**GASTROENTEROLOGY**

**ENTRUSTABLE PROFESSIONAL ACTIVITIES (EPA)**

**EPA Tool Names**

Stage 1: Transition to Discipline (TTD)

* TD1 – Assessing, triaging, and initiating management for patients with GI emergencies
* TTD2A – Performing the pre-procedural assessment and risk optimization for patients undergoing endoscopy
* TTD2B – Performing the pre-procedural assessment and risk optimization for patients undergoing endoscopy

Stage 2: Foundations of Discipline (FOD)

* FOD1A – Assessing and initiating management for uncomplicated patients
* FOD1B - Assessing and initiating management for uncomplicated patients
* FOD2 – Assessing the nutritional status and initiating a nutritional support plan for uncomplicated patients
* FOD3A – Performing esophagogastroduodenoscopy
* FOD3B – Performing esophagogastroduodenoscopy
* FOD4 – Performing endoscopic examination to the level of the sigmoid colon

Stage 3: Core of Discipline (COD)

* COD1 – Assessing and initiating management for complex patients
* COD2 – Providing ongoing management for patients with stable, chronic and/or complex conditions
* COD3 – Managing patients with exacerbations, disease progression, and/or complications of chronic GI conditions
* COD4 – Identifying and referring patients who need additional specialized care
* COD4B – Identifying and referring patients who need additional specialized care
* COD5 – Providing complete nutritional assessment and plans for patients with complex nutritional needs
* COD6 – Performing colonoscopy
* COD7 – Identifying clinically significant findings during endoscopic procedures of the upper and lower gastrointestinal tract
* COD8A – Performing therapeutic endoscopic interventions of the upper and lower gastrointestinal tract
* COD8A – Performing therapeutic endoscopic interventions of the upper and lower gastrointestinal tract
* COD9 – Providing care for patients who have experienced a patient safety incident
* COD10A – Leading the provision of GI care for patients on an inpatient service
* COD10B – Leading the provision of GI care for patients on an inpatient service

Stage 4: Transition to Practice (TTP)

* TTP1 – Managing the days list of endoscopy procedures

**EPAs and Milestones**

**\*\*\* FOR “observations” – THIS MEANS “ENTRUSTABLES” \*\*\***

**Transition to Disciple**

**PGY4 Blocks 1 & 2**

**July 1-August 25, 2019**

**Total EPA Completion during TTD: 10**

**~ 1.25 EPA per week, per learner**

**TD1 – Assessing, triaging, and initiating management for patients with GI emergencies**

*Collect 4 observations – at least 3 different presentations and at least 1 patient requiring endoscopy*

* Work within personal limitations, asking for assistance as needed
* Determine the acuity of the issue and establish priorities for patient care
* Perform a history and physical exam relevant to the patient’s presentation, in a time-effective manner
* Develop a differential and provisional diagnosis relevant to the patient’s presentation
* Develop and implement initial management plans for gastrointestinal emergencies
* Determine the need and timing of referral to another health care professional
* Identify patients requiring handover to other physicians or health care professionals

**TTD2A – Performing the pre-procedural assessment and risk optimization for patients undergoing endoscopy**

*Collect 2 observations – 2 different assessors*

* Apply knowledge of the laws governing capacity for decision making
* Explain the risks and benefits of, and the rationale, for a proposed procedure
* Provide information clearly and compassionately, checking for patient/family understanding
* Use communication skills and strategies that help the patient make an informed decision
* Document the consent discussion in an accurate and complete manner

**TTD2B – Performing the pre-procedural assessment and risk optimization for patients undergoing endoscopy**

*Collect 2 observations – 1 upper endoscopy, 1 lower endoscopy*

* Integrate and synthesize the clinical information to assess clinical status, peri-procedural risk and opportunities for risk mitigation
* Anticipate peri-procedural issues and complications, and incorporate these considerations in the management plan
* Order the preparation for the endoscopic procedure, to optimize procedural outcomes
* Select the appropriate location and sedation for the patient’s procedure
* Document the clinical encounter to adequately convey clinical reasoning, rationale for decisions and/or recommendations
* Communicate effectively with other health care professionals

**Foundations of Discipline**

**PGY4 Blocks 3-8**

**August 26-February 9, 2020**

**Total EPA Completion during FOD: 31**

**~ 1.29 EPA per week, per learner**

**FOD1A – Assessing and initiating management for uncomplicated patients**

*Collect 2 observations – at least 1 observed history, at least 1 observed physical*

* Elicit an accurate, relevant history
* Conduct the interview in a patient-centered manner
* Identify other sources of information (e.g., family, medical record) that may assist in a given patient’s care
* Perform a physical examination that informs the diagnosis
* Develop a differential and provisional diagnosis relevant to the patient’s presentation
* Select and interpret appropriate investigations

**FOD1B - Assessing and initiating management for uncomplicated patients**

*Collect 8 observations – at least 4 different categories, at least 3 assessors*

* Synthesize information from the clinical assessment
* Develop a differential and provisional diagnosis relevant to the patient’s presentation
* Select and interpret appropriate investigations
* Develop and implement management plans
* Communicate effectively with other health care professionals
* Document the clinical encounter to adequately convey clinical reasoning, rationale for decisions and/or recommendations

**FOD2 – Assessing the nutritional status and initiating a nutritional support plan for uncomplicated patients**

*Collect 1 observations of achievement*

* Elicit a diet and nutritional history
* Synthesize patient information to determine a patient’s nutritional status, including macronutrient and micronutrient sufficiency
* Estimate nutritional requirements in an uncomplicated patient
* Develop and implement a plan for nutritional support, by any route; oral, enteral, parenteral
* Work with the patient and family to understand relevant options for care
* Anticipate the risk and recommend interventions to prevent and treat refeeding syndrome
* Facilitate timely patient access to services and resources

**FOD3A – Performing esophagogastroduodenoscopy**

*Collect 6 observations – at least 2 assessors*

* Apply knowledge of anatomy, key landmarks and the endoscopic procedure
* Manipulate endoscope appropriately, achieving stabilization, orientation and direction
* Use appropriate strategies for endoscope advancement
* Achieve clear visualization of the lumen for safe navigation and complete mucosal evaluation
* Perform tissue biopsies, as appropriate
* Monitor patient comfort and safety, and adjust the procedure as needed
* Respond appropriately to input from other health care professionals

**FOD3B – Performing esophagogastroduodenoscopy**

*Collect 2 observations – at least 2 assessors*

* Document the encounter to accurately convey the procedure and outcome
* Document the quality and findings of the endoscopic procedure, using instruments with strong validity evidence as appropriate
* Record high quality images of significant findings
* Complete clinical documentation in a timely manner

**FOD4 – Performing endoscopic examination to the level of the sigmoid colon**

*Collect 5 observations – at least 2 assessors*

* Prepare and position the patient for the procedure
* Assemble and optimize endoscope function
* Manipulate the endoscope shaft, head and angulation control knobs for effective navigation of the GI tract
* Achieve optimal visualization using a variety of appropriate techniques such as air, water and suction
* Use torque steering appropriately
* Demonstrate fine tip control
* Recognize loop formation and use loop reduction techniques appropriately
* Use position change and other techniques, as appropriate, to advance the endoscope safely
* Demonstrate appropriate pace and progress during insertion and withdrawal
* Communicate effectively with nurses and assistants during the procedure
* Monitor patient comfort and safety, and adjust the procedure as needed
* Assess the quality of the bowel preparation using standardized scales
* Work within personal limitations, asking for assistance as needed

**Core of Discipline**

**PGY4 Blocks 9-13**

**PGY5 Blocks 1-11**

**February 10, 2020 – May 2, 2021**

**Total EPA Completion during COD: 107**

**~ 1.67 EPA per week, per learner**

**COD1 – Assessing and initiating management for complex patients**

*Collect 4 observations – at least 1 direct observation, at least 1inpatient, at least 1 outpatient, at least 4 different examples of the case mix, at least 2 assessors*

* Identify barriers to access and care for individual patients
* Integrate the patient’s perspective and context into the collaborative care plan
* Develop and implement management plans that consider all of the patient’s health problems and needs
* Balance risk, effectiveness and priority of interventions in the presence of multiple co-morbidities and/or other features of case complexity
* Share information and explanations that are clear and accurate while checking for understanding
* Implement a plan for ongoing care, follow-up on investigations, response to treatment and/or monitoring for disease progression
* Coordinate treatment and follow up across care settings and amongst other physicians, health care professionals and services

**COD2 – Providing ongoing management for patients with stable, chronic and/or complex conditions**

*Collect 9 observations – at least 2 direct observations, at least 2 assessors, a minimum 1 of each of the following presentations: chronic liver disease, liver transplant recipients, chronic pancreatobiliary disease, inflammatory bowel disease, refractory disease such as GERD, H Pylori, cystic fibrosis, celiac disease/eosinophilic disorders; at least 1 other presentations*

* Prioritize which issues need to be addressed
* Assess treatment adherence, efficacy and/or toxicity
* Select and interpret the results of investigations performed to monitor treatment and clinical status
* Synthesize patient information to determine clinical status and/or response to therapy
* Develop and implement monitoring strategies for anticipated adverse events, illnesses and/or complications
* Incorporate disease prevention, health promotion, and health surveillance activities into patient interactions
* Coordinate treatment and follow-up plans
* Communicate with the patient’s primary health care professional about the patient’s care

**COD3 – Managing patients with exacerbations, disease progression, and/or complications of chronic GI conditions**

*Collect 6 observations – at least 2 in patient, at least 2 outpatient, at least 2 patients with IBD, at least 2 patients with chronic liver disease, at lease on each of the other diagnoses, at least 1 of each issue, at least 2 assessors*

* Prioritize which issues need to be addressed
* Select and interpret the results of investigations performed to monitor treatment and clinical status
* Differentiate signs and symptoms of disease and/or disease progression from adverse effects of treatment
* Synthesize patient information to determine clinical course, response to treatment and/or toxicity, and short and long-term prognosis
* Adjust management plans based on clinical status and/or response to treatment
* Provide information related to the patient’s health status, care and needs clearly and compassionately
* Facilitate timely patient access to services and resources

**COD4A – Identifying and referring patients who need additional specialized care**

*Collect 2 observations – at least 1 elective, 2 different types of referral, at least 2 assessors*

* Synthesize information from the clinical assessment and investigations to determine the patient’s clinical status and health care needs
* Integrate the patient’s other medical problems, overall functioning, and current health status into the decision regarding plan of care
* Establish goals of care
* Develop and implement management plans
* Apply knowledge of local resources for optimal patient care
* Determine the need and timing of referral to another health care professional
* Provide information related to the patient’s health status, care and needs clearly and compassionately
* Facilitate timely patient access to services and resources

**COD4B – Identifying and referring patients who need additional specialized care**

*Collect 2 observations – at least 1 urgent referral*

* Formulate clear and appropriate requests for consultation
* Summarize the patient’s issues for the consultant
* Communicate with other health professionals clearly and respectfully
* Organize the handover of care to the most appropriate physician
* Coordinate care when multiple physicians and health care professionals are involved
* Work effectively with other physicians and health care professionals to provide integrated care

**COD5 – Providing complete nutritional assessment and plans for patients with complex nutritional needs**

*Collect 2 observations – at least 1 physician, at least 1 requiring nutritional intervention*

* Estimate nutritional requirements in a complex patient
* Develop and implement a plan for nutritional support by any route; oral, enteral, parenteral
* Consider costs when choosing care options
* Work with the patient and family to understand relevant options for care
* Develop and implement a plan for monitoring and follow-up
* Identify and manage complications of nutritional support (medical, and device and access related)
* Work effectively within an interprofessional team

**COD6 – Performing colonoscopy**

*Collect 7 observations – at least 4 high difficulty, at least 4 assessors, at least 2 assessors for high difficulty*

* Prepare and position the patient for the procedure
* Manipulate the endoscope shaft, head and angulation control knobs for effective navigation of the GI tract
* Achieve optimal visualization using a variety of appropriate techniques such as air, water and suction
* Use torque steering appropriately
* Demonstrate fine tip control
* Recognize loop formation and use loop reduction techniques appropriately
* Use position change and other techniques, as appropriate, to advance the endoscope safely
* Demonstrate appropriate pace and progress during insertion and withdrawal
* Communicate effectively with nurses and assistants during the procedure
* Monitor patient comfort and safety, and adjust the procedure as needed
* Work within personal limitations, asking for assistance as needed

**COD7 – Identifying clinically significant findings during endoscopic procedures of the upper and lower gastrointestinal tract**

*Collect 6 observations – at least 3 at each location (esophagus, stomach, small bowel, colon), at least 3 assessors*

* Identify clinically significant findings during endoscopic procedures
* Interpret the clinical significance of findings of endoscopic procedures
* Integrate endoscopic findings to develop a provisional diagnosis and management plan
* Determine the most appropriate interventions for the purposes of ongoing assessment and/or management
* Propose and implement plans for ongoing care and/or follow-up on investigations

**COD8A – Performing therapeutic endoscopic interventions of the upper and lower gastrointestinal tract**

*Collect 14 observations – at least 1 variceal hemostasis, at least 6 non-variceal hemostasis, at least 1 dilations, at least 5 polypectomy, at least 1 foreign body, at least 4 actively bleeding, at least 5 polypectomy >1 cm, at least 5 of medium or high complexity, at least 2 assessors*

* Preserve tissue vitality when handling tissue and instruments
* Demonstrate appropriate and safe use of ancillary equipment (e.g., electrocautery, endoscopic injection therapies, endoscopic clips, hemospray, APC, rubber band ligation, balloon tamponade tubes)
* Monitor patient comfort and safety, and adjust the procedure as needed
* Identify and react to immediate complications of the procedure, if applicable
* Work within personal limitations, asking for assistance as needed
* Maintain professional clinical performance in demanding or stressful clinical settings

**COD8B – Performing therapeutic endoscopic interventions of the upper and lower gastrointestinal tract**

*Collect 2 observations*

* Complete clinical documentation in a timely manner
* Document the encounter to accurately convey the procedure and outcome
* Document the quality and findings of the endoscopic procedure, using instruments with strong validity evidence as appropriate
* Document all relevant findings

**COD9 – Providing care for patients who have experienced a patient safety incident**

*Collect 1 observations – at least 1 in a clinical setting*

* Identify a patient safety incident in a timely manner
* Mitigate further injury from adverse events, as appropriate
* Communicate the reasons for unanticipated clinical outcomes and disclose patient safety incidents
* Answer questions from the patient and family about next steps
* Document harmful patient safety incidents as per institutional processes
* Identify potential improvement opportunities arising from harmful safety incidents and near misses
* Plan and document follow-up to a harmful patient safety incident

**COD10A – Leading the provision of GI care for patients on an inpatient service**

*Collect 6 observations – at least 4 different assessors, a mix of acute and chronic diseases, a variety of medical diagnoses*

* Perform relevant and time-effective clinical assessments
* Establish patient centered management plans
* Determine the most appropriate procedures or therapies for the purpose of assessment and/or management
* Integrate best evidence and clinical expertise into decision-making
* Coordinate care when multiple physicians and health care professionals are involved
* Allocate health care resources for optimal patient care

**COD10B – Leading the provision of GI care for patients on an inpatient service**

*Collect feedback from at least 3 observers – at least 2 other health care professionals*

* Demonstrate responsibility and accountability for decisions regarding patient care, acting in the role of junior attending
* Make effective use of the scope and expertise of other health care professionals
* Delegate tasks and responsibilities in an appropriate and respectful manner
* Communicate effectively other health care professionals
* Show respect toward collaborators
* Demonstrate professional behaviors, such as punctuality, integrity and compassion
* Run the service efficiently, safely, and effectively

**Transition to Practice**

**PGY5 Blocks 12&13**

**May 3-June 30, 2021**

**Total EPA Completion during TTP: 5**

**~ 0.55 EPA per week, per learner**

**TTP1 – Managing the days list of endoscopy procedures**

*Collect at least 5 observations – at least 3 assessors, at least 1 list of medium or high complexity*

* Run the service efficiently, safely, and effectively
* Perform endoscopic procedures in a skillful and safe manner, adapting to unanticipated findings or changing clinical circumstances
* Adhere to occupational safety procedures to ensure patient, personal and team safety
* Identify clinically significant findings of endoscopic procedures
* Propose and implement plans for ongoing care, follow-up on investigations, and further treatment or referral
* Demonstrate leadership skills in the endoscopy suite
* Manage time effectively to maintain patient and endoscopy flow