

Surgical Foundations: Foundations EPA #7

Managing patients with an uncomplicated post-operative course

Key Features:

- The observation of this EPA is divided into two parts: post-operative patient management and participation as a member of the clinical team.
- Post-operative patient management includes all aspects of writing post-operative orders, providing ongoing clinical care; documenting the post-operative course and planning for discharge.

Assessment Plan:

Part A: Postoperative management

Direct observation or case discussion by supervisor (surgeon, senior resident or fellow)

Use Form 1. Form collects information on:

- Surgical complexity: major; minor
- Patient complexity: low; high

Collect 4 observations of achievement

- At least 2 high complexity patients
- At least 2 different assessors

Part B: Collaborative care

Direct observation and/or case discussion by supervisor, with input from members of the clinical team

Use Form 1. Form collects information on

- Number of people providing input (write-in):
- Input from (select all that apply): other resident; other supervisor; nurse; other health professional

Collect feedback on at least 2 occasions

- At least 3 observers for each encounter
- At least 2 different team member roles for each encounter

CanMEDS Milestones:

Part A: Post-operative management

- 1 ME 1.3 Apply clinical and biomedical sciences to manage core patient presentations in surgical practice**
- 2 ME 1.4 Perform a focused clinical assessment that addresses all relevant issues**
- 3 ME 3.4 Perform wound surveillance and dressing care**
- 4 ME 4.1 Coordinate investigation, treatment, and follow-up plans when multiple physicians and healthcare professionals are involved**

- 5 **ME 4.1** Ensure follow-up on results of investigation and response to treatment
- 6 **ME 5.2** Use cognitive aids such as procedural checklists, structured communication tools, or care paths, to enhance patient safety
- 7 **ME 4.1 Develop and implement a plan for post-operative, immediate and/or long-term care**
- 8 **COL 1.3** Integrate the patient's perspective and context into the collaborative care plan
- 9 **COL 3.2 Communicate with the patient's primary health care professional about the patient's care**
- 10 **COL 3.2 Summarize the patient's issues in the transfer summary, including plans to deal with the ongoing issues**
- 11 **COL 3.2** Arrange for the appropriate resources and allied health care assistance to be available for the surgical patient
- 12 **L 1.4** Access supports and notification processes to enhance patient safety in their institution
- 13 **HA 1.2 Select patient education resources related to surgical practice**
- 14 **HA 1.3 Anticipate and advocate for the perioperative needs of patients belonging to vulnerable and marginalized populations**
- 15 **HA 1.3** Incorporate disease prevention, health promotion, and health surveillance into interactions with individual patients, including screening for child abuse, elder abuse, intimate partner abuse and domestic violence
- 16 **P 2.2** Demonstrate a commitment to patient safety and quality improvement through adherence to institutional policies and procedures, and clinical practice guidelines

Part B: Collaborative care

- 1 **COL 1.2 Demonstrate understanding of the roles and scopes of practice of other health care providers related to surgical practice**
- 2 **COL 1.3 Integrate the patient's perspective and context into the collaborative care plan**
- 3 **COL 2.1 Actively listen to and engage in interactions with collaborators**
- 4 **COL 3.2 Arrange for the appropriate resources and health care assistance to be available for the surgical patient**
- 5 **HA 1.1** Demonstrate an approach to working with patients to advocate for health services or resources
- 6 **P 4.1 Regulate attention, emotions, thoughts, and behaviours while maintaining capacity to perform professional tasks**