



## TRANSITION TO DISCIPLINE (TTD) EPA ASSESSMENT COMPLETION GUIDE

### PROCESS AT A GLANCE

**TOOLS:** Please use the following tools in Elentra: **TTD-1 (FOD3, COD-1)**

**PROCESS:** The Royal College and your program require that you complete the assessment requirements for the TTD EPAs (TTD-1) during Transition to Discipline, which covers Months 1-2 of the PGY4 year.

You *may* start FOD3 and COD-1

The specific requirements for each EPA assessment are outlined below. We suggest that you review this document prior to each block, and at regular intervals. The core hospital rotation EPAs will be scheduled by the hospital coordinator. You should arrange the timing of the Longitudinal Clinic EPAs with your supervisor (2 each month).

As you progress through the year, we also recommend that at the start of each week you review your Elentra dashboard to identify 1-2 possible EPAs that you might be able to complete that week and plan the timing with your supervisor at the start of the week, with the understanding that EPA completion will be dependent on cases seen on any given day. There will be unique opportunities that come up during the day (e.g. an endocrine emergency) that you or your supervisor might decide is better for the EPA completion on that day. The goal is to complete 4-5 clinical EPA per month (2 of them being in Longitudinal clinic), depending on the rotation.

The majority (i.e. > 50%) of each of the CBME workplace-based assessments, such as EPAs, must be completed by University Appointed Faculty, except where the Residency Program Committee determines otherwise.

See also the **Curriculum Plan** for this stage for more details about which EPAs are available for you to complete on each rotation.

### ENTRUSTMENT SCALE:

Intervention	Direction	Support	Competent	Proficient
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The EPAs are assessed using the global entrustment scale. *Residents are not expected to be entrustable each time an EPA is completed, this normally takes repeated effort to achieve. Our program does not have a requirement for the level of entrustment on the scale for each EPA. Readiness for progression to the next stage will depend on the full spectrum of evaluations (comments on EPAs, ITARs, and other assessments).*

On days when an EPA is scheduled, chose the best EPA to get completed



At the start of the day when an EPA is scheduled, remind your supervisor that the form needs to be completed that day



Complete 1 clinical EPA weekly. Complete an Endocrine Emergency EPA every opportunity you get.



## BREAKDOWN BY EPA: MANDATORY

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### TTD-1: Assessing patients with a **known endocrine condition**

**Number of EPA assessments:** Complete a minimum of 4 TTD-1 EPA assessments during your first 2 months of TTD.

**Types of Cases:** Aim for 4 different common endocrine conditions.

**Rotation/service:** 2 on rotation, 2 in Longitudinal Clinic

**Observation:** Completed by a minimum of 2 different assessors. Does not require direct observation.

**Type of Presentation:** Any setting

## OPTIONAL FOR TTD

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### FOD-3 Performing **endocrine-focused physical examinations**

**Number of EPA assessments:** Complete a minimum of 4 FOD-3 EPA assessments by the end of FOD.

**Rotation/service:** - Peds: At least 1 genital/breast exam or pubertal staging; otherwise, any rotation

**Types of cases:** - At least 4 different exam types (adrenal; diabetes foot exam; genital/breast; metabolic disease; osteoporosis exam; pituitary; pubertal staging; thyroid)

**Observation:** At least 2 different observers, must be direct observation

### COD1: **Managing** patients presenting with an **emergency** related to an endocrine condition or its treatment

**Number of EPA assessments:** Complete a minimum of 4 FOD-2C EPA assessments by the end of COD

**Clinical Scenarios:** Any acute scenario, no more than 1 DKA or HHS, can be simulated

**Rotation/service:** Aim for one at each core rotation, can do whenever the opportunity arises

**Observation:** Collect 4 observations of achievement; At least 1 observation by supervisor