Obstetrics & Gynecology: Core EPA #18

Managing patients with surgical complications

Key Features:
- This EPA includes recognizing, investigating, and managing patients with intraoperative and postoperative complications.
- This EPA may be observed in simulation

Assessment Plan:

Direct observation by OBGYN faculty, subspecialty trainee, or supervising surgeons in other disciplines

Use Form 1. Form collects information on:
- Complication: bowel obstruction; bowel injury; infection; perioperative bleeding; genitourinary complication; thromboembolic disease; wound complication; nerve injury; uterine perforation; vascular injury; other
- If ‘other’ indicate complication:[free text]

Collect 5 observations of achievement
- At least 3 different complications
- At least 3 faculty observers
- At least 3 different observers

Relevant Milestones:

1. ME 1.4 Apply a broad base and depth of knowledge in clinical and biomedical sciences to manage surgical complications
2. ME 1.5 Perform clinical assessments that address all relevant issues
3. ME 1.7 Adapt care as the complexity, uncertainty, and ambiguity of the patient’s clinical situation evolves
4. ME 1.7 Seek assistance in situations that are complex, novel, or involve uncertainty
5. ME 2.4 Develop and implement patient-centred management plans that consider all of the patient’s health problems and context
6. ME 5.1 Recognize and respond to harm from health care delivery, including patient safety incidents
7. ME 5.2 Use cognitive aids such as procedural checklists, structured communication tools, or care paths, to enhance patient safety
8. COM 3.1 Convey information related to the patient’s health status, care, and needs in a timely, honest, and transparent manner
9. COM 3.2 Communicate the reasons for unanticipated clinical outcomes to patients and disclose patient safety incidents
10. COM 5.1 Adapt record keeping to the clinical context
11. COL 1.2 Consult as needed with other health care professionals, including other physicians
| 12 | **COL 3.2** Organize the handover of care to the most appropriate physician or health care professional |
| 13 | **L 1.2** Model a just culture to promote openness and increased reporting |
| 14 | **L 1.4** Use data on measures of clinical performance during team discussions and to support team decision-making |
| 15 | **S 1.2** Seek and interpret multiple sources of performance data and feedback, with guidance, to continually improve performance |
| 16 | **L 1.1** Analyze and provide feedback on processes seen in one’s own practice, team, organization, or system |
| 17 | **P 4.1** Integrate skills that support adaptation and recovery in challenging situations |