Name of Fellow: Date:

5. **EPA Title:** Manage complications of cirrhosis

Detailed Description: Gastroenterologists diagnose and manage the broad spectrum of liver problems encountered in a typical gastroenterology practice. This includes an understanding and management of the complications of cirrhosis, including portal hypertension and hepatic encephalopathy. Gastroenterologists must be able to recognize when to request consultative services and refer patients for liver transplant evaluation. Separate EPAs cover the management of nutritional aspects of decompensated liver disease and endoscopic management of variceal bleeding.

decompensated ii	ver disease and endoscopic management of variceal bleeding.	
Knowledge	 Recognize the complications of cirrhosis, including portal hypertension (ascites, spontaneous bacterial peritonitis, varices), hepatic encephalopathy and hepatorenal syndrome List the indications, contraindications, limitations and complications of diagnostic and therapeutic paracentesis and interpret the results of ascitic fluid analysis Describe appropriate screening and diagnostic strategies for hepatocellular carcinoma Recognize and apply prognostic models (e.g., MELD, CPT) Identify appropriate timing to request specialty consultation on patients with cirrhosis Recognize patients in need of referral for liver transplantation 	
Skills	 Recognize patients in need of referral for liver transplantation Obtain a relevant history and perform a focused physical examination in patients with decompensated liver disease Order appropriate labs and studies to assess patients with decompensated liver disease Counsel patients about lifestyle modifications and dietary restrictions/recommendations relevant to decompensated liver disease Diagnose and manage patients with cirrhosis, including complications of portal hypertension (ascites, spontaneous bacterial peritonitis, varices), hepatic encephalopathy and hepatorenal syndrome Apply the results of ascitic fluid analysis Screen patients for hepatocellular carcinoma and refer for management Recognize when to refer patients for liver transplant evaluation Assess preoperative risk in patients with cirrhosis Communicate transitions of care effectively with other providers 	
Attitudes	 Work and communicate effectively within an interprofessional team in the management of patients with decompensated liver disease Provide compassionate care and end-of-life counseling to liver patients and their families 	
Chack ACCME co	mpetencies applicable to EPA	
	tient Care (PC)	
Medical Knowledge (MK)		
IME	cuicai Kiiowicuge (MK)	

Systems-Based Practice (SBP)	
Practice-Based Learning & Improvement (PBLI)	
Professionalism (PROF)	
Interpersonal & Communication Skills (ICS)	
What subcompetencies are needed to achieve mastery?	Approximate Time Frame Trainee Should Achieve Stage
Patient Care (PC):	
 Demonstrates skill in performing and interpreting invasive procedures. (PC4a) 	
 Demonstrates skill in performing and interpreting non-invasive procedures and/or testing (PC4b) 	
Requests and provides consultative care (PC5)	
Medical Knowledge (MK):	
Possesses Clinical knowledge (MK1)	
Knowledge of diagnostic testing and procedures (MK2)	
Systems-Based Practice (SBP):	
• Works effectively within an interprofessional team (e.g., with peers, consultants, nursing, ancillary professionals, and other support personnel) (SBP1).	
 Transitions patients effectively within and across health delivery systems (SBP4) 	
Practice-Based Learning & Improvement (PBLI):	
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•	
Professionalism (PROF):	
•	
Interpersonal & Communication Skills (ICS):	
Communicates effectively with patients and caregivers (ICS1)	
• Communicates effectively in interprofessional teams (e.g., with peers, consultants, nursing, ancillary professionals, and other support personnel) (ICS2).	
Stage of training at which supervision level 4 is expected to be reached:	

tential information sources/assessments to gauge progress		
Chart stimulated recall $oxed{igtharpi}$		
Chart audits		
Direct observations $oxed{oxed}$		
Standardized patient		
In-training examination $oxed{oxed}$		
360 Global Rating		
Patient Survey		
Simulation		
Portfolios		
Other		
sis for formal entrustment decision by the Clinical Competency Committee:		
Program director		
Faculty		
Other		
plications of entrustment for the trainee: Entrustment allows the fellow to independently		
perform consultation for patients with cirrhosis and its complications in the inpatient and outpatient		
tting.		