

**UNION EUROPEENNE DES MEDECINS SPECIALISTES (UEMS)  
EUROPEAN UNION OF MEDICAL SPECIALISTS (UEMS)**

**SUBSPECIALTY LOGBOOK RHINOLOGY, PARANASAL SINUSES AND  
ANTERIOR/CENTRAL SKULL BASE SURGERY  
(revision 2024)**

**TRAINING PROGRAMME**

**INTRODUCTION**

The UEMS ORL-HNS Section and the Board of Otorhinolaryngology has revised the European subspecialty training programme in 2024. This programme will serve as a guideline for training centres enabling them to meet the European Standard as set out by the European Board of UEMS. We are moving towards competence-based assessments.

**WORKING GROUP**

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**DEFINITION**

Otorhinolaryngology-Head & Neck Surgery (ORL-HNS) is the specialty which deals with functions and diseases of the ear, nose, throat, skull base, head and Neck. Disorders include trauma, malformations, tumors and other disorders in childhood and in adults of the ear, temporal bone, lateral skull base, nose, paranasal sinuses, anterior skull base, oral cavity, pharynx, larynx, trachea, esophagus, head, neck, thyroid, salivary and lacrimal glands and adjacent structures. It also includes investigation and treatment of conditions affecting the auditory, vestibular, olfactory and gustatory senses and disorders of the cranial nerves as well as human communication in respect of speech, language and voice disorders. Some of the conditions diagnosed by otorhinolaryngologists but located in adjacent areas will be treated with close cooperation with these related specialists.

The subspecialty of nose and paranasal sinuses is composed of surgeons who have acquired specialized knowledge and high surgical skills during their subspecialty training in the history-taking, examination, investigation and treatment planning (surgical and non-surgical

treatment) of benign and malignant conditions, malformations and trauma in the nose and paranasal sinuses as defined in the accompanying subspecialty log book.

## **THE TRAINING PROGRAMME**

The training programme will consist of the following elements:

1. Acquisition of the principles of surgery in general and theoretical knowledge of anatomy, physiology, pathology, aetiology, symptomatology and treatment of diseases of the nose and paranasal sinuses.
2. Trainees should have access to facilities for nose and paranasal sinus dissection. They should be able to familiarize themselves with the basic techniques of surgery in the nose and paranasal sinuses, with either real or virtual surgical and endoscopic techniques.
3. A list of diagnostic procedures, non-surgical management and surgical management is outlined in this subspecialty logbook.
4. The Subspecialty training programme requires documentation of all skills and operative procedures/management itemized in the section of surgical management. Confirmation of the progression of the trainee to the required competency is necessary.
5. This subspecialty log book will be used in relation to European training exchange.

## **ASSESSMENT AND EXAMINATION**

1. Examination of the theoretical and practical knowledge of the trainee can be included in the training programme. Trainees should remember also refer to their national requirements.
2. To achieve the award of the certificate of recognition, the trainee must reach the expected level of knowledge and skills approved by the training programme director before being eligible to practise as an independent nose and paranasal subspecialist.
3. Each trainee must be familiar with all diagnostic and therapeutic (surgical and non-surgical) management associated with the discipline of the nose and paranasal sinuses

4. The trainer will be responsible for confirming the competence of the trainee for the procedures and management outlined in the subspecialty logbook.
5. The contents of the log book will be continuously updated by the UEMS-ORL-HNS Board at least every 5 years with respect to new developments.
6. The recommended syllabus for the European Board Exam in ORL-HNS includes this logbook produced by the UEMS ORL-HNS Section, and the Intercollegiate Surgical Curriculum Programme Syllabus.

# TRAINING CENTRE ROTATION

**Trainee:** \_\_\_\_\_  
Name Surname Birthdate

Dates of start and finish of training period	Training Centre	Name of Trainer	Signature of Trainer



# UEMS TRAINING LOGBOOK OF NOSE & PARANASAL SINUS COMPLETION OF TRAINING

**Trainee:** \_\_\_\_\_  
Name Surname Birthdate

Date of commencement of training: \_\_\_\_\_

Date of completion of training: \_\_\_\_\_

<b>Lead Training Center</b>	
<b>Name of Trainer in charge</b>	

I, **the trainer in charge**, certify that the register of diagnostic, non-surgical and surgical management shown below is correct.

Date: \_\_\_\_\_ Signature of trainer: \_\_\_\_\_

I, **the trainee** certifies that the details given refer to diagnostic, non-surgical and surgical management carried out by me personally or were operations at which I acted as assistant.

Date: \_\_\_\_\_ Signature of trainee: \_\_\_\_\_

## **CONTENT OF THE NOSE AND PARANASAL SINUS LOGBOOK**

The log book is divided into the following sections.

**A: Diseases/Disorders of the nose and paranasal sinuses**

**B: Patient assessments and Diagnostic Procedures**

**C: Non-Surgical Management**

**D: Surgical Management**

**E: Postoperative complications**

The relevant trainer should endorse by signing and dating, when the trainee has achieved competency in each particular management or procedure

## **TEXTBOOKS & LITERATURE**

- **Fokkens WJ**, Lund VJ, Hopkins C, Hellings PW, Kern R, Reitsma S, Toppila-Salmi S, Bernal-Sprekelsen M, Mullol J. Executive summary of EPOS 2020 including integrated care pathways. *Rhinology*. 2020 Apr 1;58(2):82-111. doi: 10.4193/Rhin20.601. PMID: 32226949.
- **Fokkens WJ et al**. European Position Paper on Rhinosinusitis and Nasal Polyps 2020. *Rhinology*. 2020 Feb 20;58(Suppl S29):1-464. doi: 10.4193/Rhin20.600. PMID: 32077450.
- **Kuan EC et al**. International Consensus Statement on Allergy and Rhinology: Sinonasal Tumours. *Int Forum Allergy Rhinol*. 2024 Feb;14(2):149-608. doi: 10.1002/alr.23262. Epub 2024 Jan 2. PMID: 37658764.
- **Brożek JL et al**. Allergic Rhinitis and its Impact on Asthma (ARIA) guidelines-2016 revision. *J Allergy Clin Immunol*. 2017 Oct;140(4):950-958. doi: 10.1016/j.jaci.2017.03.050. Epub 2017 Jun 8. PMID: 28602936.

**NOSE, PARANASAL SINUSES and anterior/central skull base.**

**A: Diseases/Disorders of the nose, paranasal sinuses and anterior/central skull base - theoretical knowledge**

<b>Nose</b>		<b>Signature trainer when competency achieved</b>
Congenital malformations of nose, mid-face (cleft lip, palate), including genetic anomalies, rare diseases		
Infections of nose		
Neoplastic conditions: benign and malignant		
Nasal and facial trauma		
Management of septal disorders (deviations, perforations)		
Epistaxis		
Inflammatory and allergic conditions (rhino-allergology and concept of united airways)		
Non- allergic rhinitis		
Olfaction		

**Paranasal Sinuses and anterior/central skull base**

Congenital malformations		
Acute sinusitis and complications		
Chronic rhinosinusitis primary/secondary, localized/diffuse, type2/non-type 2		
Inflammatory and granulomatous systemic conditions including sarcoid, tuberculosis etc.		
Neoplastic conditions: benign and malignant		
Barotrauma		
Empty nose syndrome		
CSF leak		

**B. Patient assessment and Diagnostic Procedures**

**a) History and Clinical Examination**

		<b>Signature trainer when competency achieved</b>
Assessment of nasal symptoms: nasal obstruction, rhinorrhea, anosmia, hyposmia, facial pain or headache, epistaxis, olfaction		
Anterior and posterior rhinoscopy		

Nasal endoscopy		
Visual documentation ( photography, videoendoscopy, nose app)		
Ethnic variation, proportions of face, effects of aging		
<b>b) Tests of Function</b>		
		<b>Signature trainer when competency achieved</b>
Rhinomanometry		
Acoustic rhinometry		
Olfactory tests (subjective and objective)		
Ciliary function tests		
Peak Nasal Inspiratory Flow		
<b>c) Tests of Imaging</b>		
		<b>Signature trainer when competency achieved</b>
Conventional X-ray		
CT scan		
Cone beam CT		
MRI scan		
Isotope scan		
Angiography		
Understanding the use of navigation devices		
<b>d) Allergy Investigations</b>		
Understanding and performing clinical tests for atopy (skin prick tests, RAST, nasal provocation tests, etc.)		
Management of complications during allergy testing (anaphylaxis etc.)		
<b>C. Non-Surgical Management</b>		
		<b>Signature trainer when competency achieved</b>
Pharmacological therapy		
Specific immunotherapy, (Subcutaneous and sublingual)		
Management of anaphylaxis		
Selection and use of biologicals		

Nasal rinsing		
Allergen avoidance advices		
In-office therapy – nose applicators for CRS, stem cells		
Trigeminal neuralgia		
<b>D. Surgical Management</b>		
<b>Nose</b>		<b>Signature trainer when competency achieved</b>
local and regional anaesthesia		
Management of epistaxis		
<ul style="list-style-type: none"> <li>• Nasal packing, anterior and posterior</li> <li>• Nasal cautery and other endoscopic management</li> <li>• Medical disease and epistaxis</li> <li>• Ligation of sphenopalatine and internal maxillary artery, anterior and posterior ethmoidal arteries.</li> </ul>		
Foreign body removal		
Nasal Polypectomy		
Turbinate procedures (including coblation, radiofrequency etc.)		
Septal surgery		
Septal hematoma/ septal abscess management		
Management of septal perforations		
Management nasal factures and -facial fractures		
Management of soft tissue injuries		
Management of nasal skin tumors with / without flaps, grafts		
Revision septoplasty		
Septorhinoplasty (open and closed, reduction, augmentation, grafting techniques, cleft lip septorhinoplasty )		
Rhinophyma operation		
Correction of congenital malformations (choanal atresia, fistulas, dermoids etc)		
Harvesting material for reconstruction (rib, cartilage facia lata etc)		

SINUS SURGERY		Signature trainer when competency achieved
Sinus endoscopy		
Antral lavage		
Endoscopic antrostomy and sinus endoscopy		
Caldwell Luc		
Frontal sinus trephination		
External frontal sinus surgery including obliteration/ canalization.		
External ethmoidectomy		
Endoscopic Sinus Surgery and its possible acute complications		
Maxillary sinus procedures (medial maxillectomy, prelacrimal approach, Denker approach, transmaxillary pterygopaltina fossa and infratemporal fossa approach).		
<ul style="list-style-type: none"> <li>• anterior ethmoidectomy</li> </ul>		
<ul style="list-style-type: none"> <li>• posterior ethmoidectomy</li> </ul>		
<ul style="list-style-type: none"> <li>• frontal recess / frontal sinus procedures (Draf 1 – 3, periorbital suspension/ orbital transposition, and mucosal flaps)</li> </ul>		
<ul style="list-style-type: none"> <li>• sphenoid sinus procedures (lateral recess, medial petrous, trans-sellar, trans-planum, trans-clival, trans cavernous)</li> </ul>		
Surgery of floor of maxillary sinus		
Silent sinus syndrome - management		
Transorbital approaches		
Orbital decompression procedures (medial and lateral, balanced)		
Endoscopic dacry-cysto-rhinostomy		
Management of CSF leak and dura lesions		
Tumour Surgery		
<ul style="list-style-type: none"> <li>• Maxillectomy (partial, total)</li> </ul>		
<ul style="list-style-type: none"> <li>• Lateral rhinotomy</li> </ul>		
<ul style="list-style-type: none"> <li>• Midfacial degloving</li> </ul>		
<ul style="list-style-type: none"> <li>• Subfrontal approach (extracranial/ intracranial)</li> </ul>		
<ul style="list-style-type: none"> <li>• Craniofacial resection</li> </ul>		
<ul style="list-style-type: none"> <li>• Facial translocation</li> </ul>		
<ul style="list-style-type: none"> <li>• Combined approach to anterior skull base</li> </ul>		

• Orbitotomy		
• Exenteration of orbit		
• Surgery of anterior skull base (incl osteoplastic flap, duraplasty and reconstruction with/without pedicled flaps, free flaps, etc.)		
• Endoscopic approaches		
Trauma		
• Management of fractures of nasal bones/septum and septal hematoma under local or general anesthesia		
• Paranasal sinus fractures		
• Fractures of orbit including blowout fractures		
• Zygomatic fractures		
• Optic nerve decompression		
• Reconstruction of anterior skull base		
<b>E. Postoperative Complications</b>		
		<b>Signature trainer when competency achieved</b>
Epistaxis		
Infection		
Headache		
Meningitis		
Blindness		
CSF leak, dural tear and pneumoencephalus		
Carotid injury		
Orbital hematoma, diplopia		
Hyposmia		