

STAGE

FOUNDATIONS

EPA

EPA 1: Providing initial management for critically ill surgical patients

DETAILED DESCRIPTION

This EPA is divided into two parts: 1) Patient assessment, and 2) Performing procedures.

The first part of this EPA is focused on the residents' ability to assess the critically ill patient. Emphasis will be placed upon recognition and prioritization of urgent problems, development of a differential diagnosis and management plan, involvement of other physicians and health care staff as appropriate, communication amongst other physicians and health care staff and documentation.

The second part of this EPA is procedural-based, and stresses the technical aspects of performing procedures in critically ill patients. Emphasis will be upon the determination of the required procedure, organization to perform the procedure, technical performance and establishment of post-procedural care.

ENTRUSTMENT

The resident will be entrusted to:

Part 1:

1. Assess a critically ill patient and recognize urgent problems.
2. Manage common problems and complications.
3. Develop a differential diagnosis.
4. Order and interpret investigations.
5. Document clinical encounters.

Part 2:

1. Determine required procedure (needle thoracostomy; tube thoracostomy; central line insertion; surgical airway)
2. Perform procedure competently
3. Establish and implement post-procedural care plan

FOCUS OF ASSESSMENT

Medical Expert	Communicator	Collaborator	Leader	Health Advocate	Scholar	Professional
X	X	X				

REQUIRED TRAINING EXPERIENCES

Consults	Clinics	ER	Ward	OR	Other
		X	X		ICU

REQUIRED NON-CLINICAL TRAINING EXPERIENCES

Academic ½ Day	Simulation	Course/ Certification	Scholarly Project	Conference	Advocacy Activity	Rounds	Quality Assurance Activity	Other
X	X	X						

Assessment Tools	Focus of Assessment						
	ME	CM	CL	L	HA	SC	PR
Direct Observation Procedural Skills	X						
Supervisor Template	X	X					
Field Note							
Mini-CEX							
Multisource Feedback			X				
Patient Feedback							
Peer Assessment							
Resident Teaching Rubric							
Chart Review							
Journal Club Rubric							
Observed History and Physical Rubric	X						
OSCE/Simulation							
Other							
Oral Exam							
SAQ/MCQ Exam							
Shelf Quiz							
Other							
Procedure Note Assessment							
Online Module							
Procedure Log							
Other:							

ASSESSMENT STRATEGY AND SAMPLING

Seven observations of achievement are required over the following two parts:

Part A: Patient Assessment

Collect 3 direct or indirect observations of achievement by a supervisor. May be assessed in a clinical or OSCE/simulation.

Must include least 2 of the following presentations:

- Hemodynamic
 - Airway / respiratory
 - Decreased level of consciousness / acute change in mental status
 - Sepsis
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1. Competency in patient assessment will be assessed by: direct observation.
 2. Competency in initial management for formulation of differential, ordering / interpreting investigations, determining required procedure and documentation will be assessed by: chart review.
 3. Competency in seeking assistance will be assessed by: multisource feedback.

Part B: Procedure

Collect 4 direct observations of achievement by a supervisor. May be assessed in a clinical or OSCE setting and must include:

- At least one needle thoracostomy
 - At least one tube thoracostomy
 - At least one surgical airway
 - At least one central venous insertion
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1. Competence in performing the procedure (needle thoracostomy; tube thoracostomy; central line insertion; surgical airway) will be assessed by: direct observation.
 - At least one of each procedure will be observed
 2. Competence in establishing and implementing a post-procedural plan will be assessed by: chart review and multisource feedback.
 3. Competence in handover will be assessed by: chart review.

Relevant Milestones from RC

Relevant milestones (Part 1)

- 1 F ME 1.3.1 Apply clinical and biomedical sciences to manage core patient presentations in surgical practice
- 2 **F ME 1.4.2 Recognize urgent problems that may need the involvement of more experienced colleagues and seek their assistance immediately**
- 3 F ME 1.5.1 On the basis of patient-centered priorities, seek assistance to prioritize multiple competing tasks that need to be addressed
- 4 **F ME 2.2.1 Develop a specific differential diagnosis relevant to the patient's presentation**
- 5 F ME 2.2.2 Select and/or interpret appropriate investigations and/or imaging with sufficient attention to clinical details
- 6 **F ME 2.2.3 Interpret common and simple imaging modalities**
- 7 **F ME 2.4.1 Develop and implement initial management plans for common problems in surgical practice**
- 8 **F ME 2.4.5** Manage unexpected perioperative bleeding (surgical and nonsurgical)
- 9 **F ME 3.3.1 Consider urgency, and potential for deterioration, in advocating for the timely execution of a procedure or therapy**
- 10 **F ME 4.1.1** Coordinate investigation, treatment, and follow-up plans when multiple physicians and healthcare professionals are involved
- 11 **F CM 5.1.3 Document clinical encounters to adequately convey clinical reasoning and the rationale for decisions**
- 12 **F CL 3.1.3 Identify patients requiring handover to other physicians or health care professionals**
- 13 **F CL 3.2.1 Communicate with the receiving physicians or health care professionals during transitions in care, clarifying issues after transfer as needed**
- 14 **F LD 2.2.1** Apply evidence and guidelines with respect to resource utilization in common clinical scenarios including but not limited to use of blood products, investigations, inpatient versus outpatient treatment and appropriate utilization of critical care unit resources
- 15 **F PR 1.3.1** Provide care to the critically ill patient commensurate to expressed advanced directives
- 16 **F PR 4.1.2** Manage the mental, physical and environmental challenges that impact behaviour and/or performance in the clinical setting

Relevant milestones (Part 2)

- 1 **F ME 3.1.4 Gather and/or assess required information to determine the procedure required**
- 2 **F ME 3.4.2 Set up and position the patient for a procedure**
- 3 **F ME 3.4.4 Perform common procedures in a skillful, fluid and safe manner**
- 4 **F ME 3.4.7 Establish and implement a plan for post-procedure care**
- 5 **F CL 1.2.1 Work effectively with other health care professionals**