RCGP Curriculum Supercondensed Curriculum Guide

EAR, NOSE AND THROAT, SPEECH AND HEARING

Role of the GP

- Identify ENT symptoms that fall within the range of normal or are caused by self-limiting conditions
- Recognise oral, head and neck cancers, including their epidemiology and risk factors to enhance early diagnosis
- Communicate effectively with patients who have hearing impairment or deafness and promote the early use of hearing aids for those who may benefit from them including conducting or interpreting more detailed tests (e.g., audiological tests, the Dix–Hallpike test) and treatment including procedures (e.g., Epley manoeuvre) where indicated
- Demonstrate empathy and compassion towards patients with ENT symptoms that may prove difficult to manage (e.g. tinnitus, facial pain, unsteadiness, hearing loss)
- Smoking cessation advice and treatment, and awareness of the latest evidence and guidance on ecigarettes.

Knowledge and Skills Self-Assessment Guide

Symptoms and Signs

- Symptoms within the normal range, such as small neck lymph nodes in healthy children and 'geographic tongue'
- Cough
- Deafness and hearing loss, including sudden hearing loss
- Dental problems immediate necessary treatment (e.g., analgesia, antibiotics, and signposting for definitive care)
- Disturbance of smell and taste
- Earache and discharge
- Epistaxis
 - Facial dysfunction: sensory and motor
 - Facial pain
 - Head and neck lumps
 - Hoarseness
 - Jaw pain
 - Rhinitis and nasal obstruction
 - Salivation problems, including swelling and obstruction of salivary glands
 - Snoring and sleep apnoea
 - Sore throat and mouth
 - Sore tongue and changes in taste
 - Tinnitus
 - Vertigo and dizziness.

EAR, NOSE AND THROAT, SPEECH AND HEARING

Knowledge and Skills Self-Assessment Guide

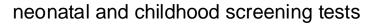
Common and Important Conditions

- Aesthetic and reconstructive surgery and botulinum toxin therapies
- Congenital abnormalities
- Cranial nerve disorders
- Disorders of the salivary glands
- Ear disorders: including otitis externa, otitis media with and without effusion, perforation of the ear drum, cholesteatoma, and mastoiditis
- Emergency treatments such as tracheotomy
- Epidemiology of rarer but potentially serious conditions such as oral, head and neck cancer, taking into account risk factors, and unhealthy behaviour
- Head and neck malignancies including unidentified malignancies presenting with lymphadenopathy
- Hearing aids and cochlear implants, tinnitus maskers
- Hearing problems including deafness, tinnitus and associated speech or language disorders
- Increasing incidence of hearing loss in certain groups, such as people with learning disability or dementia
- Nasal problems including perennial and allergic rhinitis, postnasal drip, epistaxis, and septal deviation
- Oral problems including pain, infections, pre-malignant conditions, and malignancies
- Sinus problems including infection, polyps, and allergic rhinosinusitis
- Throat problems such as infections, globus, or gastroesophageal reflux causing a cough
- Tracheotomy management in primary care
- Vertigo: central (e.g., brainstem stroke) and peripheral (e.g., benign paroxysmal positional vertigo, vestibular neuronitis, Ménière's disease).
- Vocal disorders such as hoarseness, dysphonia, aphonia and underlying causes (e.g., vocal cord nodules, laryngeal nerve palsy).

Knowledge and Skills Self-Assessment Guide

Examinations and Procedures

- Otoscopic appearances of the normal and abnormal ear
- Tests of hearing such as tympanometry, audiometry, tuning fork tests including Weber's and Rinne's,



- Detailed tests where indicated (e.g. audiological tests and the Dix–Hallpike test)
- Skills which can be used in primary care to effect a cure when indicated (e.g. the Epley manoeuvre).

Knowledge and Skills Self-Assessment Guide

Investigations

- Audiology testing
- X-Ray, Ultrasound, CT, and MRI scans
- Nasendoscopy
- Sleep studies.

EAR, NOSE AND THROAT, SPEECH AND HEARING

How this might b	e tested in MRCGP
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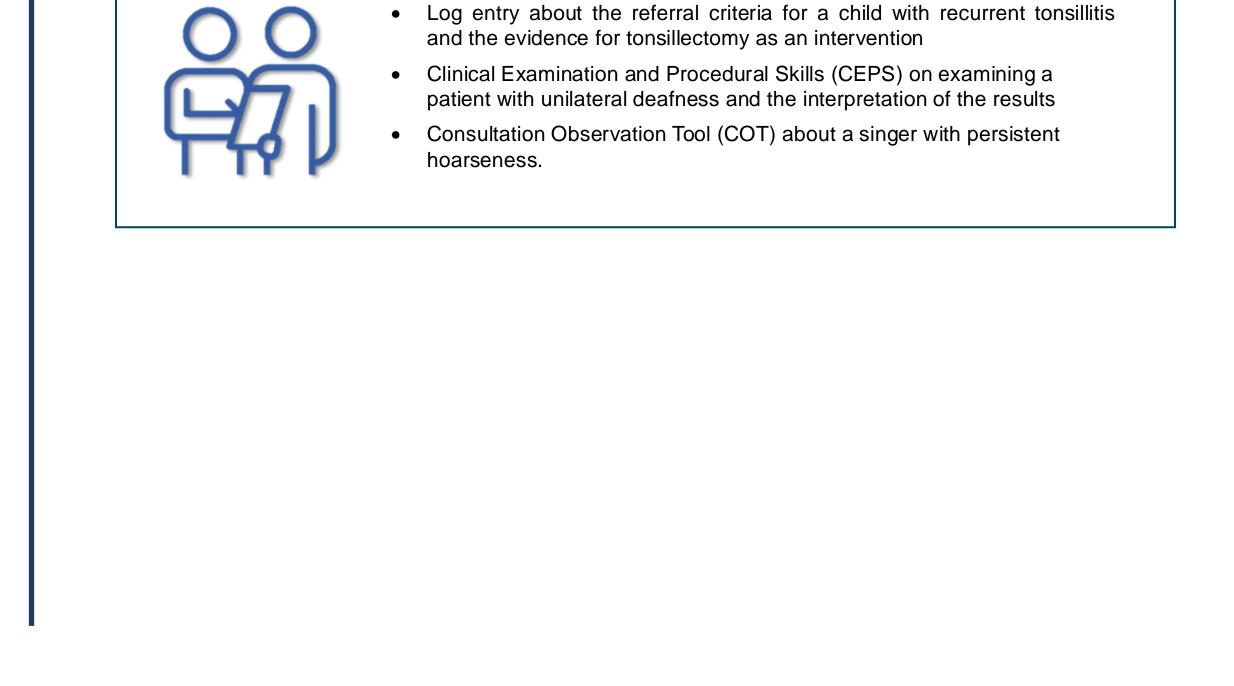
- Hearing loss in adults and children
- Recognition of red flags in ENT
- Common ENT symptoms (e.g. vertigo).

SCA

- Older woman has severe shooting pains in her left lower jaw
- Hearing-impaired man has troublesome tinnitus interfering with his sleep and concentration
- Middle-aged woman has sudden-onset disabling rotational dizziness • (examination expected by patient).



WPBA



LEARNING OPPORTUNITIES (Examples)

Core Content

Communication and Consultation

- Communication with hearing impaired
- Explaining management of common conditions (e.g., epistaxis)
- Discussing thresholds for referral (e.g., for tonsillectomy in recurrent tonsillitis)
- Breaking bad news (e.g., tinnitus)

• Prescribing

- How to use ear/ nasal sprays and drops
- Ototoxic drugs
- Avoiding antibiotic resistance (e.g., sinusitis)

• Comorbidity

- Psychological issues (e.g., impact of tinnitus)
- Gastrointestinal conditions (e.g., GORD)
- Allergies

Teamworking

- With specialist nurses, audiologists, cancer care specialists
- Information Management and Technology
 - Decision aids (e.g. sore throat)
- Health Promotion
 - Effects of smoking and advice on smoking cessation.

Primary Care



Acute Care



- Acute presentations in primary care/ secondary care, including:
 - Management of epistaxis
 - \circ $\,$ Tonsillitis and quinsy
 - Septal fracture and haematoma
 - \circ $\;$ Otitis media and externa
 - o Auricular trauma and perichondritis
 - o Bell's Palsy
 - Allergic conditions
 - Cholesteatoma.

Other specialties



A&E

Paediatrics (including hearing loss assessment and treatment)



- Daily practice and out-of-hours care
- GP minor operations and treatments room (e.g., silver nitrate nasal cautery for epistaxis).

Multidisciplinary Team

- Speech and language therapists
- Audiologists/ audiology clinics.

- Oncology and palliative care
- Oral medicine/ Maxillofacial surgery clinics.

Community

• Hearing loss clinics on the high-street.

