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