AB085. 71. Diagnostic and procedural skill training in a dedicated ENT emergency department

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Background: ENT is a craft speciality with unique procedural skills, which must be acquired and mastered in the early years of training. Technical proficiency in performing microear-debridement, nasal and laryngeal endoscopy, epistaxis management, and peri-tonsillar abscess drainage, requires exposure to a critical volume of patients. The dedicated ENT emergency department at the Royal Victoria Eye & Ear Hospital (RVEEH) is staffed by ST 1 and ST2 trainees and GP year 1 and 2 trainees, under the direct clinical supervision of an ENT Consultant. This study evaluated the number of patients seen and procedures performed in the Ear, Nose & Neck Emergency Department (ENT ED), to determine the benefit of diagnostic and procedural training in this setting, during the early years of speciality training.

Methods: A retrospective study evaluated the total number of patients attending the dedicated ENT emergency department during the month of March 2018. The data was collected using patient clinical notes and an online database (informa). Diagnostic and procedural data was collated for each patient. Data was inputted into a data collection sheet using Microsoft Excel.

Results: A total of 885 patients attended the dedicated ENT emergency department, during the study period. There were 504 new patients and 381 return patients. 70.5% of these patients were from Leinster. Reason for attendance included cerumen impaction (29%), otitis externa (20%), chronic suppurative otitis media (2%), foreign body removal (3.7%). There were 4 new Head and Neck malignancies identified, during this period. 10 patients were referred to scheduled care for further management. All patients attending the service required at least one procedure. A total of 630 microear debridements were performed, with 18 adults requiring removal of foreign body from the ear. Fiberoptic laryngoscopy was performed in 500 patients.

Conclusions: This study provides preliminary data specific to basic ENT procedures performed by year 1 and 2 specialist trainees in ENT and General Practice. This level of "practical professionalism" is difficult to replicate in a simulated learning environment. We suggest that this educational model is of value in the "early years" of procedural skills training.

Keywords: Surgical skills training; eye, nose & throat (ENT); professionalism

doi: 10.21037/map.2019.AB085

Cite this abstract as: O'Flanagan G, Buckley C, Carroll C. Diagnostic and procedural skill training in a dedicated ENT emergency department. Mesentery Peritoneum 2019;3:AB085.