Surgical Foundations: Foundations EPA #3
Providing initial management for trauma patients

Key Features:
- The focus of this EPA is participation as a member of the trauma team caring for a patient with multisystem trauma.
- This EPA may include vascular control, application of a splint for bony injury or soft tissue injury, and securing of arterial and/or venous vascular access in critical and non-critical situations.
- This EPA may be observed in simulation.

Assessment Plan:
Direct observation by trauma team leader, fellow or senior resident with trauma experience

Use Form 1. Form collects information on:
- Role of resident: primary survey; secondary survey
- Setting: clinical; simulation

Collect 2 observations of achievement
- At least 1 each primary and secondary survey

CanMEDS Milestones:

1. ME 1.4 Perform the clinical assessment in a timely manner
2. ME 1.4 Recognize urgent problems that may need the involvement of more experienced colleagues and seek their assistance
3. ME 2.1 Iteratively establish priorities as the patient’s situation evolves
4. ME 2.2 Develop a specific differential diagnosis relevant to the patient’s presentation
5. ME 3.3 Consider urgency and potential for deterioration, in advocating for the timely execution of a procedure or therapy
6. ME 3.4 Perform pre-procedural tasks in a timely, skillful, and safe manner
7. ME 3.4 Perform surgical techniques in a timely, skillful, and safe manner
   - Vascular control in elective and critical situations
   - Application of a splint for bony injury or soft tissue injury
   - Securing arterial and venous vascular access in critical and non-critical situations
8. ME 4.1 Establish plans for ongoing care, taking into account the patient’s clinical state as well as available resources
9. ME 4.1 Implement management to stabilize the patient prior to additional testing or transfer
10. COM 1.2 Optimize the physical environment for patient comfort and privacy
11. COL 1.1 Receive and appropriately respond to input from other health care professionals
12. COL 2.2 Communicate clearly and directly to promote understanding, manage differences, and resolve conflicts
13. COL 3.1 Determine when care should be transferred to another physician or health
14 **COL 3.2** Communicate with the receiving physicians or health care professionals during transitions in care, clarifying issues after transfer as needed

15 **P 4.1** Manage the mental, physical and environmental challenges that impact behaviour and/or performance in the clinical setting