EPA 7: Recognize, Provide Initial Management, and Refer Patients Presenting with Surgical Problems

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

Pediatricians must work collaboratively with surgical specialists in the care of children with conditions where surgery is or may be indicated.

The specific functions which define this EPA include:

- Recognizing conditions where surgery is primarily indicated or is needed in conjunction with medical management
- Providing initial management and/or stabilization
- Making a referral and communicating directly to the pediatric or subspecialty surgeon
- Assisting with pre- and post-operative medical care of the child (such as nutritional support, pain management, and medication dosing for the pediatric patient)
- Providing continuity of care that ensures mutual understanding of the diagnosis, management and follow up needed

Judicious Mapping to Competencies Critical to Entrustment Decisions*

| PC 4: | Clinical Reasoning |
| MK 2: | Diagnostic Evaluation |
Entrustable Professional Activities
EPA 7 for General Pediatrics

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Context for the EPA

**Rationale:** Pediatricians must recognize when a patient requires surgical consultation and/or management. They should communicate effectively when referring a patient to the surgical team and provide initial treatment and stabilization during the referral process. Pediatricians should work collaboratively with surgeons to assist with the pre-operative and post-operative care of such patients, as well as providing continuity of care in the long term.

**Scope of Practice:** Pediatricians may care for patients with surgical problems at all ages, from the immediate newborn period through adolescence. The generalist may encounter patients with surgical problems in a variety of clinical settings. Pediatricians must convey the degree of urgency of the surgical consult based on the severity of the illness and the nature of the problem. For elective consults in particular, the generalist needs to recognize appropriate timing and potentially advocate for a family and patient if this is not achieved. The generalist must recognize the limits of managing a potential surgical problem medically and know when to escalate the urgency of a consult within the limits of the resources and expertise available to them. However, it is beyond the scope of this document to consider all contexts in which the generalist may practice, but rather to address the knowledge and skills needed by the generalist who has access to surgical support.