

Physical Medicine & Rehabilitation: Foundations EPA 1

Assessing and managing patients with non-emergent commonly encountered medical and surgical issues

Key Features:

- This EPA includes taking a focused history, recognizing red flags, doing a focused examination, developing a differential diagnosis, selecting and interpreting appropriate investigations, and initiating and communicating a treatment plan.
- This EPA does not include providing advanced treatment of medical and/or surgical conditions.
- This EPA may be observed in the simulation setting.

Assessment Plan:

Direct and/or indirect observation by any physician, Core or TTP trainee, which may incorporate feedback from nurses, other health professionals, and the patient/family

Use form 1. Form collects information on:

- Observation type: direct; indirect
- Issue (check all that apply): abnormal investigation result; abnormal vitals; bowel/urinary dysfunction; dizziness; falls; glycemic control; line dysfunction; minor bleeding; nausea/vomiting; subacute or progressive neurological decline; pain; rash; sleep disturbance; wound care; non-urgent mental health and/or behavioral issues; other (open text)
- Setting: medicine inpatient unit; surgery inpatient unit; outpatient medicine clinic; outpatient surgery clinic; emergency room; simulation; other (open text)

Collect 10 observations of achievement.

- At least 4 direct observations
- At least 4 different issues
- A variety of settings
- No more than 1 in simulation setting
- At least 4 different observers
- At least 4 observations from faculty

Relevant Milestones

- 1** COM 1.2 Optimize the physical environment for patient comfort, dignity, privacy, engagement, and safety
- 2** COM 2.1 Conduct a patient-centered interview, gathering all relevant biomedical and psychosocial information for any clinical presentation
- 3** **COM 2.2 Conduct a focused and efficient patient-centred interview, managing the flow of the encounter while being attentive to the patient's cues and responses**
- 4** **ME 2.2 Elicit a history and perform a physical exam that informs the diagnosis**
- 5** **ME 2.2 Develop a differential diagnosis relevant to the patient's presentation**

- 6 ME 2.4 Develop and implement an initial management plan**
- 7 L 2.1 Apply knowledge of the resources available in the care setting when developing and implementing management plans**
- 8 ME 2.4 Anticipate common complications of disorders and their treatment, and incorporate these considerations in the management plan
- 9 ME 3.1 Describe to patients common procedures or therapies for common conditions encountered in medical and surgical training experiences
- 10 ME 4.1 Ensure follow-up on results of investigation and response to treatment**
- 11 COM 5.1 Document clinical encounters to adequately convey clinical reasoning and the rationale for decisions**
- 12 COM 2.3 Seek and synthesize relevant information from other sources, including the patient's family, with the patient's consent
- 13 COM 3.1 Use strategies to verify and validate the understanding of the patient and family with regard to the diagnosis, prognosis, and management plan
- 14 HA 1.3 Work with the patient and family to identify opportunities for disease prevention, health promotion, and health protection**
- 15 HA 2.2 Identify social determinants of health that may impact on the patient's care
- 16 S 3.1 Recognize uncertainty and knowledge gaps in clinical and other professional encounters relevant to Psychiatry