#### **Entrustable Professional Activity (Neurogastroenterology and Motility Disorders)**

1. **EPA Title:** Care of infants, children and adolescents with neurogastroenterology and motility disorders

#### 2. Description of Activity

Practicing subspecialists must be trained to care for children and adolescents with neurogastroenterology and motility (NGM) disorders which are common in childhood and often debilitating. Pediatric gastroenterologists need to be familiar with the pathophysiology of these disorders and aware of differences in children compared to adults. It is critical that trainees and future gastroenterologists are able to determine which patients are appropriate to undergo motility testing, to perform the testing safely and accurately if it is available at their institution, and to integrate the clinical presentation with the results of testing. Trainees should know when to ask for additional procedural support from a more experienced and highly trained motility consultant. The trainee must also be able to communicate motility findings to the patient, family, and the referring physician in a timely fashion.

This requires a multitude of competencies within each domain of competence.

#### The functions required of this activity include:

- 1. Understand the pathophysiology, clinical presentation, and natural history of NGM disorders
- 2. Diagnose and recognize children with suspected NGM disorders in a variety of clinical presentations
- 3. Understand the indications for, risks and benefits of, and interpretation and utilization of available diagnostic testing for NGM disorders
- 4. Create a therapeutic plan for children with NGM disorders, including pharmacologic and non-pharmacologic strategies
- 5. Understand the diagnosis and management of disorders of brain-gut interaction also see EPA for common outpatient GI and liver issues
- 6. Work collaboratively with other subspecialists (surgeons, pediatric psychologists, dieticians) to provide multidisciplinary support to patients and families with NGM disorders
- 7. Apply research findings from clinical, translational and basic studies to help guide patient care

# 3. Domains of Competence (Judicious Mapping) \_\_X\_\_Patient Care

\_\_X\_\_Medical Knowledge and Diagnostic Skills Required

\_\_X\_\_Practice Based Learning

\_\_X\_\_Interpersonal Skills

\_\_X\_\_Professionalism

\_\_X\_\_System-based Practice

\_\_X\_\_Personal and Professional Development

## 4. Competencies within each domain critical to entrustment decision

PC 1, 4, 6-9 MK 1, 2 PBLI 1, 3, 6 ICS 1, 3, 5 P 1 SBP 3,5

#### Curriculum - List Specific Knowledge, skills and attitudes needed to execute EPA

#### Medical Knowledge

- 1. Understand the anatomy and physiology of the enteric nervous system as well as interactions with the autonomic and central nervous systems
- 2. Understand the pathophysiology of NGM including neurogenic and myogenic processes
- 3. Understand the presenting signs and symptoms of congenital and acquired motor disorders of the esophagus, stomach, small intestine, colon, anorectum
- 4. Understand the mechanism of action, efficacy, routes of administration, adverse effects, indications for and contraindications to medications and treatments for NGM disorders
- 5. Recognize the contribution of infection, inflammation and systemic diseases to NGM disorders
- 6. Understand and identify overlapping symptoms between congenital and acquired NGM disorders and other gastrointestinal disorders including disorders of brain-gut interaction, using age-specific current Rome criteria

#### Patient Care

- 1. Recognize common NGM disorders including gastroesophageal reflux, dysphagia, gastroparesis, small bowel dysmotility, and constipation, and provide appropriate diagnostic assessment and management
- 2. Recognize the indications for surgical treatment of NGM disorders, interpret the symptoms and complications of patients who have had surgery, and evaluate these patients
- 3. Perform an appropriate history and physical examination in a child with a suspected NGM disorder
- 4. Understand the indications, limitations, and cost-effectiveness of diagnostic motility testing, especially:
  - a. Wireless pH and pH / impedance monitoring
  - b. Esophageal high-resolution manometry
  - c. Contrast radiography
  - d. Gastric scintigraphy
  - e. Wireless motility capsule
  - f. Hydrogen breath test
  - g. Antroduodenal manometry
  - h. Colonic manometry
  - i. Anorectal manometry
  - j. Intestinal transit studies
  - k. Defecography
  - I. Magnetic resonance imaging
- 5. Perform and/or interpret diagnostic motility testing (optional for levels 1-3 / Tier 1), including:
  - a. Wireless pH and pH / impedance monitoring
  - b. Esophageal high-resolution manometry
  - c. Antroduodenal manometry
  - d. Colonic manometry
  - e. Anorectal manometry
  - f. Intestinal transit studies

- 6. Understand the medical and surgical therapies for gastroesophageal reflux, gastroparesis, small bowel dysmotility, and constipation, including their uses and limitations
- 7. Understand and appropriately provide treatment modalities for NGM disorders including disorders of brain-gut interaction eg:
  - a. Pharmacologic treatment
  - b. Complementary and alternative therapies
  - c. Behavioral therapies
  - d. Oral, enteral and parenteral nutrition and specific dietary therapy
  - e. Surgical treatment
  - f. Endoscopic treatment (peroral ensocopic myotomy (POEM), dilation, botulinum toxin injection, enteral tube placement)
  - g. Intestinal Neuromodulation
- 8. Recognize and manage relevant problems associated with the transition from pediatric to adult care teams

#### Practice Based Learning

- 1. Educate parents and children on cause, treatment, and other aspects of NGM disorders and disorders of brain-gut interaction using a biopsychosocial model
- 2. Locate, appraise and assimilate evidence from scientific studies and apply evidence to patient care
- 3. Identify and perform appropriate learning activities related to care of children with NGM disorders

#### Interpersonal and Communication Skills

- 1. Effectively communicate disease information, treatment plan, and outcome to patients and families
- 2. Effectively communicate with other medical professionals involved in the care of NGM patients including referring physicians
- 3. Act in a consultative role to referring pediatricians and general pediatric gastroenterologists

#### Professionalism

- 1. Demonstrate compassion, integrity, respect and sensitivity to diversity in treating NGM disorders including disorders of brain-gut interaction
- 2. Protect patient privacy

## System-based Practice

- 1. Coordinate care of children with NGM disorders including primary physicians, gastroenterologists, surgeons, psychologists/social workers, dieticians radiologists, and other medical professionals
- 2. Incorporate considerations of cost awareness and risk-benefit analysis into the management plan, with a focus on quality of care

# Personal and Professional Development

- 1. Demonstrate trustworthiness and leadership that enhance team functioning and the clinical learning environment, with the ultimate goal of improving patient care
- 2. Develop effective bedside manner and maturity through interactions with patients and families

# 6. Assessment Procedure (from ACGME Assessment Toolbox – see below):

Checklist
Chart stimulated recall / Chart audits
Direct observations

# Summary of EPA

EPA Title: Care of children and adolescents with neurogastroenterology and motility disorders							
Level 1	Level 2	Level 3	Level 4	Level 5			
Understand basic anatomy and development of the enteric nervous system  Understand and recognize symptoms of common NGM disorders such as GERD  Describe the pathophysiology of common NGM disorders  Understand the biopsychosocial model of patient care	Understand the natural history, presentation, and pathophysiology of specific NGM disorders of the esophagus, stomach, small and large intestine and anorectum  Obtain a complete history and perform a directed physical examination to evaluate patients with suspected NGM disorders  Understand the indications for motility testing  Develop an appropriate initial diagnostic plan including laboratory evaluation, endoscopy, imaging and other tests  Provide basic education to families and children  Understand the overlap between organic and functional disorders	Apply diagnostic algorithms for NGM disorders  Refer patients appropriately to motility consultants for expert evaluation and management  Understand the indications for motility testing in patients with suspected NGM disorders  Understand the indications, mechanisms of action and adverse effects of medical therapies  Understand indications for surgical treatment and work with surgeons to develop a surgical plan of care  Recognize GI diseases associated with NGM disorders  Discuss the brain-gut axis and role of microbiome with patients and families  Apply the Rome criteria to diagnose disorders of braingut interaction  Provide appropriate nutritional support	Demonstrate in-depth understanding of pathophysiology of NGM disorders  Understand the indications, cost-effectiveness, and limitations of basic and advanced motility testing  Refer complex patients for advanced testing  Understand the role of endoscopic and surgical management  Work with a multidisciplinary team to provide care  Apply QI, best practices, and scientific evidence  Transition care of NGM from pediatric to adult practitioner	Provide expert opinion and management of complex and refractory cases  Expertise to select appropriate invasive therapies for the management of complicated esophageal motor disorders (pneumatic dilation, peroral endoscopic myotomy (POEM), surgery)  Lead a multidisciplinary team and an institutional NGM center  Participate in the development and study of novel management strategies, protocols and devices  Participate in scholarly activity related to NGM  Present research findings at a national meeting in oral format  Participate in and speak at regional/national meetings specific to NGM			

		<u> </u>							
		Provide advanced education							
		including side effects and							
		complications of therapies							
DIACNOSTIC AND THERADE	LITIC PROCEDURES, REPEOR	MANCE AND/OD INTERPRETA	TION						
DIAGNOSTIC AND THERAPEUTIC PROCEDURES: PERFORMANCE AND/OR INTERPRETATION									
	Interpret the provide of heads	Desferre and interpret heads	Latera not transit at all a	Dayfayya ay distayyyat					
	Interpret the results of basic	Perform and interpret basic	Interpret transit studies	Perform and interpret					
	testing, including radiography	esophageal motility testing	(scintigraphy, breath test)	advanced motility testing					
		including pH probe, wireless		including high-resolution					
		pH and pH-impedance reflux	Perform and interpret motility	esophageal manometry,					
		monitoring <sup>1</sup>	testing including pH probe,	endoluminal functional lumen					
			wireless pH and pH-	imaging probe, wireless					
			impedance reflux monitoring	motility capsule,					
			and anorectal manometry	antroduodenal manometry,					
			,	colonic manometry					
				,					
				Perform pneumatic or					
				hydraulic dilation for					
				achalasia and other					
				conditions; perform					
				esophageal/pyloric/anal					
				botulinum toxin injection					
				Perform POEM and					
				temporary lead placement					
				and monitoring of gastric					
				electric stimulator (both are					
				optional and require					
				advanced endoscopic training					
				to acquire necessary skills)					
Training / Expertise Level									
Entrustment Level									
Execution with direct	Execution with reactive	Supervision at distance	Entrustment, ready for	Supervision of others					
proactive supervision	supervision (on request)	post hoc supervision	unsupervised practice	junior colleagues					
	caportioion (on roquosi)	Poor floo caper violett		,					

<sup>&</sup>lt;sup>1</sup> in centers where studies are available and trainees are interested in learning to perform and interpret