



Entrustable Professional Activities

EPA 1 for Pediatric Hospital Medicine

EPA 1: Care for Acutely Ill Patients in Hospital Settings

Supervision Scale for This EPA

1. Trusted to observe only
2. Trusted to execute with direct supervision and coaching
3. Trusted to execute with indirect supervision and discussion of information conveyed for most simple and some complex cases
4. Trusted to execute with indirect supervision but may require discussion of information conveyed for a few complex cases
5. Trusted to execute without supervision

Description of the Activity

Acutely ill hospitalized children require a thoughtful, stepwise, coordinated, cost-effective, and patient-centered approach to diagnosis and treatment. Diagnostic decision-making, management, and coordination of care for these patients are essential skills required of pediatric hospitalists. In addition, with seriously ill patients, initial resuscitation, stabilization, and transfer of patients is fundamental to this specialty.

The specific functions which define this EPA include:

1. Identifying key features from the history and physical to develop a differential diagnosis using evidence-based reasoning, pattern recognition, and illness scripts
2. Determining level of acuity, stabilizing, and triaging to the appropriate care setting
3. Developing and executing a prioritized, high-value, patient-centered diagnostic evaluation and therapeutic management plan
4. Succinctly communicating and documenting the therapeutic plan and clinical reasoning for the care team while meeting compliance standards

Judicious Mapping to Domains of Competence

- Patient Care
- Medical Knowledge
- Practice-Based Learning and Improvement
- Interpersonal and Communication Skills
- Professionalism
- Systems-Based Practice
- Personal and Professional Development

Competencies Within Each Domain Critical to Entrustment Decisions

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| PC 1: | Gathering information |
| PC 2: | Organizing prioritizing responsibilities |
| PC 5: | Performing complete physical exams |
| PC 6: | Using optimal clinical judgement |



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| PC 7: | Developing management plans |
| MK 2: | Practicing EBM |
| ICS 6: | Maintaining medical records |
| SBP 3: | Incorporating cost awareness into care |

Context for the EPA

Rationale: Acutely ill hospitalized children require a thoughtful, stepwise, coordinated, cost-effective, and patient-centered approach to diagnosis and treatment. Diagnostic decision-making, management, and coordination of care for these patients are essential skills required of pediatric hospitalists. In addition, with seriously ill patients, initial resuscitation, stabilization, and transfer of patients is fundamental to this specialty.

Scope of Practice: Pediatric hospitalists working in a variety of practice settings routinely care for acutely ill children. In addition, pediatric hospitalists are often those in charge of initially resuscitating, stabilizing, and transferring critically ill patients. A comprehensive set of skills is necessary to workup, treat, and advocate for patients and families, ensuring patient-centered, high-value, efficient, and safe care. In addition, pediatric hospitalists are often the physician leaders of clinical practice guidelines for common inpatient pediatric diagnoses.

Curricular Components That Support the Functions of the EPA

1. Identifying key features from the history and physical to develop a differential diagnosis using evidence-based reasoning, pattern recognition, and illness scripts
 - Performs a thorough yet efficient history and physical exam
 - Reviews, summarizes, and assimilates pertinent information from past patient health records
 - Highlights key features of the history, physical exam, and prior workup, and identifies elements that do or do not fit a particular illness script
 - Develops a prioritized differential diagnosis with supportive clinical reasoning
 - Recognizes and abates the risk for diagnostic errors when there is limited evidence to guide evaluation and treatment and when patients have multiple problems
2. Determining level of acuity, stabilizing, and triaging to the appropriate care setting
 - Initiates necessary stabilizing workup and management
 - Monitors for and recognizes changes in physical and mental status
 - Identifies criteria for transfer to another level or site of care
 - Executes complete and safe handoffs and transfers of care
3. Developing and executing a prioritized, high-value, patient-centered diagnostic evaluation and therapeutic management plan
 - Assesses the need for diagnostic evaluation and treatment and recognizes potential costs, benefits, harms, and unintended consequences
 - Generates appropriate stepwise approach to workup and treatment
 - Engages in shared decision-making with patient and family to ensure workup and treatment meets their goals of care



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- Reassesses all available data to adapt management plans as necessary
 - Promotes interdisciplinary discussions to address all comorbidities and case management issues
4. Succinctly communicating and documenting the therapeutic plan and clinical reasoning for the care team while meeting compliance standards
- Communicates with patient and family in patient-centered way, engaging in appropriate shared decision-making
 - Communicates with medical home to ensure that care continues post-hospitalization
 - Documents the primary problem, comorbidities, need for hospitalization, and discharge criteria
 - Addresses a clear treatment plan for the primary problem

Problems **generally** within the scope of pediatric hospital medicine practice where the role of the hospitalist is to recognize, evaluate, and manage these patients

- Acute Kidney Injury/Acute Renal Failure
- Altered Mental Status
- Asthma
- Bone and Joint Infections
- Brief Resolved Unexpected Event (BRUE)
- CNS Infections
- Failure to Thrive
- Fever of Unknown Origin
- Fluid and Electrolyte Disturbances
- Gastroenteritis
- Henoch-Scholein Purpura
- Kawasaki Disease
- Neonatal Fever
- Neonatal Jaundice
- Pain Control
- Psychologic Urgencies/Emergencies
- Respiratory Failure
- Seizures
- Shock
- Skin and Soft Tissue Infections
- Toxic Ingestion
- Upper and Lower Respiratory Infections
- Urinary Tract Infections

Problems that may present to a pediatric hospitalist where the role of the hospitalist is to recognize, evaluate, and co-manage these patients with a surgical colleague. Particular emphasis should be on co-management of pain, fluids, antimicrobial therapy, care coordination, and management of comorbidities.

- Increased Intracranial Pressure
- Acute Abdomen
- Spinal Fusion



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- Testicular Torsion
- Tonsillectomy and Adenoidectomy
- Trauma (Accidental and Non-Accidental)

EPA and Curricular Components Authors

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