Obstetrics & Gynecology: Foundations EPA #1

Providing routine prenatal care to a low-risk, healthy population

Key Features:
- This EPA includes assessing and counselling women experiencing a low-risk pregnancy and managing routine prenatal care.
- This EPA must be observed in a clinical setting, and may be observed in obstetric clinics or the antenatal ward.

Assessment Plan:

Direct observation or case discussion, and review of a consult letter/antenatal form by OBGYN faculty, family physician, midwife, nurse, genetic counsellor, or Core or TTP trainee

Use Form 1. Form collects information on:
- Visit: initial visit; follow up visit
- Patient: pre-conception; first trimester; second trimester; third trimester; term; postdate
- Discussion topic: [free text]

Collect 5 observations of achievement
- At least 1 initial visit assessment
- At least 1 second trimester patient
- At least 1 third trimester patient
- At least 1 discussion regarding common prenatal issues (e.g., postdate, vaginal birth after cesarean section [VBAC], or breech presentation)
- At least 3 observations by faculty
- At least 3 different observers

Relevant Milestones:

1 ME 2.2 Perform a patient assessment including history and physical exam
2 ME 2.2 Focus the clinical encounter, performing it in a time-effective manner, without excluding key elements
3 ME 2.2 Select appropriate investigations and interpret the results
4 ME 2.3 Address the patient’s ideas, fears, and concerns about pregnancy and her prenatal care
5 ME 2.4 Ensure that the patient and family are informed about the risks and benefits of each screening and treatment option in the context of best evidence and guidelines
6 ME 4.1 Establish plans for ongoing care for the patient, taking into consideration her clinical state, circumstances, preferences, and actions, as well as available resources, best practices, and research evidence
7 COM 3.1 Communicate the plan of care clearly and accurately to patients and their families
8 COM 5.1 Document clinical encounters to adequately convey findings, clinical reasoning and the rationale for decisions
9 COL 1.2 Consult as needed with other health care professionals, including other physicians
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<th>L 2.2 Apply evidence and guidelines with respect to resource utilization in common clinical scenarios</th>
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<tr>
<td>11</td>
<td>HA 1.1 Facilitate timely patient access to services and resources</td>
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<td>12</td>
<td>HA 1.2 Work with patients to increase opportunities to adopt healthy behaviours</td>
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