Physical Medicine & Rehabilitation: Core EPA 3

Identifying, assessing and managing patients with emergent and urgent medical issues

Key Features:
- This EPA includes complex emergent and urgent medical issues.
- This may include communicating with patients, families and/or other health care professionals, advocating for appropriate patient care (e.g. transfer to acute care or ICU), and handover to a receiving clinical team.
- This EPA may be observed in the simulation setting.

Assessment Plan:
Direct and/or indirect observation by physiatrist, TTP trainee, or non-physiatrist physician with appropriate skill set; this may include feedback from nurses or other health professionals.

Use form 1. Form collects information on:
- Observation type: direct; indirect
- Rehabilitation population group (check all that apply): amputee; brain injury; musculoskeletal; neurological; neuromuscular, spinal cord injury; stroke other diagnoses (burns/cancer/cardiorespiratory); other (write in)
- Medical issue: acute joint swelling; acute limb swelling; acute undifferentiated functional deterioration; acute wound deterioration; altered level of consciousness; altered neurological status; angioedema/anaphylaxis; autonomic dysreflexia; code blue; critical abnormal investigation result; critical abnormal vitals; falls/acute trauma; major hemorrhage; overdose; palpitations; post-traumatic agitation; pulseless limb; respiratory distress; severe acute pain; urgent mental health and behavioral issues; other (write in)
- Setting: inpatient rehabilitation; outpatient physiatry clinic; outpatient electrodiagnostic clinic; consultation service; simulation

Collect 10 observations of achievement.
- At least 2 direct observations
- At least 4 different medical issues
- At least 1 autonomic dysreflexia (may be observed in simulation)
- No more than 4 in simulation setting
- At least 4 different observers
- At least 4 observations from faculty

Relevant Milestones

1. ME 1.6 Adapt care as the complexity, uncertainty and ambiguity of the patient’s clinical situation evolves

2. ME 2.2 Focus the clinical encounter, performing it in a time-effective manner, without excluding key elements

3. ME 2.2 Select and interpret the results of investigations and imaging based on differential diagnosis
4 ME 2.4 Develop and implement initial and/or ongoing management plans
5 COM 3.1 Convey information related to the patient’s health status, care, and needs clearly and compassionately
6 COM 3.2 Communicate the reasons for unanticipated clinical outcomes to patients and disclose patient safety incidents
7 COM 5.1 Document relevant information
8 COL 2.1 Communicate with the receiving physicians or health care professionals during transitions in care, clarifying issues after transfer, as needed
9 L 2.1 Consider health care resources and costs when determining the investigation and management plan
10 P 2.2 Demonstrate a commitment to patient safety and quality improvement through adherence to institutional policies and procedures
11 P 4.1 Integrate skills that support adaptation and recovery in challenging situations