Curricular Components That Support the Functions of EPA 3: Care for Infants, Children, and Adolescents with Common Outpatient GI, Liver/Biliary, Pancreatic, and Nutritional Issues

1. Obtaining accurate and complete information sufficient to develop a differential diagnosis and management plan
   - Obtains a detailed, complete, and accurate history and physical exam focused on the appropriate systems for patients referred with gastrointestinal and liver disorders
   - Accurately assesses nature, acuity, and severity of the clinical problem
   - Accurately interprets data such as laboratory and stool evaluation
   - Accurately interprets radiology and pathology test results
   - Develops a comprehensive differential diagnosis and assessment of medical issues
   - Devises a detailed and comprehensive treatment plan for each patient
   - Orders necessary and appropriate laboratory and diagnostic tests and procedures in light of the clinical presentation and formulates a treatment plan based on the diagnosis
   - Follows up and interprets all laboratory data and test results
   - Develops and carries out patient management plans
   - Demonstrates use of available evidence to investigate, evaluate, and improve the care of patients with gastrointestinal disorders

2. Demonstrating knowledge of diseases/conditions/symptoms common to pediatric gastroenterology, hepatology, and nutrition
   - Demonstrates knowledge of established and evolving biomedical, clinical, and epidemiological sciences of gastrointestinal, liver, and nutritional disorders and pancreatic disorders as well as the application of this knowledge to patient care
   - Knows and understands symptoms that are not specific to a disease but represent variation of normal in a healthy child’s life
   - Demonstrates knowledge of the pathophysiology of a broad range of common outpatient pediatric gastrointestinal diseases and functional problems (including vomiting, diarrhea, abdominal pain, constipation, and failure to thrive) as described in the North American Society for Pediatric Gastroenterology, Hepatology and Nutrition (NASPGHAN) guidelines
   - Knows and understands the therapies for the treatment of a broad range of common outpatient pediatric gastrointestinal disease processes and functional disorders (including vomiting, diarrhea, abdominal pain, constipation, and failure to thrive) as well as the role of nutritional therapy and surgical intervention
   - Knows and understand the diagnostic workup and treatment of common outpatient pediatric liver disease disorders including hyperbilirubinemia, jaundice, and elevated liver enzymes in the neonate, child, and adolescent
Entrustable Professional Activities
Curricular Components Supporting EPA 3 for Pediatric Gastroenterology

• Knows and understands the diagnostic workup of pancreatic disorders including pancreatic insufficiency and pancreatitis
• Knows and understands the workup and can differentiate GI causes of vomiting including acid-peptic disorders, cyclic vomiting syndrome, and rumination syndrome
• Demonstrates knowledge of clinical and translational research
• Develops the ability to use online information resources, courses, and national and regional organization websites pertaining to pediatric gastroenterology

3. Communicating management plan to patients, their families, and caregivers
   • Communicates management plans with patient, family, primary physician, resident physicians, nursing staff, nutrition support team, and other ancillary health service providers
   • Preserves patient confidentiality
   • Provides emotional, social, and culturally sensitive support to patients and families with gastrointestinal disorders

4. Educating patients, their families and caregivers, and other health professionals about the disease process and management plan
   • Provides education to patients and families concerning the pathophysiology and manifestations of their gastrointestinal disease process. Discusses the proper use of prescribed medications including potential adverse effects
   • Provides education to patients and families concerning symptoms that are normal in a healthy child’s life and how these symptoms are likely not related to a disease
   • Enables patients to be comfortable asking about their disease or medications by exhibiting empathetic listening skills
   • Ensures that patients understand the correct way to take their prescribed medicines
   • Ensures patient/parents know how to contact their physician if questions arise or if there is a change in condition
   • Prepares for and appropriately transitions care from pediatric to adult health care systems
   • Interacts with faculty and colleagues to discuss evaluations and patient outcomes and incorporates feedback into promoting professional growth and engages in quality improvement projects for practice improvement
   • Educating primary care providers and health care professionals on the cause, treatment, and clinical course of common GI, liver, pancreatic, and nutritional disorders

5. Adapting management plan to changing clinical information
   • Performs continuing monitoring of patients to evaluate safety and efficacy of observations and treatment plan as instituted; orders additional studies and/or adjusts therapy as clinically indicated
Entrustable Professional Activities
Curricular Components Supporting EPA 3 for Pediatric Gastroenterology

- Knows and understands that clinical practice guidelines are suggestions for clinical care and may be flexible and evolve with time

6. Communicating and providing consultation to referring physicians and other health care providers
   - Works to provide consultative services for patients with coexisting gastrointestinal disorders and other medical needs
   - Communicates management plans to referring physicians and jointly manages patients

Problems that generally require further consultation where the role of the subspecialist is to recognize, provide preliminary evaluation, and refer/co-manage
   - Surgical referral for surgical placement of gastrostomy if percutaneous endoscopic gastrostomy (PEG) tube not indicated or not performed by gastroenterologists at the institution, or other surgical treatment
   - Referral for advanced motility studies, typically to a colleague in pediatric gastroenterology with advanced motility training
   - Referral to psychiatry or psychology or biofeedback for management of stress or other psychological issues which may often accompany functional GI disease

Curricular Components Authors

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