EPA 2: Provide Recommended Pediatric Health Screening

Supervision Scale for This EPA

1. Trusted to observe the EPA
2. Trusted to practice EPA only under proactive, full supervision as a coactivity with the supervisor
3. Trusted to practice EPA only under proactive, full supervision with the supervisor in the room and ready to step in as needed
4. Trusted to practice EPA only under reactive, on-demand supervision with supervisor immediately available and ALL findings double checked
5. Trusted to practice EPA only under reactive, on-demand supervision with supervisor immediately available and KEY findings double checked
6. Trusted to practice EPA only under reactive, on-demand supervision with supervisor distantly available (e.g., by phone), findings reviewed
7. Trusted to practice EPA unsupervised
8. Trusted to supervise others in practice of EPA (where supervision means ability to assess patient and learner needs ensuring safe, effective care and further trainee development by tailoring supervision level)

Description of the Activity

Screening, which serves the purpose of early identification and treatment of populations of patients, is an important element of preventive health care. Foundational knowledge is critical, including knowledge of 1) available screening tests; 2) their status from a regulatory perspective (e.g., mandatory, recommended, or voluntary); 3) their sensitivity, specificity, and positive and negative predictive values; 4) their cost/benefit ratio for patients and society; and 5) the risk/benefit ratio for the patient.

The specific functions which define this EPA include:

- Applying knowledge in selection and interpretation of screening tools and tests (e.g., screens for growth and development, special senses, and medical conditions)
- Engaging patients and families in shared decision-making for those screening tests that are not mandated by state law
- Educating patients and families about the implications of the results to their overall health and care plan

Judicious Mapping to Competencies Critical to Entrustment Decisions*

<table>
<thead>
<tr>
<th>MK1:</th>
<th>Clinical Knowledge</th>
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<tr>
<td>ICS 1:</td>
<td>Patient and Family Centered Communication</td>
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<td>P 1:</td>
<td>Professional Behavior</td>
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<td>P 2:</td>
<td>Ethical Principles</td>
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Entrustable Professional Activities
EPA 2 for General Pediatrics

| SBP 5: Population and Community Health |
| SBP 6: Physician Role in Health Care System |

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Context for the EPA

**Rationale:** A pediatrician must have a thorough understanding of the variety of screening tests and tools that are used in health maintenance visits. A national evidence-driven guideline is detailed in the Bright Futures/AAP Periodicity Schedule. Additionally, certain populations of at-risk children (e.g., patients with Down Syndrome) have separate recommended screenings. Finally, the pediatrician may utilize other health screens as required by their local or state agencies and different payor groups.

**Scope of Practice:** Recommended screening tests span the entire age range of pediatrics, starting with newborn metabolic screening to depression screening in young adulthood. Any pediatrician conducting health maintenance exams must have a thorough understanding of the recommended screenings outlined in the Bright Futures/AAP Periodicity Schedule. Additionally, for routine screening to be successful the pediatrician must ensure that his/her interprofessional staff is properly educated and protocols structured so that screening occurs in a timely manner, and that the results are reviewed and reported to patients. If there is an abnormal result the pediatrician must then initiate treatment and/or refer to the appropriate specialist. The pediatrician must be competent in discussing both the rationale and the results of screening to families. The pediatrician is ultimately accountable for all of these steps in the process.