimer measurement

Treatment:

3 Initiate and monitor treatment

Prophylaxis:

4 Awareness at all times of the importance of prophylaxis

Technical Skills and Procedures No content

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills
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<th>Nutrition</th>
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<tr>
<td>Objective</td>
<td>Recognise the need for artificial nutritional support and arrange enteral nutrition.</td>
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<tr>
<td>Knowledge</td>
<td>3 Effects of malnutrition, both excess and depletion</td>
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<td></td>
<td>3 Methods of screening and assessment</td>
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<td>3 Arrange access to suitable artificial nutritional support, preferably via a nutrition team: Dietary supplements</td>
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<tr>
<td>Clinical Skills</td>
<td>2 Arrange access to suitable artificial nutritional support, preferably via a nutrition team: Enteral nutrition</td>
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<td>1 Arrange access to suitable artificial nutritional support, preferably via a nutrition team: Parenteral nutrition</td>
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<td>Objective</td>
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<td>Research: Ability to perform a simple research study and present the results.</td>
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<td>Teaching: Ability to teach small groups such as medical students.</td>
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<td>Category</td>
<td>Core Surgical Skills and Knowledge for All Specialties</td>
</tr>
</tbody>
</table>

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Objective

Palliative Care: Good management of the dying patient in consultation with the palliative care team.

Principles of organ donation: Knowledge of the principles of organ donation.

Knowledge

Palliative Care:

3 Care of the terminally ill
4 Analgesia
3 Antiemetics
3 Laxatives

Clinical Skills

3 Symptom control in the terminally ill patient

Technical Skills and Procedures

No content

Professional Skills

Please see the Professional Skills and Behaviour » Initial section for these skills

Endocrine and Metabolic Disorders

To identify, investigate and manage surgical patients with common metabolic disorders
- To identify, investigate and manage surgical patients with Thyrotoxicosis
- To identify, investigate and manage surgical patients with Hypothyroidism
- To identify, investigate and manage surgical patients with Hypercalcaemia
- Knowledge of the significance of corticosteroid therapy in patient care
- To identify, investigate and manage surgical patients with Diabetes mellitus
- To identify, investigate and manage surgical patients with Hyponatraemia

Thyrotoxicosis
4 Pathophysiology of thyroid hormone excess and associated risks from surgery

Hypothyroidism
4 Pathophysiology of thyroid hormone deficiency and associated risks from surgery

Hypercalcaemia
3 Causes and effects of hypercalcaemia

Cortico-steroid therapy
4 Complications
4 Steroid insufficiency

Diabetes Mellitus
4 Complications

Hyponatraemia
4 Pathophysiology of fluid and electrolyte balance
4 Causes of hyponatraemia
Thyrotoxicosis
4 History and examination
3 Investigation of thyrotoxicosis

Hypothyroidism
4 History and examination
4 Investigation

Hypercalcaemia
3 Investigation of hypercalcaemia
3 Treatment of hypercalcaemia
Cortico-steroid therapy
4 Peri-operative management of patients on steroid therapy

Diabetes Mellitus
4 Peri-operative management of diabetic patients

Hyponatraemia
4 Treatment

Clinical Skills

Technical Skills and Procedures
No content

Professional Skills
Please see the Professional Skills and Behaviour » Initial section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Child Protection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Core Surgical Skills and Knowledge for All Specialties</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>No content</td>
</tr>
<tr>
<td>Objective</td>
<td></td>
</tr>
<tr>
<td>Knowledge</td>
<td></td>
</tr>
<tr>
<td>4 Working knowledge of Trust and ACPC Child Protection Procedures</td>
<td></td>
</tr>
<tr>
<td>4 Basic understanding of child protection law</td>
<td></td>
</tr>
<tr>
<td>4 Understanding of Children's rights</td>
<td></td>
</tr>
<tr>
<td>4 Working knowledge of types and categories of child maltreatment, presentations, signs and other features (primarily physical, emotional, sexual, neglect, professional)</td>
<td></td>
</tr>
<tr>
<td>4 Understanding of one personal role, responsibilities and appropriate referral patterns in child protection</td>
<td></td>
</tr>
<tr>
<td>4 Understanding of the challenges of working in partnership with children and families</td>
<td></td>
</tr>
</tbody>
</table>

Ability to:

4 recognise the possibility of abuse or maltreatment

Clinical Skills

4 recognise limitations of own knowledge and experience and seek appropriate expert advice
4 urgently consult immediate senior in surgery to enable referral to paediatricians
4 keep appropriate written documentation relating to child protection matters
4 Communicate effectively with those involved with child protection, including children and their families

Technical Skills and Procedures
No content

Professional Skills
Please see the Professional Skills and Behaviour » Initial section for these skills

---

**Topic**: Foreign bodies in the ear canal, nasal foreign bodies, ingested foreign bodies both swallowed and inhaled

**Category**: Paediatric

**Sub-category**: Foreign bodies in the ear nose and throat

**Objective**

1. Safe definitive management of children with suspected and actual foreign bodies in the ear and nose; primary management of inhaled foreign bodies to facilitate safe transfer for tracheobronchoscopy as needed
2. Recognition of the clinical features of foreign bodies in the ear nose and throat; knowledge of the natural history and the complications associated with treatment.

**Knowledge**

1. Assessment of the airway in the child
2. Assessment of plain radiography at a basic level e.g. recognition of gross abnormalities on chest radiograph
3. Assessment of soft tissue x-ray of the neck

**Clinical Skills**

1. Ability to take a thorough history from the child/carer
2. Otoscopy
3. Rhinoscopy

**Technical Skills and Procedures**

1. Removal of nasal foreign body
2. Otomicroscopy and removal of FB

**Professional Skills**

Please see the Professional Skills and Behaviour » Initial section for these skills

---

**Topic**: Nasal injuries, haematoma of the pinna, trauma to the external, middle and inner ear, neck trauma

**Category**: Paediatric

**Sub-category**: Trauma to the head and neck

**Objective**

None

**Knowledge**

1. Presentation and management of nasal fractures
2. Nasal septal haematoma
3. Ear trauma

**Clinical Skills**

1. Good knowledge of common aetiologies and awareness of the possible presentations of non-accidental injury in the ENT department.

**Professional Skills**

Please see the Professional Skills and Behaviour » Initial section for these skills
3 Ability to take a thorough history from child/parent
3 Assessment of the external nose
3 Assessment of the nasal airway
3 Clinical examination of the ear including otoscopy
2 Assessment of the neck including the airway
3 Otoscopy

DATA INTERPRETATION
2 Pure tone audiometry, tympanometry

PATIENT MANAGEMENT
Emergency airway care see section

Technical Skills and Procedures
2 Nasal fracture manipulation
2 Drainage of septal haematoma
2 Drainage of haematoma of pinna

Professional Skills
Please see the Professional Skills and Behaviour » Initial section for these skills

Topic
Spontaneous epistaxis; epistaxis in children with coagulopathy; epistaxis as a presentation of systematic disease

Category
Paediatric

Sub-category:
Epistaxis

Objective
Optimum recognition and management of children with epistaxis;
3 Thorough knowledge of the pathophysiology, epidemiology, natural history and current approach to treatment of epistaxis to include awareness of the evidence base for current treatment regimens.

Knowledge
3 Understand the role of systemic diseases and their treatments in relation to epistaxis
3 Understand the guidelines for investigations

HISTORY AND EXAMINATION
3 Ability to take a thorough history from the child/carer
3 Anterior Rhinoscopy
3 Flexible Nasendoscopy
2 Rigid Nasendoscopy
3 Examination of the neck
3 Otoscopy

Clinical Skills

DATA INTERPRETATION
3 Interpretation of full blood count; awareness of significance of coagulation tests

PATIENT MANAGEMENT
3 Medical and surgical management of epistaxis

Technical Skills and Procedures
3 Nasal cautery

Professional Skills
Please see the Professional Skills and Behaviour » Initial section for these skills

Topic
Rhinosinusitis; complications of sinus infections

Category
Paediatric

Sub-category:
Nose and Sinus infections
Objective

Optimum recognition and management of children with rhinosinusitis; particularly complicated sinus disease e.g. orbital cellulitis, intracranial sepsis.

Knowledge

3 Thorough knowledge of the pathophysiology, epidemiology, natural history and current approach to treatment of infective rhinitis to include awareness of the evidence base for current treatment regimens.
3 Recognition and emergency management of complications

HISTORY AND EXAMINATION

3 Ability to take a thorough history from the child/carer
3 Anterior Rhinoscopy
3 Flexible Nasendoscopy
2 Rigid Nasendoscopy
3 Examination of the neck
3 Otoscopy

Clinical Skills

DATA INTERPRETATION
1 Awareness of imaging techniques; assessment of abnormalities on CT scanning of the paranasal sinuses

PATIENT MANAGEMENT
3 Medical and surgical management of rhinitis, rhinosinusitis

Technical Skills and Procedures

None

Professional Skills

Please see the Professional Skills and Behaviour » Initial section for these skills

---

Topic

Congenital laryngeal pathology including laryngomalacia, subglottic stenosis, acute laryngeal infections

Category

Paediatric

Sub-category:

Airway Disorders

Objective

Safe recognition of main patterns of presentations of children with airway obstruction at birth, in infancy and in later childhood. Includes primary management to enable definitive treatment of main conditions.

Knowledge

2 Clinical feature of airway obstruction, clinical measures to determine severity of obstruction, awareness of spectrum of causes, treatment options and natural history of main conditions at different ages e.g. laryngeal webs in the newborn, laryngomalacia, acute epiglottitis and laryngotraechobronchitis.

HISTORY AND EXAMINATION

1 Assessment of the airway in the newborn

Clinical Skills

DATA INTERPRETATION
1 Assessment of pulse oximetry findings, assessment of plain radiography at a basic level e.g. recognition of gross abnormalities on chest radiograph

PATIENT MANAGEMENT
3 Medical management e.g. steroids, adrenaline, bronchodilators.
1 Emergency airway care

Technical Skills and Procedures

None

Professional Skills

Please see the Professional Skills and Behaviour » Initial section for these skills
<table>
<thead>
<tr>
<th>Topic</th>
<th>Acute tonsillitis, complications of tonsillitis, adenoids, obstructive sleep apnoea</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Paediatric</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Tonsils and adenoids</td>
</tr>
<tr>
<td>Objective</td>
<td>Definitive secondary-care management of adenotonsillar disease in otherwise healthy children, Management in syndromic and special needs children is often in a designated children's hospital</td>
</tr>
<tr>
<td>Knowledge</td>
<td>2 Epidemiology, classification, aetiology and natural history of adenotonsillar disease. Thorough understanding of the evidence base that underpins current treatment approaches. Awareness of controversies. Except for the management of very young (under four years) children and those with complex medical needs e.g. syndromic children.</td>
</tr>
<tr>
<td>Clinical Skills</td>
<td>DATA INTERPRETATION</td>
</tr>
<tr>
<td></td>
<td>2 Assessment of the adenoids and airway using plain radiography</td>
</tr>
<tr>
<td></td>
<td>2 Awareness of the principles that underpin sleep studies in children</td>
</tr>
<tr>
<td>Technical Skills and Procedures</td>
<td>PATIENT MANAGEMENT</td>
</tr>
<tr>
<td></td>
<td>Comprehensive management including surgery as appropriate</td>
</tr>
<tr>
<td></td>
<td>2 Tonsillectomy</td>
</tr>
<tr>
<td></td>
<td>2 Adenoidectomy</td>
</tr>
<tr>
<td></td>
<td>1 Arrest of adenotonsillar bleeding</td>
</tr>
<tr>
<td>Professional Skills</td>
<td>Please see the Professional Skills and Behaviour » Initial section for these skills</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Topic</th>
<th>Syndromes with important ORL manifestations, cleft palate and the major malformations of the ears nose and throat</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Paediatric</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Congenital deformities affecting the head and neck</td>
</tr>
<tr>
<td>Objective</td>
<td>Safe primary management of children with congenital deformities of the head and neck, awareness of the principles that underpin long-term care.</td>
</tr>
<tr>
<td>Knowledge</td>
<td>2 Basic knowledge of the range of deformities that present at birth with an emphasis on awareness of those that affect the airway e.g. choanal atresia, cystic hygroma</td>
</tr>
<tr>
<td>Clinical Skills</td>
<td>DATA INTERPRETATION</td>
</tr>
<tr>
<td></td>
<td>1 Assessment of pulse oximetry findings, assessment of plain radiography at a basic level e.g. recognition of gross abnormalities on chest radiograph</td>
</tr>
<tr>
<td>Technical Skills and Procedures</td>
<td>PATIENT MANAGEMENT</td>
</tr>
<tr>
<td></td>
<td>1 Emergency airway care</td>
</tr>
<tr>
<td></td>
<td>2 Management of OME in cleft palate children</td>
</tr>
<tr>
<td>Professional Skills</td>
<td>None</td>
</tr>
</tbody>
</table>
### Professional Skills

Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Congenital masses e.g vascular malformations, thyroid and thyroglossal duct swellings, acute and chronic infections and granulomatous disorders that cause neck swellings, cervical adenopathy, awareness of the rare malignancies that present with neck masses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Paediatric</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Neck Masses</td>
</tr>
<tr>
<td>Objective</td>
<td>Safe recognition of main patterns of presentations of children with neck swellings at birth, in infancy and in later childhood. Includes primary management to enable definitive treatment of common conditions.</td>
</tr>
</tbody>
</table>

1. Classification of vascular malformations, awareness of treatment options
2. Applied embryology of thyroid gland descent and awareness of commoner causes of swellings related to the thyroid gland and thyroglossal duct
3. Applied anatomy of the neck spaces and awareness of the presentation, clinical features and primary management of abscesses and collections in these spaces

1. Knowledge of the range of causes and natural history of cervical adenopathy, good grasp of the evidence base which guides the selection of children for neck node biopsy

**HISTORY AND EXAMINATION**

1. Assessment of the neck, ability to take a through history from child/parent.

**DATA INTERPRETATION**

1. Assessment of plain radiography at a basic level e.g. recognition of gross abnormalities on chest radiograph. Awareness of the range of imaging options available e.g. sonography, CT, MR scanning.

**PATIENT MANAGEMENT**

1. Emergency airway care
2. The role of surgery

**Technical Skills and Procedures**

1. Flexible endoscopy
2. Incision drainage neck abscess
3. Biopsy neck node

### Professional Skills

Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Speech delay, disorders of articulation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Paediatric</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Speech and language development</td>
</tr>
<tr>
<td>Objective</td>
<td>Awareness of the epidemiology and presentation of delayed speech and its relevance to ENT disorders. Awareness of the main disorders of articulation e.g hyponasal and hypernasal speech.</td>
</tr>
</tbody>
</table>

1. The normal developmental milestones with an emphasis on speech and language acquisition. Major causes of delayed speech
2. Pathology that underlies hyponasal and hypernasal speech. Role of the adenoids

**HISTORY AND EXAMINATION**

1. Ability to take a through history from child/parent
1 Ability to distinguish hyponasal and hypernasal speech i.e. clinical assessment of speech
3 Otoscopy
2 Flexible endoscopy

DATA INTERPRETATION
3 Pure tone audiometry
1 Hearing tests in pre-school child

PATIENT MANAGEMENT

1 Multidisciplinary teams in the management of children with speech and other developmental problems

<table>
<thead>
<tr>
<th>Topic</th>
<th>Technical Skills and Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 Flexible endoscopy, examination of the nasopharynx</td>
</tr>
<tr>
<td></td>
<td>2 Division of tongue tie</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Professional Skills</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please see the <a href="#">Professional Skills and Behaviour » Initial</a> section for these skills</td>
</tr>
</tbody>
</table>

**Main cancers that affect the head and neck in children, including lymphoma**

**Category**: Paediatric

**Sub-category**: Oncology

**Objective**

- Awareness of the epidemiology presentation and principles of management of malignant disease in the head and neck.
- 3 Classification of the main malignancies, knowledge of typical presentations, understanding of the natural history of childhood cancers with an emphasis on differences between adult and childhood disease. Awareness of issues relating to the management of the child and family with cancer including palliative care e.g. management of epistaxis.

**HISTORY AND EXAMINATION**

- 3 Ability to take a thorough history from child/parent
- 3 Examination of the neck
- 3 Examination of the cranial nerves
- 3 Otoscopy
- 1 Flexible endoscopy

**Clinical Skills**

- DATA INTERPRETATION
- 3 Awareness of the range of diagnostic tests available particularly imaging

**PATIENT MANAGEMENT**

- 1 Initial diagnosis and liaison with colleagues

**Technical Skills and Procedures**

- 1 Flexible endoscopy, examination of the nasopharynx
- 4 Neck node biopsy
- 4 Biopsy of tumours

**Professional Skills**

Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

**Congenital lesions including cysts, sinus's and fistulas; abnormalities of the pinna; inflammatory disease of the ear canal**
**Category:** Paediatric  
**Sub-category:** Disorders of the external ear in children

**Objective**  
*Recognition and classification of the principle congenital anomalies; management of otitis externa; management of uncomplicated lesions of the pinna e.g. accessory auricles, sebaceous cysts*

4 Recognition of the clinical features of foreign bodies in the ear nose and throat; knowledge of the natural history and the complications associated with treatment.

**Knowledge**

**Clinical Skills**

**HISTORY AND EXAMINATION**

4 Ability to take a thorough history from the child/carer  
4 Inspection of the external ear and recognition of main anomalies; Otoscopy

**DATA INTERPRETATION**

**PATIENT MANAGEMENT**

3 Rehabilitation of hearing loss in microtia; selection of children for referral for ear reconstruciton/prostheses; Counselling of families but not definitive management of microtia and other major anomalies of the external ear.

**Technical Skills and Procedures**

4 Otomicroscopy  
4 Excision of simple lesions in and around the external ear  
3 Surgery for prominent ears requires specific training

**Professional Skills**

Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

**Topic** Congenital deafness, classification of causes, investigation and rehabilitation  
**Category** Paediatric  
**Sub-category:** Deafness excluding otitis media and its complications

**Objective**

*Awareness of the epidemiology and presentation of deafness, good knowledge of range of causes, awareness of diagnostic and investigative strategies and knowledge of the principles that underpin rehabilitation including amplification and cochlear implantation*

2 Applied embryology of the ear including congenital deformities of the ear and their relationship to deafness  
2 Differential diagnosis  
2 Genetic, syndromic and non-syndromic deafness

**Knowledge**

1 The principles of audiometric screening  
1 The principles of audiological testing and the range of tests available  
1 Rehabilitation of the deaf child with an emphasis on hearing aids  
1 Cochlear implantation

**Clinical Skills**

**DATA INTERPRETATION**

1 Awareness of the range of investigative options available especially the principles of genetic testing e.g connexin measurements, imaging e.g. sonography, CT, MR scanning
PATIENT MANAGEMENT
As above

Technical Skills and Procedures
3 Microscopic examination of the ear

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Acute otitis media, recurrent acute otitis media, otitis media with effusion (OME), chronic otitis media, mastoiditis, intracranial sepsis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Paediatric</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Otitis media and its complications</td>
</tr>
<tr>
<td>Objective</td>
<td>Definitive secondary-care management of inflammatory middle –ear disease and its complications</td>
</tr>
<tr>
<td>Knowledge</td>
<td>4 Epidemiology, classification, aetiology and natural history of each variant of otitis media. 4 Thorough understanding of the evidence base which underpins current treatment approaches. 4 Except for the surgical management of cholesteatoma and the use of bone-anchored hearing aids trainees are expected to progress to level 4.</td>
</tr>
</tbody>
</table>

HISTORY AND EXAMINATION
3 Ability to take a through history from child/parent
3 Otoscopy
3 Examination of the cranial nerves
2 Neurological examination
DATA INTERPRETATION
2 Pure Tone Audiometry
2 Tympanometry
2 Diagnostic imaging e.g. ST scan, MRI
2 Laboratory investigations e.g. blood tests, lumbar puncture and bacteriology results

PATIENT MANAGEMENT
4 Comprehensive management including surgery as appropriate
4 Referral and team working for children with complications of acute otitis media

Technical Skills and Procedures
3 Otomicroscopy
3 Tympanostomy tubes

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Congenital and acquired causes that are of particular importance in children and the principles of management and rehabilitation with an emphasis on how these differ in children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Paediatric</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Facial Palsy</td>
</tr>
<tr>
<td>Objective</td>
<td>Safe primary management of children with facial palsy, recognition of clinical pathologies that present with facial palsy.</td>
</tr>
<tr>
<td>Knowledge</td>
<td>3 Basic knowledge of the range of aetiologies, the natural history of the main causes, and the evidence base that underpins current investigation and management (This section complements the adult curriculum)</td>
</tr>
<tr>
<td>Clinical Skills</td>
<td>HISTORY AND EXAMINATION</td>
</tr>
</tbody>
</table>
3 Ability to take a history from child/parent
3 Otoscopy
3 Examination of the head and neck
3 Assessment of the cranial nerves in children

DATA INTERPRETATION
1 Awareness of the range of diagnostic tests and the principles that govern their use e.g. electroneuronography, imaging of the facial nerve

PATIENT MANAGEMENT
3 Principles of pharmacological management (e.g. steroids, anti-viral agents)
3 Emergency care
3 Eye protection

Technical Skills and Procedures
2 Myringotomy (3 to 4)

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Rhinitis, allergic rhinitis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Paediatric</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Inflammatory nasal disease (including allergic rhinitis)</td>
</tr>
<tr>
<td>Objective</td>
<td>Optimum recognition and management of children with rhinitis. 3 Thorough knowledge of the pathophysiology, epidemiology, natural history and current approach to treatment of allergic rhinitis to include awareness of the evidence base for current treatment regimens.</td>
</tr>
<tr>
<td>Knowledge</td>
<td></td>
</tr>
</tbody>
</table>

HISTORY AND EXAMINATION
3 Ability to take a thorough history from the child/carer
3 Anterior Rhinoscopy
2 Flexible Nasendoscopy
2 Rigid Nasendoscopy
3 Examination of the neck
3 Otoscopy

Clinical Skills DATA INTERPRETATION
3 Skin tests for allergies; Blood tests for allergies;
1 Awareness of imaging techniques; assessment of abnormalities on CT scanning of the paranasal sinuses
1 Knowledge of immunological tests, ciliary function tests/nasal biopsy.

PATIENT MANAGEMENT
3 Medical and surgical management of rhinitis

Technical Skills and Procedures 2 Submucous diathermy

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Inflammatory nasal polyposis; nasal masses e.g. encephalocele, rare nasal tumours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Paediatric</td>
</tr>
</tbody>
</table>

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Sub-category: Nasal Polyps in Children

Objective

3 Recognition of the aetiology and clinical features of foreign nasal polyps including cystic fibrosis and the contents of the anterior cranial fossa presenting as nasal polyps

Knowledge

3 Knowledge of the natural history and the complications associated with treatment
3 The relationship to other respiratory disease including those in the lower respiratory tract

HISTORY AND EXAMINATION

3 Ability to take a thorough history from the child/carer
3 Anterior Rhinoscopy
2 Flexible Nasendoscopy
2 Rigid Nasendoscopy
3 Examination of the neck
3 Otoscopy

Clinical Skills

DATA INTERPRETATION

1 Awareness of imaging techniques; assessment of abnormalities on CT scanning of the paranasal sinuses
1 Knowledge of immunological tests, ciliary function tests/nasal biopsy

PATIENT MANAGEMENT

3 Medical and surgical management of nasal polyposis
1 Investigation of nasal masses

Technical Skills and Procedures

1 Nasal Polypectomy either endoscopically or with direct vision

Professional Skills

Please see the Professional Skills and Behaviour » Initial section for these skills

---

Topic Adnenoid and tonsillar pathology in adults

Category Head and Neck

Sub-category: None

Objective

To understand the aetiology, presenting signs, symptoms and management of benign adenotonsillar and pharyngeal disease. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Demonstrate a detailed knowledge of the anatomy, physiology, pathology & microbiology of the oro and nasopharynx including relevant anatomical relationships
4 Know the presenting signs and symptoms benign adenotonsillar & pharyngeal disease
4 Know the Complications of adenotonsillar infection.
4 Understand the investigation, differential diagnosis and complications of adenotonsillar hypertrophy
4 Know the ‘red flag’ indicators of malignant disease of the pharynx
4 Demonstrate expertise at eliciting an appropriate clinical history and physical signs of benign adenotonsillar and pharyngeal disease and the complications of treatment including those involving the airway
2 Diagnosis and medical management of post-operative haemorrhage following adenotonsillar surgery
Technical Skills and Procedures

4 Incision and drainage of peritonsillar abscess.
3 Tonsillectomy and adenoidectomy in adults and children (see paediatric ENT)
3 Manage the compromised airway due to hypertrophy
1 Surgical management of post-operative bleeding following adenotonsillar surgery

Professional Skills

Please see the Professional Skills and Behaviour » Initial section for these skills.

---

Topic Airway obstruction in adults
Category Head and Neck

Objective
To understand the aetiology, presenting signs, symptoms and management of patients presenting with upper airway disorders in the emergency situation in adults. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

Knowledge
4 Demonstrate a detailed knowledge of the anatomy & physiology of the larynx, trachea, pharynx and oral cavity
3 Understand the microbiology and pathology of disorders of the upper aerodigestive tract.
4 Understand the classification of diseases that may present with airway obstruction.

Clinical Skills
2 Be able to elicit an appropriate clinical history and correctly interpret physical signs.
2 Be aware of the role of investigation in the management of airway obstruction.

Technical Skills and Procedures
2 Be competent at performing the following diagnostic procedures; fibreoptic nasopharyngoscopy, direct laryngoscopy, microlaryngoscopy, bronchoscopy, pharyngo oesophagoscopy
2 Be proficient at performing a surgical tracheostomy in the elective & emergency setting both under general and local anaesthesia
1 Be competent at foreign body removal from the airway in adults

Professional Skills

Please see the Professional Skills and Behaviour » Initial section for these skills.

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Topic Aetiology and management of the craniocervical trauma in adults
Category Head and Neck
Sub-category: None

Objective
To understand the aetiology, presenting signs, symptoms and management of a
patient with craniocervical trauma. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Understand the anatomy of the head and neck
2 Understand the pathophysiological effects of blunt, penetrating and high and low velocity projectile trauma to the bones and soft tissues of the head and neck
2 Understand the Le Fort classification of facial fractures and their effects.
2 Understand the classification of fractures of the mandible and their effects
2 Understand the classification of fractures of the temporal bone and their effects.
2 Understand the consequences and potential complications of injury to structures in the neck, in the 3 horizontal entry zones of the neck.
2 Understand the principles underpinning the appropriate investigation of a patient with a penetrating injury of the neck
4 Understand the principles of the Glasgow Coma Scale and the management of the patient with an altered level of consciousness.
2 Understand the principles of management of traumatic injury to the head and neck, including the indications for urgent surgical exploration and the priorities underpinning the planning of investigation and management.
2 Understand the need for a multidisciplinary approach to management of craniocervical trauma
2 Be able to elicit an appropriate clinical history from a patient with craniocervical trauma (or from a third party witness).
2 Be able to demonstrate the relevant clinical signs from a patient with craniocervical trauma.
1 Be able to appropriately order and interpret the results of investigations in a patient with craniocervical trauma.
1 Be able to coordinate the assembly of an appropriate multidisciplinary team to manage a patient with craniocervical trauma.
2 Be able to secure the airway through intubation or tracheostomy

Knowledge

Clinical Skills

Technical Skills and Procedures

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Disorders of swallowing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Head and Neck</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>None</td>
</tr>
</tbody>
</table>

Objective

To understand the aetiology, presenting signs, symptoms and management of common disorders of swallowing, including dysphagia, globus pharyngeus, neurological swallowing disorders, odynophagia and aspiration. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive

4 Understand the anatomy of the pharynx, and physiology of swallowing.
3 Understand causes of odynophagia.

Knowledge

3 Understand the various hypotheses relating to the aetiology of dysphagia.
4 Understand the investigation and imaging of a patient with dysphagia.
3 Understand the principles of medical and surgical management of dysphagia
4 Elicit clinical history and clinical signs.

Clinical Skills

3 Be able to examine the pharynx and oesophagus with mirrors and endoscopes in outpatients
2 be able to work with Speech & Language therapists in the management of dysphagia
4 Flexible fibreoptic nasopharyngolaryngoscopy
1 Interpretation of videofluoroscopic swallowing studies
1 Fibreoptic endoscopic evaluation of swallowing studies
2 Endoscopic examination of pharynx, larynx and oesophagus under general anaesthesia
2 Removal of foreign bodies from the pharynx, larynx and oesophagus under general anaesthesia
1 Be able to perform competently endoscopic and open pharyngeal pouch surgery

### Professional Skills

Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Aetiology and management of cervical sepsis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Head and Neck</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>None</td>
</tr>
</tbody>
</table>

#### Objective

*To understand the aetiology, presenting signs, symptoms and management of a patient with cervical sepsis. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.*

4 Understand the anatomy of the fascial compartments of the neck.
2 Understand the pathogenesis (including congenital abnormalities) and clinical presentation of deep neck space infections.
2 Know the microbiology of deep neck space infections.
2 Understand the principles of medical and surgical management of deep neck space infections, including image guided drainage procedures.
2 Understand the complications of deep neck space infections and their management.

#### Knowledge

4 Be able to elicit an appropriate history from a patient with deep cervical sepsis.
4 Be able to demonstrate the relevant clinical signs from a patient with deep cervical sepsis.

#### Clinical Skills

3 Be able to order and interpret the results of appropriate investigations, including imaging and microbiological cultures, in a patient with deep cervical sepsis.
1 Be able to undertake treatment of a patient with deep cervical sepsis or complications thereof.

#### Technical Skills and Procedures

2 Be proficient in rigid endoscopic examination of the upper aerodigestive tract
2 Be proficient in management of the compromised upper airway, including tracheostomy.

### Topic

Aetiology and management of congenital abnormalities of the head and neck affecting adults

| Category | Head and Neck |
| Sub-category: | None |

#### Objective

*To understand the aetiology, presenting signs, symptoms and management of a patient with congenital abnormality of the head and neck. This module gives*
some indication of the breadth and depth of required knowledge and surgical skills. This section complements the paediatric section as most of the problems will present there. The list should not be considered to be fully inclusive or exhaustive.

3 Understand the embryology of the head and neck.
3 Understand the anatomy of the neck.
2 Understand the morphology and classification of pharyngeal diverticulae.
2 Understand the pathophysiological effects of pharyngeal diverticulae and the principles underlying their management

Knowledge

2 Understand the theories relating to the pathogenesis of branchial arch abnormalities including branchial cyst, collaral fistula, external ear malformations, thyroglossal duct related malformations, cervical sinuses and fistulae.
2 Understand the principles of management of branchial arch abnormalities including branchial cyst, collaral fistula, external ear malformations, thyroglossal duct related malformations, cervical sinuses and fistulae.
2 Know of syndromes associated with congenital abnormalities of the head and neck

1 Understand the morphology and classification of dentoalveolar malformations and the principles underlying their management.
1 Understand the morphology and classification of congenital abnormalities of the larynx, trachea and oesophagus and the principles underlying their management.
2 Understand the morphology, classification of and pathophysiological effects of cleft lip and palate, and the principles of management thereof.
2 Understand the investigation of congenital abnormalities of the head and neck including imaging and examination under anesthesia.
1 Understand the principles of genetic counselling of patients or the parents of children with congenital abnormalities of the head and neck.
2 Be able to elicit an appropriate history from a patient with a congenital abnormality of the head and neck.
2 Be able to demonstrate the relevant clinical signs from a patient with a congenital abnormality of the head and neck.

Clinical Skills

2 Be able to undertake appropriately ordered investigation of a congenital abnormality of the head and neck.
2 Be able to interpret imaging of congenital abnormalities of the head and neck.
2 Understand the role of a multidisciplinary team in the management of congenital abnormalities of the head and neck.

Technical Skills and Procedures

1 Be able to perform appropriately directed examination under anaesthesia, including endoscopic assessment of a congenital abnormality of the head and neck.
1 Be able to excise a pharyngeal diverticulum using open and endoscopic techniques.
1 Be able to perform surgery to remove abnormalities of the thyroglossal duct.
2 Be able to perform a tracheostomy.
1 Be able to excise a branchial cyst.

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills

Topic Cervical lymphadenopathy in adults
Category Head and Neck
Objective

To understand the aetiology, presenting symptoms & signs and management of patients presenting with cervical lymphadenopathy. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive and exhaustive.

3 Demonstrate knowledge of the aetiology & pathology of cervical lymphadenopathy including manifestations of systemic disease.
3 The need for endoscopic assessment of a neck mass this comes in under demonstrating knowledge of aetiology & pathology therefore
3 Be able to order the appropriate investigations of neck masses
3 Understand the anatomy of the neck, and distribution of cervical lymph nodes. Classify the lymphatic levels of the neck according to the MSK classification.

Knowledge

2 Demonstrate knowledge of the differing histology and microbiological causes of cervical lymphadenopathy.
2 Presentation, aetiology, investigations and pattern of metastatic spread of upper aerodigestive tract, salivary gland, cutaneous and thyroid malignancies. 2 Demonstrate knowledge of the presentation, aetiology, investigations and principles of management of lymphoreticular disease as it applies to the head and neck.
3 Principles of management of patients with cervical lymphadenopathy.
2 Demonstrate knowledge of the indications for medical & surgical management and the complications of management.

Clinical Skills

3 Be able to take a relevant detailed history and interpret clinical signs correctly.

Technical Skills and Procedures

4 Fine needle aspiration cytology
3 Out patient and in patient endoscopy of the UADT.
2 Excision of cervical lymph nodes and deal with the complications.

Professional Skills

Please see the Professional Skills and Behaviour » Initial section for these skills

Topic Head and neck malignancies in the upper aerodigestive tract excluding the oral cavity
Category Head and Neck
Sub-category: None

To understand the aetiology of head and neck malignancies in the upper aerodigestive tract, presenting signs, symptoms and management of patients presenting with HNC. This module gives some indication of the breadth and depth of required. Knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Understand the classification of head and neck malignancies in particular squamous carcinoma as it is the commonest type (HNC) and know the principles of TNM staging.
4 Know the pathology of HNC
4 Understand the presenting signs and symptoms of head and neck cancer.

Knowledge

2 Understand the various hypotheses relating to the aetiology of squamous cell cancer including the cellular basis of oncogenesis.
3 Understand the pattern of spread of malignant disease.
2 Understand how HNC is managed in the multidisciplinary setting.
1 Know the indications for imaging in HNC and the use of relevant imaging modalities.
2 Understand the functional consequences of head and neck cancer, and its treatment.
1 Understand the principles involved in and evidence for the various medical and surgical methods of treatment available for head and neck cancer.
1 Understand the role of surgical and medical treatment in palliative management of patients
1 Understand the indications for reconstructive and rehabilitative surgery (including surgical voice restoration) in HNC
1 Know the various reconstructive options available in HNC
4 Elicit a relevant clinical history and clinical signs including being able to perform an appropriate examination.
2 Be able to work within the MDT, and recognise the contributions made by all team members.
4 Demonstrate good communication skills with other professionals.
1 Be able to break bad news sensitively and appropriately to patients and their families
2 Be able to perform the following diagnostic procedures; microlaryngoscopy, pharyngooesophagoscopy, tonsillectomy, examination of postnasal space, bronchoscopy, Fine Needle Aspiration Cytology (FNAC)

Clinical Skills

4 Elicit a relevant clinical history and clinical signs including being able to perform an appropriate examination.
1 Be able to work within the MDT, and recognise the contributions made by all team members.
4 Demonstrate good communication skills with other professionals.
1 Be able to break bad news sensitively and appropriately to patients and their families
2 Be able to perform the following diagnostic procedures; microlaryngoscopy, pharyngooesophagoscopy, tonsillectomy, examination of postnasal space, bronchoscopy, Fine Needle Aspiration Cytology (FNAC)

Technical Skills and Procedures

1 Total Laryngectomy
1 Comprehensive and selective neck dissection
1 Partial laryngectomy
1 Transoral laser surgery
2 Be able to replace a tracheoesophageal valve in clinic.

Professional Skills

Please see the Professional Skills and Behaviour » Initial section for these skills

Topic Investigation and management of the neck and lump
Category Head and Neck
Sub-category: None
Objective
To understand the aetiology, presenting symptoms & signs and management of patients presenting with a neck lump. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.
4 Understand the anatomy of the neck, and distribution of cervical lymph nodes. Classify the lymphatic levels of the neck.
4 Know the differential diagnosis of a neck lump.
4 Demonstrate knowledge of the aetiology & pathology of cervical lymphadenopathy including manifestations of systemic disease.
3 Understand the presentation, aetiology, investigations and pattern of metastatic spread of upper aerodigestive tract, salivary gland, cutaneous and thyroid malignancies.

Knowledge
3 Understand the appropriate investigation of neck masses
3 Demonstrate knowledge of the presentation, aetiology, investigations and principles of management of lymphoma and leukaemia as it applies to the head and neck.
4 Understand the principles of medical and surgical management of patients with a neck lump
3 Demonstrate knowledge of the potential complications of management.

Clinical Skills
3 Be able to take a relevant detailed history, perform appropriate examination and interpret clinical signs correctly.
3 Demonstrate a rational approach to investigation of a neck lump
3 Perform (FNAC)
3 Out patient and in patient endoscopy of the Upper aerodigestive tract
2 Perform excision biopsy of cervical lymph nodes and deal with the complications.
1 Branchial cyst excision and management of complications

Technical Skills and Procedures

Professional Skills
Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

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**Topic** Neoplastic salivary gland disease

**Category** Head and Neck

**Sub-category:** None

**Objective**

To understand the aetiology, presenting signs, symptoms and management of neoplastic salivary gland disease. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Know the anatomy & physiology of the major & minor salivary glands & their relations.
4 Know the anatomy of the neck.
4 Know the anatomy of the oral cavity.
3 Know the pathology of salivary gland tumours.
3 Understand the classification of salivary gland tumours.
3 Understand inflammatory swellings
3 Know the presenting symptoms & signs of salivary gland tumours.
3 Understand the modalities (cytological & imaging) available for investigating salivary gland tumours
2 Know the differential diagnosis of salivary gland tumours and inflammatory swellings.
2 Understand the principles of management of salivary gland tumours.
2 Understand the potential consequences of salivary gland surgery and the complications of surgery
2 Understand the principles of management (surgical & non surgical) of malignant salivary gland disease
1 Understand the role of reconstructive and palliative surgery in the management of malignant salivary gland disease
4 Be able to elicit an appropriate clinical history and interpret physical signs correctly
3 Demonstrate the ability to detect ‘red flag’ symptoms & signs of malignant disease.
2 Order the most appropriate imaging modality
1 Manage patients with malignant disease in a multidisciplinary team
3 FNAC

**Clinical Skills**

1 Be able to perform a submandibular gland excision
1 Biopsy of a minor salivary gland tumour
1 Be able to perform a superficial parotidectomy

**Technical Skills and Procedures**

**Professional Skills** Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

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**Topic** Benign salivary gland disease

**Category** Head and Neck
<table>
<thead>
<tr>
<th>Sub-category:</th>
<th>None</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective</td>
<td>To understand the aetiology, presenting signs, symptoms and management of benign salivary gland disease. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.</td>
</tr>
</tbody>
</table>
| Knowledge    | 4 Know the anatomy and physiology of the major and minor salivary glands.  
3 Understand the pathological processes, both local & systemic, that can affect the salivary glands.  
3 Understand the classification of benign salivary gland disease including infection, inflammatory diseases, drugs and benign tumours  
3 Know the various imaging modalities for investigation of benign salivary gland disease.  
3 Understand the principles of patient management.  
3 Know the medical and surgical management of salivary gland disease, and the complications of surgery  
4 Be able to elicit an appropriate clinical history and interpret clinical signs correctly. |
| Clinical Skills | 2 Be able to order the appropriate special investigations and correctly interpret images including plain radiographs, computerized tomography and Magnetic resonance imaging.  
2 Be able to counsel patients on the particular risks of salivary gland surgery. |
| Technical Skills and Procedures | 2 Be able to excise a submandibular calculus  
1 Be able to perform submandibular gland excision |
| Professional Skills | Please see the Professional Skills and Behaviour » Initial section for these skills |

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<table>
<thead>
<tr>
<th>Topic</th>
<th>Thyroid and parathyroid disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Head and Neck</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>None</td>
</tr>
<tr>
<td>Objective</td>
<td>To understand the aetiology, presenting signs, symptoms and management of Thyroid and Parathyroid disorders. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.</td>
</tr>
</tbody>
</table>
| Knowledge | 3 Understand the classification of thyroid neoplasia.  
4 Understand the embryology, physiology, biochemistry and anatomy of the thyroid gland.  
4 Understand the embryology, physiology, biochemistry and anatomy of the parathyroid glands.  
4 Understand the pathophysiology of endocrine dysfunction of the thyroid and parathyroid glands.  
4 Understand the principles of investigation of a patient with endocrine dysfunction of the thyroid gland.  
4 Understand the principles of investigation of a patient with endocrine dysfunction of the parathyroid glands.  
4 Understand the principles of investigation of a patient with a parathyroid or |

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thryroid mass

4 Understand principles of medical and surgical management of endocrine dysfunction of the thyroid and parathyroid glands, including the peri operative management of thyrotoxicosis.

4 Understand principles of medical and surgical management of neoplasia of the thyroid and parathyroid glands, including post operative complications.
4 Be able to elicit an appropriate clinical history from a patient with thyroid or parathyroid gland disease.

Clinical Skills
4 Be able to demonstrate relevant clinical signs in a patient with thyroid or parathyroid gland disease

2 Be able to obtain appropriate samples for fine needle cytology or microtrephine biopsy from a patient with a thyroid or parathyroid mass.

Technical Skills and Procedures
1 Be able to perform thyroid surgery.

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills

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**Topic**

**Oral pathology**

**Category**

Head and Neck

**Sub-category:** None

**Objective**

To understand the aetiology, presenting signs, symptoms and management of patients presenting with disorders of the oral cavity. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Understand the anatomy of the oral cavity
4 Know the normal flora of the oral cavity and how oral disease can alter oral flora
3 Understand the physiology of the oral phases of swallowing
3 Know the physiology of salivary function
2 Understand the consequences of oral disease on swallowing
2 Understand the consequences of salivary gland dysfunction on oral health
2 Know the causes of drooling and the principles of management thereof.
1 Understand the aetiology, pathophysiology, presenting symptoms and signs of dental caries
2 Know the pathophysiology, presenting symptoms & signs and management of mucosal oral disease including infection, inflammation, soft tissue and bony conditions
4 Understand the aetiology of oral cancer
3 Know the presenting symptoms and signs of oral cancer
2 Understand the principles of management of oral cancer
3 Understand the long and short term effects of chemotherapy and radiotherapy on oral health
1 Understand the appropriate modalities for imaging oral disease
4 Be able to elicit an appropriate clinical history and interpret physical signs correctly

**Clinical Skills**

2 Demonstrate the ability to detect ‘red flag’ symptoms & signs of malignant disease.
2 Order the most appropriate imaging modality
2 Be able to interpret plain images of the oral cavity and associated bony structures
1 Manage patients with malignant disease in a multidisciplinary team
2 Be able to diagnose dental related sepsis presenting in the neck or paranasal sinuses

Technical Skills and Procedures
3 Perform a biopsy of an oral lesion
1 Remove and treat benign oral lesions
1 Simple dental extractions

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills

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**Topic**  
**Sleep related breathing disorders**

**Category**  
Head and Neck

**Sub-category:** None

**Objective**
To understand the aetiology, presenting signs, symptoms and management of sleep related breathing disorders. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

1. Know the aetiology, presenting signs and symptoms of sleep related breathing disorders, including snoring, obstructive sleep apnoea / hypopnoea and central sleep apnoea in adults.
2. Know of the pathophysiological sequelae of sleep related breathing disorders including snoring, obstructive sleep apnoea / hypopnoea and central sleep apnoea
3. Understand the principles of assessment and investigation of sleep related breathing disorders, including sleep nasendoscopy and sleep studies / polysomnography.
4. Understand the principles of management of sleep related breathing disorders including CPAP, mandibular advancement prostheses, nasal and pharyngeal surgery, tracheostomy and drug therapy.
5. Understand the principles of midface and mandibular advancement surgery.

**Knowledge**

1. Be able to elicit an appropriate clinical history and identify relevant clinical signs in a patient with a sleep related breathing disorder.
2. Be able to make a correct diagnosis from the results of assessment and investigation of a patient with a sleep related breathing disorder, and synthesise an appropriate plan for their clinical management.

**Clinical Skills**

1. Be able to perform surgery to correct nasal airway obstruction.
2. Be able to perform sleep nasendoscopy and out patient flexible fibreoptic nasendoscopy

**Technical Skills and Procedures**

**Professional Skills** Please see the Professional Skills and Behaviour » Initial section for these skills

---

**Topic**  
**Voice disorders**

**Category**  
Head and Neck

**Sub-category:** None

**Objective**
To understand the aetiology, presenting signs, symptoms and management of common voice disorders. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.
### Knowledge

1. Understand the physics of sound
2. Understand the embryology of the larynx and congenital malformations of the larynx
3. Understand the maturational / developmental changes of the larynx
4. Understand the anatomy, neuroanatomy and movements of the larynx
2. Understand the physiology of phonation and articulation
2. Understand the classification of dysphonias and the various hypotheses relating to the aetiology of dysphonias.

### Clinical Skills

3. Communication skills with Speech & language therapists and ability to work in a multidisciplinary team.

### Technical Skills

1. Videostroboscopic laryngoscopy in an outpatient setting
1. Microscopic / endoscopic laryngeal surgery
1. Laryngeal framework surgery

### Professional Skills

Please see the Professional Skills and Behaviour » Initial section for these skills.

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### Topic

**Acquired lesions including osteoma, exostosis and atresia, dermatological conditions, benign and malignant lesions, affect of ionizing irradiation on the temporal bone. Trauma and foreign bodies.**

### Category

Otology

### Sub-category:

Non infective conditions of the external ear

### Objective

*To understand the aetiology, pathology, presentation and management of non-infective conditions of the external ear.*

3. systemic conditions affecting external ear
3. dermatological conditions of the external ear
3. pharmacology of medications used in treatment
3. aetiology, pathology, presentation and management of benign and malignant disease

### Knowledge

1. aetiology of acquired atresia of the external auditory meatus
1. pathogenesis of effects of ionizing radiation of the ear and temporal bone
2. aetiology, pathology, presentation and management of osteoma / exostosis
3. management of foreign bodies
3. understand the implications and management of trauma to the ear

**HISTORY AND EXAMINATION**

4. obtain appropriate history

### Clinical Skills

3. clinical examination
3. Otoscopy
2. microscopy
DATA INTERPRETATION
2 interpretation of audiological
2 awareness and interpretation of radiological investigations

PATIENT MANAGEMENT
Medical management
Comprehensive management including surgery as appropriate
3 Referral and team working
3 aural toilet including microsuction and application of dressings
2 biopsy of lesion of external ear wedge excision
1 oncological and reconstructive surgery

Technical Skills and Procedures
1 meatoplasty
1 removal of osteoma / exostosis
2 otomicroscopy and removal of FB’s
2 Drainage of haematoma of pinna
2 suturing of pinna

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Comprehensive management of otitis externa, furunculosis, otomycosis, myringitis granular and benign, herpetic lesions and malignant otitis externa</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Otology</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Infective conditions of the external ear including otitis externa, furunculosis, otomycosis, myringitis granular and benign/herpetic</td>
</tr>
</tbody>
</table>

Objective
To understand the aetiology, pathology, presentation and management of infective conditions of the external ear.

3 Anatomy, physiology and pathology of the external ear and relationship of disease to the temporal bone.
3 Microbiology of external ear

Knowledge
3 Knowledge of antimicrobial and antiviral agents and pharmacology of medications used in treatment
3 The pathogenesis of disorders of the external ear.
3 Differential diagnosis and management of inflammatory conditions
3 Necrotising otitis externa.

HISTORY AND EXAMINATION
History taking, clinical examination including neuro – otological
2 Interpret audio vestibular tests.
2 Understand principles of patient management.

Clinical Skills
Awareness and interpretation of radiological investigations inc bone scanning microbiological reports
2 interpretation of laboratory investigations

PATIENT MANAGEMENT
Medical management
Indications for surgical intervention

Technical Skills
3 Microscopy
and Procedures  
2 suction clearance  
2 biopsy of lesion of external ear  

Professional Skills  
Please see the Professional Skills and Behaviour » Initial section for these skills  

<table>
<thead>
<tr>
<th>Topic</th>
<th>Trauma</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Otology</td>
<td></td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Trauma</td>
<td></td>
</tr>
</tbody>
</table>

To understand the aetiology, presenting signs, symptoms and management of trauma of the external, middle and inner ear including the temporal bone. This module gives some indication of the breadth and depth of required knowledge and surgical skills.

- Anatomy, physiology and pathology of the ear and auditory pathways.  
- The effects of trauma on the pinna, ear canal, tympanic membrane, middle ear, otic capsule and temporal bone.

<table>
<thead>
<tr>
<th>Objective</th>
<th>Knowledge</th>
<th></th>
</tr>
</thead>
</table>
| 3 Anatomy, physiology and pathology of the ear and auditory pathways.  
3 The effects of trauma on the pinna, ear canal, tympanic membrane, middle ear, otic capsule and temporal bone. | 2 The effects and assessment of poly-trauma and neurological injury.  
3 The effects of barotrauma  
2 The surgical and non-surgical management of trauma of the external, middle and inner ear. |  |

HISTORY AND EXAMINATION  
3 History taking, clinical examination,  
2 Audiological and vestibular assessment  
2 Neurophysiological assessment of facial nerve

2 Significance of radiological findings.  
2 Interpret audio-vestibular tests.  
2 Principles of patient management

DATA INTERPRETATION  
2 objective and subjective audiological and vestibular tests  
2 Radiological imaging of the temporal bone, head and neck  
2 Laboratory investigations

PATIENT MANAGEMENT  
Demonstrate communication skills and empathy  
2 Be able to advise the patient of the treatment options, discuss risks and potential benefits, potential complications  
3 To work where appropriate in a multidisciplinary team liaise with other professional and organisations  
3 The importance of teamwork in managing critically ill patients  
3 Microscopy  
2 Suction clearance of ear  
1 meatoplasty  
2 Drainage of haematoma of pinna  
2 suturing of pinna

Technical Skills and Procedures  
1 reconstructive surgery of the pinna  
1 exploratory tympanotomy  
1 myringoplasty  
1 ossiculoplasty  
1 facial nerve decompression / anastomosis  
1 repair of perilymph leak
**Professional Skills** Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Acute otitis media including mastoiditis, skull base infection, chronic otitis media and sequelae</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Otology</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Middle ear</td>
</tr>
</tbody>
</table>

*Demonstrate communication skills and empathy.*

*To understand the aetiology, presenting signs, symptoms and management of infection of the middle ear. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.*

- 3 Anatomy, physiology and pathology of the ear and temporal bone
- 3 The microbiology related to acute and chronic ear infections.
- 3 Complications of acute otitis media.

**Objective**

**Knowledge**

- 2 Principles and practice of audiology including pure tone audiometry, tympanometry
- 2 Principle and practice of objective tests of hearing
- 2 interpretation of radiological investigations
- 2 Pharmacology of medications used in medical treatment

**Clinical Skills**

**DATA INTERPRETATION**

- 2 Principle and practice of objective tests of hearing
- 2 interpretation of radiological investigations

**PATIENT MANAGEMENT**

- medical and surgical treatments of acute infection to the middle ear and temporal bone
- 2 suction clearance
- 2 microsuction and myringotomy
- 2 myringotomy and grommet

**Technical Skills and Procedures**

- 2 T tube insertion
- 2 Grommet removal
- 1 Myringoplasty
- 1 Cortical mastoidectomy
- 1 Modified radical mastoidectomy

**Professional Skills** Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Management of adult deafness presenting as sudden or progressive conductive, mixed and sensorineural hearing loss</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Otology</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Deafness in adults</td>
</tr>
</tbody>
</table>

*To understand the aetiology, presenting signs, symptoms and management of*
adults who present with conductive, mixed, progressive or sudden onset of sensorineural deafness. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

**Knowledge**

- Embryology of the ear
- Anatomy, physiology and pathology of the ear and auditory pathways. Principles of acoustics and measurement of sound.
- Principles and practice of audiology including pure tone audiometry, speech audiometry and electrophysiological tests and other objective tests of hearing including oto-acoustic emissions
- Radiological imaging of the inner ear and central vestibular pathways
- The genetics of otological diseases
- The aetiology, pathogenesis and management of disorders of the ear and hearing; including both benign and malignant disease noise induced hearing loss; preservation of hearing
- Central auditory processing disorders, auditory neuropathy, obscure auditory dysfunction
- Auditory rehabilitation including the use of hearing aids and other assistive devices.
- Social and psychological issues of deafness
- Principles of non-auditory communication
- Principles of surgical reconstruction.
- Management of severe/profound hearing loss.

**HISTORY AND EXAMINATION**

- History taking, clinical examination inc neuro-otological
- Objective and subjective audiological assessment
- Principles of a holistic approach to the management of hearing loss
- Vestibular assessment, including electro physiological testing, and clinical examination
- Radiological assessment
- Genetic counselling

**DATA INTERPRETATION**

- Audiological and vestibular tests
- Radiological imaging of the temporal bone, head and neck
- Laboratory investigations

**PATIENT MANAGEMENT**

- Demonstrate communication skills and empathy
- Be able to advise the patient of the treatment options, discuss risks and potential benefits, potential complications
- To work where appropriate in a multidisciplinary team Liaise with other professional and organisations

**Technical Skills and Procedures**

- Exploratory tympanotomy
- Myringoplasty
- Tympanoplasty
- Open and closed mastoidectomy
- Ossiculoplasty
- Stapedotomy / stapedectomy
1 Cochlear implantation
1 Middle ear implantation
1 Insertion of Bone anchored hearing aid abutment
1 closure of perilymph leak
1 The surgical approaches to the CP angle

**Professional Skills** Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Objective and subjective tinnitus</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Category</strong></td>
<td>Otology</td>
</tr>
<tr>
<td><strong>Sub-category:</strong></td>
<td>Tinnitus</td>
</tr>
</tbody>
</table>

*To understand the aetiology, presenting signs, symptoms and management of tinnitus. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.*

- 3 Anatomy, physiology and pathology of the ear and auditory pathways.
- 3 The pathogenesis of disorders of the ear and hearing
- 2 Principles and practice of audiology including pure tone audiometry, speech audiometry and electrophysiological tests and other objective tests of hearing including oto-acoustic emissions
- 1 Psycho-acoustical tests, pitch and loudness match, minimum masking level, residual inhibition
- 1 The various hypotheses relating to the aetiology of tinnitus both objective and subjective
- 2 The psychological effects of tinnitus
- 1 Principles of tinnitus retraining and rehabilitation and the principles of support and counselling
- 2 Function of hearing aid(s) and masking

**HISTORY AND EXAMINATION**
- 3 History taking, clinical examination including neuro-otological
- 2 Otoscopy
- 2 Microscopy
- 2 Significance of radiological findings

**DATA INTERPRETATION**
- 1 Interpretation of neuro-otological radiology
- 1 Interpretation of neuro-physiological tests

**PATIENT MANAGEMENT**
- 2 Principles of patient management
- 3 Demonstrate communication skills and empathy.
- 1 Be able to advise the patient of the treatment options, discuss risks and potential benefits.

**Technical Skills and Procedures**
- 1 Perform pure tone audiometry, tympanometry
- 1 Pitch matching and masking

**Professional Skills** Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Upper and lower motor neuron disease of the facial nerve</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Category</strong></td>
<td>Otology</td>
</tr>
</tbody>
</table>
**Facial Paralysis**

**Objective**

To understand the aetiology, presenting signs, symptoms and management of facial nerve palsy. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

3 The anatomy and physiology of facial nerve and related structures
3 The aetiology classification and neuro-physiology of facial paralysis
2 The relevant clinical neurological, vascular, radiological, biochemical, serological and electrophysiological investigations
2 Per-operative facial nerve monitoring
2 Principles of rehabilitation for facial paralysis
2 Understand the psychological effects of facial disfigurement

**Knowledge**

3 The anatomy and physiology of facial nerve and related structures
3 The aetiology classification and neuro-physiology of facial paralysis
2 The relevant clinical neurological, vascular, radiological, biochemical, serological and electrophysiological investigations
2 Per-operative facial nerve monitoring
2 Principles of rehabilitation for facial paralysis
2 Understand the psychological effects of facial disfigurement

**Clinical Skills**

**DATA INTERPRETATION**

2 Neuro-physiological tests of inner ear function and facial nerve
2 Neuro-otological radiological tests
2 Laboratory investigations

**PATIENT MANAGEMENT**

Demonstrate communication skills and empathy
2 Be able to advise the patient/parents or carers of the treatment options, discuss risks and potential benefits, potential complications and obtain informed consent. Liaise with other health care professionals.

1 Tarsorraphy
1 Cortical mastoidectomy
1 Modified radical mastoidectomy
1 Decompression of facial nerve
1 Facial nerve anastomosis

**Technical Skills and Procedures**

**Professional Skills**

Please see the Professional Skills and Behaviour » Initial section for these skills

---

**Dizziness**

**Category**

Otology

**Sub-category:** Dizziness

To understand the aetiology, presenting signs, symptoms and management of patients with disordered balance. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

3 Anatomy, neuro-anatomy and physiology of related to maintenance of balance [this was to encompass all this vestibular system, visual, locomotor and cardiovascular systems ]

**Knowledge**

3 Pathology and pathogenesis of diseases of the ear
2 The pathology and various hypotheses relating to the aetiology and management of sudden vestibular failure, Ménière’s disease, benign
paroxysmal vertigo, vestibular schwannoma, pharmacological and metabolic side effects

2 The handicaps related to age related sensory and proprioceptive degeneration psychological aspects of dizziness
2 The relevant clinical neurological, vascular, radiological, biological, immunological and serological investigations
2 The relationship of vestibular disorders to legislation relating to employment and driving
2 The principles of vestibular rehabilitation
2 The principles of particle repositioning manoeuvres
2 Treatment options both non-surgical and surgical

HISTORY AND EXAMINATION
3 History and clinical examination
2 Vestibular assessment, including electro physiological testing

DATA INTERPRETATION
2 Interpret audio-vestibular tests
2 Interpret neuro-physiological tests
2 Interpret neuro-otological radiological investigations

Clinical Skills

PATIENT MANAGEMENT
3 Demonstrate communication skills and empathy
2 Be able to advise the patient of the treatment options, discuss risks and potential benefits, potential complications and obtain informed consent
1 Perform particle re-positioning manoeuvres
2 Microscopy
2 Myringotomy and grommet

Technical Skills and Procedures
1 Cortical mastoidectomy
1 Decompression of endolymphatic sac
1 Closure of perilymph fistula
1 Surgical procedures for Ménière’s disease, vestibular schwannoma
1 Removal of lesions of the IAM and cerebro-pontine angle

Professional Skills
Please see the Professional Skills and Behaviour » Initial section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Disorders of equilibrium including Meniere's disorder</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Otology</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Disorders of equilibrium including merniere's disorder</td>
</tr>
<tr>
<td>Objective</td>
<td>To understand the aetiology, presenting signs, symptoms and management of common ORL conditions. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.</td>
</tr>
<tr>
<td>Knowledge</td>
<td>3 The pathology and various hypotheses relating to the aetiology of Meniere's Disease.</td>
</tr>
<tr>
<td></td>
<td>2 Neuroradiological imaging of the inner ear and central vestibular pathways</td>
</tr>
<tr>
<td></td>
<td>3 The relevant clinical neurological, vascular, radiological, biochemical,</td>
</tr>
</tbody>
</table>
immunological and serological investigations.
2 The relationship of vestibular disorders to legislation relating to employment and driving.
2 The principles of vestibular rehabilitation.

4 History taking and examination
2 Vestibular assessment, including electro physiological testing, and clinical examination
2 Interpret audio vestibular tests
2 Interpret neurophysiological tests
2 Principles of patient management

Clinical Skills

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills

Topic Disequilibrium of ageing.
Category Otology
Sub-category: Disorders of equilibrium including meniere's disorder

Objective

To understand the aetiology, presenting signs, symptoms and management of common ORL conditions. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Clinical anatomy, neuro-anatomy and physiology of the vestibular system, locomotor, CVS and cardivascular systems and vision
4 Pathology and pathogenesis of diseases of the ear
3 The relevant clinical neurological, vascular, radiological, biological, immunological and serological investigations
2 The relationship of vestibular disorders to legislation relating to employment and driving
2 The handicaps related to age related sensory and proprioceptive degeneration

Clinical Skills

Technical Skills and Procedures No content

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills

Topic Neurological and Vascular causes of vertigo
To understand the aetiology, presenting signs, symptoms and management of common ORL conditions. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

### Knowledge

- 4 Anatomy, neuro-anatomy and physiology of the vestibular system, locomotor, CVS and cardiovascular systems and vision
- 4 Pathology and pathogenesis of diseases of the ear
- 3 The relevant clinical neurological, vascular, radiological, biological, immunological and serological investigations
- 2 The relationship of vestibular disorders to legislation relating to employment and driving
- 2 The principles of vestibular rehabilitation
- 4 History taking and examination
- 2 Vestibular assessment, including electro physiological testing, and clinical examination

### Clinical Skills

- 2 Elicit clinical history and clinical signs
- 2 Interpret audio vestibular tests
- 2 Interpret neurophysiological tests
- 2 Principles of patient management

### Technical Skills and Procedures

No content

### Professional Skills

Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

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**Topic:** Vestibular Schwannoma

**Category:** Otology

**Sub-category:** Disorders of equilibrium including meningi's disorder

To understand the aetiology, presenting signs, symptoms and management of common ORL conditions. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

- 4 Anatomy, neuro-anatomy and physiology of the vestibular system, locomotor, CVS and cardiovascular systems and vision
- 4 Pathology and pathogenesis of diseases of the ear
- 2 The relevant clinical neurological, vascular, radiological, biological, immunological and serological investigations
- 2 The relationship of vestibular disorders to legislation relating to employment and driving
- 2 The principles of vestibular rehabilitation
- 4 History taking and examination
- 2 Vestibular assessment, including electro physiological testing, and clinical examination

**Knowledge**

- 2 Neuroradiological imaging of the inner ear and central vestibular pathways
- 2 The genetics of vestibular schwannomas and genetic counselling
- 2 The surgical and non-surgical management options
- 1 The surgical approaches to the CP angle

**Clinical Skills**

- 2 Interpret audio vestibular tests
- 2 Interpret neurophysiological tests
- 2 Principles of patient management
Technical Skills and Procedures: No content

Professional Skills: Please see the Professional Skills and Behaviour » Initial section for these skills

### Topic: Benign Paroxysmal Positional Vertigo
#### Category: Otology
#### Sub-category: Disorders of equilibrium including meniere's disorder

**Objective**

To understand the aetiology, presenting signs, symptoms and management of common ORL conditions. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

- 4 Anatomy, neuro-anatomy and physiology of the vestibular system, locomotor, CVS and cardiovascular systems and vision
- 4 Pathology and pathogenesis of diseases of the ear
- 2 The relevant clinical neurological, vascular, radiological, biological, immunological and serological investigations
- 2 The relationship of vestibular disorders to legislation relating to employment and driving
- 2 The principles of vestibular rehabilitation; particle repositioning manoeuvres
- 2 Treatment options both non-surgical and surgical
- 2 The pathology and various hypotheses relating to the aetiology of BPPV
- 4 History taking and examination
- 2 Vestibular assessment, including electro physiological testing, and clinical examination

**Knowledge**

- 2 Interpret audio vestibular tests
- 2 Interpret neurophysiological tests
- 2 principles of patient management

**Clinical Skills**

1 Perform particle re-positioning manoeuvres

**Technical Skills and Procedures**

**Professional Skills** Please see the Professional Skills and Behaviour » Initial section for these skills

### Topic: Acute vestibular failure
#### Category: Otology
#### Sub-category: Disorders of equilibrium including meniere's disorder

**Objective**

To understand the aetiology, presenting signs, symptoms and management of common ORL conditions. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

- 4 Anatomy, neuro-anatomy and physiology of the vestibular system, locomotor, CVS and cardiovascular systems and vision
- 4 Pathology and pathogenesis of diseases of the ear
- 4 The pathology and various hypotheses relating to the aetiology of sudden vestibular failure
- 2 The relevant clinical neurological, vascular, radiological, biological, immunological and serological investigations
- 2 The relationship of vestibular disorders to legislation relating to employment and driving
<table>
<thead>
<tr>
<th>Topic</th>
<th>Epistaxis</th>
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</thead>
<tbody>
<tr>
<td>Category</td>
<td>Rhinology</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>None</td>
</tr>
</tbody>
</table>

**Objective**

*To understand the aetiology, presenting symptoms and signs and management of epistaxis. There should be detailed understanding of the presenting features, complications, diagnosis, and management of these infections.*

4 Understanding of local and systemic aetiologies of epistaxes
4 Detailed knowledge of the anatomy and physiology of nasal vasculature
4 Detailed understanding of the presenting symptoms and signs of epistaxes
3 Detailed knowledge of management including first aid measures, nasal cauter, packing and operative techniques in the management of epistaxes
3 Know the complications of epistaxes and the management of them.
4 Demonstrate expertise in taking an appropriate clinical history.
4 Ability to elicit physical signs both local and systemic if appropriate

**Clinical Skills**

4 Awareness of relevant haematological and imaging investigations.
3 Awareness of management principles in patient with epistaxis
3 Ability to resuscitate critically ill patient
2 diagnostic nasendoscopy
2 Packing of nose

**Technical Skills and Procedures**

2 Removal of nasal packing
3 Cautery of nasal septum
1 Ethmoid Artery ligation
1 Sphenopalatine artery ligation

**Professional Skills**

Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

| Topic                  | Nasal trauma and deformity                                                |
|-----------------------|                                                                           |
| Category              | Rhinology                                                                 |
| Sub-category:         | None                                                                       |

**Objective**

*To understand the presenting features, diagnosis, complications and management of nasal trauma and deformity. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.*

3 Understanding of the anatomy of the nose, paranasal sinuses and facial skeleton.

**Knowledge**

3 Understanding of the mechanisms of trauma responsible for nasal and facial injuries.
3 Knowledge of the appropriate imaging techniques
2 Knowledge of the specific complications of nasal trauma
3 Knowledge of the management of nasal trauma
2 Knowledge of the management of nasal deformity
4 Ability to take a relevant history and perform an appropriate clinical examination

**Clinical Skills**
3 Knowledge of the relevant special investigations and correct interpretation
2 Ability to adequately resuscitate the critically ill patient

**Technical Skills and Procedures**
2 Fracture nose reduction
3 Packing of nose
1 Septoplasty

**Professional Skills** Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

---

### Topic
Nose and sinus infections

#### Category
Rhinology

#### Sub-category:
None

#### Objective
To understand the aetiology, pathophysiology, and microbiology. There should be a detailed understanding of the presenting features, complications, diagnosis, and management of these infections. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

3 Detailed knowledge of anatomy and physiology of the nose and paranasal sinuses
3 Know the microbiology of acute and chronic rhinosinusitis
2 Knowledge of rarer pathogens responsible for rhinosinusitis
2 Understanding of the differences in management between acute and chronic rhinosinusitis.
3 Knowledge of the indications for and techniques of surgical management
3 Knowledge of the complications of sinusitis and their management.
3 Demonstrate an ability to take an appropriate history and perform a nasal examination with a speculum and endoscope.

#### Knowledge
2 understanding of special investigations to inform the diagnosis
2 Understanding of the differences in management between acute and chronic rhinosinusitis.
3 Knowledge of the indications for and techniques of surgical management
3 Knowledge of the complications of sinusitis and their management.

3. Demonstrate an ability to take an appropriate history and perform a nasal examination with a speculum and endoscope.

#### Clinical Skills
3 Awareness of the indications for imaging including CT and MRI
3 Awareness of indications for other special investigations including microbiology, immunology etc
2 Nasendoscopy
2 Antral washout – direct vision
1 Inferior meatal antrostomy – direct vision + endoscopic
1 Middle meatal antrostomy – endoscopic

#### Technical Skills and Procedures
1 Nasal polypectomy – endoscopic
1 Uncinection – endoscopic
1 Uncinection + bulla – endoscopic
1 Anterior ethmoidectomy - endoscopic
1 Caldwell-Luc – direct vision
1 Intranasal ethmoidectomy – direct vision

#### Professional Skills
Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

---

### Topic
Mose and sinus inflammation including allergy

#### Category
Rhinology
Sub-category: None

Objective
To understand the aetiology and pathophysiology of nasal & paranasal sinus inflammation. There should be detailed understanding of the presenting features, complications, diagnosis, and management of these infections. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

Detailed knowledge of anatomy and physiology of the nose and paranasal sinuses
Understanding of the aetiologies underlying inflammation of the nose and sinuses.
Know the role of allergy in the pathophysiology of inflammation of the nose and sinuses.

Knowledge

Clinical Skills

Technical Skills and Procedures

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills

Topic Congenital abnormalities
Category Rhinology
Sub-category: None

Objective
To understand the aetiology, clinical features and management of congenital nasal abnormalities. To understand how these may be associated with other syndromes. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

Knowledge

2 Knowledge of the anatomy and physiology of the nose and paranasal sinuses.
2 Knowledge of the embryology of the nose and sinuses.
2 Knowledge of those conditions associated with congenital nasal abnormalities.
1 Understanding of how to manage congenital nasal abnormalities in both the elective & emergency settings.
2 Ability to take an appropriate history from the parent and child and perform relevant examination.
1 Nasendoscopy if appropriate

**Clinical Skills**

- Nasendoscopy if appropriate

**Technical Skills and Procedures**

- Nasendoscopy

**Professional Skills**

Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

### Topic: Facial pain

**Category:** Rhinology

**Sub-category:** None

**Objective**

To understand the aetiologies, characteristics and management of conditions presenting with facial pain, including those causes not arising in the upper aerodigestive tract

- 3 Anatomy and physiology of the face, including the TMJ, dentition and cervical spine
- 2 Understand the differential diagnosis of facial pain including organic and functional causes
- 2 Understand the various treatment modalities, both medical and surgical
- 2 Awareness of the multidisciplinary approach to management
- 3 Ability to take a relevant history of facial pain
- 3 Ability to perform an appropriate ENT, neurological and locomotor examination

**Clinical Skills**

- 2 Understanding of the appropriate radiological investigations
- 1 Appropriate management to include pharmacological, surgical and counselling therapies
- 2 Outpatient endoscopy of upper aerodigestive tract

**Technical Skills and Procedures**

- 2 Examination under anaesthesia
- 2 Biopsy - external nose
- 2 Biopsy – internal nose

**Professional Skills**

Please see the [Professional Skills and Behaviour » Initial](#) section for these skills

### Topic: Nasal polyps

**Category:** Rhinology

**Sub-category:** None

**Objective**

To understand the aetiologies, pathophysiology and clinical features of nasal polyps. There should be a detailed knowledge of the diagnostic features, management and complications.

This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

- 3 A detailed understanding of the aetiologies and conditions associated with nasal polyps.
- 3 Knowledge of the clinical features of nasal polyps
- 3 Understand the medical and surgical management options of nasal polyps
3 Understand the clinical significance of unilateral nasal polyps

Clinical Skills

3 Ability to take an appropriate history and perform an examination including
nasal endoscopy.
2 Awareness of imaging techniques
1 Nasal polypectomy
2 Nasendoscopy
2 Antral washout – direct vision
1 Inferior meatal antrostomy – direct vision + endoscopic

Technical Skills and Procedures

1 Middle meatal antrostomy – endoscopic
1 Uncinecuctomy – endoscopic
1 Uncinecuctomy + bulla – endoscopic
1 Anterior ethmoidectomy - endoscopic
1 Caldwell-Luc – direct vision
1 Intranasal ethmoidectomy – direct vision

Professional Skills

Please see the Professional Skills and Behaviour » Initial section for these skills

---

**Granulomatous conditions**

**Category**
Rhinology

**Sub-category:**
None

**Objective**

To understand the aetiology, classification, clinical features and management of granulomatous conditions of the nose. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

3 Understanding of the classification of nasal granulomatous conditions
3 Knowledge of the Pathophysiology of these conditions
3 Knowledge of the microbiology of specific nasal granulomatous conditions
3 Knowledge of the features of non specific granulomatous conditions eg sarcoidosis and Wegener’s granulomatosis.
2 Understanding of methods of diagnosis.
2 Knowledge of management of these conditions.
3 Awareness of differential diagnosis
3 Ability to take a relevant history and perform an appropriate clinical examination

**Clinical Skills**

2 Knowledge of the relevant special investigations and correct interpretation of them.

**Technical Skills and Procedures**

2 diagnostic nasendoscopy
2 examination under anaesthesia
2 biopsy – external
2 biopsy - internal

**Professional Skills**

Please see the Professional Skills and Behaviour » Initial section for these skills

---

**Rhinological oncology**

**Category**
Rhinology

**Sub-category:**
None

**Objective**

To understand the aetiology, clinical presentation and management of tumours of the nose and paranasal sinuses. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.
Knowledge

3 Knowledge of the anatomy of the nose and paranasal sinuses.
3 Knowledge of the distribution of cervical lymph nodes
3 Understanding of the pattern of spread of malignancy in the head and neck
2 Knowledge of the different histological types of malignancy in the nose and paranasal sinuses.
2 Understanding of the principles of medical and surgical management of malignancy of the nose and sinuses.
2 Knowledge of the complications of both the disease and its management.

Clinical Skills

3 Ability to take a relevant history, perform an appropriate examination and interpret clinical findings correctly
2 Demonstrate a rational approach to special investigations

Technical Skills and Procedures

2 Examination of nose under anaesthesia
2 Biopsy of nose - external
2 Biopsy of nose - internal

Professional Skills

Please see the Professional Skills and Behaviour » Initial section for these skills

---

Topic Septorhinoplasty
Category Rhinology
Sub-category: Facial Plastics

Objective

To understand the presenting features, assessment, management and complications of nasal and septal deformity. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

4 Understanding of the anatomy of the nose, paranasal sinuses and facial skeleton.
3 Understanding the embryology of the nose
2 Understanding of the mechanisms of trauma responsible for nasal and facial injuries.
2 Understanding methods of assessment of the facial skeleton
2 Knowledge of the specific complications of nasal surgery

Clinical Skills

2 Ability to assess the patient and devise a surgical plan

Technical Skills and Procedures

1 Septoplasty
1 Septorhinoplasty
2 Packing of nose
1 Sphenopalatine artery ligation

Professional Skills

Please see the Professional Skills and Behaviour » Initial section for these skills

---

Topic Congenital abnormalities
Category Rhinology
Sub-category: Facial Plastics

Objective

To understand the aetiology, clinical features and management of congenital facial abnormalities. To understand how these may be associated with other
This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

Knowledge

2 Knowledge of those conditions associated with congenital facial abnormalities.
2 Understanding of how to manage congenital facial abnormalities in both the elective & emergency settings.

Clinical Skills

3 Ability to take an appropriate history form the parent and child and perform relevant examination.
2 Nasendoscopy
4 Examination of external nose
4 Examination of internal nose with headlight

Technical Skills and Procedures

4 Examination of external nose
4 Examination of internal nose with headlight
2 Nasendoscopy
2 Examination under anaesthesia
2 Resection of nasal lesion NEC
1 Excision skin lesion

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills

Topic Cosmetic Surgery

Category Rhinology

Sub-category: Facial Plastics

To understand the presentation and analysis of cosmetic deformity of the face. This involves a detailed understanding of the anatomy of the skin and deeper structures and knowledge of the different facial aesthetic units. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

Knowledge

2 Understanding of the anatomical areas and aesthetic units that make up the face.
2 Knowledge of the planes of dissection available.
2 Knowledge of the methods used to analyse facial features.
2 Knowledge of the various procedures used in cosmetic facial surgery.
2 Knowledge of the limitations and complications of cosmetic facial surgery
3 Ability to take a relevant history and perform an appropriate clinical examination
2 Ability to assess facial deformity and devise a management plan
4 Examination of external nose
4 Examination of internal nose with headlight

Clinical Skills and Procedures

2 Resection of nasal lesion
1 Flaps used in reconstruction
1 SMR
1 Septoplasty
2 Excision skin lesion

Professional Skills Please see the Professional Skills and Behaviour » Initial section for these skills
<table>
<thead>
<tr>
<th>Topic</th>
<th>Reconstruction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Rhinology</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Facial Plastics</td>
</tr>
</tbody>
</table>

To understand the methods available for facial reconstruction involving, skin, muscle, cartilage, bone and implants. This involves a detailed understanding of the anatomy of the skin and deeper structures and in particular the blood supply of the tissues involved. Knowledge of the basic types of skin grafts, local flaps, regional flaps and free flaps is necessary. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

4 Understanding of the anatomical areas of the face
4 Understanding of the blood supply and innervations of the face and of local, regional and free grafts.

Knowledge
2 Knowledge of the different types of flap available and the indications for their use
2 Knowledge of the implants and prosthetic devices available.

Clinical Skills
3 Ability to take a relevant history and perform an appropriate clinical examination
2 Ability to assess facial defects and devise a management plan
2 Resection of nasal lesion

Technical Skills and Procedures
1 Lip- wedge resection
2 Excision skin lesion
2 Suture skin

Professional Skills Please see the [Professional Skills and Behaviour » Initial](#) section for these skills
Final Stage

At the completion of final stage trainees will be competent in all aspects of the operative and non-operative management of patients presenting with the following key conditions (Level 4).

- Adult Upper Airway Obstruction
- Neck Masses
- Disorders of Swallowing
- Sleep Apnoea
- Voice Disorders
- Airway Disorders
- Sore Throat and Tonsillitis
- Cutaneous Lesions of the Head and Neck
- Tinnitus
- Hearing Loss
- Ear Discharge
- Otalgia
- Disorders of equilibrium
- Facial nerve disorders

By the end of the final stage of training, trainees will be competent in all aspects of the following procedures (Level 4):

- Excision of neck, thyroglossal and branchial cleft cysts and fistulae
- Drainage of superficial and deep neck space infections
- Examination of the neck and upper aerodigestive tract in the clinic and in theatre
- Out patient and in patient endoscopy
- Fine needle aspiration for cytology
- Excision of cervical lymph nodes
- Submandibular gland excision
- Endoscopic assessment of head and neck cancer
- Endoscopic assessment of the airway, intubation, tracheostomy, and foreign body removal
- The removal of foreign bodies from the pharynx and oesophagus
- The drainage of peritonsillar abscess.
- Tonsillectomy and adenoidectomy.
- Endoscopic examination of the neck and upper aerodigestive tract in the outpatient department
- Surgical ventilation of the ears; adenoidectomy
- The drainage of auricular haematomas
- Myringoplasty.
- Microscope assessment of the ear/ microsuction and insertion of dressings
- Cortical mastoidectomy

Click on Workplace Based Assessments to view the assessment forms including DOPS and PBAs

Topics

<table>
<thead>
<tr>
<th>Topic</th>
<th>Foreign bodies in the ear canal, nasal foreign bodies, ingested foreign bodies both swallowed and inhaled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Paediatric</td>
</tr>
</tbody>
</table>
Sub-category: Foreign bodies in the ear nose and throat

Objective

Safe definitive management of children with suspected and actual foreign bodies in the ear and nose; primary management of inhaled foreign bodies to facilitate safe transfer for tracheobronchoscopy as needed.

4 Recognition of the clinical features of foreign bodies in the ear nose and throat; knowledge of the natural history and the complications associated with treatment.

Knowledge

4 Recognition of the clinical features of foreign bodies in the ear nose and throat; knowledge of the natural history and the complications associated with treatment.

HISTORY AND EXAMINATION

4 Ability to take a thorough history from the child/carer
4 Otoscopy
4 Rhinoscopy

4 Assessment of the airway in the child

Clinical Skills

DATA INTERPRETATION

3 Assessment of plain radiography at a basic level e.g. recognition of gross abnormalities on chest radiograph
3 Assessment of soft tissue x-ray of the neck

PATIENT MANAGEMENT

3 Emergency airway care

Technical Skills and Procedures

4 Otomicroscopy and removal of FB
4 Removal of nasal foreign body
4 Pharyngo-oesophagoscopy

Professional Skills

Please see the Professional Skills and Behaviour » Final section for these skills

Topic Nasal injuries, haematoma of the pinna, trauma to the external, middle and inner ear, neck trauma

Category Paediatric

Sub-category: Trauma to the head and neck

Objective

None

4 Presentation and management of nasal fractures
4 Nasal septal haematoma

Knowledge

4 Ear trauma
4 Good knowledge of common aetiologies and awareness of the possible presentations of non-accidental injury in the ENT department.

HISTORY AND EXAMINATION

4 Ability to take a thorough history from child/parent
4 Assessment of the external nose
4 Assessment of the nasal airway
4 Clinical examination of the ear including otoscopy
4 Assessment of the neck including the airway

Clinical Skills

4 Otoscopy

DATA INTERPRETATION

4 Pure tone audiometry, tympanometry

PATIENT MANAGEMENT

Emergency airway care see section

Technical Skills and Procedures

4 Nasal fracture manipulation
4 Drainage of septal haematoma
4 Drainage of haematoma of pinna

**Professional Skills** Please see the [Professional Skills and Behaviour » Final](#) section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Spontaneous epistaxis; epistaxis in children with coagulopathy; epistaxis as a presentation of systematic disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Paediatric</td>
</tr>
<tr>
<td>Sub-category</td>
<td>Epistaxis</td>
</tr>
<tr>
<td>Objective</td>
<td>Optimum recognition and management of children with epistaxis;</td>
</tr>
<tr>
<td></td>
<td>4 Thorough knowledge of the pathophysiology, epidemiology, natural history and current approach to treatment of epistaxis to include awareness of the evidence base for current treatment regimens.</td>
</tr>
<tr>
<td>Knowledge</td>
<td>4 Understand the role of systemic diseases and their treatments in relation to expistaxis</td>
</tr>
<tr>
<td></td>
<td>4 Understand the guidelines for investigations</td>
</tr>
</tbody>
</table>

**Clinical Skills**

<table>
<thead>
<tr>
<th>HISTORY AND EXAMINATION</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Ability to take a thorough history from the child/carer</td>
<td></td>
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<tr>
<td>4 Anterior Rhinoscopy</td>
<td></td>
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<tr>
<td>4 Flexible Nasendoscopy</td>
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<tr>
<td>4 Rigid Nasendoscopy</td>
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<tr>
<td>4 Examination of the neck</td>
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<tr>
<td>4 Otoscopy</td>
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</tbody>
</table>

**Data Interpretation**

4 Interpretation of full blood count; awareness of significance of coagulation tests

**Patient Management**

4 Medical and surgical management of epistaxis

**Technical Skills and Procedures**

4 Nasal cautery

**Professional Skills** Please see the [Professional Skills and Behaviour » Final](#) section for these skills

---

**Topic** Rhinosinusitis; complications of sinus infections

**Category** Paediatric

**Sub-category:** Nose and Sinus infections

**Objective** Optimum recognition and management of children with rhinosinusitis; particularly complicated sinus disease e.g. orbital cellulitis, intracranial sepsis.

4 Thorough knowledge of the pathophysiology, epidemiology, natural history and current approach to treatment of infective rhinitis to include awareness of the evidence base for current treatment regimens.

**Knowledge**

4 Recognition and emergency management of complications

**HISTORY AND EXAMINATION**

4 Ability to take a thorough history from the child/carer  
4 Anterior Rhinoscopy

**Clinical Skills**

4 Flexible Nasendoscopy  
4 Rigid Nasendoscopy  
4 Examination of the neck  
4 Otoscopy
DATA INTERPRETATION
3 Awareness of imaging techniques; assessment of abnormalities on CT scanning of the paranasal sinuses

PATIENT MANAGEMENT
4 Medical and surgical management of rhinitis, rhinosinusitis

Technical Skills and Procedures
2 External frontoethmoidectomy
1 Drainage of sphenoid sinus

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

---

**Topic**

**Congenital laryngeal pathology including laryngomalacia, subglottic stenosis, acute laryngeal infections**

**Category**

Paediatric

**Sub-category:** Airway Disorders

**Objective**

Safe recognition of main patterns of presentations of children with airway obstruction at birth, in infancy and in later childhood. Includes primary management to enable definitive treatment of main conditions.

4 Clinical feature of airway obstruction, clinical measures to determine severity of obstruction, awareness of spectrum of causes, treatment options and natural history of main conditions at different ages e.g. laryngeal webs in the newborn, laryngomalacia, acute epiglottitis and laryngotraechobronchitis.

**Knowledge**

3 Assessment of the airway in the newborn

**Clinical Skills**

3 Assessment of pulse oximetry findings, assessment of plain radiography at a basic level e.g. recognition of gross abnormalities on chest radiograph and CT

**PATIENT MANAGEMENT**

4 Medical management e.g. steroids, adrenaline, bronchodilators.

2 Emergency airway care

**Technical Skills and Procedures**

2 Paediatric panendoscopy both in the outpatients and in theatre

2 Paediatric tracheotomy emergency and elective

**Professional Skills** Please see the Professional Skills and Behaviour » Final section for these skills

---

**Topic**

**Acute tonsillitis, complications of tonsillitis, adenoids, obstructive sleep apnoea**

**Category**

Paediatric

**Sub-category:** Tonsils and adenoids

**Objective**

Definitive secondary-care management of adenotonsillar disease in otherwise healthy children, Management in syndromic and special needs children is often in a designated children’s hospital.

4 Epidemiology, classification, aetiology and natural history of adenotonsillar disease. Thorough understanding of the evidence base that underpins current treatment approaches. Awareness of controversies. Except for the management of very young (under four years) children and those with complex medical
needs e.g. syndromic children.

**HISTORY AND EXAMINATION**
- Ability to take a thorough history from child/parent.
- Otoscopy
- Examination of the pharynx including endoscopy

**Clinical Skills**

**DATA INTERPRETATION**
- Assessment of the adenoids and airway using plain radiography
- Awareness of the principles that underpin sleep studies in children

**PATIENT MANAGEMENT**
- Comprehensive management including surgery as appropriate

**Technical Skills and Procedures**
- Tonsillectomy
- Adenoidectomy
- Arrest of adenotonsillar bleeding as an emergency

**Professional Skills**
- Please see the [Professional Skills and Behaviour » Final](#) section for these skills

**Topic**

Syndromes with important ORL manifestations, cleft palate and the major malformations of the ears nose and throat

**Category**

Paediatric

**Sub-category:**

Congenital deformities affecting the head and neck

**Objective**

Safe primary management of children with congenital deformities of the head and neck, awareness of the principles that underpin long-term care.

**Knowledge**

Basic knowledge of the range of deformities that present at birth with an emphasis on awareness of those that affect the airway e.g. choanal atresia, cystic hygroma. Level 2

**HISTORY AND EXAMINATION**
- Assessment of the airway in the newborn

**Clinical Skills**

**DATA INTERPRETATION**
- Assessment of pulse oximetry findings, assessment of plain radiography at a basic level e.g. recognition of gross abnormalities on chest radiograph and CT

**PATIENT MANAGEMENT**
- Emergency airway care
- Management of OME in cleft palate children

**Technical Skills and Procedures**
- 1 surgical procedures but not required

**Professional Skills**
- Please see the [Professional Skills and Behaviour » Final](#) section for these skills

**Topic**

Congenital masses e.g vascular malformations, thyroid and thyroglossal duct swellings, acute and chronic infections and granulomatous disorders that cause neck swellings, cervical adenopathy, awareness of the rare malignancies that present with neck masses

**Category**

Paediatric

**Sub-category:**

Neck Masses

**Objective**

Safe recognition of main patterns of presentations of children with neck swellings at birth, in infancy and in later childhood. Includes primary
management to enable definitive treatment of common conditions.

Knowledge
3 Classification of vascular malformations, awareness of treatment options
3 applied embryology of thyroid gland descent and awareness of commoner causes of swellings related to the thyroid gland and thyroglossal duct
3 applied anatomy of the neck spaces and awareness of the presentation, clinical features and primary management of abscesses and collections in these spaces
4 Knowledge of the range of causes and natural history of cervical adenopathy, good grasp of the evidence base which guides the selection of children for neck node biopsy

HISTORY AND EXAMINATION
4 Assessment of the neck, ability to take a through history from child/parent.

Clinical Skills
HISTORY AND EXAMINATION
4 Assessment of the neck, ability to take a through history from child/parent.

DATA INTERPRETATION
3 Assessment of plain radiography at a basic level e.g. recognition of gross abnormalities on chest radiograph. Awareness of the range of imaging options available e.g. sonography, CT, MR scanning.

PATIENT MANAGEMENT
3 Emergency airway care
3 The role of surgery
4 Flexible endoscopy

Technical Skills and Procedures
4 Incision drainage neck abscess
4 Biopsy neck node
3 Other surgical procedures depending on experience gained

Professional Skills
Please see the Professional Skills and Behaviour » Final section for these skills

Speech delay, disorders of articulation

Topic
Speech delay, disorders of articulation

Category
Paediatric

Sub-category:
Speech and language development

Objective
Awareness of the epidemiology and presentation of delayed speech and its relevance to ENT disorders. Awareness of the main disorders of articulation e.g hyponasal and hypernasal speech.
3 The normal developmental milestones with an emphasis on speech and language acquisition. Major causes of delayed speech
4 Pathology that underlies hyponasal and hypernasal speech. Role of the adenoids

Knowledge
HISTORY AND EXAMINATION
4 Ability to take a through history from child/parent
3 Ability to distinguish hyponasal and hypernasal speech i.e clinical assessment of speech
4 Otoscopy
4 Flexible endoscopy

Clinical Skills
DATA INTERPRETATION
4 Pure tone audiometry
3 Hearing tests in pre-school child

PATIENT MANAGEMENT
3 Multidisciplinary teams in the management of children with speech and other developmental problems

Technical Skills and Procedures
- 4 Flexible endoscopy, examination of the nasopharynx
- 4 Division of tongue tie

Professional Skills
Please see the Professional Skills and Behaviour » Final section for these skills

---

### Topic
**Main cancers that affect the head and neck in children, including lymphoma**

**Category**: Paediatric

**Sub-category**: Oncology

**Objective**

*Awareness of the epidemiology presentation and principles of management of malignant disease in the head and neck.*

- 3 Classification of the main malignancies, knowledge of typical presentations, understanding of the natural history of childhood cancers with an emphasis on differences between adult and childhood disease. Awareness of issues relating to the management of the child and family with cancer including palliative care e.g. management of epistaxis.

**Knowledge**

- HISTORY AND EXAMINATION
  - 4 Ability to take a thorough history from child/parent
  - 4 Examination of the neck
  - 4 Examination of the cranial nerves
  - 4 Otoscopy
- 4 Flexible endoscopy

**Clinical Skills**

**DATA INTERPRETATION**

- 3 Awareness of the range of diagnostic tests available particularly imaging

**PATIENT MANAGEMENT**

- 4 Initial diagnosis and liaison with colleagues
- 4 Flexible endoscopy.

**Technical Skills and Procedures**

- 4 Examination of the nasopharynx
- 4 Neck node biopsy
- 4 Biopsy of tumours

**Professional Skills**
Please see the Professional Skills and Behaviour » Final section for these skills

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### Topic
**Congenital lesions including cysts, sinus’s and fistulas; abnormalities of the pinna; inflammatory disease of the ear canal**

**Category**: Paediatric

**Sub-category**: Disorders of the external ear in children

**Objective**

*Recognition and classification of the principle congenital anomalies; management of otitis externa; management of uncomplicated lesions of the pinna e.g. accessory auricles, sebaceous cysts*

- 4 Recognition of the clinical features of foreign bodies in the ear nose and throat; knowledge of the natural history and the complications associated with treatment.

**Knowledge**

- HISTORY AND EXAMINATION
  - 4 Ability to take a thorough history from the child/carer
4 Inspection of the external ear and recognition of main anomalies; Otoscopy

DATA INTERPRETATION
4 Age-appropriate assessment of hearing; Tympanometry; Awareness of the imaging techniques and principle findings in microtia.

PATIENT MANAGEMENT
3 Rehabilitation of hearing loss in microtia; selection of children for referral for ear reconstruction/prostheses; Counselling of families but not definitive management of microtia and other major anomalies of the external ear.

Technical Skills and Procedures
4 Otomicroscopy
4 Excision of simple lesions in and around the external ear
3 Surgery for prominent ears requires specific training

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Congenital deafness, classification of causes, investigation and rehabilitation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Paediatric</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Deafness excluding otitis media and its complications</td>
</tr>
<tr>
<td>Objective</td>
<td>Awareness of the epidemiology and presentation of deafness, good knowledge of range of causes, awareness of diagnostic and investigative strategies and knowledge of the principles that underpin rehabilitation including amplification and cochlear implantation</td>
</tr>
<tr>
<td>Knowledge</td>
<td>3 Applied embryology of the ear including congenital deformities of the ear and their relationship to deafness</td>
</tr>
<tr>
<td></td>
<td>3 Differential diagnosis</td>
</tr>
<tr>
<td></td>
<td>3 Genetic, syndromic and non-syndromic deafness</td>
</tr>
<tr>
<td></td>
<td>3 The principles of audiometric screening</td>
</tr>
<tr>
<td></td>
<td>3 The principles of audiological testing and the range of tests available</td>
</tr>
<tr>
<td></td>
<td>3 Rehabilitation of the deaf child with an emphasis on hearing aids</td>
</tr>
<tr>
<td></td>
<td>3 Cochlear implantation</td>
</tr>
<tr>
<td>HISTORY AND EXAMINATION</td>
<td></td>
</tr>
<tr>
<td>4 Ability to take a through history from child/parent.</td>
<td></td>
</tr>
<tr>
<td>4 Otoscopy</td>
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</tbody>
</table>

Clinical Skills DATA INTERPRETATION
3 Awareness of the range of investigative options available especially the principles of genetic testing e.g. connexin measurements, imaging e.g. sonography, CT, MR scanning

PATIENT MANAGEMENT
As above

Technical Skills and Procedures
4 Microscopic examination of the ear
2 All other surgical procedures but the nature will depend on the training available

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Acute otitis media, recurrent acute otitis media, otitis media with effusion (OME), chronic otitis media, mastoiditis, intracranial sepsis</th>
</tr>
</thead>
</table>

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Paediatric
Otitis media and its complications

Definitive secondary-care management of inflammatory middle–ear disease and its complications

4 Epidemiology, classification, aetiology and natural history of each variant of otitis media. 4 Thorough understanding of the evidence base which underpins current treatment approaches.

4 Except for the surgical management of cholesteatoma and the use of bone-anchored hearing aids trainees are expected to progress to level 4.

HISTORY AND EXAMINATION
4 Ability to take a thorough history from child/parent
4 Otoscopy
4 Examination of the cranial nerves
3 Neurological examination

DATA INTERPRETATION
4 Pure Tone Audiometry
4 Tympanometry

Clinical Skills
3 Diagnostic imaging e.g. ST scan, MRI
3 Laboratory investigations e.g. blood tests, lumbar puncture and bacteriology results

PATIENT MANAGEMENT
4 Comprehensive management including surgery as appropriate
4 Referral and team working for children with complications of acute otitis media
4 Otomicroscopy
4 Tympanostomy tubes
4 Tympanoplasty
4 Cortical Mastoidectomy
3 Other procedures depending on experience and exposure

Technical Skills and Procedures

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

Paediatric
Facial Palsy

Safe primary management of children with facial palsy, recognition of clinical pathologies that present with facial palsy.

4 Basic knowledge of the range of aetiologies, the natural history of the main causes, and the evidence base that underpins current investigation and management (This section complements the adult curriculum)

HISTORY AND EXAMINATION
4 Ability to take a history from child/parent
4 Otoscopy

Clinical Skills
4 Examination of the head and neck
4 Assessment of the cranial nerves in children

DATA INTERPRETATION
2 Awareness of the range of diagnostic tests and the principles that govern their
use e.g. electroneuronography, imaging of the facial nerve

PATIENT MANAGEMENT
4 Principles of pharmacological management (e.g. steroids, anti-viral agents)
4 Emergency care
4 Eye protection

Technical Skills and Procedures
4 Myringotomy (3 to 4)
4 Drainage of mastoid abscess

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

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**Topic**  
**Rhinitis, allergic rhinitis**

**Category**  
Paediatric

**Sub-category:**  
Inflammatory nasal disease (including allergic rhinitis)

**Objective**  
*Optimum recognition and management of children with rhinitis.*

4 Thorough knowledge of the pathophysiology, epidemiology, natural history and current approach to treatment of allergic rhinitis to include awareness of the evidence base for current treatment regimens.

**HISTORY AND EXAMINATION**
4 Ability to take a thorough history from the child/carer
4 Anterior Rhinoscopy
4 Flexible Nasendoscopy
4 Rigid Nasendoscopy
4 Examination of the neck
4 Otoscopy

**Clinical Skills**  
DATA INTERPRETATION
4 Skin tests for allergies; Blood tests for allergies;
3 Awareness of imaging techniques; assessment of abnormalities on CT scanning of the paranasal sinuses
3 Knowledge of immunological tests, ciliary function tests/nasal biopsy.

**PATIENT MANAGEMENT**

4 Medical and surgical management of rhinitis

Technical Skills and Procedures
4 Submucous diathermy

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

---

**Topic**  
**Inflammatory nasal polyposis; nasal masses e.g. encephalocele, rare nasal tumours**

**Category**  
Paediatric

**Sub-category:**  
Nasal Polyps in Children

**Objective**  
*None*

4 Recognition of the aetiology and clinical features of foreign nasal polyps including cystic fibrosis and the contents of the anterior cranial fossa presenting as nasal polyps
4 Knowledge of the natural history and the complications associated with treatment
4 The relationship to other respiratory disease including those in the lower respiratory tract

HISTORY AND EXAMINATION
4 Ability to take a thorough history from the child/carer
4 Anterior Rhinoscopy
4 Flexible Nasendoscopy
4 Rigid Nasendoscopy
4 Examination of the neck
4 Otoscopy

Clinical Skills

DATA INTERPRETATION
3 Awareness of imaging techniques; assessment of abnormalities on CT scanning of the paranasal sinuses
3 Knowledge of immunological tests, ciliary function tests/nasal biopsy

PATIENT MANAGEMENT
4 Medical and surgical management of nasal polyposis
Investigation of nasal masses (2 to 4)

Technical Skills and Procedures
4 Nasal Polypectomy either endoscopically or with direct vision
1 Anterior ethmoidectomy in children
2 Middle meatal antrostomy

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

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**Topic**     Adnenoid and tonsillar pathology in adults
**Category**  Head and Neck
**Sub-category:** None

**Objective**
To understand the aetiology, presenting signs, symptoms and management of benign adenotonsillar and pharyngeal disease. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.
4 Demonstrate a detailed knowledge of the anatomy, physiology, pathology & microbiology of the oro and nasopharynx incl relevant anatomical relationships
4 Know the presenting signs and symptoms of benign adenotonsillar & pharyngeal disease
4 Know the complications of adenotonsillar infection.
4 Understand the investigation, differential diagnosis and complications of adenotonsillar hypertrophy
4 Know the ‘red flag’ indicators of malignant disease of the pharynx
4 Demonstrate expertise at eliciting an appropriate clinical history and physical signs of benign adenotonsillar and pharyngeal disease and the complications of treatment including those involving the airway
4 Diagnosis and medical management of post-operative haemorrhage following adenotonsillar surgery
4 Incision and drainage of peritonsillar abscess.
4 Manage the compromised airway due to hypertrophy
4 Tonsillectomy and adenoidectomy in adults and children
4 Surgical management of post-operative bleeding following adenotonsillar surgery

**Knowledge**

**Clinical Skills**

**Technical Skills and Procedures**

**Professional Skills** Please see the Professional Skills and Behaviour » Final section for these skills
### Topic

**Airway obstruction in adults**

**Category:** Head and Neck  
**Sub-category:** None

**Objective**

To understand the aetiology, presenting signs, symptoms and management of patients presenting with upper airway disorders in the emergency situation in adults. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Demonstrate a detailed knowledge of the anatomy & physiology of the larynx, trachea, pharynx and oral cavity  
4 Understand the microbiology and pathology of disorders of the upper aerodigestive tract.  
4 Understand the classification of diseases that may present with airway obstruction.  
4 Know the different methods of securing an airway safely (surgical & non surgical) in an emergency setting  
4 Understand the principles of patient management of patients presenting with airway obstruction.

**Knowledge**

4 Understand the principles of patient management of patients presenting with airway obstruction.  
4 Know the different methods of securing an airway safely (surgical & non surgical) in an emergency setting  
3 Understand the indications & techniques for surgical debulking of upper airway malignancies  
4 Be able to elicit an appropriate clinical history and correctly interpret physical signs.  
4 Be aware of the role of appropriate investigation in the management of airway obstruction.

**Clinical Skills**

4 Demonstrate the ability to work effectively with anaesthetists and those involved in critical care who manage the 'shared airway'.  
4 Demonstrate expertise in the safe assessment of patients with critical airways.  
4 Be competent at performing the following diagnostic procedures; fibroptic nasopharyngoscopy, direct laryngoscopy, microlaryngoscopy, bronchoscopy, pharyngo oesophagoscopy

**Technical Skills and Procedures**

3 Be competent at performing endotracheal intution  
4 Be proficient at performing a surgical tracheostomy in the elective & emergency setting both under general and local anaesthesia  
4 Be competent at foreign body removal from the airway in adults  
3 Debuling procedures (laser/microdebrider)

**Professional Skills**

Please see the [Professional Skills and Behaviour » Final](#) section for these skills

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### Topic

**Aetiology and management of the craniocervical trauma in adults**

**Category:** Head and Neck  
**Sub-category:** None

**Objective**

To understand the aetiology, presenting signs, symptoms and management of a patient with craniocervical trauma. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Understand the anatomy of the head and neck  
4 Understand the pathophysiological effects of blunt, penetrating and high and low velocity projectile trauma to the bones and soft tissues of the head and neck  
4 Understand the Le Fort classification of facial fractures and their effects.
3 Understand the classification of fractures of the mandible and their effects
4 Understand the classification of fractures of the temporal bone and their effects.
4 Understand the consequences and potential complications of injury to structures in the neck, in the 3 horizontal entry zones of the neck.
4 Understand the principles underpinning the appropriate investigation of a patient with a penetrating injury of the neck
4 Understand the principles of the Glasgow Coma Scale and the management of the patient with an altered level of consciousness.
4 Understand the principles of management of traumatic injury to the head and neck, including the indications for urgent surgical exploration and the priorities underpinning the planning of investigation and management.
4 Understand the need for a multidisciplinary approach to management of cranio cervical trauma
4 Be able to elicit and appropriate clinical history from a patient with cranio cervical trauma (or from a third party witness).
4 Be able to demonstrate the relevant clinical signs from a patient with cranio cervical trauma.
4 Be able to appropriately order and interpret the results of investigations in a patient with cranio cervical trauma.
4 Be able to coordinate the assembly of an appropriate multidisciplinary team to manage a patient with cranio cervical trauma.
4 Be able to secure the airway through intubation or tracheostomy
4 Be able to explore the traumatized neck and secure bleeding vessels.
4 Be able to manage penetrating injury to the viscera of the upper aerodigestive tract
3 Be able to undertake microsurgical reanastomosis of divided nerves where appropriate.

Clinical Skills
4 Be able to elicit and appropriate clinical history from a patient with cranio cervical trauma (or from a third party witness).
4 Be able to demonstrate the relevant clinical signs from a patient with cranio cervical trauma.
4 Be able to appropriately order and interpret the results of investigations in a patient with cranio cervical trauma.
4 Be able to coordinate the assembly of an appropriate multidisciplinary team to manage a patient with cranio cervical trauma.
4 Be able to secure the airway through intubation or tracheostomy
4 Be able to explore the traumatized neck and secure bleeding vessels.

Technical Skills and Procedures
4 Be able to manage penetrating injury to the viscera of the upper aerodigestive tract
3 Be able to undertake microsurgical reanastomosis of divided nerves where appropriate.

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

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**Topic**  | Disorders of swallowing
---|---
**Category** | Head and Neck
**Sub-category:** | None

*To understand the aetiology, presenting signs, symptoms and management of common disorders of swallowing, including dysphagia, globus pharyngeus, neurological swallowing disorders, odynophagia and aspiration. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive*

**Objective**
4 Understand the anatomy of the pharynx, and physiology of swallowing.
4 Understand causes of odynophagia.

**Knowledge**
4 Understand the various hypotheses relating to the aetiology of dysphagia.
4 Understand the investigation and imaging of a patient with dysphagia.
4 Understand the principles of medical and surgical management of dysphagia.
4 Elicit an appropriate clinical history and clinical signs.
4 Be able to examine the pharynx and oesophagus with mirrors and endoscopes in outpatients.

**Clinical Skills**
4 Be able to work in cooperation with Speech & language therapists in the management of dysphagia.

**Technical Skills**
4 Flexible fibreoptic nasopharyngolaryngoscopy
and Procedures

4 Interpretation of videofluoroscopic swallowing studies
4 Fibreoptic endoscopic evaluation of swallowing studies
4 Endoscopic examination of pharynx, larynx and oesophagus under general anaesthesia
4 Removal of foreign bodies from the pharynx, larynx and oesophagus under general anaesthesia
3 Be able to perform competently endoscopic and open pharyngeal pouch surgery

Professional Skills

Please see the Professional Skills and Behaviour » Final section for these skills

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Aetiology and management of cervical sepsis

**Category**: Head and Neck

**Objective**

To understand the aetiology, presenting signs, symptoms and management of a patient with cervical sepsis. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

1. Understand the anatomy of the fascial compartments of the neck.
2. Understand the pathogenesis (including congenital abnormalities) and clinical presentation of deep neck space infections.
3. Know the microbiology of deep neck space infections.
4. Understand the principles of medical and surgical management of deep neck space infection, including image guided drainage procedures.
5. Understand the complications of deep neck space infections and their management.
6. Be able to elicit an appropriate history from a patient with deep cervical sepsis.
7. Be able to demonstrate the relevant clinical signs from a patient with deep cervical sepsis.
8. Be able to order and interpret the results of appropriate investigations, including imaging and microbiological cultures, in a patient with deep cervical sepsis.
9. Be able to undertake treatment of a patient with deep cervical sepsis or complications thereof.
10. Be proficient in rigid endoscopic examination of the upper aerodigestive tract.
11. Be proficient in management of the compromised upper airway in deep cervical sepsis, including tracheostomy.

**Clinical Skills**

4 Be able to order and interpret the results of appropriate investigations, including imaging and microbiological cultures, in a patient with deep cervical sepsis.
4 Be able to undertake treatment of a patient with deep cervical sepsis or complications thereof.

**Technical Skills and Procedures**

4 Manage the patient in conjunction with anaesthetists/intensivists.
4 Be competent in the open incision and drainage of a deep cervical abscess, as well as demonstrating awareness of the complications of such procedures.

**Professional Skills**

Please see the Professional Skills and Behaviour » Final section for these skills

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Aetiology and management of congenital abnormalities of the head and neck affecting adults

**Category**: Head and Neck

**Objective**

To understand the aetiology, presenting signs, symptoms and management of a patient with congenital abnormality of the head and neck. This module gives
some indication of the breadth and depth of required knowledge and surgical skills. This section complements the paediatric section as most of the problems will present there. The list should not be considered to be fully inclusive or exhaustive.

4 Understand the embryology of the head and neck.
4 Understand the anatomy of the neck.
4 Understand the morphology and classification of pharyngeal diverticulae.
4 Understand the pathophysiological effects of pharyngeal diverticulae and the principles underlying their management.
4 Understand the theories relating to the pathogenesis of branchial arch abnormalities including branchial cyst, collaular fistula, external ear malformations, thyroglossal duct related malformations, cervical sinuses and fistulae. (i.e. branchial cleft abnormalities).
4 Understand the principles of management of branchial arch abnormalities including branchial cyst, collaular fistula, external ear malformations, thyroglossal duct related malformations, cervical sinuses and fistulae.

**Knowledge**

3 Know of syndromes associated with congenital abnormalities of the head and neck.
3 Understand the morphology and classification of dentoalveolar malformations and the principles underlying their management.
4 Understand the morphology and classification of congenital abnormalities of the larynx, trachea and oesophagus and the principles underlying their management.
3 Understand the morphology, classification of and pathophysiological effects of cleft lip and palate, and the principles of management thereof.
4 Understand the investigation of congenital abnormalities of the head and neck including imaging and examination under anesthesia.
3 Understand the principles of genetic counselling of patients or the parents of children with congenital abnormalities of the head and neck.
4 Be able to elicit an appropriate history from a patient with a congenital abnormality of the head and neck.
4 Be able to demonstrate the relevant clinical signs from a patient with a congenital abnormality of the head and neck.

**Clinical Skills**

4 Be able to undertake appropriately ordered investigation of a congenital abnormality of the head and neck.
4 Be able to interpret imaging of congenital abnormalities of the head and neck.
4 Understand the role of a multidisciplinary team in the management of congenital abnormalities of the head and neck.
4 Be able to perform appropriately directed examination under anaesthesia, including endoscopic assessment of a congenital abnormality of the head and neck.

**Technical Skills and Procedures**

4 Be able to excise a pharyngeal diverticulum using open and endoscopic techniques.
4 Be able to perform surgery to remove abnormalities of the thyroglossal duct.
4 Be able to perform a tracheostomy under general and local anaesthesia.
4 Be able to excise a branchial cyst.
3 Be able to excise a branchial fistula.

**Professional Skills**

Please see the [Professional Skills and Behaviour » Final](#) section for these skills.

---

**Topic** Cervical lymphadenopathy in adults

**Category** Head and Neck
To understand the aetiology, presenting symptoms & signs and management of patients presenting with cervical lymphadenopathy. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive and exhaustive.

4 Demonstrate knowledge of the aetiology & pathology of cervical lymphadenopathy including manifestations of systemic disease.
4 The need for endoscopic assessment of a neck mass this comes in under demonstrating knowledge of aetiology & pathology therefore
4 Be able to order the appropriate investigations of neck masses
4 Understand the anatomy of the neck, and distribution of cervical lymph nodes. Classify the lymphatic levels of the neck according to the MSK classification.
4 Demonstrate knowledge of the differing histology and microbiological causes of cervical lymphadenopathy.
4 Presentation, aetiology, investigations and pattern of metastatic spread of upper aerodigestive tract, salivary gland, cutaneous and thyroid malignancies. 4 Demonstrate knowledge of the presentation, aetiology, investigations and principles of management of lymphoreticular disease as it applies to the head and neck.
4 Principles of management of patients with cervical lymphadenopathy.
4 Demonstrate knowledge of the indications for medical & surgical management and the complications of management.

4 Be able to take a relevant detailed history and interpret clinical signs correctly.
4 Fine needle aspiration cytology
4 Out patient and in-patient endoscopy of the UADT.
4 Excision of cervical lymph nodes and deal with the complications
2 Block dissections of lymph nodes

Please see the Professional Skills and Behaviour » Final section for these skills

To understand the aetiology of head and neck malignancies in the upper aerodigestive tract, presenting signs, symptoms and management of patients presenting with HNC. This module gives some indication of the breadth and depth of required. Knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive

4 Understand the classification of head and neck malignancies in particular squamous carcinoma as it is the commonest type (HNC) and know the principles of TNM staging.
4 Know the pathology of HNC
4 Understand the presenting signs and symptoms of head and neck cancer.
4 Understand the various hypotheses relating to the aetiology of squamous cell cancer including the cellular basis of oncogenesis.
4 Understand the pattern of spread of malignant disease.
4 Understand how HNC is managed in the multidisciplinary setting.
4 Know the indications for imaging in HNC and the use of relevant imaging
modalities.
3 Understand the functional consequences of head and neck cancer, and its treatment.
4 Understand the principles involved in and evidence for the various medical and surgical methods of treatment available for head and neck cancer.
3 Understand the role of surgical and medical treatment in palliative management of patients
3 Understand the indications for reconstructive and rehabilitative surgery (including surgical voice restoration) in HNC
3 Know the various reconstructive options available in HNC
4 Elicit a relevant clinical history and clinical signs including being able to perform an appropriate examination.
4 Be able to work within the MDT, and recognise the contributions made by all team members.
4 Demonstrate good communication skills with other professionals.
4 Be able to break bad news sensitively and appropriately to patients and their families
4 Be able to perform the following diagnostic procedures; microlaryngoscopy, pharyngo-oesophagoscopy, tonsillectomy, examination of postnasal space, bronchoscopy, Fine Needle Aspiration Cytology (FNAC)
3 Total Laryngectomy
3 Comprehensive and selective neck dissection
2 Partial laryngectomy
2 Transoral laser surgery
2 Reconstructive surgery with myocutaneous (pedicled) flaps
2 Reconstructive surgery with free flaps
4 Be able to manage safely acute complications of Head & Neck surgery
4 Be able to replace a tracheooesophageal valve in clinic.

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

### Topic Investigation and management of the neck and lump

#### Category
Head and Neck

#### Sub-category:
None

#### Objective
To understand the aetiology, presenting symptoms & signs and management of patients presenting with a neck lump. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Understand the anatomy of the neck, and distribution of cervical lymph nodes. Classify the lymphatic levels of the neck.
4 Know the differential diagnosis of a neck lump.
4 Demonstrate knowledge of the aetiology & pathology of cervical lymphadenopathy including manifestations of systemic disease.
4 Understand the presentation, aetiology, investigations and pattern of metastatic spread of upper aerodigestive tract, salivary gland, cutaneous and thyroid malignancies.
4 Understand the appropriate investigation of neck masses
4 Demonstrate knowledge of the presentation, aetiology, investigations and principles of management of lymphoma and leukaemia as it applies to the head and neck.
4 Understand the principles of medical and surgical management of patients
with a neck lump
4 Demonstrate knowledge of the potential complications of management.
4 Be able to take a relevant detailed history, perform appropriate examination and interpret clinical signs correctly.
4 Demonstrate a rational approach to investigation of a neck lump
4 Perform (FNAC)

### Clinical Skills

4 Out patient and in patient endoscopy of the Upper aerodigestive tract
4 Perform excision biopsy of cervical lymph nodes and deal with the complications.
4 Branchial cyst excision and management of complications

### Professional Skills

**Please see the [Professional Skills and Behaviour » Final](#) section for these skills**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Neoplastic salivary gland disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Head and Neck</td>
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<tr>
<td>Sub-category:</td>
<td>None</td>
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</table>

**Objective**

To understand the aetiology, presenting signs, symptoms and management of neoplastic salivary gland disease. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Know the anatomy & physiology of the major & minor salivary glands & their relations.
4 Know the anatomy of the neck.
4 Know the anatomy of the oral cavity.
4 Know the pathology of salivary gland tumours.
4 Understand the classification of salivary gland tumours.
4 Understand inflammatory swellings
4 Know the presenting symptoms & signs of salivary gland tumours.
4 Understand the modalities (cytological & imaging) available for investigating salivary gland tumours

4 Know the differential diagnosis of salivary gland tumours and inflammatory swellings.
4 Understand the principles of management of salivary gland tumours.
4 Understand the potential consequences of salivary gland surgery and the complications of surgery
3 Understand the principles of management (surgical & non surgical) of malignant salivary gland disease
3 Understand the role of reconstructive and palliative surgery in the management of malignant salivary gland disease
4 Be able to elicit an appropriate clinical history and interpret physical signs correctly

### Knowledge

4 Demonstrate the ability to detect ‘red flag’ symptoms & signs of malignant disease.
4 Order the most appropriate imaging modality
3 Manage patients with malignant disease in a multidisciplinary team
4 FNAC
4 Be able to perform a submandibular gland excision

### Clinical Skills

3 Biopsy of a minor salivary gland tumour
3 Be able to perform a superficial parotidectomy
2 Total parotidectomy
2 Selective & comprehensive neck dissection

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1 Facial nerve grafting & facio-hypoglossal anastomosis

**Professional Skills** Please see the [Professional Skills and Behaviour » Final](#) section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Benign salivary gland disease</th>
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<tr>
<td>Sub-category:</td>
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</table>

**Objective**

>To understand the aetiology, presenting signs, symptoms and management of benign salivary gland disease. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Know the anatomy and physiology of the major and minor salivary glands.
4 Understand the pathological processes, both local & systemic, that can affect the salivary glands.
4 Understand the classification of benign salivary gland disease including infection, inflammatory diseases, drugs and benign tumours
4 Know the various imaging modalities for investigation of benign salivary gland disease.
4 Understand the principles of patient management.
4 Know the medical and surgical management of salivary gland disease, and the complications of surgery
4 Be able to elicit an appropriate clinical history and interpret clinical signs correctly.

**Clinical Skills**

4 Be able to order the appropriate special investigations and correctly interpret images including plain radiographs, computerized tomography and Magnetic resonance imaging.
4 Be able to counsel patients on the particular risks of salivary gland surgery.

**Technical Skills and Procedures**

4 Be able to excise a submandibular calculus
3 Be able to perform submandibular gland excision
2 Total parotidectomy for inflammatory disease

**Professional Skills** Please see the [Professional Skills and Behaviour » Final](#) section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Thyroid and parathyroid disease</th>
</tr>
</thead>
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<tr>
<td>Category</td>
<td>Head and Neck</td>
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<tr>
<td>Sub-category:</td>
<td>None</td>
</tr>
</tbody>
</table>

**Objective**

>To understand the aetiology, presenting signs, symptoms and management of Thyroid and Parathyroid disorders. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Understand the embryology, physiology, biochemistry and anatomy of the thyroid gland.
4 Understand the embryology, physiology, biochemistry and anatomy of the parathyroid glands.
4 Understand the pathophysiology of endocrine dysfunction of the thyroid and parathyroid glands.
4 Understand the classification of thyroid neoplasia.
4 Understand the principles of investigation of a patient with endocrine dysfunction of the thyroid gland.

4 Understand the principles of investigation of a patient with endocrine dysfunction of the parathyroid glands.

4 Understand the principles of investigation of a patient with a parathyroid or thyroid mass

4 Understand principles of medical and surgical management of endocrine dysfunction of the thyroid and parathyroid glands, including the peri operative management of thyrotoxicosis.

4 Understand principles of medical and surgical management of neoplasia of the thyroid and parathyroid glands, including post operative complications.

4 Be able to elicit an appropriate clinical history from a patient with thyroid or parathyroid gland disease.

Clinical Skills

4 Be able to demonstrate relevant clinical signs in a patient with thyroid or parathyroid gland disease

4 Be able to obtain appropriate samples for fine needle cytology or microtrephine biopsy from a patient with a thyroid or parathyroid mass.

3 Be able to perform thyroid surgery.

Technical Skills and Procedures

3 Be able to perform surgical exploration of the neck for parathyroid disease.

1 Be able to explore the superior mediastinum for thyroid and parathyroid neoplasia.

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

Topic Oral pathology
Category Head and Neck
Sub-category: None

Objective

To understand the aetiology, presenting signs, symptoms and management of patients presenting with disorders of the oral cavity. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Understand the anatomy of the oral cavity
4 Know the normal flora of the oral cavity and how oral disease can alter oral flora
4 Understand the physiology of the oral phases of swallowing
4 Know the physiology of salivary function
4 Understand the consequences of oral disease on swallowing
4 Understand the consequences of salivary gland dysfunction on oral health
4 Know the causes of drooling and the principles of management thereof.
3 Understand the aetiology, pathophysiology, presenting symptoms and signs of dental caries
3 Know the pathophysiology, presenting symptoms & signs and management
of mucosal oral disease including infection, inflammation, soft tissue and bony conditions
4 Understand the aetiology of oral cancer
4 Know the presenting symptoms and signs of oral cancer
4 Understand the principles of management of oral cancer
4 Understand the long and short term effects of chemotherapy and radiotherapy on oral health
4 Understand the appropriate modalities for imaging oral disease
4 Be able to elicit an appropriate clinical history and interpret physical signs correctly
4 Demonstrate the ability to detect ‘red flag’ symptoms & signs of malignant disease.

Clinical Skills
4 Order the most appropriate imaging modality
4 Be able to interpret plain images of the oral cavity and associated bony structures
3 Manage patients with malignant disease in a multidisciplinary team
4 be able to diagnose dental related sepsis presenting in the neck or paranasal sinuses
4 Perform a biopsy of an oral lesion
3 Remove and treat benign oral lesions
2 Partial glossectomy

Technical Skills and Procedures
2 Submandibular gland transposition for drooling
3 Simple dental extractions
2 closure of oroantral fistulae
1 Mandibulotomy and excision of floor of mouth lesion
1 Total glossectomy

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

Topic Sleep related breathing disorders
Category Head and Neck
Sub-category: None

Objective
To understand the aetiology, presenting signs, symptoms and management of sleep related breathing disorders. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.
4 Know the aetiology, presenting signs and symptoms of sleep related breathing disorders, including snoring, obstructive sleep apnoea / hypopnoea and central sleep apnoea in adults.
4 Know of the pathophysiological sequelae of sleep related breathing disorders including snoring, obstructive sleep apnoea / hypopnoea and central sleep apnoea

Knowledge
4 Understand the principles of assessment and investigation of sleep related breathing disorders, including sleep nasendoscopy and sleep studies / polysomnography.
4 Understand the principles of management of sleep related breathing disorders including CPAP, mandibular advancement prostheses, nasal and pharyngeal surgery, tracheostomy and drug therapy.
4 Understand the principles of midface and mandibular advancement surgery.

Clinical Skills
4 Be able to elicit an appropriate clinical history and identify relevant clinical signs in a patient with a sleep related breathing disorder.
4 Be able to make a correct diagnosis from the results of assessment and investigation of a patient with a sleep related breathing disorder, and synthesise an appropriate plan for their clinical management.

Technical Skills and Procedures
4 Be able to perform palatal surgery for snoring/OSAS
4 Be able to perform surgery to correct nasal airway obstruction.
4 Be able to perform sleep nasendoscopy and outpatient flexible fibreoptic nasendoscopy

Professional Skills
Please see the Professional Skills and Behaviour » Final section for these skills

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<table>
<thead>
<tr>
<th>Topic</th>
<th>Voice disorders</th>
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<tbody>
<tr>
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<td>Head and Neck</td>
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<tr>
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</tbody>
</table>

**Objectives**

To understand the aetiology, presenting signs, symptoms and management of common voice disorders. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

- Understand the physics of sound
- Understand the embryology of the larynx and congenital malformations of the larynx
- Understand the maturational / developmental changes of the larynx
- Understand the anatomy, neuroanatomy and movements of the larynx
- Understand the physiology of phonation and articulation
- Understand the classification of dysphonias and the various hypotheses relating to the aetiology of dysphonias.
- Understand the classification of disorders of articulation
- Understand principles of videostroboscopic examination of the larynx, laryngography and analysis of pitch and periodicity of speech. (including photodocumentation)
- Understand the principles of the medical and surgical management of patients with dysphonia (including instrumentation).
- Know the principles of Speech and Language Therapy
- Know about inflammatory and neoplastic laryngeal disorders
- Elicit an appropriate clinical history from and demonstrate clinical signs in a dysphonic patient
- Communication skills with Speech & Language therapists and ability to work in a multidisciplinary team.
- Laryngeal examination with mirrors and flexible fibreoptic endoscope in an outpatient setting
- Microlaryngoscopy
- Videostroboscopic laryngoscopy in an outpatient setting
- Microscopic / endoscopic laryngeal surgery and intralaryngeal injection techniques
- Laryngeal framework surgery
- Laryngeal electromyography

Professional Skills
Please see the Professional Skills and Behaviour » Final section for these skills

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<table>
<thead>
<tr>
<th>Topic</th>
<th>Ranula</th>
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<tbody>
<tr>
<td>Category</td>
<td>Head and Neck</td>
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<thead>
<tr>
<th>Topic</th>
<th>Sialadenitis</th>
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<tbody>
<tr>
<td>Category</td>
<td>Head and Neck</td>
</tr>
<tr>
<td>Sub-category</td>
<td>Salivary gland disorders</td>
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<td>Objective</td>
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<tr>
<td></td>
<td>Embryogenesis of the salivary glands.</td>
</tr>
<tr>
<td></td>
<td>Anatomy of the salivary glands.</td>
</tr>
<tr>
<td>Knowledge</td>
<td>Antimicrobial investigations and therapy of the common ENT infections</td>
</tr>
<tr>
<td></td>
<td>Investigations of patients with sialadenitis.</td>
</tr>
<tr>
<td></td>
<td>Management of the patient with sialadenitis.</td>
</tr>
<tr>
<td></td>
<td>Knowledge of complications associated with sialadenitis.</td>
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<tr>
<td>Clinical Skills</td>
<td>Incision and drainage of acute salivary gland infections.</td>
</tr>
<tr>
<td>Technical Skills and Procedures</td>
<td>No content</td>
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<tr>
<td>Professional Skills</td>
<td>Please see the <a href="#">Professional Skills and Behaviour » Final</a> section for these skills</td>
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<table>
<thead>
<tr>
<th>Topic</th>
<th>Sialolithiasis</th>
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<td>Salivary gland disorders</td>
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<tr>
<td>Objective</td>
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<tr>
<td></td>
<td>Embryogenesis of the salivary glands.</td>
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<tr>
<td></td>
<td>Anatomy of the salivary glands.</td>
</tr>
</tbody>
</table>
Presenting symptoms of salivary gland obstruction.

Microbiology of the common ENT infections.

Antimicrobial investigations and therapy of the common ENT infections

Investigations of patients with salivary gland obstruction.

Management of the patient with salivary gland obstruction.

Knowledge of complications associated with salivary gland obstruction.

Surgical management of the patient with salivary gland obstruction.

Intra oral parotid stone excision.

Clinical Skills

Intraoral submandibular duct stone excision.

Submandibular gland excision.

Technical Skills and Procedures

No content

Professional Skills

Please see the Professional Skills and Behaviour » Final section for these skills

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**Topic** | **Submandibular and parotid gland tumours**
---|---
**Category** | Head and Neck
**Sub-category:** | Salivary gland disorders
**Objective** | No content

Embryogenesis of the salivary glands.

Anatomy of the salivary glands.

Knowledge of salivary gland pathology.

Knowledge of the pathogenesis of parotid gland tumours.

**Knowledge**

Presenting symptoms of parotid gland tumours.

Investigations of patients with parotid gland tumours.

Management of the patient with a parotid gland tumour.

Surgical management of the patient with parotid gland tumour.

Knowledge of complications associated with salivary gland excision.

Fine needle cytology.

**Clinical Skills**

Superficial parotidectomy.

Total conservative parotidectomy.
Selective and radical neck dissections

Facial nerve grafting.

Facial-hypoglossal anastamosis.

Technical Skills and Procedures
No content

Professional Skills
Please see the Professional Skills and Behaviour » Final section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Acquired lesions including osteoma, exostosis and atresia, dermatological conditions, benign and malignant lesions, affect of ionizing irradiation on the temporal none. Trauma and foreign bodies.</th>
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<tbody>
<tr>
<td>Category</td>
<td>Otology</td>
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<tr>
<td>Sub-category:</td>
<td>Non infective conditions of the external ear</td>
</tr>
<tr>
<td>Objective</td>
<td>To understand the aetiology, pathology, presentation and management of non-infective conditions of the external ear.</td>
</tr>
<tr>
<td>Knowledge</td>
<td>4 systemic conditions affecting external ear</td>
</tr>
<tr>
<td></td>
<td>4 dermatological conditions of the external ear</td>
</tr>
<tr>
<td></td>
<td>4 pharmacology of medications used in treatment</td>
</tr>
<tr>
<td></td>
<td>4 aetiology, pathology, presentation and management of benign and malignant disease</td>
</tr>
<tr>
<td></td>
<td>3 aetiology of acquired atresia of the external auditory meatus</td>
</tr>
<tr>
<td></td>
<td>3 pathogenesis of effects of ionizing radiation of the ear and temporal bone</td>
</tr>
<tr>
<td></td>
<td>4 aetiology, pathology, presentation and management of osteoma / exostosis</td>
</tr>
<tr>
<td></td>
<td>4 management of foreign bodies</td>
</tr>
<tr>
<td></td>
<td>4 understand the implications and management of trauma to the ear</td>
</tr>
</tbody>
</table>

HISTORY AND EXAMINATION
4 obtain appropriate history
4 clinical examination
4 Ototoscopy
4 microscopy

Clinical Skills
DATA INTERPRETATION
3 interpretation of audiological
3 awareness and interpretation of radiological investigations

PATIENT MANAGEMENT
Medical management
Comprehensive management including surgery as appropriate
4 Referral and team working
4 Aural toilet including microsuction and application of dressings
4 Biopsy of lesion of external ear
3 Wedge excision

Technical Skills and Procedures
3 Oncological and reconstructive surgery
3 Meatoplasty
3 Removal of osteoma / exostosis
4 Otomicroscopy and removal of FB’s
4 Drainage of haematoma of pinna
4 Suturing of pinna

Professional Skills
Please see the Professional Skills and Behaviour » Final section for these skills
**Topic:** Comprehensive management of otitis externa, furunculosis, otomycosis, myringitis granular and benign, herpetic lesions and malignant otitis externa

**Category:** Otology

**Sub-category:** Infective conditions of the external ear including otitis externa, furunculosis, otomycosis, myringitis granular and benign/herpetic

**Objective**

To understand the aetiology, pathology, presentation and management of infective conditions of the external ear.

4 Anatomy, physiology and pathology of the external ear and relationship of disease to the temporal bone.
4 Microbiology of external ear

**Knowledge**

4 Knowledge of antimicrobial and antiviral agents and pharmacology of medications used in treatment
4 The pathogenesis of disorders of the external ear.
4 Differential diagnosis and management of inflammatory conditions
4 Necrotising otitis externa.

**HISTORY AND EXAMINATION**

History taking, clinical examination including neuro – otological
4 Interpret audio vestibular tests.
4 Understand principles of patient management.

**DATA INTERPRETATION**

Awareness and interpretation of radiological investigations inc bone scanning microbiological reports
4 interpretation of laboratory investigations

**Clinical Skills**

**PATIENT MANAGEMENT**

Medical management
Indications for surgical intervention

**Technical Skills and Procedures**

4 Microscopy
4 suction clearance
4 biopsy of lesion of external ear

**Professional Skills**

Please see the [Professional Skills and Behaviour » Final](#) section for these skills

---

**Topic:** Trauma

**Category:** Otology

**Sub-category:** Trauma

**Objective**

To understand the aetiology, presenting signs, symptoms and management of trauma of the external, middle and inner ear including the temporal bone. This module gives some indication of the breadth and depth of required knowledge and surgical skills.

4 Anatomy, physiology and pathology of the ear and auditory pathways.
4 The effects of trauma on the pinna, ear canal, tympanic membrane, middle ear, otic capsule and temporal bone.

**Knowledge**

4 The effects and assessment of poly-trauma and neurological injury.
4 The effects of barotrauma
4 The surgical and non-surgical management of trauma of the external, middle
and inner ear.

HISTORY AND EXAMINATION
4 History taking, clinical examination,
4 Audiological and vestibular assessment
4 Neurophysiological assessment of facial nerve

3 Significance of radiological findings.
4 Interpret audio-vestibular tests.
4 Principles of patient management

DATA INTERPRETATION
4 objective and subjective audiological and vestibular tests
3 Radiological imaging of the temporal bone, head and neck
4 Laboratory investigations

PATIENT MANAGEMENT
Demonstrate communication skills and empathy
4 Be able to advise the patient of the treatment options, discuss risks and potential benefits, potential complications
4 To work where appropriate in a multidisciplinary team liaise with other professional and organisations
4 The importance of teamwork in managing critically ill patients

Microscopy
Suction clearance of ear
3 meatoplasty
4 Drainage of haematoma of pinna
4 suturing of pinna
2 reconstructive surgery of the pinna
3 exploratory tympanotomy
4 myringoplasty
2 ossiculoplasty
2 facial nerve decompression / anastomosis
2 repair of perilymph leak

Technical Skills and Procedures

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

Topic Acute otitis media including mastoiditis, skull base infection, chronic otitis media and sequelae
Category Otology
Sub-category: Middle ear

Demonstrate communication skills and empathy.

To understand the aetiology, presenting signs, symptoms and management of infection of the middle ear. This module gives some indication of the breadth and depth of required knowledge and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Anatomy, physiology and pathology of the ear and temporal bone
4 The microbiology related to acute and chronic ear infections.
4 Complications of acute otitis media.

Knowledge
4 Principles and practice of audiology including pure tone audiometry, tympanometry
4 Principle and practice of objective tests of hearing
4 Interpretation of radiological investigations
4 Pharmacology of medications used in medical treatment

HISTORY AND EXAMINATION
4 Otological and neuro-otological examination
4 Audiological assessment
4 History taking, clinical examination,
4 Understand principles of patient management
4 Microscope assessment of the ear

Clinical Skills
DATA INTERPRETATION
4 Principle and practice of objective tests of hearing
3 Interpretation of radiological investigations

PATIENT MANAGEMENT
medical and surgical treatments of acute infection to the middle ear and
 temporal bone
4 suction clearance
4 microsuction and myringotomy
4 myringotomy and grommet

Technical Skills
4 T tube insertion
4 Grommet removal
4 Myringoplasty
4 Cortical mastoidectomy
3 Modified radical mastoidectomy

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Management of adult deafness presenting as sudden or progressive conductive, mixed and sensorineural hearing loss</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Otology</td>
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<tr>
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</tbody>
</table>

To understand the aetiology, presenting signs, symptoms and management of adults who present with conductive, mixed, progressive or sudden onset of sensorineural deafness. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Embryology of the ear
4 Anatomy, physiology and pathology of the ear and auditory pathways. Principles of acoustics and measurement of sound.
4 Principles and practice of audiology including pure tone audiometry, speech audiometry and electrophysiological tests and other objective tests of hearing including oto-acoustic emissions
3 Radiological imaging of the inner ear and central vestibular pathways

Knowledge
3 The genetics of otological diseases
4 The aetiology, pathogenesis and management of disorders of the ear and hearing: including both benign and malignant disease
4 Noise induced hearing loss; preservation of hearing
3 Central auditory processing disorders, auditory neuropathy, obscure auditory dysfunction
3 Auditory rehabilitation including the use of hearing aids and other assistive devices.
4 Social and psychological issues of deafness
3 Principles of non-auditory communication
4 Principles of surgical reconstruction.
4 Management of severe/profound hearing loss.

HISTORY AND EXAMINATION
4 History taking, clinical examination inc neuro-otological
4 Objective and subjective audiological assessment
4 Principles of a holistic approach to the management of hearing loss
4 Vestibular assessment, including electro physiological testing, and clinical examination
3 Radiological assessment
3 genetic counseling

DATA INTERPRETATION
4 audiological and vestibular tests
3 Radiological imaging of the temporal bone, head and neck
4 Laboratory investigations

PATIENT MANAGEMENT
Demonstrate communication skills and empathy
4 Be able to advise the patient of the treatment options, discuss risks and potential benefits, potential complications
4 To work where appropriate in a multidisciplinary team Liaise with other professional and organisations
4 Microscopy
4 Suction clearance of ear
4 Aural polypectomy
4 Myringotomy +/- grommet
3 Exploratory tympanotomy
4 Myringoplasty
3 Tympanoplasty
3 Open and closed mastoidectomy
3 Ossiculoplasty
2 Stapedotomy / stapedectomy
2 Cochlear implantation
2 Middle ear implantation
3 Insertion of Bone anchored hearing aid abutment
3 closure of perilymph leak
1 The surgical approaches to the CP angle

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Objective and subjective tinnitus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Otology</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Tinnitus</td>
</tr>
<tr>
<td>Objective</td>
<td>To understand the aetiology, presenting signs, symptoms and management of tinnitus. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.</td>
</tr>
<tr>
<td>Knowledge</td>
<td>4 Anatomy, physiology and pathology of the ear and auditory pathways.</td>
</tr>
</tbody>
</table>
4 The pathogenesis of disorders of the ear and hearing
4 Principles and practice of audiology including pure tone audiometry, speech audiometry and electrophysiological tests and other objective tests of hearing including oto-acoustic emissions
3 Psycho-acoustical tests, pitch and loudness match, minimum masking level, residual inhibition
4 The various hypotheses relating to the aetiology of tinnitus both objective and subjective
4 The psychological effects of tinnitus
3 Principles of tinnitus retraining and rehabilitation and the principles of support and counselling
3 function of hearing aid(s) and masking

**Clinical Skills**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Upper and lower motor neuron disease of the facial nerve</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Otology</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Facial Paralysis</td>
</tr>
</tbody>
</table>

**Objective**

To understand the aetiology, presenting signs, symptoms and management of facial nerve palsy. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 The anatomy and physiology of facial nerve and related structures
4 The aetiology classification and neuro-physiology of facial paralysis
2 The relevant clinical neurological, vascular, radiological, biochemical, serological and electrophysiological investigations

**Knowledge**

Per-operative facial nerve monitoring
2 Principles of rehabilitation for facial paralysis
1 Understand the psychological effects of facial disfigurement

**HISTORY AND EXAMINATION**

4 The anatomy and physiology of facial nerve and related structures

**Clinical Skills**

4 The aetiology classification and neuro-physiology of facial paralysis
3 The relevant clinical neurological, vascular, radiological, biochemical, serological and electrophysiological investigations
4 Principles of rehabilitation for facial paralysis
4 Understand the psychological effects of facial disfigurement

DATA INTERPRETATION
4 neuro-physiological tests of inner ear function and facial nerve
4 Neuro-otological radiological tests
4 Laboratory investigations

PATIENT MANAGEMENT
4 Demonstrate communication skills and empathy
4 Be able to advise the patient/parents or carers of the treatment options, discuss risks and potential benefits, potential complications and obtain informed consent. Liaise with other health care professionals.

Technical Skills and Procedures
2 Tarsorraphy
4 Cortical mastoidectomy
3 Modified radical mastoidectomy
2 Decompression of facial nerve
2 Facial nerve anastomosis

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Dizziness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Otology</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Dizziness</td>
</tr>
</tbody>
</table>

To understand the aetiology, presenting signs, symptoms and management of patients with disordered balance. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

4 Anatomy, neuro-anatomy and physiology of related to maintenance of balance [this was to encompass all this vestibular system, visual, locomotor and cardiovascular systems]
4 Pathology and pathogenesis of diseases of the ear
4 The pathology and various hypotheses relating to the aetiology and management of sudden vestibular failure, Ménière’s disease, benign paroxysmal vertigo, vestibular schwannoma, pharmacological and metabolic side effects

Knowledge
4 The handicaps related to age related sensory and proprioceptive degeneration psychological aspects of dizziness
3 The relevant clinical neurological, vascular, radiological, biological, immunological and serological investigations
4 The relationship of vestibular disorders to legislation relating to employment and driving
4 The principles of vestibular rehabilitation
4 The principles of particle repositioning manoeuvres
4 Treatment options both non-surgical and surgical

Clinical Skills
4 Vestibular assessment, including electro physiological testing

DATA INTERPRETATION
4 Interpret audio-vestibular tests
4 Interpret neuro-physiological tests
3 Interpret neuro-otological radiological investigations

PATIENT MANAGEMENT
4 Demonstrate communication skills and empathy
4 Be able to advise the patient of the treatment options, discuss risks and potential benefits, potential complications and obtain informed consent
4 Perform particle re-positioning maneuvers
4 microscopy
4 Myringotomy and grommet

Technical Skills and Procedures
4 Perform particle re-positioning maneuvers
4 microscopy
4 Myringotomy and grommet
4 Cortical mastoidectomy
2 Decompression of endolymphatic sac
2 Closure of perilymph fistula
2 surgical procedures for Ménière’s disease, vestibular schwannoma
2 removal of lesions of the IAM and cerebro-pontine angle

Professional Skills
Please see the Professional Skills and Behaviour » Final section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Disorders of equilibrium including Meniere's disorder</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Otology</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Disorders of equilibrium including Meniere's disorder</td>
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<tr>
<td>Objective</td>
<td>To understand the aetiology, presenting signs, symptoms and management of common ORL conditions. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive. Clinical anatomy, neuro-anatomy and physiology of the vestibular system, locomotor, CVS and cardiovascular systems and vision. Pathology and pathogenesis of diseases of the ear. The pathology and various hypotheses relating to the aetiology of Meniere's Disease. The relevant clinical neurological, vascular, radiological, biochemical, immunological and serological investigations. The relationship of vestibular disorders to legislation relating to employment and driving. 4 The principles of vestibular rehabilitation.</td>
</tr>
<tr>
<td>Knowledge</td>
<td>Vestibular assessment, including electro physiological testing, and clinical examination</td>
</tr>
</tbody>
</table>
Elicit clinical history and clinical signs.

Perform relevant audio vestibular tests

Interpret audio vestibular tests

Interpret neurophysiological tests

4 Principles of patient management

<table>
<thead>
<tr>
<th>Topic</th>
<th>Disequilibrium of ageing.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Otology</td>
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<tr>
<td>Sub-category:</td>
<td>Disorders of equilibrium including Meniere's disorder</td>
</tr>
</tbody>
</table>

To understand the aetiology, presenting signs, symptoms and management of common ORL conditions. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

Clinical anatomy, neuro-anatomy and physiology of the vestibular system, locomotor, CVS and cardiovascular systems and vision

Pathology and pathogenesis of diseases of the ear

The relevant clinical neurological, vascular, radiological, biological, immunological and serological investigations

The relationship of vestibular disorders to legislation relating to employment and driving

The principles of vestibular rehabilitation

4 The handicaps related to age related sensory and proprioceptive degeneration

Vestibular assessment, including electro physiological testing, and clinical examination

Elicit clinical history and clinical signs.

<table>
<thead>
<tr>
<th>Clinical Skills</th>
<th>Perform relevant audio vestibular tests</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Interpret audio vestibular tests</td>
</tr>
<tr>
<td></td>
<td>Interpret neurophysiological tests</td>
</tr>
</tbody>
</table>

4 principles of patient management

<table>
<thead>
<tr>
<th>Technical Skills and Procedures</th>
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Professional Skills Please see the [Professional Skills and Behaviour » Final](#) section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Neurological and Vascular causes of vertigo</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Otology</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Disorders of equilibrium including Meniere's disorder</td>
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To understand the aetiology, presenting signs, symptoms and management of common ORL conditions. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

Clinical anatomy, neuro-anatomy and physiology of the vestibular system, locomotor, CVS and cardiovascular systems and vision

Pathology and pathogenesis of diseases of the ear

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>The relevant clinical neurological, vascular, radiological, biological, immunological and serological investigations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The relationship of vestibular disorders to legislation relating to employment and driving</td>
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<tr>
<td></td>
<td>4 The principles of vestibular rehabilitation</td>
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<tr>
<td></td>
<td>Vestibular assessment, including electro physiological testing, and clinical examination</td>
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<td>Elicit clinical history and clinical signs</td>
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<td>4 principles of patient management</td>
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</table>

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</table>

| Professional Skills | Please see the [Professional Skills and Behaviour » Final](#) section for these skills |

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<table>
<thead>
<tr>
<th>Topic</th>
<th>Vestibular Schwannoma</th>
</tr>
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<tbody>
<tr>
<td>Category</td>
<td>Otology</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Disorders of equilibrium including Meniere's disorder</td>
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</table>

To understand the aetiology, presenting signs, symptoms and management of common ORL conditions. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

Clinical anatomy, neuro-anatomy and physiology of the vestibular system, locomotor, CVS and cardiovascular systems and vision

Pathology and pathogenesis of diseases of the ear
The relevant clinical neurological, vascular, radiological, biological, immunological and serological investigations

The relationship of vestibular disorders to legislation relating to employment and driving

The principles of vestibular rehabilitation

The genetics of vestibular schwannomas and genetic counselling.

The surgical and non-surgical management options.

4 The surgical approaches to the CP angle

Vestibular assessment, including electro physiological testing, and clinical examination

Elicit clinical history and clinical signs

Clinical Skills

Perform relevant audio vestibular tests

Interpret audio vestibular tests

Interpret neurophysiological tests

4 principles of patient management

Technical Skills and Procedures 1 The surgical approach for trans labyrintheine and other surgical approaches to resection

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

Topic Benign Paroxysmal Positional Vertigo

Category Otology

Sub-category: Disorders of equilibrium including Meniere's disorder

Objective

To understand the aetiology, presenting signs, symptoms and management of common ORL conditions. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

Clinical anatomy, neuro-anatomy and physiology of the vestibular system, locomotor, CVS and cardiovascular systems and vision

Pathology and pathogenesis of diseases of the ear

The relevant clinical neurological, vascular, radiological, biological, immunological and serological investigations

The relationship of vestibular disorders to legislation relating to employment and driving

The principles of vestibular rehabilitation
Treatment options both non-surgical and surgical

4 The pathology and various hypotheses relating to the aetiology of BPPV
Vestibular assessment, including electro physiological testing, and clinical examination

Elicit clinical history and clinical signs

Perform relevant audio vestibular tests

**Clinical Skills**
- Interpret audio vestibular tests
- Interpret neurophysiological tests
- 4 principles of patient management

1 The surgical approach for trans labyrinthine and other surgical approaches to resection

**Technical Skills and Procedures**
- 4 Perform particle re-positioning manoeuvres

**Professional Skills**
Please see the [Professional Skills and Behaviour » Final](#) section for these skills

---

**Topic**  
Acute vestibular failure

**Category**  
Otology

**Sub-category:** Disorders of equilibrium including Meniere's disorder

To understand the aetiology, presenting signs, symptoms and management of common ORL conditions. This module gives some indication of the breadth and depth of required knowledge, clinical and surgical skills. The list should not be considered to be fully inclusive or exhaustive.

Clinical anatomy, neuro-anatomy and physiology of the vestibular system, locomotor, CVS and cardiovascular systems and vision

Pathology and pathogenesis of diseases of the ear

The various hypotheses relating to the aetiology of sudden vestibular failure

**Knowledge**
The relevant clinical neurological, vascular, radiological, biological, immunological and serological investigations

The relationship of vestibular disorders to legislation relating to employment and driving

4 The principles of vestibular rehabilitation
Vestibular assessment, including electro physiological testing, and clinical examination

**Clinical Skills**
- Elicit clinical history and clinical signs
- Perform relevant audio vestibular tests
Interpret audio vestibular tests

Interpret neurophysiological tests

4 principles of patient management

<table>
<thead>
<tr>
<th>Topic</th>
<th>Epistaxis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Rhinology</td>
</tr>
<tr>
<td>Objective</td>
<td>To understand the aetiology, presenting symptoms and signs and management of epistaxis. There should be detailed understanding of the presenting features, complications, diagnosis, and management of these infections.</td>
</tr>
</tbody>
</table>
| Knowledge            | 4 Understanding of local and systemic aetiologies of epistaxes  
                        | 4 Detailed knowledge of the anatomy and physiology of nasal vasculature  
                        | 4 Detailed understanding of the presenting symptoms and signs of epistaxes  
                        | 4 Detailed knowledge of management including first aid measures, nasal cautery, packing and operative techniques in the management of epistaxes  
                        | 4 Know the complications of epistaxes and the management of them.  
                        | 4 Demonstrate expertise in taking an appropriate clinical history.  
                        | 4 Ability to elicit physical signs both local and systemic if appropriate  
                        | 4 Awareness of relevant haematological and imaging investigations.  
                        | 4 Awareness of management principles in patient with epistaxis  
                        | 4 Ability to resuscitate critically ill patient |
| Clinical Skills      | 3 Diagnostic nasendoscopy  
                        | 3 Packing of nose  
                        | 3 Removal of nasal packing  
                        | 3 Cautery of nasal septum  
                        | 3 Ethmoid Artery ligation  
                        | 3 Sphenopalatine artery ligation |
| Technical Skills and Procedures | No content |

<table>
<thead>
<tr>
<th>Topic</th>
<th>Nasal trauma and deformity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Rhinology</td>
</tr>
<tr>
<td>Objective</td>
<td>To understand the presenting features, diagnosis, complications and management of nasal trauma and deformity. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.</td>
</tr>
</tbody>
</table>
| Knowledge            | 4 Understanding of the anatomy of the nose, paranasal sinuses and facial skeleton.  
                        | 4 Understanding of the mechanisms of trauma responsible for nasal and facial injuries.  
                        | 4 Knowledge of the appropriate imaging techniques  
                        | 4 Knowledge of the specific complications of nasal trauma  
                        | 4 Knowledge of the management of nasal trauma |
| Professional Skills  | Please see the Professional Skills and Behaviour » Final section for these skills |
4 Knowledge of the management of nasal deformity
4 Ability to take a relevant history and perform an appropriate clinical examination
4 Knowledge of the relevant special investigations and correct interpretation
4 Ability to adequately resuscitate the critically ill patient
4 Fracture nose reduction
4 Packing of nose

Clinical Skills

Technical Skills
3 Ethmoid artery ligation
3 Sphenopalatine artery ligation
4 Septoplasty
3 Septorhinoplasty

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

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**Topic**  
**Nose and sinus infections**

**Category**  
Rhinology

**Sub-category:** None

**Objective**  
To understand the aetiology, pathophysiology, and microbiology. There should be detailed understanding of the presenting features, complications, diagnosis, and management of these infections. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

4 Detailed knowledge of anatomy and physiology of the nose and paranasal sinuses
4 Know the microbiology of acute and chronic rhinosinusitis
4 Knowledge of rarer pathogens responsible for rhinosinusitis

**Knowledge**

4 Understanding of the differences in management between acute and chronic rhinosinusitis.
4 Knowledge of the indications for and techniques of surgical management
4 Knowledge of the complications of sinusitis and their management.

4 Demonstrate an ability to take an appropriate history and perform a nasal examination with a speculum and endoscope.

**Clinical Skills**

4 Awareness of the indications for imaging including CT and MRI
4 Awareness of indications for other special investigations including microbiology, immunology etc
4 nasendoscopy
4 antral washout – direct vision
4 inferior meatal antrostomy – direct vision + endoscopic
4 middle meatal antrostomy – endoscopic

**Technical Skills**

4 nasal polypectomy – endoscopic
4 uncinectomy – endoscopic
4 uncinectomy + bulla – endoscopic
3 anterior ethmoidectomy - endoscopic
3 Caldwell-Luc – direct vision
3 Intranasal ethmoidectomy – direct vision

**Professional Skills** Please see the Professional Skills and Behaviour » Final section for these skills

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**Topic**  
**Mose and sinus inflammation including allergy**
**Category** Rhinology

**Sub-category:** None

**Objective**

To understand the aetiology and pathophysiology of nasal & paranasal sinus inflammation. There should be detailed understanding of the presenting features, complications, diagnosis, and management of these infections. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

- 4 Detailed knowledge of anatomy and physiology of the nose and paranasal sinuses
- 4 Understanding of the aetiologies underlying inflammation of the nose and sinuses.
- 4 Know the role of allergy in the pathophysiology of inflammation of the nose and sinuses.
- 4 Understanding of the special investigations used in the assessment of nasal allergy.
- 4 Understanding of the imaging modalities to assess the nose and sinuses.
- 4 Knowledge of the role of management of allergy, and drug treatment in nasal and sinus inflammation.
- 4 Understand the place of surgery in management of nasal and sinus inflammation.
- 4 Ability to take an appropriate history and perform a relevant examination of the nose and sinuses.
- 4 Ability to perform nasendoscopy
- 4 Ability to interpret the result of allergy testing including skin prick testing
- 4 Know which haematological investigations & radiological imaging are appropriate.
- 4 nasendoscopy
- 4 turbinate cautery
- 4 turbinate surgery
- 4 antral washout – direct vision
- 4 inferior meatal antrostomy – direct vision + endoscopic
- 4 middle meatal antrostomy – endoscopic
- 4 nasal polypectomy – endoscopic
- 4 uncincetomy – endoscopic
- 4 uncincetomy + bulla – endoscopic
- 3 anterior ethmoidectomy - endoscopic
- 3 Caldwell-Luc – direct vision
- 3 Intranasal ethmoidectomy – direct vision

**Knowledge**

4 Detailed knowledge of anatomy and physiology of the nose and paranasal sinuses.

**Clinical Skills**

4 Ability to take an appropriate history and perform a relevant examination of the nose and sinuses.

4 Ability to perform nasendoscopy

4 Ability to interpret the result of allergy testing including skin prick testing

4 Know which haematological investigations & radiological imaging are appropriate.

4 nasendoscopy

4 turbinate cautery

4 turbinate surgery

4 antral washout – direct vision

4 inferior meatal antrostomy – direct vision + endoscopic

4 middle meatal antrostomy – endoscopic

4 nasal polypectomy – endoscopic

4 uncincetomy – endoscopic

4 uncincetomy + bulla – endoscopic

4 anterior ethmoidectomy - endoscopic

4 Caldwell-Luc – direct vision

4 Intranasal ethmoidectomy – direct vision

**Technical Skills and Procedures**

4 nasal polypectomy – endoscopic

4 uncincetomy – endoscopic

4 uncincetomy + bulla – endoscopic

3 anterior ethmoidectomy - endoscopic

3 Caldwell-Luc – direct vision

3 Intranasal ethmoidectomy – direct vision

**Professional Skills**

Please see the [Professional Skills and Behaviour » Final](#) section for these skills
4 Knowledge of the embryology of the nose and sinuses.
4 Knowledge of those conditions associated with congenital nasal abnormalities.
4 Understanding of how to manage congenital nasal abnormalities in both the elective & emergency settings.

Clinical Skills
4 Ability to take an appropriate history form the parent and child and perform relevant examination.
4 Nasendoscopy if appropriate

Technical Skills and Procedures
4 Nasendoscopy
3 Examination under anaesthesia

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

Topic Facial pain
Category Rhinology
Sub-category: None

Objective
To understand the aetiologies, characteristics and management of conditions presenting with facial pain, including those causes not arising in the upper aerodigestive tract

Knowledge
4 Anatomy and physiology of the face, including the TMJ, dentition and cervical spine
4 Understand the differential diagnosis of facial pain including organic and functional causes
4 Understand the various treatment modalities, both medical and surgical
4 Awareness of the multidisciplinary approach to management
4 Ability to take a relevant history of facial pain
4 Ability to perform an appropriate ENT, neurological and locomotor examination

Clinical Skills
4 Understanding of the appropriate radiological investigations
4 Appropriate management to include pharmacological, surgical and counselling therapies

Technical Skills and Procedures
4 Outpatient endoscopy of upper aerodigestive tract
4 Examination under anaesthesia
4 Biopsy - external nose
4 Biopsy – internal nose

Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

Topic Nasal polyps
Category Rhinology
Sub-category: None

Objective
To understand the aetiologies, pathophysiology and clinical features of nasal polyps. There should be a detailed knowledge of the diagnostic features, management and complications.

This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

Knowledge
4 A detailed understanding of the aetiologies and conditions associated with nasal polyps.
4 Knowledge of the clinical features of nasal polyps
4 Understand the medical and surgical management options of nasal polyps
4 Understand the clinical significance of unilateral nasal polyps
4 Ability to take an appropriate history and perform an examination including nasal endoscopy.

Clinical Skills
4 Awareness of imaging techniques
1 nasal polypectomy
2 nasendoscopy
2 antral washout – direct vision
1 inferior meatal antrostomy – direct vision + endoscopic

Technical Skills and Procedures
1 middle meatal antrostomy – endoscopic
1 uncinctomy – endoscopic
1 uncinctomy + bulla – endoscopic
1 anterior ethmoidectomy - endoscopic
1 Caldwell-Luc – direct vision
1 Intranasal ethmoidectomy – direct vision

Professional Skills
Please see the Professional Skills and Behaviour » Final section for these skills

Topic Granulomatous conditions
Category Rhinology
Sub-category: None

Objective
To understand the aetiology, classification, clinical features and management of granulomatous conditions of the nose. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

Knowledge
4 Understanding of the classification of nasal granulomatous conditions
4 Knowledge of the Pathophysiology of these conditions
4 Knowledge of the microbiology of specific nasal granulomatous conditions
4 Knowledge of the features of non specific granulomatous conditions eg sarcoidosis and Wegener’s granulomatosis.
4 Understanding of methods of diagnosis.
4 Knowledge of management of these conditions.
4 Awareness of differential diagnosis
4 Ability to take a relevant history and perform an appropriate clinical examination
4 Knowledge of the relevant special investigations and correct interpretation of them.

Clinical Skills
4 diagnostic nasendoscopy

Technical Skills and Procedures
4 examination under anaesthesia
4 biopsy – external
4 biopsy - internal

Professional Skills
Please see the Professional Skills and Behaviour » Final section for these skills

Topic Rhinological oncology
Category Rhinology
Sub-category: None

Objective
To understand the aetiology, clinical presentation and management of tumours of the nose and paranasal sinuses. This module gives some idea of the breadth
and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

Knowledge
- Knowledge of the anatomy of the nose and paranasal sinuses.
- Knowledge of the distribution of cervical lymph nodes.
- Understanding of the pattern of spread of malignancy in the head and neck.
- Knowledge of the different histological types of malignancy in the nose and paranasal sinuses.
- Understanding of the principles of medical and surgical management of malignancy of the nose and sinuses.
- Knowledge of the complications of both the disease and its management.

Clinical Skills
- Ability to take a relevant history, perform an appropriate examination and interpret clinical findings correctly.
- Demonstrate a rational approach to special investigations.

Technical Skills and Procedures
- Examination of nose under anaesthesia.
- Biopsy of nose - external.
- Biopsy of nose - internal.

Professional Skills
Please see the [Professional Skills and Behaviour » Final](#) section for these skills.

---

**Topic**: Septorhinoplasty  
**Category**: Rhinology  
**Sub-category**: Facial Plastics  

*To understand the presenting features, assessment, management and complications of nasal and septal deformity. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.*

- Understanding of the anatomy of the nose, paranasal sinuses and facial skeleton.
- Understanding the embryology of the nose.
- Understanding of the mechanisms of trauma responsible for nasal and facial injuries.
- Understanding methods of assessment of the facial skeleton.
- Knowledge of the specific complications of nasal surgery.
- Ability to take a relevant history and perform an appropriate clinical examination.
- Ability to assess photographs and devise a surgical plan.
- Septoplasty.

**Technical Skills and Procedures**
- Septorhinoplasty.
- Packing of nose.
- Sphenopalatine artery ligation.

**Professional Skills**
Please see the [Professional Skills and Behaviour » Final](#) section for these skills.

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**Topic**: Congenital abnormalities  
**Category**: Rhinology  
**Sub-category**: Facial Plastics  

*To understand the aetiology, clinical features and management of congenital facial abnormalities. To understand how these may be associated with other syndromes.*

This module gives some idea of the breadth and depth of required knowledge.
Knowledge

4 Knowledge of the anatomy and physiology of the facial structures.
4 Knowledge of the embryology of the face including the nose, palate and neck.

4 Knowledge of those conditions associated with congenital facial abnormalities.
4 Understanding of how to manage congenital facial abnormalities in both the elective & emergency settings.

4 Ability to take an appropriate history form the parent and child and perform relevant examinations.

Clinical Skills

4 Nasendoscopy if appropriate
4 Examination of external nose
4 Examination of internal nose with headlight
4 Nasendoscopy

4 Examination under anaesthesia
4 Resection of nasal lesion NEC
4 Excision skin lesion

Professional Skills

Please see the Professional Skills and Behaviour » Final section for these skills
Topic: Reconstruction  
Category: Rhinology  
Sub-category: Facial Plastics

Objective: To understand the methods available for facial reconstruction involving, skin, muscle, cartilage, bone and implants. This involves a detailed understanding of the anatomy of the skin and deeper structures and in particular the blood supply of the tissues involved. Knowledge of the basic types of skin grafts, local flaps, regional flaps and free flaps is necessary. This module gives some idea of the breadth and depth of required knowledge and surgical skills. This list should not be considered to be fully inclusive or exhaustive.

4 Understanding of the anatomical areas of the face
4 Understanding of the blood supply and innervation of the face and of local, regional and free grafts.

Knowledge:
4 Knowledge of the different types of flap available and the indications for their use
4 Knowledge of the implants and prosthetic devices available.
4 Ability to take a relevant history and perform an appropriate clinical examination
4 Ability to assess facial defects and devise a management plan
4 Resection of nasal lesion

Technical Skills and Procedures:
4 Lip-wedge resection
4 Excision skin lesion
4 Suture skin

Professional Skills: Please see the Professional Skills and Behaviour » Final section for these skills
Special Interest Stage

Cleft Lip and Palate Surgery deals with the soft and hard tissue deformities of the commonest oro-facial congenital disorder. In collaboration with other medical and dental disciplines, and non-medical health professionals, the surgeon contributes to the correction of respiratory, hearing, feeding, speech and facial growth disorders and facial deformity. The diagnosis of some forms of clefting may be made by pre-natal ultrasound; thus the surgical care of cleft patients and their families may start before birth. It continues in many cases throughout childhood and adolescence and concludes only at the cessation of growth, and when the patient is satisfied with the result; or when further care is required only from a different discipline.

Special interest training in cleft lip and palate may commence only after the trainees have passed the inter-collegiate board examinations in the home specialty (see paragraph “Entry to training” below). Trainees will thus have proved abilities in the generality of their own specialty, including operative skills. They will also have acquired skills in diagnosis, investigation, non-operative management, and in communication with patients and colleagues. Specific skills involved in the multi-disciplinary delivery of health care to children will also have been developed.

Cleft Lip and Palate – Service Need

Nationwide there are 11 Cleft centres, although the majority of them work on more than one hub site, and all of them work in collaboration with district hospital and community health services.

There are 1000 to 1200 new patients with clefts born each year. Because of the effects on facial growth, dentition, hearing and speech, psychological effects and the associations with other congenital anomalies and genetic disorders, the great majority of the patients need follow-up at least until the facial skeleton has ceased growing (age 16 roughly), and many need continuing care in the first few years of adulthood. This equates to follow-up lists totalling 12,000 children or more, and a number of adults. Surgeons of three different disciplines are involved at any or all stages of care (Plastic, Oral & Maxillofacial, Otorhinolaryngology).

The current staffing arrangements in the Cleft centres vary according to how much the surgeons contribute to the generality of their "home" specialty. There are a very few exclusively "cleft" surgeons but they are the minority, and it does not look as if this will be the pattern in the near future. There are around 30 surgeons nationally operating on infant patients, and some more (OMFS) surgeons operating on older children and adults. There will therefore only be opportunities for a maximum of one or two trainees per year to develop the special interest.

Entry to training

Trainees wishing to pursue a special interest in Cleft Lip and Palate Surgery will be drawn from the following four specialties: Oral and Maxillo-Facial Surgery, Oto-rhino-laryngology (ENT), Paediatric Surgery and Plastic Surgery. Entry to Cleft Lip and Palate special interest training is by competitive interview. Candidates should either have passed the inter-collegiate board examination in their “home-specialty” or be within 6 months of taking it.

Length of training

The training is competency based but it is anticipated that the period of training will take more than one year but not exceed two years.
It is expected that trainees will have acquired some exposure to the management of cleft patients in a training setting in their home specialty, or in allowed periods “out of programme”. Experience obtained in non-training settings (e.g. “Cleft camps”) cannot be counted in a trainee’s log-book. However, it is clear that skills acquired in this manner can be assessed subsequently in the training setting.

All training in Cleft Lip and Palate Surgery is acknowledged by the four contributing specialties as counting towards the acquisition of the Certificate of Completion of Training (CCT).

The training interface group recognises that training in Cleft Lip and Palate Surgery should take place with the full facilities of a Paediatric environment. A trainee with a special interest in Cleft Lip and Palate Surgery must be able to demonstrate that he/she can function as part of a multi-disciplinary team. He/she must also demonstrate an appropriate relationship, directly or by correspondence, with all other relevant Paediatric Departments and Specialists, including: Fetal Medicine, Clinical Genetics, Nutrition and Dietetics, Anaesthetics, General Paediatrics, Community Paediatrics.

The training will cover the full range of primary and secondary cleft surgical procedures. Some of the related procedures that the advanced trainee (and later the consultant) will undertake will depend on their parent speciality (e.g. insertion of grommets, aspects of dental surgical management).

The purpose of the syllabus is to guide trainees as to the skills they will need to develop, in a multi-disciplinary setting, to treat cleft children and assist their families.

Click on Workplace Based Assessments to view the assessment forms including DOPS and PBAs

**Topics**

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<th>Basic science</th>
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</tr>
<tr>
<td>Sub-category:</td>
<td>Basic science as applied to Cleft surgery</td>
</tr>
<tr>
<td>Objective</td>
<td>No content</td>
</tr>
<tr>
<td>Knowledge</td>
<td>Pathogenesis of cleft lip and palate</td>
</tr>
<tr>
<td></td>
<td>Risk factors (medication and illness in pregnancy, family history, syndromes)</td>
</tr>
<tr>
<td></td>
<td>Basic knowledge of dental development</td>
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<tr>
<td></td>
<td>Out-line of normal development of deciduous dentition, mixed dentition phase, permanent dentition</td>
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<td>Common dental anomalies in clefts</td>
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<td></td>
<td>Surgical anatomy</td>
</tr>
<tr>
<td></td>
<td>Skeleton and soft tissues of cleft and non-cleft patients, face, jaws, oral cavity,</td>
</tr>
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</table>
pharynx, upper airway

Normal physiology of infants and children
Cardio-respiratory physiology of newborn, energy requirements, growth, development milestones in the first year of life, IV fluid management, principles of resuscitation (APLS/PALS)

Normal oro-facial physiology
Feeding mechanisms, swallowing, relation of infant feeding and later speech mechanisms, nasal and Eustachian tube and middle ear physiology

Clinical Skills No content
Technical Skills and Procedures No content
Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

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<tr>
<th>Topic</th>
<th>History taking</th>
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<td>Patient/Parent management</td>
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<tr>
<td>Objective</td>
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<tr>
<td>Knowledge</td>
<td>Symptom patterns, pregnancy and family history</td>
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<td></td>
<td>Elicit relevant history</td>
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<td></td>
<td>Elicit pregnancy history</td>
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<tr>
<td>Clinical Skills</td>
<td>Take history in difficult circumstances (English not first language, parents with psychological or social problems, confrontational parents)</td>
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<tr>
<td>Technical Skills</td>
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<tr>
<td>and Procedures</td>
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<tr>
<td>Professional Skills</td>
<td>Please see the Professional Skills and Behaviour » Final section for these skills</td>
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<tr>
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<tbody>
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<tr>
<td>Sub-category:</td>
<td>Patient/Parent management</td>
</tr>
<tr>
<td>Objective</td>
<td>None</td>
</tr>
<tr>
<td>Knowledge</td>
<td>Patterns of clinical signs in clefting</td>
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<td>Signs of appropriate development</td>
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<td></td>
<td>Appropriate explanation of procedure to parents</td>
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<tr>
<td>Clinical Skills</td>
<td>Ability to examine without causing undue discomfort elicit signs and use appropriate equipment</td>
</tr>
<tr>
<td>Technical Skills</td>
<td>None</td>
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<tr>
<td>and Procedures</td>
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<tr>
<td>Professional Skills</td>
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<thead>
<tr>
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<th>Peri-operative management</th>
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<td>Patient/Parent management</td>
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<tr>
<td>Objective</td>
<td>None</td>
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<tr>
<td>Knowledge</td>
<td>Appropriate health for undergoing anaesthesia and operation</td>
</tr>
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<td></td>
<td>Basic knowledge of anaesthesia for cleft infants</td>
</tr>
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<td></td>
<td>Post-operative management, including introduction of feeding</td>
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<td></td>
<td>Appropriate pre-operative examination</td>
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<td>Communication with anaesthetists</td>
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<tr>
<td>Clinical Skills</td>
<td>Post-operative fluid management (Intravenous and oral)</td>
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<td></td>
<td>Use of prophylactic antibiotics</td>
</tr>
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<td>Technical Skills and Procedures</td>
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</tr>
<tr>
<td>Professional Skills</td>
<td>Please see the <a href="#">Professional Skills and Behaviour » Final</a> section for these skills</td>
</tr>
</tbody>
</table>

### Topic: Surgical Technique

#### Category
Cleft Lip and Palate Stage 1 Key Objectives to be achieved in the first 6 months

#### Sub-category: Patient/Parent management

#### Objective: None

#### Knowledge
- Principles and techniques of primary cleft surgery of lip and palate
- Principles and techniques of secondary cleft surgery, including unilateral alveolar bone graft
- Demonstrates appropriate knowledge of surgical anatomy
- Demonstrates appropriate knowledge of operation rationale

#### Clinical Skills
- Appropriate tissue handling
- Appropriate selection of instruments
- Appropriate selection of suture material

#### Technical Skills and Procedures
None

#### Professional Skills
Please see the [Professional Skills and Behaviour » Final](#) section for these skills

### Topic: Speech investigations

#### Category
Cleft Lip and Palate Stage 1 Key Objectives to be achieved in the first 6 months

#### Sub-category: Patient/Parent management

#### Objective: None

#### Knowledge
- Indications for speech investigations
- Methods and limitations
- Radiation protection
- Assessing appropriateness of referral for speech investigations

#### Clinical Skills
- Assessing likely cooperation of patient
- Basic interpretation of results

#### Technical Skills and Procedures
None

#### Professional Skills
Please see the [Professional Skills and Behaviour » Final](#) section for these skills
**Topic**  
**Team working**

**Category**  
Cleft Lip and Palate Stage 1 Key Objectives to be achieved in the first 6 months

**Sub-category:** Multidisciplinary management

**Objective**  
None

**Knowledge**  
Understanding the expertise and role of other disciplines in cleft management

**Clinical Skills**  
Effective communication with other disciplines

**Technical Skills and Procedures**  
None

**Professional Skills**  
Please see the [Professional Skills and Behaviour » Final](#) section for these skills

---

**Topic**  
**Communication**

**Category**  
Cleft Lip and Palate Stage 1 Key Objectives to be achieved in the first 6 months

**Sub-category:** Multidisciplinary management

**Objective**  
None

**Knowledge**  
Methods and timing of involvement of other disciplines in cleft care

**Clinical Skills**  
Appropriate involvement of other professionals

**Technical Skills and Procedures**  
None

**Professional Skills**  
Please see the [Professional Skills and Behaviour » Final](#) section for these skills

---

**Topic**  
**Empathy and sensitivity, ethics, consent**

**Category**  
Cleft Lip and Palate Stage 1 Key Objectives to be achieved in the first 6 months

**Sub-category:** Multidisciplinary management

**Objective**  
None

**Knowledge**  
Range of patient and parent reaction to cleft deformity and its consequences  
Knowledge of ethical issues in cleft management  
Identifying patients and parents concerns

**Clinical Skills**  
Take consent effectively for primary cleft operations  
Ability to discuss ethical issues and potential complications

**Technical Skills and Procedures**  
None

**Professional Skills**  
Please see the [Professional Skills and Behaviour » Final](#) section for these skills

---

**Topic**  
**Antenatal diagnosis**

**Category**  
Cleft Lip and Palate Stage 1 Key Objectives to be achieved in the first 6 months

**Sub-category:** Multidisciplinary management

**Objective**  
None
### Knowledge
- Possibilities and limitations of antenatal diagnosis
- Likelihood of undiagnosed coexistent abnormalities

### Clinical Skills
- Ability to ascertain details of antenatal diagnosis
- Ability to prioritise information
- Ability to use simple language in discussing diagnoses

### Technical Skills and Procedures
None

### Professional Skills
Please see the [Professional Skills and Behaviour » Final](#) section for these skills

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<table>
<thead>
<tr>
<th>Topic</th>
<th>Organisation and planning</th>
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</thead>
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<td>Multidisciplinary management</td>
</tr>
<tr>
<td>Objective</td>
<td>None</td>
</tr>
</tbody>
</table>

### Knowledge
- Systematic approach to patient management
- Starting with important tasks

### Clinical Skills
- Improvement of efficiency
- Discussing prioritisation with colleagues in the team

### Technical Skills and Procedures
None

### Professional Skills
Please see the [Professional Skills and Behaviour » Final](#) section for these skills

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<table>
<thead>
<tr>
<th>Topic</th>
<th>Data and record management</th>
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<td>Multidisciplinary management</td>
</tr>
<tr>
<td>Objective</td>
<td>None</td>
</tr>
</tbody>
</table>

### Knowledge
- Understand how data are recorded by different specialties in cleft management

### Clinical Skills
- Contribute accurate records
- Understand significance of data recorded by others

### Technical Skills and Procedures
None

### Professional Skills
Please see the [Professional Skills and Behaviour » Final](#) section for these skills

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<table>
<thead>
<tr>
<th>Topic</th>
<th>Audit/Evidence based medicine</th>
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</thead>
<tbody>
<tr>
<td>Category</td>
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</tr>
<tr>
<td>Sub-category:</td>
<td>Multidisciplinary management</td>
</tr>
<tr>
<td>Objective</td>
<td>None</td>
</tr>
</tbody>
</table>

### Knowledge
- Principles of EBM
- Important clinical trials in cleft management
- Ongoing audit in cleft management
- Critically appraise evidence

### Clinical Skills
- Competent use of paper and electronic data sources
- Ability to discuss evidence with parents and patients at appropriate level
<table>
<thead>
<tr>
<th>Topic</th>
<th>Research</th>
</tr>
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<tbody>
<tr>
<td>Category</td>
<td>Cleft Lip and Palate Stage 1 Key Objectives to be achieved in the first 6 months</td>
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<tr>
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<td>Multidisciplinary management</td>
</tr>
<tr>
<td>Objective</td>
<td>None</td>
</tr>
<tr>
<td>Knowledge</td>
<td>Place of research in aiding patient management</td>
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<tr>
<td></td>
<td>Different methods of research and application of these</td>
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<tr>
<td>Clinical Skills</td>
<td>Involvement in departmental research project</td>
</tr>
<tr>
<td></td>
<td>Using critical analysis skills to determine research questions</td>
</tr>
<tr>
<td>Technical Skills and Procedures</td>
<td>None</td>
</tr>
<tr>
<td>Professional Skills</td>
<td>Please see the Professional Skills and Behaviour » Final section for these skills</td>
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<thead>
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<th>Topic</th>
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<td>Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Core knowledge</td>
</tr>
<tr>
<td>Objective</td>
<td>None</td>
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<tr>
<td>Knowledge</td>
<td>Process and timing of facial, branchial arch and otological development</td>
</tr>
<tr>
<td></td>
<td>Teratogenic effects</td>
</tr>
<tr>
<td>Clinical Skills</td>
<td>Ability to relate deformity/anomaly to embryology</td>
</tr>
<tr>
<td>Technical Skills and Procedures</td>
<td>None</td>
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<tr>
<td>Professional Skills</td>
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<tr>
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<tr>
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<td>Core knowledge</td>
</tr>
<tr>
<td>Objective</td>
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<tr>
<td>Knowledge</td>
<td>Genetics of cleft lip and palate</td>
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<td></td>
<td>Cleft syndromes</td>
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<td></td>
<td>Common cranio-facial syndromes</td>
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<td></td>
<td>Cleft syndromes with risk of disability in other systems</td>
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<tr>
<td>Clinical Skills</td>
<td>Sensitive discussion of new findings</td>
</tr>
<tr>
<td></td>
<td>Use of clinical genetics inputs</td>
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<tr>
<td>Technical Skills and Procedures</td>
<td>None</td>
</tr>
<tr>
<td>Professional Skills</td>
<td>Please see the Professional Skills and Behaviour » Final section for these skills</td>
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</tbody>
</table>
**Topic**  Growth and development in infant/child nutrition  
**Category**  Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months  
**Sub-category:** Core knowledge  

**Objective**  
None  
Cardio-respiratory physiology of newborn  
Energy requirements  
Growth  
Development milestones in the first year of life  

**Knowledge**  
IV fluid management  
Principles of resuscitation (APLS/PALS)  
Feeding mechanisms, swallowing, relation of infant feeding and later speech mechanisms, nasal and Eustachian tube and middle ear physiology  
Use of growth charts, recognising growth/development exceptions in syndromic patients, appropriate referral of developmental delay, learning difficulties, childhood disability  

**Clinical Skills**  

**Technical Skills and Procedures**  None  

**Professional Skills**  Please see the Professional Skills and Behaviour » Final section for these skills

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**Topic**  Speech Development  
**Category**  Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months  
**Sub-category:** Core knowledge  

**Objective**  
None  
Feeding mechanisms, swallowing, relation of infant feeding and later speech mechanisms, nasal and Eustachian tube and middle ear physiology  

**Knowledge**  
Range of normal speech development mechanisms at risk in cleft, effect of otitis media with effusion, speech skills at school entry  
Effective liaison with Speech Therapists, effective liaison with ENT, appropriate interventions in pre-school child and school child  

**Clinical Skills**  

**Technical Skills and Procedures**  None  

**Professional Skills**  Please see the Professional Skills and Behaviour » Final section for these skills

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**Topic**  Peri-operative Management  
**Category**  Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months  
**Sub-category:** Core knowledge  

**Objective**  
None  
Range of normal pre-operative parameters in children, significant dangers for anaesthetics and operation, principles of post-operative fluid management, antibiotic policy  
Appropriate examination, liaison with Anaesthetics and Ward staff, counselling of parents, post-operative fluids and feeding management, thresholds for Intensive Care interventions  

**Clinical Skills**  

**Technical Skills**  None
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<tr>
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<tr>
<td>Knowledge</td>
<td>Possibilities and limitations of antenatal diagnosis, likelihood of undiagnosed coexistent abnormalities</td>
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<tr>
<td>Clinical Skills</td>
<td>Ability to ascertain details of antenatal diagnosis, ability to prioritise information, ability to use simple language in discussing diagnoses</td>
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<td>Knowledge</td>
<td>Airway in Pierre Robin, choanal and laryngeal anomalies</td>
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<td>Clinical Skills</td>
<td>Airway management in collaboration with other professionals</td>
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<td>Professional Skills</td>
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<td>Post natal management</td>
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<tr>
<td>Objective</td>
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</tr>
<tr>
<td>Knowledge</td>
<td>Energy requirements and preferred methods of feeding in clefts, feeding problems in syndromic and premature babies</td>
</tr>
<tr>
<td>Clinical Skills</td>
<td>Liaise with other professionals on optimisation of cleft patients' feeding</td>
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<tr>
<td>Technical Skills and Procedures</td>
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<td>Professional Skills</td>
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<td>Sub-category:</td>
<td>Post natal management</td>
</tr>
<tr>
<td>Objective</td>
<td>None</td>
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</tbody>
</table>
**Knowledge**
Understanding of techniques and priorities of informing parents of new patients

**Clinical Skills**
Counselling parents of new patients, ability to use simple language, ability to demonstrate priorities to parents

**Technical Skills and Procedures**
None

**Professional Skills**
Please see the [Professional Skills and Behaviour » Final](#) section for these skills

<table>
<thead>
<tr>
<th>Topic</th>
<th>Principles of pre-surgical orthodontics</th>
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<tr>
<td>Category</td>
<td>Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Post natal management</td>
</tr>
<tr>
<td>Objective</td>
<td>None</td>
</tr>
<tr>
<td>Knowledge</td>
<td>Awareness of orthodontic preferences, awareness of situations indicating pre-surgical orthodontics</td>
</tr>
<tr>
<td>Clinical Skills</td>
<td>Appropriate discussion with Orthodontic colleagues</td>
</tr>
<tr>
<td>Technical Skills and Procedures</td>
<td>None</td>
</tr>
<tr>
<td>Professional Skills</td>
<td>Please see the <a href="#">Professional Skills and Behaviour » Final</a> section for these skills</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Topic</th>
<th>Primary lip repair</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months</td>
</tr>
<tr>
<td>Sub-category:</td>
<td>Primary surgery</td>
</tr>
<tr>
<td>Objective</td>
<td>None</td>
</tr>
<tr>
<td>Knowledge</td>
<td>Surgical anatomy, pathological anatomy, techniques and timing, rationale of different sequences</td>
</tr>
<tr>
<td>Clinical Skills</td>
<td>No content</td>
</tr>
<tr>
<td>Technical Skills and Procedures</td>
<td>Operative skill to repair the lip and appropriate other structures according to Unit protocol</td>
</tr>
<tr>
<td>Professional Skills</td>
<td>Please see the <a href="#">Professional Skills and Behaviour » Final</a> section for these skills</td>
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<thead>
<tr>
<th>Topic</th>
<th>Primary Palate repair</th>
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<tbody>
<tr>
<td>Category</td>
<td>Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months</td>
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<td>Primary surgery</td>
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<td>Objective</td>
<td>None</td>
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<tr>
<td>Knowledge</td>
<td>Surgical anatomy, pathological anatomy, techniques and timing, rationale of different sequences</td>
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<tr>
<td>Clinical Skills</td>
<td>No content</td>
</tr>
<tr>
<td>Technical Skills and Procedures</td>
<td>Operative skill to repair the palate and appropriate other structures according to Unit protocol</td>
</tr>
<tr>
<td>Professional Skills</td>
<td>Please see the <a href="#">Professional Skills and Behaviour » Final</a> section for these skills</td>
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<table>
<thead>
<tr>
<th>Topic</th>
<th>Lip revision and fistula closure</th>
</tr>
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<tbody>
<tr>
<td>Category</td>
<td>Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months</td>
</tr>
</tbody>
</table>
Sub-category: Secondary surgery
Objective None
Knowledge Appropriate assessment of lip/fistula disability, awareness of patient perceptions
Clinical Skills None
Technical Skills and Procedures Ability to make appropriate lip revision, ability to make appropriate fistula closure
Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

Topic Investigation of velo-pharyngeal function
Category Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months
Sub-category: Secondary surgery
Objective None
Knowledge Indications for speech investigations, methods and limitations, radiation protection
Clinical Skills No content
Technical Skills and Procedures Assessing appropriateness of referral for speech investigations, assessing likely co-operation of patient, basic interpretation of results
Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

Topic Secondary palatal surgery, surgical management of VPI
Category Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months
Sub-category: Secondary surgery
Objective None
Knowledge Anatomy and physiology of palatal function and abnormalities after cleft closure, pathophysiology of VPI
Clinical Skills No content
Technical Skills and Procedures Judgement on correct operations for secondary repair and control of VPI, skilful dissection of palate after previous repair, surgical skills in speech surgery, pharyngoplasty
Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills

Topic Alveolar bone graft
Category Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months
Sub-category: Secondary surgery
Objective None
Knowledge Preparation for bone grafting, correct assessment of evolution of secondary dentition, understanding of orthodontic investigations and treatment
Clinical Skills None
Technical Skills and Procedures Surgical skills in alveolar bone grafting, correct peri-operative management
Professional Skills Please see the Professional Skills and Behaviour » Final section for these skills
**Topic** Rhinoplasty

**Category** Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months

**Sub-category:** Secondary surgery

**Objective** None

**Knowledge** Anatomy and pathological anatomy of the cleft nose, understanding of corrective procedures

**Clinical Skills** None

**Technical Skills and Procedures** Demonstrate surgical skills in cleft rhinoplasty, management of cleft airway and nasal septum

**Professional Skills** Please see the [Professional Skills and Behaviour » Final](#) section for these skills

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**Topic** Cleft related orthognathic surgery

**Category** Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months

**Sub-category:** Secondary surgery

**Objective** None

**Knowledge** Understanding of anatomy and pathological anatomy, understanding of planning, surgical principles in orthognathic appliances and their usage, methods of distraction osteogenesis

**Clinical Skills** None

**Technical Skills and Procedures** Ability to perform orthognathic surgery under supervision

**Professional Skills** Please see the [Professional Skills and Behaviour » Final](#) section for these skills

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**Topic** Basic Otology and hearing assessment

**Category** Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months

**Sub-category:** Multidisciplinary teamworking

**Objective** None

**Knowledge** Interpretation of audiogram and tympanometry study, understanding the principles of brain stem evoked response audiometry

**Clinical Skills** Ability to refer from appropriate history and audiogram

**Technical Skills and Procedures** None

**Professional Skills** Please see the [Professional Skills and Behaviour » Final](#) section for these skills

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**Topic** Orthodontics

**Category** Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months

**Sub-category:** Multidisciplinary teamworking

**Objective** No content

**Knowledge** Understanding of orthodontic role in cleft care, planning AGB, planning orthognathic surgery, orthodontic measurement of mid-facial growth

**Clinical Skills** Appropriate liaison with Orthodontists
### Technical Skills and Procedures

No content

### Professional Skills

Please see the [Professional Skills and Behaviour » Final](#) section for these skills

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<thead>
<tr>
<th>Topic</th>
<th>Speech and language therapy</th>
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<tbody>
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<tr>
<td>Sub-category:</td>
<td>Multidisciplinary teamworking</td>
</tr>
<tr>
<td>Objective</td>
<td>None</td>
</tr>
<tr>
<td>Knowledge</td>
<td>Speech and language therapy input into cleft management, tools for examining speech development, surgical and orthodontic assistance to speech therapy</td>
</tr>
<tr>
<td>Clinical Skills</td>
<td>Appropriate liaison with Speech and language therapists, partaking in policy formation for patients concerning speech management bg</td>
</tr>
<tr>
<td>Technical Skills and Procedures</td>
<td>None</td>
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<tr>
<td>Professional Skills</td>
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<th>Topic</th>
<th>Paediatric and restorative dentistry</th>
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<tr>
<td>Sub-category:</td>
<td>Multidisciplinary teamworking</td>
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<tr>
<td>Objective</td>
<td>None</td>
</tr>
<tr>
<td>Knowledge</td>
<td>Understanding of the role of Paediatric Dentists, understanding basics of oral and dental hygiene, understanding principles of restorative dentistry</td>
</tr>
<tr>
<td>Clinical Skills</td>
<td>Appropriate referral to Paediatric and Restorative Dentist</td>
</tr>
<tr>
<td>Technical Skills and Procedures</td>
<td>None</td>
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<tr>
<td>Professional Skills</td>
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<tr>
<th>Topic</th>
<th>Child and adolescent psychology</th>
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<td>Sub-category:</td>
<td>Multidisciplinary teamworking</td>
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<tr>
<td>Objective</td>
<td>None</td>
</tr>
<tr>
<td>Knowledge</td>
<td>Awareness of the role of Psychologists in childhood and adolescence, understanding of situations requiring psychology therapy</td>
</tr>
<tr>
<td>Clinical Skills</td>
<td>Care in selection of appropriate patients/families for referral</td>
</tr>
<tr>
<td>Technical Skills and Procedures</td>
<td>None</td>
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<tr>
<td>Professional Skills</td>
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<tr>
<th>Topic</th>
<th>Children with disabilities</th>
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<tbody>
<tr>
<td>Category</td>
<td>Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months</td>
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<tr>
<td>Sub-category:</td>
<td>Multidisciplinary teamworking</td>
</tr>
<tr>
<td>Objective</td>
<td>None</td>
</tr>
<tr>
<td>Topic</td>
<td>Ethical issues</td>
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<td>Multidisciplinary teamworking</td>
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<tr>
<td>Objective</td>
<td>None</td>
</tr>
<tr>
<td>Knowledge</td>
<td>Understanding of consent in older children and adolescents, Gillick competence, ethics of new procedures</td>
</tr>
<tr>
<td>Clinical Skills</td>
<td>Ability to take consent from older children and adolescents, ability to communicate medical ethics to parents and older children</td>
</tr>
<tr>
<td>Technical Skills and Procedures</td>
<td>None</td>
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<thead>
<tr>
<th>Topic</th>
<th>General paediatric issues</th>
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<td>Multidisciplinary teamworking</td>
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<tr>
<td>Objective</td>
<td>None</td>
</tr>
<tr>
<td>Knowledge</td>
<td>Understanding of resuscitation of children</td>
</tr>
<tr>
<td>Clinical Skills</td>
<td>Understanding issues of non-accidental injury and child protection</td>
</tr>
<tr>
<td>Technical Skills and Procedures</td>
<td>Maintenance of APLS/PALS skills</td>
</tr>
<tr>
<td>Professional Skills</td>
<td>Ability to recognise signs of NAI, risk factors, family pathology, awareness of NAI referral pathways to child protection</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Topic</th>
<th>Management of residual cleft deformity in adults</th>
</tr>
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</tr>
<tr>
<td>Objective</td>
<td>None</td>
</tr>
<tr>
<td>Knowledge</td>
<td>Understanding of situation at cessation of facial growth, basic understanding of nasal septal deformity, understanding of adult self-image problems, understanding of adult communication problems</td>
</tr>
<tr>
<td>Clinical Skills</td>
<td>Ability to assemble appropriate professionals to solve adults' concerns</td>
</tr>
<tr>
<td>Technical Skills and Procedures</td>
<td>None</td>
</tr>
<tr>
<td>Professional Skills</td>
<td>Please see the Professional Skills and Behaviour » Final section for these skills</td>
</tr>
</tbody>
</table>
### Topic: Children with disabilities

**Category:** Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months  
**Sub-category:** Multidisciplinary teamworking  
**Objective**  
None  
**Knowledge**  
Understanding the role of Community Paediatrics and associated professionals, special needs teaching, awareness of communication disorders  
**Clinical Skills**  
Appropriate liaison with community agencies, ability to write relevant reports  
**Technical Skills and Procedures**  
None  
**Professional Skills**  
Please see the [Professional Skills and Behaviour » Final](#) section for these skills

### Topic: Rhinoplasty

**Category:** Cleft Lip and Palate Stage 2 Objectives to be Achieved within 18 months  
**Sub-category:** Secondary surgery  
**Objective**  
None  
**Knowledge**  
Anatomy and pathological anatomy of the cleft nose, understanding of corrective procedures  
**Clinical Skills**  
None  
**Technical Skills and Procedures**  
Demonstrate surgical skills in cleft rhinoplasty, management of cleft airway and nasal septum  
**Professional Skills**  
Please see the [Professional Skills and Behaviour » Final](#) section for these skills