# Entrustable Professional Activities for Surgical Foundations

## 2018 VERSION 1 0

## Surgical Foundations: Transition to Discipline EPA #1

## Performing the preoperative preparation of patients for basic surgical procedures

## Key Features:

This EPA includes verifying pertinent clinical findings and completing relevant clinical documentation, including orders

Assessment plan: Indirect observation by supervisor

Use Form 1.

Collect 1 observation of achievement

#### **Relevant milestones**

- 1 TD ME 1.6.1 Identify clinical situations in which complexity, uncertainty, and ambiguity may play a role in decision-making
- TD ME 2.1.1 Identify the concerns and goals of the patient and family for the 2 encounter
- TD ME 2.2.1 Elicit a history and perform a physical exam that informs the 3 diagnosis
- 4 TD ME 2.4.1 Develop an initial management plan for common patient presentations in surgical practice
- 5 TD ME 3.2.1 Describe the ethical principles and legal process of obtaining and documenting informed consent
- 6 **TD ME 3.3.1** Recognize and discuss the importance of the triaging and timing of a procedure or therapy
- **TD COM 1.1.1** Communicate using a patient-centred approach that facilitates 7 patient trust and autonomy and is characterized by empathy, respect, and compassion
- 8 **TD COM 1.2.1** Mitigate physical barriers to communication to optimize patient comfort, privacy, engagement, and safety
- 9 TD COM 2.1.1 Conduct a patient-centred interview, gathering all relevant biomedical and psychosocial information for any clinical presentation
- 10 TD COM 2.1.2 Integrate and synthesize information about the patient's beliefs, values, preferences, context and expectations with biomedical and psychosocial information
- 11 TD COM 2.1.3 Identify and effectively explore issues to be addressed in a surgical patient encounter, including but not limited to the patient's context and preferences

<sup>© 2018</sup> The Royal College of Physicians and Surgeons of Canada. All rights reserved. This document may be reproduced for educational purposes only provided that the following phrase is included in all related materials: *Copyright © 2018 The Royal College of Physicians and Surgeons of Canada. Referenced and produced with permission.* Please forward a copy of the final product to the Office of Specialty Education, atth: Associate Director, Specialty. Written permission from the Royal College is required for all other uses. For further information regarding intellectual property, please contact: <u>documents@royalcollege.edu</u>.

which include items to be addressed such as age, ethnicity, gender, family, and religious beliefs

- **12 TD COM 2.2.1** Conduct a focused and efficient patient interview, managing the flow of the encounter while being attentive to the patient's cues and responses
- **13 TD COM 2.3.1** Seek and synthesize relevant information from other sources, including the patient's family, hospital records and other health care professionals, with the patient's consent
- 14 TD COM 5.1.1 Organize information in appropriate sections within an electronic or written medical record
- 15 TD COM 5.1.2 Maintain accurate and up-to-date problem lists and medication lists
- **16 TD COM 5.2.1** Demonstrate reflective listening, open-ended inquiry, empathy, and effective eye contact while using a written or electronic medical record
- **17 TD COL 1.3.1** Discuss with the patient and family any plan for involving other health care professionals, including other physicians, in the patient's care
- **18** TD COL 1.3.2 Describe the elements of a good consultation
- **19 TD HA 1.2.1** Identify resources or agencies that address the health needs of patients

## Recognizing and initiating early management for critically ill surgical patients

Key Features:

- This EPA focuses on the initial approach to a critically ill patient; at this early stage of training, an important feature of this task is recognizing one's own limits and seeking assistance and/or handing over care to ensure safe patient management
- This EPA may be observed in simulation (e.g. OSCE)

#### Assessment plan:

Direct observation by supervisor and review of clinic note

Use Form 1. Form collects information on:

- Type of scenario: clinical; simulated

Collect 2 observations of achievement

#### Relevant milestones

- 1 TD ME 1.6.2 Recognize own limits and seek assistance when necessary
- 2 TD ME 2.1.4 Perform initial resuscitation according to ACLS guidelines
- 3 TD ME 2.2.1 Elicit a history and perform a physical exam that informs the diagnosis
- 4 TD ME 2.2.2 Develop a differential diagnosis and adjust as new information is obtained
- 5 TD ME 2.2.3 Select necessary initial investigations to assist in diagnosis and management
- 6 TD ME 4.1.1 Identify the potential need for consultation
- **7 TD COM 1.2.1** Mitigate physical barriers to communication to optimize patient comfort, privacy, engagement, and safety
- 8 TD COM 2.3.1 Seek and synthesize relevant information from other sources, including the patient's family, hospital records and other health care professionals, with the patient's consent
- 9 TD COL 1.1.1 Receive and appropriately respond to input from other health care professionals
- 10 TD COL 2.2.1 Communicate effectively with other physicians and health care professionals
- 11 TD COL 3.2.4 Perform safe and effective handover during transitions in care
- 12 TD S 1.1.2 Recognize the duality of being a learner as well as a practitioner
- **13 TD P 1.1.1** Consistently prioritize the needs of patients and others to ensure a patient's legitimate needs are met

 $<sup>\</sup>ensuremath{\mathbb S}$  2018 The Royal College of Physicians and Surgeons of Canada. All rights reserved.

## **Documenting clinical encounters**

Key Features:

- This EPA focuses on the synthesis and documentation of relevant medical and surgical information while ensuring professional behaviour in the use of electronic medical records and/or other technologies

## Assessment plan:

Direct or indirect observation by supervisor with review of clinical documentation

Use Form 1. Form collects information on:

- Type of setting: inpatient; outpatient

Collect 2 observations of achievement

- At least 1 inpatient
- At least 1 outpatient

#### Relevant milestones

- **TD COM 2.3.1** Seek and synthesize relevant information from other sources, including the patient's family, hospital records and other health care professionals, with the patient's consent
- 2 TD COM 5.1.1 Organize information in appropriate sections within an electronic or written medical record
- 3 TD COM 5.1.2 Maintain accurate and up-to-date problem lists and medication lists
- 4 TD COM 5.1.3 Document an initial management plan for common patient presentations in surgical practice
- 5 TD COM 5.2.2 Demonstrate an understanding of the risk of breaching patient confidentiality as a result of the use of new technologies such as telehealth, and internet or digital storage and transmission devices
- **6 TD COL 3.2.3** Communicate with the receiving physicians or health care professionals during transitions in care
- 7 TD L 1.4.1 Utilize the data available in health information systems in their discipline to optimize patient care
- 8 TD P 1.1.3 Complete assigned responsibilities
- **9 TD P 1.5.1** Describe the risks of technology enabled communication in surgical practice including but not limited to social media

 $\ensuremath{\textcircled{\sc 0}}$  2018 The Royal College of Physicians and Surgeons of Canada. All rights reserved.

## Demonstrating handover technique

Key Features:

- This EPA focuses on the transitions of care that occur between residents and/or at times of patient transfer to another health care setting or location.
- Key aspects of this task include accurate and effective communication as well as professionalism in the use of medical information technology and/or social media

<u>Assessment plan:</u> Direct observation by supervisor

Use Form 1.

Collect 2 observations of achievement

#### Relevant milestones

- 1 TD ME 2.1.2 Identify patients at risk for sudden deterioration in clinical status requiring closer follow-up
- 2 **TD COL 1.3.1** Discuss with the patient and family any plan for involving other health care professionals, including other physicians, in the patient's care
- 3 TD COL 3.2.1 Describe specific information required for safe handover during transitions in care
- 4 TD COL 3.2.2 Acknowledge that incomplete or inaccurate handover can result in suboptimal patient care, if not harm
- 5 TD COL 3.2.3 Communicate with the receiving physicians or health care professionals during transitions in care
- 6 TD COL 3.2.4 Perform safe and effective handover during transitions in care
- 7 TD L 4.3.2 Demonstrate an understanding of the appropriate use of information technology to enhance surgical practice
- 8 TD P 1.5.1 Describe the risks of technology enabled communication in surgical practice including but not limited to social media

© 2018 The Royal College of Physicians and Surgeons of Canada. All rights reserved.

## Demonstrating ability to function in the operating room

Key Features:

- This EPA focuses on the safe and timely preparation for a surgical procedure including maintenance of sterility, universal precautions, handling of sharps and understanding occupational risks and hazards
- This EPA may be observed in simulation

#### Assessment plan:

Supervisor or delegate does assessment based on direct observation

Use Form 1. Form collects information on:

- Type of scenario: clinical; simulation

Collect 1 observation of achievement

#### Relevant milestones

- 1 TD ME 3.4.1 Demonstrate effective procedure preparation, including the use of a pre-procedure time-out or surgical safety checklist as appropriate
- 2 TD ME 3.4.3 Perform pre-procedural tasks in a timely, skillful, and safe manner
  - Establish and maintain a sterile field
  - Maintain universal precautions
  - Ensure safe handling of sharps
  - Hand-cleanse, gown and glove
- 3 TD COL 1.2.2 Discuss the roles and responsibilities of all participants in the operating room
- 4 **TD P 4.1.4** Demonstrate an understanding of occupational risks and their management

© 2018 The Royal College of Physicians and Surgeons of Canada. All rights reserved.

## Repairing simple skin incisions/lacerations

Key Features:

- This EPA may be observed in simulation

<u>Assessment plan:</u> Direct observation by supervisor

Use Form 1. Form collects information on:

- Type of scenario: clinical; simulation
- Wound size: < 2 cm, 2-5 cm, >5 cm

Collect 1 observation of achievement

- Wound must be at least 5 cm long

#### Relevant milestones

- 1 TD ME 2.4.2 Use appropriate prophylaxis
- 2 TD ME 3.2.2 Obtain and document informed consent for simple wound closure
- 3 TD ME 3.4.4 Perform pre-procedural tasks for a simple wound closure
  - Apply aseptic technique
  - Gather and manage the availability of appropriate instruments and materials for minor procedures
  - Obtain appropriate assistance
  - Position the patient appropriately
  - Prepare the operative site
  - Hand-cleanse, gown and glove
  - Demonstrate appropriate draping of the patient
  - Deliver pre-procedural local anesthesia if appropriate
- 4 TD ME 3.4.5 Perform procedural tasks in a timely, skillful and safe manner
  - Use common surgical instruments, including but not limited to
    - needle drivers, retractors, forceps, clamps, and scissors Select and use suture materials
    - Assess the quality of the closure
- 5 TD COM 3.1.4 Plan and discuss appropriate postoperative care and issues with patients and families

## Managing tubes, drains and central lines

Key Features:

- This EPA may be observed in any clinical or simulated scenario related to tubes and drains (nasogastric, Jackson-Pratt or similar, chest tubes, feeding tubes, foley catheter, central venous catheter) (e.g. blocked, accidentally removed etc.)

<u>Assessment plan:</u> Indirect observation by supervisor

Use Form 1.

Collect 1 observation of achievement

#### Relevant milestones

- 1 TD ME 1.3.1 Apply knowledge of the different tubes, drains and lines used in the care of the surgical patient, the indications for their use and the risks associated with them
- 2 **TD ME 2.4.3** Develop a management plan for common presentations related to tubes, drains and lines
- 3 TD ME 3.3.2 Determine the priority with which various problems with in-situ tubes, drains and lines require intervention
- 4 TD ME 3.4.6 Perform common procedures in a skillful, fluid and safe manner
  unblock tubes and/or drains
- **5 TD COM 3.1.2** Communicate the plan of care in a clear, compassionate, respectful, and accurate manner to the patient and family
- 6 TD COL 2.1.2 Respond to nursing requests and concerns in a respectful and timely manner
- **7 TD P 1.1.1** Consistently prioritize the needs of patients and others to ensure a patient's legitimate needs are met

© 2018 The Royal College of Physicians and Surgeons of Canada. All rights reserved.