

Entrustable Professional Activities

EPA 4 for Child Abuse Pediatrics

EPA 4: Provide Subspecialty Medical Evaluation in Cases of Suspected Child Physical Abuse

Supervision Scale for This EPA

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

Description of the Activity

Child abuse pediatricians need to be able to perform comprehensive medical evaluations for children and adolescents in cases of possible physical abuse.

The specific functions which define this EPA include:

- 1. Obtaining a medical history from parent(s)/caregiver(s)
- 2. Obtaining a medical history from children and adolescents based on developmental capabilities and emotional state
- 3. Reviewing and synthesizing information from additional sources including but not limited to prior medical records and investigative information
- 4. Completing a comprehensive physical examination using photo documentation, video recording, or other technology when appropriate
- 5. Applying in-depth knowledge in the field to implement a focused diagnostic workup
- 6. Applying in-depth knowledge in the field to formulate an appropriate differential diagnosis
- 7. Applying in-depth knowledge in the field to formulate an appropriate final diagnosis and management plan
- 8. Engaging in bidirectional communication with family members, other health providers, child protective agency staff, and/or other community members as appropriate
- 9. Providing ethical, comprehensive, comprehensible expert written reports and/or oral testimony as appropriate for the medical-legal interface of child abuse pediatrics

Judicious Mapping to Domains of Competence

- ✓ Patient Care
- ✓ Medical Knowledge



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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*

PC 4:	Interviewing patients
PC 5:	Performing complete physical exams
MK 2:	Practicing EBM
ICS 3:	Communicating with health professionals
ICS 5:	Consultative role
PPD 8:	Dealing with uncertainty

^{*}Based on original Pediatrics Subspecialty Milestones ©2015 ACGME/ABP. All rights reserved.

Context for the EPA

Rationale: Child abuse pediatricians must be able to evaluate and manage all forms of child physical abuse, identify mimickers of physical abuse, and ensure clear communication throughout the process with patients, families, medical providers, law enforcement, child protective investigators, and the legal field.

Scope of Practice: The patient population includes all children referred to child abuse pediatrics for the evaluation of child physical abuse. Child abuse pediatricians may be asked to testify in courts related to the medical evaluation.