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EPA 1: Clinical Assessment

Note: This form has been altered to better support paper-based trialling of EPA assessments in 2023 and 2024. This form will be translated into an online version prior to implementation of an e-portfolio. Most of the details in the form will be prepopulated in the e-portfolio or entered by the prevocational doctor.

The purpose of this form is to provide feedback to the prevocational doctor on their performance of an EPA to support their learning and to support assessment review panel decisions about satisfactory completion of PGY1 (the point of general registration) or PGY2. EPAs assessed throughout PGY1 and PGY2 should represent a breadth of experience and a range of task complexities. There is an expectation that there is an increase in the level of complexity of cases across the year and two-year program.

Prevocational doctor name			
Term name			
Term start date		Term end date	
PGY	Term	____ of ____	Week of term
Date of assessment			
Supervisor name			
Assessor name			
Assessor			

- Specialist or equivalent (term supervisor)
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Prevocational doctor to complete this section

Description

This activity requires the ability to, where appropriate or possible complete some or all of the following list. The prevocational doctor is to tick the task descriptions that are relevant to this assessment:

- 1. if clinical assessment has been requested by a team member, clarify the concern(s) with them
- 2. identify pertinent information in the patient record
- 3. obtain consent from the patient
- 4. obtain a history
- 5. examine the patient
- 6. consider and integrate information from the patient record, clinical assessments, and relevant ward protocols/ guidelines/ literature
- 7. develop provisional and differential diagnoses and/or problem lists
- 8. produce a management plan, confirm with senior colleague as appropriate, and communicate with relevant team members and the patient
- 9. implement management plan, initiate or perform appropriate investigations and procedures, and document assessment and next steps, including indications for follow up

See Section 2B of Training and assessment ±Training and assessment requirements for prevocational (PGY1 and PGY2) training programs for descriptions of behaviours that demonstrate entrustability to the supervisor.

Case details

Brief description of issues of case:
[e.g. age, gender, diagnosis etc.]

Self-assessment

Self-reflection on performance of the task:
[how do you feel you went?, what went well and why?, what could you have done better and how?]

Based on this case, what will you do to develop your learning further?

Outcome statements (this section of the form will be functional at implementation of an e-portfolio)

[Will prepopulate what outcome statements this assessment will map to, based on what aspects of the task description have been ticked in the above section]

Assessor to complete this section

EPA 2: Recognition and care of the acutely unwell patient

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The purpose of this form is to provide feedback to the prevocational doctor on their performance of an EPA to support their learning and to support assessment review panel decisions about satisfactory completion of PGY1 (the point of general registration) or PGY2. EPAs assessed throughout PGY1 and PGY2 should represent a breadth of experience and a range of task complexities.

Prevocational doctor name			
Term name			
Term start date		Term end date	
PGY	Term	___ of ___	Week of term
Date of assessment			

Supervisor name	
Assessor name	
Assessor	<ul style="list-style-type: none"> • Specialist or equivalent (term supervisor) • Specialist or equivalent (other) • Registrar • Nurse/ nurse practitioner • Pharmacist • Other
Consultation with/ input from	<ul style="list-style-type: none"> • Specialist or equivalent (term supervisor) • Specialist or equivalent (other) • Registrar • Nurse/ nurse practitioner • Allied health • Pharmacist • Patient • PGY1/2 peer • Other

Title

Recognise, assess, escalate appropriately, and provide immediate management to deteriorating and acutely unwell patients. (This EPA recognises that PGY1/2 doctors often called after hours to assess patients whose situation has acutely changed)

Focus and context

This EPA applies in any clinical context but the critical aspects that differentiate it from EPA 1 are for the PGY1/PGY2 doctor to:

1. Recognise the acutely unwell and or deteriorating patient (including acute deterioration in mental health).
2. Act immediately, demonstrating a timely approach to management
3. Escalate appropriately

Perform this activity in multiple settings, including inpatient and ambulatory (or community) care settings or in emergency departments, in and after hours, and in the care of different populations for example children, adults and elderly.

Prevocational doctor to complete this section

Description

This activity requires the ability to, where appropriate or possible complete some or all of the following list. The prevocational doctor is to tick the task descriptions that are relevant to this assessment:

- [REDACTED]

EPA 3: Prescribing

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The purpose of this form is to provide feedback to the prevocational doctor on their performance of an EPA to support their learning and to support assessment review panel decisions about satisfactory completion of PGY1 (the point of general registration) or PGY2. EPAs assessed throughout PGY1 and PGY2 should represent a breadth of experience and a range of task complexities.

Prevocational doctor name			
Term name			
Term start date		Term end date	
PGY	Term	_____ of _____	Week of term
Date of assessment			
Supervisor name			
Assessor name			
Assessor	<ul style="list-style-type: none"> Specialist or equivalent (term supervisor) Specialist or equivalent (other) Registrar 		<ul style="list-style-type: none"> Nurse/ nurse practitioner Pharmacist Other
Consultation with/ input from	<ul style="list-style-type: none"> Specialist or equivalent (term supervisor) Specialist or equivalent (other) Registrar Nurse/ nurse practitioner Allied health 		<ul style="list-style-type: none"> Pharmacist Patient PGY1/2 peer Other

Title
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Focus and context

This EPA applies in any clinical context but the critical aspects are to:

1. Prescribe autonomously when appropriate, taking account of registration, health service policies, and individual confidence and experience with that drug or product
2. Prescribe as directed by a senior team member, taking responsibility for completion of the order to ensure it is both accurate and appropriate in the context of the patient

Perform this activity in multiple settings, including inpatient and ambulatory (or community) care settings or in emergency departments and in the care of different populations for example children, adults and elderly.

Prevocational doctor to complete this section

Description

This activity requires the ability to, where appropriate or possible complete some or all of the following list. The prevocational doctor is to tick the task descriptions that are relevant to this assessment:

- 1. obtain and interpret medication histories
- 2. respond to requests from team members to prescribe medications
- 3. consider whether a prescription is appropriate
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EPA 4: Team Communication ± documentation, handover and referrals

Note: This form has been altered to better support paper-based trialling of EPA assessments in 2023 and 2024. This form will be translated into an

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Prevocational doctor to complete this section

Description

Assessor to complete this section

Case details	Patient type: <ul style="list-style-type: none">• Child• Adult	Brief description: [e.g., age, gender, diagnosis etc.]
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•	The patient(s) is known to me and I have directly observed some part of the clinical interaction or have spoken to a team member that has
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Complexity of the case(s)	<ul style="list-style-type: none">• Low• Medium• High
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