

## **Entrustable Professional Activities**

## **EPA 3 for Pediatric Pulmonology**

# **EPA 3: Demonstrate Competence in Communicating a New Diagnosis of a Life- Altering Disease Using a Patient and Family Centered Approach**

#### **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 for most simple and some complex cases
- 4. Trusted to execute with indirect supervision but may require discussion of information for a few complex cases
- 5. Trusted to execute without supervision

#### **Description of the Activity**

Pediatric pulmonologists are often responsible for introducing a new diagnosis of a serious disorder. Scope of practice for this EPA includes the child and family that has recently been diagnosed with an acute or chronic life altering disease. An example for pediatric pulmonology would be the new diagnosis of cystic fibrosis made through newborn screening. The pediatric pulmonary subspecialist must have the knowledge and skills needed for the comprehensive initial discussion and the initiation of a long-term management plan.

The specific functions which define this EPA include:

- 1. Demonstrating knowledge of the disease, common course of illness, and management/treatment of the disease by delivering details about the disease in a clear and comprehensive manner
- 2. Establishing rapport and initiating a therapeutic alliance with newly diagnosed patients and their families by recognizing the importance of verbal and nonverbal cues and managing the emotional and human response to the difficult news
- 3. Engaging patients and families in shared decision making to develop a care plan that meets their medical and psychosocial needs
- 4. Demonstrating the self-confidence needed to deliver bad news and support the emotional response of the patient and family

#### **Judicious Mapping to Domains of Competence**

- ✓ Patient Care
- ✓ Medical Knowledge
  Practice-Based Learning and Improvement
- ✓ Interpersonal and Communication Skills Professionalism



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- ✓ Systems-Based Practice
- ✓ Personal and Professional Development

#### Competencies Within Each Domain Critical to Entrustment Decisions\*

PC 4:	Interviewing patients (special attn. to behavior, PS)
PC 9:	Counseling patients and families
MK 1:	Demonstrating knowledge
ICS 2:	Demonstrating insight into emotion
SBP 2:	Coordinating care
PPD 7:	Demonstrating self-confidence

<sup>\*</sup>Based on original Pediatrics Subspecialty Milestones ©2015 ACGME/ABP. All rights reserved.

#### Context for the EPA

Rationale: Pediatric pulmonologists must be able to provide all aspects of care following the diagnosis of a serious, life-altering disease. This includes an understanding of the diagnosis, implications for immediate intervention, and the development of a management and treatment plan. The physician must have the ability to empathetically convey information regarding the diagnosis to the patient and family and be able to do it in a way that allows best understanding and comprehension and subsequently involve them as a member of the team who is engaged in shared decision-making..

Scope of Practice: The care of the patient with a life-altering disease begins when the physician is made aware of the diagnosis and begins to prepare to meet with the patient and family. The therapeutic relationship begins with this first meeting of the patient and family and may continue for several meetings depending on the complexity of the diagnosis and the health literacy of the caregivers. For the scope of this document, this care will continue until the initial care plan has been created and implemented and the family begins the process of chronic disease management.