Entrustable Professional Activities
EPA 2 for Pediatric Rheumatology

EPA 2: Manage Patients with Acute or Chronic Complex Multi-System Rheumatic Disease in an Ambulatory, Emergency, or Inpatient Setting

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

Children with complex multi-system rheumatic disease constitute a challenging but critical activity for the rheumatologist. This core EPA for the rheumatologists requires the mastery of providing efficient and effective care to a large number of patients with suspected and confirmed autoimmune and auto-inflammatory disease. The focal components of this professional activity build upon those of managing both the clinic patient with more common rheumatic diseases as well as the more acutely ill hospitalized patient.

The specific functions which define this EPA include:

1. Developing knowledge of rheumatic autoimmune diseases, auto-inflammatory diseases, and associated musculoskeletal conditions specific to children, adolescents, and young adults
2. Performing general and specialized history and physical examinations (e.g., rheumatologic review of systems and musculoskeletal examination) in order to care for patients with chronic complex multi-system rheumatic disease
3. Developing sound clinical reasoning that drives the creation of an appropriate differential diagnosis and evaluation
4. Applying guidelines, evidence-based literature, and/or consensus treatment plans to the care of patients
5. Developing and documenting a management plan that addresses the primary problem, all co-morbidities, as well as cost considerations
6. Coordinating care in different health care settings (e.g., ER, hospital) and with an interdisciplinary health care team
7. Placing the patient at the center of all management decisions
8. Demonstrating the ability to manage uncertainty (one’s own as well as that of the patient and family)
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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 1: | Gathering information |
| PC 5: | Performing complete physical exams |
| PC 7: | Developing management plans |
| MK 1: | Demonstrating knowledge |
| PBLI 6: | Practicing EBM |
| ICS 1: | Communicating with patients/families |
| ICS 3: | Communicating with health professionals |
| SBP 2: | Coordinating care |
| PPD 8: | Dealing with uncertainty |

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

Context for the EPA

Rationale: Pediatric rheumatologists must be able to diagnose and manage patients with acute or chronic complex multi-system rheumatic disease in a variety of settings including outpatient clinic, the emergency room, and in the hospital. All of these settings will require coordination of care with a multidisciplinary health care team.

Scope of Practice: Care is provided in the ambulatory and inpatient setting. The pediatric rheumatologists also serve as a resource for telephone, electronic, and remote consultation, and care is occasionally supervised in-home or at remote sites. The patient population includes all patients with rheumatic, inflammatory, and autoimmune diseases, and associated musculoskeletal conditions followed regularly in the pediatric rheumatology clinic and patients evaluated as requested consultations. Patients will range in age from newborns to young adults. This document is intended to address the scope of knowledge and skills of the pediatric rheumatologist, with the understanding that the pediatric rheumatologist will often need to create and lead multidisciplinary teams and require evaluation and management input from other health care professionals, and participate in quality improvement.