

Psychiatry: Core EPA # 2

Performing psychiatric assessments and providing differential diagnoses and management plans for children and youth

Key Features:

- This EPA focuses on performing a developmentally informed psychiatric assessment, using knowledge of neurobiological, cognitive, behavioral, emotional, family and personality development to perform a comprehensive biopsychosocial interview involving the patient, family, and others.
- This also includes synthesizing the information to develop a differential diagnosis and management plan that integrates psychopharmacology, psychotherapy and social interventions as appropriate.
- The management plan should include considerations of parent or guardian guidance, referral resources, and basic pharmacological and psychotherapeutic interventions.
- This EPA does not include delivery of the management plan.

Assessment plan:

Direct observation, case discussion and/or review of consult letter or other by child and adolescent psychiatrist, psychiatrist, TTP psychiatry resident, Core/TTP child and adolescent psychiatry subspecialty resident, or psychiatry/child and adolescent psychiatry fellow

Use form 1. Form collects information on:

- Case type: anxiety disorder; mood disorder; attention deficit/hyperactivity disorder; autism spectrum disorder; intellectual disability; other neurodevelopmental disorder; personality disorder; psychotic disorder; substance use disorder; OCD; trauma; other presentation
- Co-morbidities (write-in):
- Setting: emergency; inpatient unit; consultation liaison; outpatient; community; residential treatment centre
- Complexity: low; medium; high
- Demographic: child 4-12 years; adolescent 13-18 years
- Observation (select all that apply): direct; case discussion; review of clinical documents

Collect 6 observations of achievement

- At least 1 mood disorder, anxiety disorder, or OCD
- At least 1 ADHD
- At least 1 abuse, neglect, or trauma
- At least 1 intellectual disability/autism spectrum disorder comorbidity
- At least 2 children 4-12 years
- At least 2 adolescents 13-18 years

- At least 4 direct observations, including review of documentation
- At least 3 different observers
- At least 2 observations by a child and adolescent psychiatrist

Relevant Milestones:

- 1 ME 1.3 Apply knowledge of normal and abnormal physical, cognitive, emotional, and behavioural development**
- 2 ME 2.2 Focus the clinical encounter, performing it in a time-effective manner without excluding key elements**
- 3 ME 2.2 Adapt the clinical assessment to the patient's developmental stage**
- 4 ME 2.2 Synthesize biological, psychological, and social information to determine a diagnosis**
- 5 ME 2.2 Elicit a history, perform a physical exam, select appropriate investigations, and interpret their results for the purpose of diagnosis and management, disease prevention, and health promotion**
- 6 ME 2.4 Develop and implement management plans that consider all of the patient's health problems and context**
- 7 ME 3.2 Use shared decision-making in the consent process**
- 8 COM 1.6 Tailor approaches to decision-making to patient capacity, values, and preferences**
- 9 COM 2.1 Integrate, summarize, and present the biopsychosocial information obtained from a patient-centred interview**
- 10 COM 5.1 Document clinical encounters in an accurate, complete, timely, and accessible manner and in compliance with legal and privacy requirements**
- 11 HA 1.1 Work with patients to address the determinants of health that affect them and their access to needed health services or resources**
- 12 P 3.1 Apply child welfare legislation, including mandatory reporting**