

Obstetrics & Gynecology: Foundations EPA #1

Providing routine prenatal care to a low-risk, healthy population

Key Features:

- This EPA includes assessing and counselling women experiencing a low-risk pregnancy and managing routine prenatal care.
- This EPA must be observed in a clinical setting, and may be observed in obstetric clinics or the antenatal ward.

Assessment Plan:

Direct observation or case discussion, and review of a consult letter/antenatal form by OBGYN faculty, family physician, midwife, nurse, genetic counsellor, or Core or TTP trainee

Use Form 1. Form collects information on:

- Visit: initial visit; follow up visit
- Patient: pre-conception; first trimester; second trimester; third trimester; term; postdate
- Discussion topic (write in):

Collect 3 observations of achievement

- At least 1 initial visit assessment, in the antenatal period (i.e. pre-conception, or first, second or third trimester)
- At least 1 second or third trimester patient
- At least 1 discussion regarding common prenatal issues (e.g., postdate, vaginal birth after cesarean section [VBAC], or breech presentation)
- At least 2 different observers

CanMEDS Milestones:

- 1** **ME 2.2** Perform a patient assessment including history and physical exam
- 2** **ME 2.2 Focus the clinical encounter, performing it in a time-effective manner, without excluding key elements**
- 3** **ME 2.2 Select appropriate investigations and interpret the results**
- 4** **ME 2.3** Address the patient's ideas, fears, and concerns about pregnancy and her prenatal care
- 5** **ME 2.4** Ensure that the patient and family are informed about the risks and benefits of each screening and treatment option in the context of best evidence and guidelines
- 6** **ME 4.1 Establish plans for ongoing care for the patient, taking into consideration her clinical state, circumstances, preferences, and actions, as well as available resources, best practices, and research evidence**
- 7** **COM 3.1 Communicate the plan of care clearly and accurately to the patient and their family**
- 8** **COM 5.1** Document the clinical encounter to adequately convey findings, clinical reasoning and the rationale for decisions
- 9** **COL 1.2** Consult as needed with other health care professionals, including other physicians

*ENTRUSTABLE PROFESSIONAL ACTIVITIES
FOR OBSTETRICS AND GYNECOLOGY (2021 version 1.2)*

- 10** **L 2.2** Apply evidence and guidelines with respect to resource utilization in common clinical scenarios
- 11** **HA 1.1 Facilitate timely patient access to services and resources**
- 12** **HA 1.2** Work with the patient to increase opportunities to adopt healthy behaviours