



EPA 12: Perform General Procedures of a Physician

- Basic cardiopulmonary resuscitation (CPR)
- Bag-mask ventilation (BMC)
- Sterile technique
- Venipuncture
- Insertion of an intravenous line
- Placement of a Foley catheter

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

EPA 12

Perform general procedures of a physician

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

Demonstrate technical skills required for the procedure

PC₁

Understand and explain the anatomy. physiology, indications. contraindications, risks,

benefits, alternatives, and potential complications of the procedure

PC1

Communicate with the patient and family to ensure they understand pre- and postprocedural activities

PC7 ICS6 P6

Demonstrate confidence that puts patients and families at ease

PPD7 PPD1

Behaviors Requiring Corrective Response

Lacks required technical skills

Fails to follow sterile technique when indicated

Displays lack of awareness of knowledge gaps

Uses inaccurate language or presents information distorted

by personal biases

Disregards patient's and family's wishes

Fails to obtain appropriate consent before performing a procedure

Displays overconfidence and

takes actions that could endanger patients or providers

→ Developing Behaviors → (Learner may be at different levels within a row.)

Technical skills are variably applied

Completes the procedure unreliably

Uses universal precautions and aseptic technique inconsistently

Does not understand key issues in performing procedures, such as indications, contraindications. risks, benefits, and

Demonstrates limited knowledge of procedural complications or how to minimize them

alternatives

Uses jargon or other ineffective communication techniques

Does not read emotional response from the patient

Does not engage patient in shared decision making

Displays a lack of confidence that increases patient's stress or discomfort, or overconfidence that erodes patient's trust if the learner struggles to perform the

Accepts help when offered

procedure

Approaches procedures as mechanical tasks to be performed and often initiated at the request of others

Struggles to adapt approach when indicated

Describes most of these key

issues in performing

common procedural

to mitigate them

family's wishes

Asks for help with

complications

procedures: indications,

contraindications, risks.

benefits, and alternatives

Demonstrates knowledge of

complications but struggles

and elicit patient's and

When focused on the task

during the procedure, may

struggle to read emotional

response from the patient

Correctly performs procedure on multiple occasions over time

preparation for performance of

Demonstrates necessary

procedures

Expected Behaviors

for an Entrustable

Learner

Uses universal precautions and aseptic technique consistently

Demonstrates and applies working knowledge of essential anatomy, physiology, indications, contraindications, risks, benefits. and alternatives for each procedure

Knows and takes steps to mitigate complications of procedures

Conversations are respectful Demonstrates patient-centered and generally free of jargon skills while performing procedures (avoids jargon.

participates in shared decision making, considers patient's emotional response)

Having accounted for the patient's and family's wishes, obtains appropriate informed

Seeks timely help

Has confidence commensurate with level of knowledge and skill that puts patients and families at