Internal Medicine: Foundations EPA #6 Discussing and establishing patients' goals of care

Madrazo L, Cruz JD, Correa N, Puka K, Kane S-L. Evaluating the quality of written feedback within entrustable professional activities in an internal medicine cohort. J Grad Med Educ. 2023;15(1):74-80. DOI:http://dx.doi.org/10.4300/JGME-D-22-00222.1

Key Features:

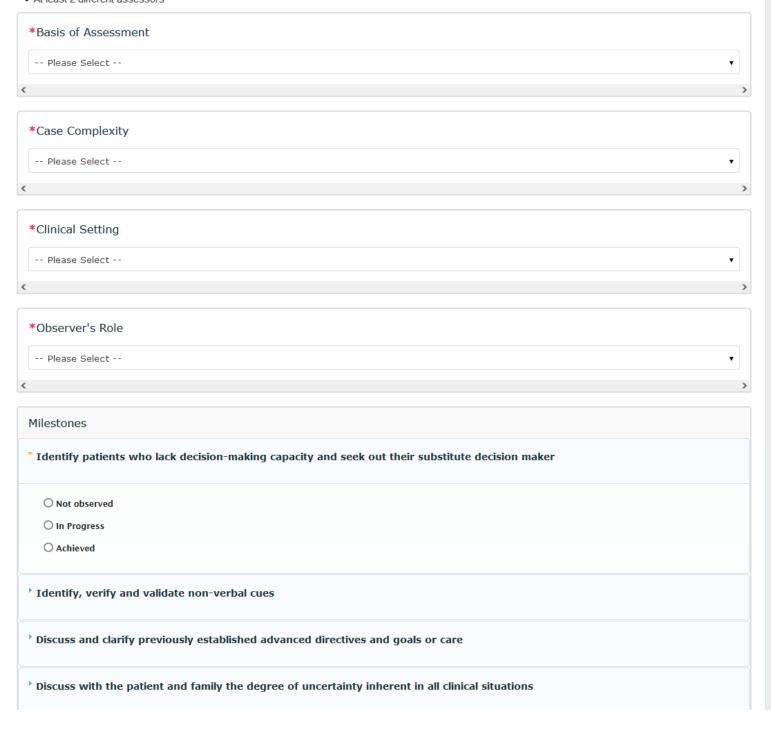
- This EPA focuses on the documentation of a patient's previous advanced directives and/or goals of care, and not those discussions that are directed at changes in goals of care (that is an EPA of the Core stage).
- This EPA includes discussing goals of care with a substitute decision-maker.
- . This EPA may be observed in the clinical setting or in simulation (e.g. OSCE).

Assessment Plan:

Direct and/or indirect observation by supervisor

Collect at least 3 observations of achievement

- . 1 from each category
- · Not more than 1 in simulation setting
- · At least 1 involves a substitute decision-maker
- · At least 2 observations by staff
- At least 2 different assessors



| Document information about patients and their medical conditions in a manner than enhances intra- and interprofessional care |
|--|
| Adhere to institutional policies and procedures relevant to advance directives and goals of care |
| Optimize the physical environment for patient comfort, privacy, engagement and safety |
| *Based on this observation of resident performance overall: |
| O I had to do |
| O I had to talk them through |
| O I had to direct them from time to time |
| O I needed to be available just in case |
| O I did not need to be there |
| Comments (mandatory) |
| Please select a response before adding a comment. |
| fi. |
| |
| Next Steps |
| next steps |
| |
| |
| · · · · · · · · · · · · · · · · · · · |
| Concerns |
| • Do you have patient safety concerns related to this resident's performance? |
| No |
| |
| ● No |
| ○ Yes |
| Do you have professionalism concerns about this resident's performance? |
| No . |
| • Are there other reasons to flag this assessment? |
| |
| No |
| *Have feedback about this form? (eg, "Missing Dx", etc.) |
| No |
| |
| O Yes |
| |
| |

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Entrustable Professional Activities Analyzed

Transition to Discipline

| D1 | Performing histories and physical exams, documenting and presenting findings, across |
|----|--|
| | clinical settings for initial and subsequent care |
| D2 | Identifying and assessing unstable patients, providing initial management, and obtaining |
| | help |
| D3 | Performing the basic procedures of Internal Medicine |

Foundations of Discipline

| F1 | Assessing, diagnosing, and initiating management for patients with common acute medical |
|----|--|
| | presentations in acute care settings |
| F2 | Managing patients admitted to acute care settings with common medical problems and |
| | advancing their care plans |
| F3 | Consulting specialists and other health professionals, synthesizing recommendations, and |
| | integrating these into the care plan |
| F4 | Formulating, communicating, and implementing discharge plans for patients with common |
| | medical conditions from acute care settings |
| F5 | Assessing unstable patients, providing targeted treatment and consulting as needed |
| F6 | Discussing and establishing patient's coals of care |
| F7 | Identifying personal learning needs while caring for patients and addressing those needs |

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