

Physical Medicine & Rehabilitation: Foundations EPA 2

Identifying, assessing, and providing initial management of patients with emergent and urgent medical issues, and recognizing when to ask for assistance

Key Features:

- This EPA includes recognizing unstable or acutely ill patients in various clinical settings, requesting help where appropriate, and initiating management until help arrives.
- This EPA also includes communicating with patients, families and/or other health care professionals.
- This EPA may include collaborating and advocating for appropriate patient care (e.g. transfer to acute care or ICU).
- This EPA may be observed in the simulation setting.

Assessment Plan:

Direct and/or indirect observation by any physician, Core or TTP trainee with feedback from nurse or other health professional, patient and/or family

Use form 1. Form collects information on:

- Observation type: direct; indirect
- Medical issue (check all that apply): acute joint swelling; acute limb swelling; acute wound deterioration; altered level of consciousness; altered neurological status; angioedema/anaphylaxis; chest pain; code blue; critical abnormal investigation result; critical abnormal vitals; falls/acute trauma; major hemorrhage; palpitations; pulseless limb; respiratory distress; overdose; severe acute pain; urgent mental health and behavioral issues; other (open text)
- Setting: emergency room; medicine inpatient unit; surgery inpatient unit; medicine outpatient clinic; surgery outpatient clinic; simulation; other (open text)

Collect 10 observations of achievement.

- At least 4 direct observations
- At least 4 different medical issues
- At least 2 different settings
- No more than 2 in simulation setting
- At least 4 different observers
- At least 4 observations from faculty

Relevant milestones

- 1 ME 2.1 Prioritize issues to address in the patient's assessment and management**
- 2 ME 1.4 Recognize urgent problems that may need the involvement of more experienced colleagues and seek their assistance**
- 3 ME 2.2 Focus the clinical encounter, performing it in a time-effective manner, without excluding key elements**
- 4 ME 2.1 Establish priorities for the clinical encounter, incorporating the patient's perspectives, preferences and care needs

- 5 ME 2.2 Develop a differential diagnosis relevant to the patient's presentation**
- 6 ME 2.4 Develop and implement an initial management plan**
- 7 ME 4.1 Coordinate investigation, treatment, and follow-up when multiple physicians and health care professionals are involved
- 8 COM 1.1 Communicate using a patient-centred approach that facilitates patient trust and autonomy and is characterized by empathy, respect, and compassion
- 9 COM 2.3 Seek and synthesize relevant information from other sources, including the patient's family
- 10 COM 3.1 Use strategies to verify and validate the understanding of the patient and family with regard to the diagnosis, prognosis and management plan**
- 11 COM 5.1 Document clinical encounters to adequately convey clinical reasoning and the rationale for decisions**
- 12 COL 1.2 Seek and respond to input from other health care professionals
- 13 COL 3.1 Identify patients requiring handover to other physicians or health care professionals**
- 14 COL 1.3 Communicate clearly and directly to promote understanding in the health care team
- 15 L 2.1 Apply knowledge of the resources available in the care setting when developing and implementing management plans
- 16 L 2.2 Apply evidence and guidelines with respect to resource utilization in common clinical scenarios