

Surgical Foundations: Foundations EPA #2

Providing initial management for trauma patients

Key Features:

- The observation of this EPA is divided into two parts: achievement of ATLS certification and 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

Assessment plan:

Part A: ATLS Certification

Submission of the certificate of course completion upon successful completion of ATLS course, to the Competence Committee

Part B: Patient assessment

Direct observation by trauma team leader

Use Form 1. Form collects information on:

- Role of resident: primary; secondary survey

Collect 2 observations of achievement

- At least one each primary and secondary survey

Relevant milestones (Part B)

- 1 F ME 1.4.1 Perform focused clinical assessments with recommendations that are well-documented**
 - 2 F ME 1.4.2 Recognize urgent problems that may need the involvement of more experienced colleagues and seek their assistance immediately**
 - 3 F ME 2.1.1 Iteratively establish priorities as the patient's situation evolves**
 - 4 F ME 2.2.1 Develop a specific differential diagnosis relevant to the patient's presentation**
 - 5 F ME 3.3.1 Consider urgency, and potential for deterioration, in advocating for the timely execution of a procedure or therapy**
 - 6 F ME 3.4.1 Perform pre-procedural tasks in a timely, skillful, and safe manner**
 - 7 F ME 3.4.3 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 F ME 4.1.6 Establish plans for ongoing care, taking into account the patient's clinical state as well as available resources**
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- 9 **F ME 4.1.7 Implement management to stabilize the patient prior to additional testing or transfer**
- 10 **F COM 1.2.1** Optimize the physical environment for patient comfort, privacy, engagement, and safety
- 11 **TD COL 1.1.1 Receive and appropriately respond to input from other health care professionals**
- 12 **F COL 2.2.2** Communicate clearly and directly to promote understanding, manage differences, and resolve conflicts
- 13 **F COL 3.1.1** Determine when care should be transferred to another physician or health professional
- 14 **F COL 3.2.1** Communicate with the receiving physicians or health care professionals during transitions in care, clarifying issues after transfer as needed
- 15 **F P 4.1.2** Manage the mental, physical and environmental challenges that impact behaviour and/or performance in the clinical setting