EPA 10: Recognize a Patient Requiring Urgent or Emergent Care and Initiate Evaluation and Management

- Chest pain
- Mental status change
- Shortness of breath and hypoxemia
- Fever
- Hypotension or hypertension
- Tachycardia or arrhythmia
- Oliguria, anuria, or urinary retention
- Electrolyte abnormalities
- Hypoglycemia or hyperglycemia

An EPA: A unit of observable, measurable professional practice requiring integration of competencies

EPA 10

Recognize urgent or emergent situation

Underlying entrustability for all EPAs are trustworthy habits, including truthfulness, conscientiousness, and discernment.

This schematic depicts development of proficiency in the Core EPAs. It is _not_ intended for use as an assessment instrument. Entrustment decisions should be made after EPAs have been observed in multiple settings with varying context, acuity, and complexity and with varying patient characteristics.

Key Functions with Related Competencies	Behaviors Requiring Corrective Response	→ Developing Behaviors → (Learner may be at different levels within a row.)		Expected Behaviors for an Entrustable Learner
Recognize normal and abnormal vital signs as they relate to patient- and disease-specific factors as potential etiologies of a patient's decompensation PC2 PC4 PC5	Fails to recognize trends or variations of vital signs in a decompensating patient	Demonstrates limited ability to gather, filter, prioritize, and connect pieces of information to form a patient-specific differential diagnosis in an urgent or emergent setting	Recognizes outliers or unexpected results or data and seeks out an explanation	Recognizes variations of patient's vital signs based on patient- and disease-specific factors Gathers, filters, and prioritizes information related to a patient's decompensation in an urgent or emergent setting
Recognize severity of a patient's illness and indications for escalating care and initiate interventions and management PC4 PC3 PC2 PC5 PC6 PPD1	Does not recognize change in patient's clinical status or seek help when a patient requires urgent or emergent care	Misses abnormalities in patient's clinical status or does not anticipate next steps May be distracted by multiple problems or have difficulty prioritizing Accepts help	Recognizes concerning clinical symptoms or unexpected results or data Asks for help	Responds to early clinical deterioration and seeks timely help Prioritizes patients who need immediate care and initiates critical interventions
Initiate and participate in a code response and apply basic and advanced life support PC1 PPD1 SBP2 IPC4	Responds to a decompensated patient in a manner that detracts from or harms team's ability to intervene	Requires prompting to perform basic procedural or life support skills correctly Does not engage with other team members	Demonstrates appropriate airway and basic life support (BLS) skills Initiates basic management plans Seeks input or guidance from other members of the health care team	Initiates and applies effective airway management, BLS, and advanced cardiovascular life support (ACLS) skills Monitors response to initial interventions and adjusts plan accordingly Adheres to institutional procedures and protocols for escalation of patient care Uses the health care team members according to their roles and responsibilities to increase task efficiency in an emergent patient condition
Upon recognition of a patient's deterioration, communicate situation, clarify patient's goals of care, and update family members ICS2 ICS6 PPD1	Dismisses concerns of team members (nurses, family members, etc.) about patient deterioration Disregards patient's goals of care or code status	Communicates in a unidirectional manner with family and health care team Provides superfluous or incomplete information to health care team members Does not consider patient's wishes if they differ from those of the provider	Tailors communication and message to the audience, purpose, and context in most situations Actively listens and encourages idea sharing from the team (including patient and family) Confirms goals of care	Communicates bidirectionally with the health care team and family about goals of care and treatment plan while keeping them up to date Actively listens to and elicits feedback from team members (e.g., patient, nurses, family members) regarding concerns about patient deterioration to determine next steps