

Entrustable Professional Activities for Adult Endocrinology and Metabolism

2025
VERSION 1.0

This document applies to those who begin training on or after July 1, 2025.

This document is to be used in conjunction with the *Entrustable Professional Activity User Guide*, which is available on the Royal College's website.

Endocrinology and Metabolism: Transition to Discipline EPA #1 A

Assessing patients with a known endocrine condition

Key Features:

- This EPA focuses on the application of Internal Medicine competencies related to clinical assessment and management to the care of patients with a previously diagnosed endocrine condition.
- This includes taking an organized history, performing a targeted physical examination, and synthesizing findings to formulate an assessment of the patient.
- This EPA may be observed in any setting.

Assessment Plan:

Direct observation and/or case review by supervisor or Core or TTP resident

Use Form 1

Collect 4 observations of achievement

- At least 2 different observers

CanMEDS Milestones:

- 1 COM 1.2 Optimize the physical environment for patient comfort, dignity, privacy, engagement, and safety**
- 2 ME 2.2 Gather a relevant clinical history**
- 3 COM 2.1 Conduct the interview in a patient-centred manner**

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*ENTRUSTABLE PROFESSIONAL ACTIVITIES FOR
ADULT ENDOCRINOLOGY AND METABOLISM (2025)*

- 4 ME 2.2 Perform a physical exam relevant to the presentation**
- 5 COM 2.3 Identify other sources of information (e.g., family, medical record) that may assist in the patient's care**
- 6 ME 2.2 Synthesize patient information from the clinical assessment for the purpose of written or oral summary to a supervisor**
- 7 P 1.1 Behave in a professional manner**

Endocrinology and Metabolism: Foundations EPA #1 A

Assessing and managing individuals with an uncomplicated presentation of an endocrine condition

Key Features:

- This EPA includes all aspects of a consultation: gathering information from the history, physical exam and other sources, and developing a management plan which may include treatment as well as further investigation.
- This EPA may be observed in any care setting (e.g., clinic, hospital).
- At this stage, this EPA includes individuals whose presentation is typical or common and is not further complicated by multiple medical comorbidities or management challenges, including those due to social determinants of health and geographic and/or cultural complexities.

Assessment Plan:

Direct and/or indirect observation by supervisor, clinical fellow, or TTP resident

Use Form 1. Form collects information on:

- Observation (select all that apply): direct; indirect
- Presentation (write in):

Collect 4 observations of achievement

- At least 1 direct observation
- A variety of presentations
- No more than 2 presentations of diabetes

CanMEDS Milestones:

- 1 ME 2.2 Elicit a history and perform a relevant physical exam**
- 2 ME 2.2 Select and/or interpret investigations**
- 3 ME 2.2 Develop a differential and most probable diagnosis**
- 4 ME 2.2 Integrate the clinical data to establish the diagnosis and, if relevant, stage and/or severity of the condition**
- 5 ME 2.4 Develop and implement a management plan**
- 6 COM 3.1 Communicate the diagnosis and plan to the patient and/or family**

Endocrinology and Metabolism: Foundations EPA #2 A

Providing ongoing care for individuals with an uncomplicated presentation of an endocrine condition

Key Features:

- This EPA includes clinical reassessment, further investigation and/or modification of treatment, screening or monitoring for adverse effects or complications of the condition or its treatment, and making decisions about discharge and/or timing of ongoing follow-up.

Assessment Plan:

Direct and/or indirect observation by supervisor, clinical fellow, or TTP resident

Use Form 1. Form collects information on:

- Presentation (write in):

Collect 4 observations of achievement

- At least 1 presentation of diabetes
- At least 3 different presentations other than diabetes
- At least 2 different observers

CanMEDS Milestones:

- 1 ME 1.4 Perform a clinical assessment that addresses all relevant issues**
- 2 ME 2.2 Assess adherence to, response to, and adverse effects of therapy as well as complications of the underlying disorder**
- 3 ME 2.2 Interpret the results of investigations performed to monitor the condition and/or treatment**
- 4 ME 2.2 Determine if there is a need to adapt the management plan based on response to therapy and/or disease progression**
- 5 ME 4.1 Determine the frequency and timing of future investigations and visits**
- 6 COL 3.1 Determine if care should be transferred back to a primary care provider**

*ENTRUSTABLE PROFESSIONAL ACTIVITIES FOR
ADULT ENDOCRINOLOGY AND METABOLISM (2025)*

- 7 HA 1.2 Work with the patient/family to increase their understanding of the condition and associated comorbidities, supporting their active role in disease management**
- 8 COM 5.1 Document the encounter to convey the clinical assessment and the rationale for decisions and/or recommendations**

Endocrinology and Metabolism: Foundations EPA #3 A

Performing endocrine focused physical examinations

Key Features:

- The focus of this EPA is the integration of the knowledge of endocrine anatomy and physiology and the pathophysiology and complications of endocrine diseases with physical examination skills to identify and recognize the significance of clinical findings.
- This EPA includes the assessment of one or more endocrine systems or diseases (e.g., pituitary, thyroid, diabetes, pubertal staging, etc.), as well as attention to patient comfort and privacy/draping during the physical exam.
- The observation of this EPA requires the supervisor to directly observe the performance of the physical examination of a patient not previously known to the resident.

Assessment Plan:

Direct observation by supervisor

Use Form 1. Form collects information on:

- Exam type (select all that apply): adrenal; diabetes foot exam; genital/breast; metabolic disease; osteoporosis exam; pituitary; pubertal staging; thyroid

Collect 4 observations of achievement

- At least 4 different exam types
- At least 1 genital/breast exam or pubertal staging
- At least 2 different observers

CanMEDS Milestones:

- 1 COM 1.2 Optimize the physical environment for patient comfort, dignity, privacy, engagement, and safety**
- 2 ME 2.2 Demonstrate an organized approach to the physical examination**
- 3 ME 2.2 Focus the clinical encounter, performing it in a time-effective manner, without excluding key elements**
- 4 ME 2.2 Interpret the findings of the physical exam in the context of the patient's presentation**
- 5 P 1.1 Behave in a professional manner**

Endocrinology and Metabolism: Foundations EPA #4 A

Counselling patients and families for the purposes of patient education, disease prevention, and/or health promotion

Key Features:

- This EPA focuses on sharing information and engaging the patient and/or family in their care.
- It includes being sensitive to patient specific factors (age, gender, religion, culture, preferences, etc.), applying a patient/family centred approach, using plain language, providing clear explanations, engaging in shared decision-making, respecting patient autonomy, and assessing the patient's/family's understanding of the discussion.
- Examples of scenarios relevant to this EPA include disclosing a diagnosis, teaching the patient and/or family about their condition, its management, and/or preventive measures, discussing pharmacologic and non-pharmacologic therapies, and discharge planning.

Assessment Plan:

Direct observation by supervisor, which may include input from other health care professionals or the patient/family

Use Form 1. Form collects information on:

- Topic: disease/treatment education; disease prevention/health promotion

Collect 3 observations of achievement

- At least 1 of each topic
- At least 2 different observers

CanMEDS Milestones:

- 1 COM 1.1 Establish rapport with the patient and/or family**
- 2 COM 1.1 Engage the patient in the discussion as appropriate for their health literacy**
- 3 COM 3.1 Provide accurate information about the medical condition and management plan**
- 4 COM 3.1 Use plain language and avoid medical jargon**
- 5 COM 4.3 Solicit and answer questions from the patient and/or family**
- 6 COM 3.1 Verify and validate the understanding of the patient and/or family**
- 7 COM 4.1 Communicate in a manner that is respectful, non-judgmental and culturally aware**

*ENTRUSTABLE PROFESSIONAL ACTIVITIES FOR
ADULT ENDOCRINOLOGY AND METABOLISM (2025)*

- 8 HA 1.2 Work with the patient and/or family to increase their understanding of their illness and health care needs**
- 9 HA 1.2 Provide the patient and/or family with education resources**
- 10 P 1.1 Demonstrate respect for patient autonomy**

Endocrinology and Metabolism: Core EPA #1 A

Managing patients presenting with an emergency related to an endocrine condition or its treatment

Key Features:

- This EPA focuses on timely assessment and management, including consulting with or referring to other services for definitive management of the problem.
- Examples of emergent/urgent presentations include diabetic ketoacidosis/HHS, severe hyper/hypocalcemia, thyroid storm/severe hyperthyroidism, myxedema coma, adrenal crisis, and diabetes insipidus.
- This EPA may be observed in simulation or in case discussion.

Assessment Plan:

Direct and/or indirect observation by supervisor or clinical fellow

Use Form 1. Form collects information on:

- Presentation: DKA/HHS; other (write in)

Collect 4 observations of achievement

- No more than 1 DKA or HHS
- At least 1 observation by supervisor

CanMEDS Milestones:

- 1 ME 2.1 Determine the acuity of the issue and the priorities for patient care**
- 2 ME 1.4 Perform a clinical assessment that addresses all relevant issues**
- 3 ME 2.2 Select and/or interpret investigations**
- 4 ME 2.2 Integrate the clinical data to establish the diagnosis**
- 5 ME 2.4 Determine the setting of care appropriate for the patient's health needs**
- 6 ME 2.4 Develop a management plan**
- 7 COL 1.2 Consult as needed with other health care professionals, including other physicians**
- 8 COL 1.2 Work effectively with members of the interprofessional team to implement a management plan**

9 COM 5.1 Document the encounter to convey the clinical assessment and the rationale for decisions and/or recommendations

10 P 4.1 Maintain professionalism while managing stressful situations

Endocrinology and Metabolism: Core EPA #2 A

Assessing and managing patients with complex and/or atypical presentations

Key Features:

- This EPA includes all aspects of a consultation: gathering information from the history, physical exam, and other sources, working effectively with other members of the interprofessional team (as well as with the referring service if relevant), and developing a management plan which may include treatment as well as further investigation.
- This may require scholarly review of treatment options and/or multidisciplinary collaboration or consultation with external experts.
- This EPA may be observed in any care setting (e.g., clinic, hospital, emergency department), including virtual care.
- At this stage, this EPA includes the full range of endocrine conditions and presentations that are complex or atypical due to patient factors (e.g., pregnancy, other medical conditions, peri-operative timing) or complicated by management challenges, including those due to social determinants of health and geographic and/or cultural variability.

Assessment Plan:

Direct and/or indirect observation by supervisor

Use Form 1. Form collects information on:

- Presentation (write in):

Collect 4 observations of achievement

- At least 3 different presentations
- At least 2 different observers

CanMEDS Milestones:

- 1 ME 1.4 Perform a clinical assessment that addresses all relevant issues**
- 2 ME 2.2 Integrate the clinical data to establish the diagnosis and, if relevant, stage and/or severity of the condition**
- 3 S 3.4 Integrate best evidence and clinical expertise into decision-making**
- 4 ME 2.4 Develop and implement a management plan**
- 5 ME 2.2 Identify whether the case warrants discussion at multidisciplinary case conference**
- 6 ME 4.1 Determine the need and timing of referral to another physician**

*ENTRUSTABLE PROFESSIONAL ACTIVITIES FOR
ADULT ENDOCRINOLOGY AND METABOLISM (2025)*

- 7 L 2.1 Consider costs and resource availability when selecting diagnostic or treatment options**
- 8 COL 1.2 Work effectively with members of the interprofessional team to implement a management plan**

Endocrinology and Metabolism: Core EPA #3 A

Providing ongoing care

Key Features:

- This EPA includes clinical reassessment, further investigation, adjustment, or modification of treatment based on changes in the individual's condition, response to therapy or goals of care, screening or monitoring for adverse effects or complications of the condition or its treatment and making decisions about discharge and/or timing of ongoing follow-up.
- The observation of this EPA is based on a single patient in any general, specialized, or longitudinal clinic.

Assessment Plan:

Direct and/or indirect observation by supervisor

Use Form 1. Form collects information on:

- Patient presentation (write in):
- Issue (select all that apply): progressive condition; initiate and/or change therapy; manage complications; arrange/review surveillance; supportive/preventive care; counsel/educate; discharge; other issue

Collect 6 observations of achievement

- At least 1 diabetes presentation
- At least 4 different presentations other than diabetes

CanMEDS Milestones:

- 1 ME 1.4 Perform a clinical assessment that addresses all relevant issues**
- 2 ME 2.2 Interpret the results of investigations performed to monitor the condition and/or treatment**
- 3 ME 2.2 Determine if there is a need to adapt the management plan based on response to therapy and/or disease progression**
- 4 ME 2.3 Integrate the patient's and family's perspective and context into the care plan**
- 5 L 2.1 Consider costs and resource availability when selecting diagnostic or treatment options**
- 6 ME 4.1 Implement a plan for ongoing care, follow-up on investigations, response to treatment and monitoring for disease progression**

*ENTRUSTABLE PROFESSIONAL ACTIVITIES FOR
ADULT ENDOCRINOLOGY AND METABOLISM (2025)*

- 7 HA 1.2 Work with the patient/family to increase their understanding of the condition and associated comorbidities, supporting their active role in disease management**
- 8 COM 5.1 Document the encounter to convey the clinical assessment and the rationale for decisions and/or recommendations**

Endocrinology and Metabolism: Core EPA #4 A

Interpreting investigations

Key Features:

- This EPA focuses on the interpretation of investigations such as dynamic testing (e.g., cosyntropin, DDAVP stimulation, petrosal sinus sampling, water deprivation test, supervised fast, oral glucose load, aldo/renin level, adrenal vein sampling, growth hormone stimulation, GnRH), and genetics, pathology, and imaging investigations.
- This includes identifying possible confounders and recognizing the limits of the diagnostic technique and its interpretation.

Assessment Plan:

Direct or indirect observation by supervisor

Use Form 1. Form collects information on:

- Type of report: dynamic testing; genetics; imaging; other pathology; thyroid cytology
- Specific test (write in):

Collect 5 observations of achievement

- At least 2 dynamic testing
- At least 1 imaging
- At least 1 pathology
- At least 1 thyroid FNA-B cytology

CanMEDS Milestones:

- 1 ME 2.2 Assess the quality and validity of the study, and any impact on the diagnostic interpretation**
- 2 ME 1.3 Apply knowledge of the principles, strengths, and limitations of diagnostic investigations**
- 3 ME 2.2 Interpret the results of the investigation(s) in the context of the clinical presentation**
- 4 ME 2.2 Summarize findings of clinical relevance and, as appropriate, provide suggestions for further testing or management**
- 5 COL 1.3 Engage in respectful shared decision-making with physicians and other colleagues in the health care professions**

Endocrinology and Metabolism: Core EPA #5 A

Managing diabetes with insulin therapy and the use of diabetes technologies

Key Features:

- This EPA focuses on prescribing insulin therapy for individuals with type 1 and type 2 diabetes, gestational diabetes, and other forms of diabetes.
- This includes ensuring that the individual has appropriate follow-up to assist with titration of insulin and providing appropriate monitoring for side effects (e.g., hypoglycemia and DKA).
- It also includes demonstrating expertise in transitioning patients from basal-bolus insulin to a continuous subcutaneous insulin infusion system/insulin pump therapy.
- It also includes interpretation of continuous glucose monitoring (CGM).

Assessment Plan:

Direct and/or indirect observation by supervisor or diabetes or pump educator

Use Form 1. Form collects information on:

- Type of diabetes: congenital; cystic fibrosis-related; diabetes in pregnancy; monogenic; post-pancreatic surgery; secondary diabetes; type 1; type 2
- Treatment: CGM; multiple daily injections; insulin pump; transition to pump

Collect 10 observations of achievement

- At least 2 diabetes in pregnancy
- At least 1 individual with congenital, cystic fibrosis-related, monogenic, post-pancreatic surgery or secondary diabetes
- At least 3 continuous glucose monitoring
- At least 3 multiple daily injections
- At least 3 insulin pumps
- At least 1 transition to pump
- At least 2 different observers

CanMEDS Milestones:

- 1 ME 1.3 Apply knowledge of intensive diabetes management, including the use of diabetes technologies**
- 2 ME 2.2 Interpret the results of glucose monitoring**
- 3 ME 3.4 Select and prescribe an insulin regimen based on individual needs and glycemic targets**
- 4 COM 3.1 Educate and counsel patients about their condition and the treatment options**

*ENTRUSTABLE PROFESSIONAL ACTIVITIES FOR
ADULT ENDOCRINOLOGY AND METABOLISM (2025)*

- 5 COM 3.1 Provide written and/or visual materials to supplement health teaching**
- 6 ME 3.4 Provide anticipatory guidance for management of diabetes-technology malfunction, including a back-up plan**
- 7 COL 1.2 Work effectively with diabetes nurse educators**
- 8 ME 4.1 Establish a follow-up plan**
- 9 HA 1.1 Facilitate patient access to needed resources and services**

Endocrinology and Metabolism: Core EPA #6 A

Documenting patient encounters

Key Features:

- This EPA focuses on writing a high-quality consultation note using any format: handwritten, dictated, electronic medical record.
- This includes a synthesis of the pertinent clinical findings, investigations, and management plan, as well as clear articulation of the role of the endocrinologist and the referring physician in further care. It may include linking the recommendations to evidence-based guidelines or other educational references for the referring physician.
- The documents submitted for review must be the sole work of the resident.
- This EPA may be observed in any care setting and with any patient presentation.

Assessment Plan:

Review of clinical documentation by supervisor

Use Form 1. Form collects information on:

- Type of documentation: new patient consultation note; returning patient note

Collect 4 observations of achievement

- At least 1 new patient consultation note
- At least 1 returning patient note
- At least 2 different observers

CanMEDS Milestones:

- 1 ME 2.2 Synthesize and interpret information from the clinical assessment**
- 2 COM 5.1 Organize information in appropriate sections**
- 3 COM 5.1 Document all relevant findings and investigations**
- 4 COM 5.1 Convey clinical reasoning and the rationale for decisions**
- 5 COM 5.1 Provide a clear plan for ongoing management**
- 6 COL 1.2 Identify clearly the roles of the referring physician and/or other relevant care providers and the endocrinologist in the ongoing management plan**
- 7 COL 3.2 Provide anticipatory guidance for results of outstanding investigations and/or next steps for management**
- 8 COM 5.1 Complete clinical documentation in a timely manner**

Endocrinology and Metabolism: Core EPA #7 A

Providing indirect patient management recommendations to other health care professionals

Key Features:

- This EPA focuses on in-house or off-site calls or electronic communication with a requesting physician or other health care professional and provision of medical recommendations.
- This includes collecting the information necessary to provide recommendations for patient management including interpretation of labs, triage to an outpatient clinic for assessment, or transfer to an appropriate setting based on acuity.
- This EPA may be observed in simulation (e.g., OSCE).

Assessment Plan:

Direct and/or indirect observation by supervisor

Use Form 1. Form collects information on:

- Origin of call: in-house; off-site; e-consult
- Patient presentation (write in):

Collect 5 observations of achievement

- A variety of patient presentations
- At least 2 observers

CanMEDS Milestones:

- 1 COM 2.3 Gather relevant patient information from another health professional**
- 2 ME 2.2 Integrate information from the clinical assessment and/or investigations to determine the patient's clinical status and health care needs**
- 3 ME 2.1 Determine the acuity of the issue and the priorities for patient care**
- 4 L 2.1 Apply knowledge of the health care resources available in other care settings**
- 5 ME 2.4 Determine the setting of care appropriate for the patient's health needs**
- 6 ME 2.4 Support the referring physician in developing a plan for ongoing care in the local setting and/or for care prior to endocrinology assessment**

*ENTRUSTABLE PROFESSIONAL ACTIVITIES FOR
ADULT ENDOCRINOLOGY AND METABOLISM (2025)*

- 7 ME 2.4 Provide anticipatory guidance for management of potential changes in the patient's clinical status**
- 8 COL 1.3 Communicate effectively with physicians and other health care professionals**
- 9 COM 5.1 Document advice provided to other health care providers**

Endocrinology and Metabolism: Core EPA #8 A

Providing unplanned advice to patients

Key Features:

- This EPA focuses on unplanned interactions occurring outside of scheduled planned patient encounters and may include responding to calls from patients and/or family members (i.e., on-call) or contacting patients about results.
- This includes providing appropriate and timely advice about management and/or patient disposition, recognizing conditions that can be managed remotely (e.g., virtual) versus those that require in-person assessment, and documenting the encounter.

Assessment Plan:

Direct and/or indirect observation by supervisor

Use Form 1. Form collects information on:

- Complex case: yes; no

Collect 2 observations of achievement

- At least 1 complex case
- At least 2 different observers

CanMEDS Milestones:

- 1 ME 2.2 Gather information required to clarify the patient's issue or status**
- 2 ME 2.2 Integrate information from the clinical assessment and/or investigations to determine the patient's clinical status and health care needs**
- 3 ME 2.4 Determine if an in-person visit is required**
- 4 ME 2.4 Develop a management plan**
- 5 ME 2.4 Provide anticipatory guidance for management of potential changes in the patient's clinical status**
- 6 COM 3.1 Convey information to the patient and/or family clearly and compassionately**
- 7 COM 3.1 Verify and validate the understanding of the patient and/or family**

*ENTRUSTABLE PROFESSIONAL ACTIVITIES FOR
ADULT ENDOCRINOLOGY AND METABOLISM (2025)*

- 8 COM 5.1 Document the encounter to convey the clinical assessment and the rationale for decisions and/or recommendations**
- 9 COM 5.3 Use technology in a manner that respects patient privacy and confidentiality**

Endocrinology and Metabolism: Core EPA #9 A

**Supporting adolescents/young adults with endocrine conditions in the transition
from the pediatric to adult care setting**

Key Features:

- This EPA focuses on the unique aspects of developmental readiness and risks that occur as adolescents/young adults progress to autonomy for their health care needs.
- The nature of the endocrine condition is not relevant for this EPA.

Assessment Plan:

Direct and/or indirect observation by supervisor

Use Form 1. Form collects information on:

- Patient condition (write in):

Collect 2 observations of achievement

- At least 2 different patient conditions
- At least 2 different observers

CanMEDS Milestones:

- 1 ME 2.2 Assess the patient's health literacy and developmental readiness for the demands of the adult care setting**
- 2 ME 2.2 Assess psychosocial issues that may affect health and/or access to services**
- 3 ME 2.2 Assess adherence to treatment and monitoring plans**
- 4 HA 1.2 Work with the patient and/or family to increase their understanding of their illness and health care needs**
- 5 HA 1.2 Work with the patient to increase autonomy in their care**
- 6 COM 4.3 Use communication skills and strategies that foster effective patient-physician relationships**
- 7 ME 2.4 Anticipate, prevent and manage changes in health status at the time of transition**
- 8 ME 4.1 Establish plans for ongoing care that include monitoring health status and managing adherence**

Endocrinology and Metabolism: Core EPA #10 A

Leading patient care on an inpatient consultation service

Key Features:

- This EPA includes all aspects of leading a consultation service, including triaging referrals, delegating to, organizing, and teaching and supervising junior members of the team, making decisions for patient care, and working effectively with referring physicians and members of the interprofessional endocrinology team.
- The observation of this EPA is based on a period of at least one week.

Assessment Plan:

Direct and/or indirect observation by supervisor(s) which may include input from others

Use Form 1

Collect 2 observations of achievement

- At least 2 different observers

CanMEDS Milestones:

- 1 ME 1.1 Demonstrate responsibility and accountability for patient care within the boundaries and expectations of the consultant role**
- 2 ME 1.5 Prioritize patients based on clinical urgency**
- 3 S 3.4 Integrate best evidence and clinical expertise into decision-making**
- 4 ME 2.4 Establish management plans that consider all relevant aspects of the patient's care**
- 5 COL 1.3 Communicate effectively with the consulting service**
- 6 COL 2.2 Work effectively with other health care professionals when there are differences in opinion**
- 7 L 4.1 Integrate supervisory and teaching responsibilities into the overall management of the clinical service**
- 8 L 4.2 Run the service efficiently, safely, and effectively**

Endocrinology and Metabolism: Transition to Practice EPA #1 A

Managing an endocrinology practice

Key Features:

- This EPA focuses on managing the caseload of an endocrinologist: providing quality care for individual patients, triaging and prioritizing between patients and amongst patients and other occupational demands, and demonstrating judicious use of resources.
- It includes managing a longitudinal clinic and/or inpatient service.
- It also includes completing medical documentation in a timely manner, and completing administrative responsibilities which may include billing, triaging referrals, and completing insurance forms.
- This EPA should be observed in a longitudinal clinic over a period of two months and/or one week of inpatient service.

Assessment Plan:

Direct and/or indirect observation by supervisor

Use Form 1

Collect 2 observations of achievement

CanMEDS Milestones:

- 1 ME 1.1 Demonstrate responsibility and accountability for decisions regarding patient care at the level of the most responsible physician**
- 2 L 4.2 Manage bookings and triage consultation requests to optimize clinic scheduling based on clinical acuity**
- 3 S 3.4 Integrate best evidence and clinical expertise into decision-making**
- 4 ME 2.4 Establish management plans that consider all relevant aspects of the patient's care**
- 5 COM 5.1 Document clinical encounters in an accurate, complete, and timely manner**
- 6 L 4.1 Set priorities and manage time to fulfil diverse responsibilities**
- 7 L 4.1 Integrate supervisory and teaching responsibilities into the overall management of the clinical service**
- 8 P 4.1 Manage the mental and physical challenges that impact physician wellness and/or performance in demanding or stressful clinical settings**

Endocrinology and Metabolism: Transition to Practice EPA #2 A

Developing a plan for continuing professional development

Key Features:

- This EPA is meant to address the resident's professional development needs in early practice and may include a variety of scenarios. Examples include a plan to act on identified performance gaps; a plan to correct educational gaps in training; a plan to prepare for fellowship training; a plan to prepare for practice in a specific setting (i.e., academic vs community).
- Achievement of this EPA is based on submission of a document which includes a) the rationale for a learning plan, b) self-reflection, c) personal needs assessment, and d) identification of the methods to achieve the personal learning plan, such as literature review, clinical training, and/or conference attendance.
- The plan should be SMART (specific, measurable, assessable, realistic, and timely), and must include the appropriate choice of clinical experiences and/or appropriate academic resources (journals, textbooks, conferences).

Assessment Plan:

Review of resident's submission of a professional development plan by supervisor, academic advisor, or mentor

Use Form 4

Collect 1 observation of achievement

CanMEDS Milestones:

- 1 P 2.1** Demonstrate a commitment to maintaining and enhancing competence
- 2 S 1.2** Interpret data on personal performance to identify opportunities for learning and improvement
- 3 L 4.2** Articulate personal interests and career goals
- 4 S 1.1** Define learning needs related to personal practice and/or career goals
- 5 S 1.1** Create a personal learning plan that is feasible, includes clear deliverables, timelines, resources, and a plan for monitoring ongoing achievement
- 6 L 4.2** Plan for continuing medical education experiences to gain competencies necessary for future practice