Entrustable Professional Activities
EPA 3 for Pediatric Hospital Medicine

EPA 3: Perform Common Procedures Associated with the Practice of Pediatric Hospital Medicine

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

Pediatric hospitalists must be prepared to perform, coordinate, and/or supervise procedures common to the care of hospitalized children.

Procedures at a minimum include:

- Airway management and respiratory support
  - Oxygen delivery devices
  - Bag-mask ventilation
  - Replacement of tracheostomy tube
  - Suctioning
- Neonatal resuscitation (NRP)
- Pediatric resuscitation and stabilization (PALS)
- Placement/replacement of feeding tubes (NG/OG/G-tube)
- Lumbar puncture
- Bladder catheterization
- Access (intravenous, intraosseous)
- Sedation

The specific functions which define this EPA include:

1. Describing indications, contraindications, risks, and benefits and identifying alternative options for common pediatric hospital medicine procedures
2. Performing culturally competent patient-centered informed consent
Prepared and utilizing appropriate equipment, personnel, and setting to perform the procedure safely and effectively

4. Anticipating, recognizing, and managing potential complications

5. Documenting the procedure in an accurate, timely, and compliant manner

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*

| PC 6: | Using optimal clinical judgment |
| PC 8: | Performing procedures |
| PBLI 1: | Identifying gaps |
| ICS 1: | Communicating with patients/families |
| ICS 5: | Consultative role |
| ICS 6: | Maintaining medical records |
| SBP 3: | Incorporating cost awareness into care |
| PPD 7: | Demonstrating self-confidence |

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Context for the EPA

Rationale: Pediatric hospitalists are the front-line care providers for hospitalized children and as such need to have procedural skills necessary to provide safe and timely care.

Scope of Practice: Pediatric hospitalists need to have confidence and skill in procedures common to hospitalized children — including stabilization of decompensating newborn and pediatric patients. While daily practices may vary among institutions, pediatric hospitalists should have basic knowledge and skills of common procedures in order to recognize the need for, perform, or arrange them in the context of their particular health care institution. Pediatric hospitalists apply procedural best practices to individual patients and systems to ensure safe procedural care of pediatric patients.