ENT Nursing Outpatient Clinic – Gødstrup

I. Location	The nursing outpatient clinic is situated within a designated examination room in the ENT department.
II. Staffing	Management has mandated that all nurses must be competent in performing the procedures scheduled within the nursing outpatient clinic. Staff have been trained either by medical colleagues or by experienced nursing peers.
III. Scheduling	• Monday–Friday: 07:45 and 08:00 (two appointment slots) • Thursday: 12:30 (five appointment slots) • Standard consultation duration: 15 minutes per patient, supplemented by 5 minutes for documentation.
IV. Nursing Procedures	• Removal of HT nasal packing • Removal of otoplasty bandages • Removal of X-lite dressings following nasal fracture • Dressing changes using Aquacel for abscesses in the head and neck region • Removal of silicone plates • Tracheal cannula replacement, including elective replacements coordinated with AMK (Emergency Medical Coordination Centre)
V. Development potential	• Achieving full booking capacity • Expansion of specialized nursing procedures • Enhancement of staff competencies across the entire nursing team
Contact information	Development Nurse and SoMe Editor, Danna Guldager Aarup, danaar@rm.dk

ENT Nursing Outpatient Clinic – Køge

IV. Nursing Procedures	The clinic currently provides removal of silastic plates, removal of ear dressings following otoplasty, and tracheal cannula changes.
V. Development potential	Preliminary discussions have explored the feasibility of establishing a mobile outreach team for patients requiring tracheal cannula changes.

ENT Nursing Outpatient Clinic – Randers

I. Location	Nursing office.
II. Staffing	The function is currently performed by 2–3 nurses.
III. Scheduling	The clinic operates every Thursday or every second Thursday, depending on the number of patients assessed as suitable for telephone consultations. Most appointment slots are allocated to telephone-based consultations.
IV. Nursing Procedures	Preoperative information and preparation for surgery.
V. Development potential	Two years ago, Randers implemented an independent nurse-led outpatient model for preoperative tonsillectomy consultations. This model has demonstrated significant benefits, including reduced physician workload, high patient satisfaction, and strengthened autonomous nursing practice. Due to limited patient volume for procedures such as tracheal cannula changes, suture removal, and bandage removal after *aures alatae*, these tasks are scheduled in the physician track but performed independently by nurses. Future development considerations include: • Transitioning telephone consultations to video consultations • Ensuring all nurses are comfortable conducting consultations independently •
Contact information	Specialty Nurse, Helle Agergaard Nielsen, helageni@rm.dk

ENT Nursing Outpatient Clinic – Esbjerg

I. Location	Located within the ENT outpatient clinic, with one examination room allocated to nursing consultations.
II. Staffing	Seven nurses are employed in the clinic. Management requires all nurses to be able to perform the outpatient nursing functions. No additional training was necessary due to prior experience.
III. Scheduling	A dedicated nurse is assigned to the nursing outpatient clinic Monday–Friday from 08:00–15:00. Patients are initially booked in the physician's schedule and transferred to the nursing clinic when marked "Ready for nurse."
IV. Nursing Procedures	• CPAP delivery (physician-reviewed; CPAP also delivered in the sleep clinic) • Preoperative assessments including blood sampling, ECG, anesthesia booking, and surgical information • Telephone consultations (08:15–09:15 and 13:30–14:30) • Assessment of dizziness (Caloric, VHIT, VHG) • Administrative tasks including telemedicine and sleep-related duties
V. Development potential	The clinic was established on 1 October 2025 and is undergoing continuous evaluation. Restructuring has enabled allocation of one full-time nurse to the nursing outpatient clinic, while two additional nurses support FNA, pediatric patients, cancer pathway patients, and other tasks. Interpreter consultations remain in the main outpatient clinic. Daily morning meetings (08:10–08:15) facilitate coordination and rapid adjustment in case of staff absence.
Contact information	Clinical Nurse Specialist, Arzu Korkmaz, Arzu.Korkmaz@rsyd.dk

ENT Nursing Outpatient Clinic – Hillerød

I. Location	One room in the ENT outpatient clinic and the vestibular clinic.
II. Staffing	Only trained staff may perform nursing outpatient functions. Training is provided by physicians or qualified colleagues.
III. Scheduling	• Monday: 08:30–15:30 • Tracheal cannula clinic: 1-hour appointments, with optional 30-minute slots • Tuesday: Vestibular clinic (TRV chair), 40 minutes for new patients, 30 minutes for follow-ups • Wednesday: Removal of silastic plates (30-minute slots)
IV. Nursing Procedures	• Tracheal cannula management • Removal of silastic plates • Operation of the TRV chair.
V. Development potential	Potential areas for expansion include: • Management of recurrent abscesses • Ear cleaning prior to audiological assessment • Voice assessment post–vocal cord surgery • Feeding tube insertion • Telemedicine and video consultations • Nursing research • Dysphagia counselling • Outreach services for tracheal cannula changes, CADD pump medication changes, cancer patient support, and staff education
Contact information	Nurse, Lisbeth Borgsten, lisbeth.borgsten@regionh.dk

ENT Nursing Outpatient Clinic – Aarhus

I. Location	Two to four examination rooms in the clinic.
II. Staffing	• Nursing outpatient clinic: All nurses with ≥1 year of experience and completed training • Sleep clinic: Three dedicated nurses • Biological treatment clinic: Four dedicated nurses • Ad hoc clinic: All nurses
III. Scheduling	• Nursing outpatient clinic: Monday and Thursday 08:30–15:00 • Sleep clinic: Monday–Thursday 08:30–15:00 • Biological treatment clinic: Every second Wednesday 09:00–15:00 • Ad hoc clinic: Daily 08:30–15:00 • Telephone hours vary by clinic
IV. Nursing Procedures	**Nursing outpatient clinic:** Cannula changes, suture removal, BAHA wound control, rehabilitation consultations, removal of hexalite/silicone plates. **Sleep clinic:** CPAP delivery, treatment monitoring, sleep apnea assessment, telemedicine (AMBUFLEX). **Biological treatment clinic:** Spirometry, lung testing, FeNO, initiation of biological medication, first-dose administration, medication delivery for home treatment. **Ad hoc clinic ("Runner"):** Assistance to physicians, preparation of examination rooms, instrument cleaning, patient care in waiting areas, equipment maintenance.
V. Development potential	• Pilot testing of video consultations • Expansion of nursing outpatient clinic to daily operation • Expansion of biological treatment services • Improvement of pathways for tracheal cannula and laryngectomy patients
Contact information	Specialty Nurse Vina Boll Matthiesen, vinamatt@rm.dk

ENT Nursing Outpatient Clinic – Odense

I. Location	Examination rooms used for both nursing tasks and cancer pathway patients.
II. Staffing	Seven nurses with ≥1 year of experience and completed training.
III. Scheduling	• Monday: 08:00–12:00 • Tuesday, Wednesday, Friday: 08:00–15:00
IV. Nursing Procedures	**General nursing tasks:** Cannula changes, CI consultations, home IV antibiotic therapy, biological treatment for nasal polyps, telephone triage, administrative coordination, staple removal after CI, wound care for abscesses, coordination of afternoon nursing conferences. **HOHC cancer pathway tasks:** Coordination, patient communication, anesthesia and blood test booking, PET-CT escort, nutrition and smoking cessation counselling, correspondence, surgical consultations.
V. Development potential	• **Separation of the two outpatient functions** • **Preventive consultations for laryngectomy and tracheostomy patients** • **Rehabilitation consultations via video or telephone** • **Removal of nasal tamponades postoperatively**
Contact information	Clinical Nurse Specialist, Maiken Jørgensen, Maiken.Jorgensen@rsyd.dk

ENT Nursing Outpatient Clinic – Sønderborg

I. Location	Sleep clinic and cannula clinic located within the ENT outpatient department.
II. Staffing	Three nurses and one assistant in the cannula team; eleven nurses in the sleep clinic.
III. Scheduling	3–4 sleep clinic rooms daily. Cannula clinic every second Thursday 08:30–15:00.
IV. Nursing Procedures	Comprehensive tracheal cannula care including communication with home care and ordering of supplies. Sleep clinic nurses manage CPAP delivery and treatment monitoring.
V. Development potential	Recent initiatives include group-based CPAP delivery and establishment of a biological clinic for sinus patients. Additional potential tasks include suture removal, tamponade removal, and removal of postoperative ear dressings, though staffing constraints currently limit implementation.
Contact information	Nurse, Gitte Friedrichsen, Gitte.Friedrichsen@rsyd.dk

ENT Nursing Outpatient Clinic – Rigshospitalet

I. Location	Dedicated nursing room within the ENT outpatient clinic.
II. Staffing	Fourteen nurses.
III. Scheduling	Four weekdays weekly, 09:00–15:00
IV. Nursing Procedures	• Telephone consultations • Tracheal cannula changes • BAHA and CI follow-up • Removal of silastic plates and nasal shields • Wound and abscess assessment • Voice analysis • *Aures alatae* follow-up. • Other nursing pathways handle cancer follow-up • Biological treatment • Surgical preparation • Home IV therapy • Cross-sector coordination.
V. Development potential	Potential expansion into suture removal, postoperative packing removal, Provox valve changes, postoperative infection management, cerumen removal, nasal fracture follow-up, postoperative sinus and nasal assessment, and epistaxis management.
Contact information	Clinical Nurse Specialist, Pernille Langkilde, pernille.langkilde@regionh.dk Nurse Specialist, Andreas Woltmann, andreas.woltmann.02@regionh.dk

ENT Nursing Outpatient Clinic – Aalborg

I. Location	Rooms allocated for sleep, cannula, BAHS, and biological treatment.
II. Staffing	Twelve sleep nurses, three cannula nurses, two biological treatment nurses, two BAHS nurses.
III. Scheduling	Sleep: 2–3 daily tracks + 1–2 virtual tracks Cannula: weekly Biological: weekly or biweekly BAHS: ad hoc
IV. Nursing Procedures	• CPAP initiation and monitoring • Cannula changes • Biological treatment follow-up • BAHS wound control • Long-term follow-up.
V. Development potential	Challenges remain in establishing a traditional ENT nursing track due to mixed patient categories. Development areas include guided self-decision methods, shifting spare part distribution to equipment depots, outreach cannula services, teaching initiatives, expansion of biological treatment teams, and improved coordination of patient communication.
Contact information	Nurse Specialist, Rikke Toftelund, r.toftelund@rn.dk

ENT Nursing Outpatient Clinic – Vejle

I. Location	Two examination rooms.
II. Staffing	Two nurses; four nursing consultations daily.
III. Scheduling	Monday, Tuesday, Wednesday, Friday 08:00–15:00.
IV. Nursing Procedures	• Removal of silastic discs • Tamponade removal • Wound care • Suture removal • Preoperative nursing consultations • Uncomplicated cannula changes • Anesthesia and diagnostic booking • Removal of *aures alatae* bandages • Delivery of biological medication • Patient rebooking • Telephone follow-up.
V. Development potential	The clinic continuously evaluates potential new patient categories inspired by practices in other ENT departments.
Contact information	Nurse Specialist, Charlotte Overgaard Villadsen, Charlotte.Overgaard.Villadsen@rsyd.dk