

<p><b>1. EPA Title</b></p>	<p>Perform comprehensive histories and physical and neurodevelopmental examinations to make accurate diagnoses for patients presenting with developmental-behavioral concerns from infancy through young adulthood.</p>
<p><b>2. Description of the activity</b></p>	<p>Brief general description: DBP physicians care for a broad array of patients with a wide spectrum of developmental and behavioral challenges. Unlike other pediatric medical specialties, biomedical markers for developmental-behavioral disorders are scarce and laboratory workup rarely contributes to the diagnostic process. Thus, it is absolutely critical that DBP physicians be expert in obtaining thorough developmental-behavioral histories (including direct history elicitation from families and incorporation of information from early intervention programs, schools, and allied health professionals) and performing careful neurodevelopmental/neurobehavioral examinations in order to make appropriate and comprehensive developmental-behavioral diagnoses.</p> <p>The functions required of this activity include:</p> <ol style="list-style-type: none"> <li>1. Demonstrating an understanding of the normal stages and variations of child development and the typical sequence of developmental milestone acquisition across developmental streams (motor, cognitive, speech/language, social/emotional/behavioral).</li> <li>2. Acquiring a thorough understanding of developmental disabilities including autism spectrum disorders, intellectual disabilities, language and learning disorders, motor disabilities, and visual and hearing impairments; as well as an understanding of child and adolescent psychopathology and co-morbidities</li> <li>3. Demonstrating an understanding of the spectrum of developmental and behavioral disorders from mild to severe <i>within</i> each stream of development (motor, cognitive, speech/language, social/emotional/behavioral).</li> <li>4. Demonstrating an understanding of the continuum of developmental and behavioral disorders <i>across</i> developmental streams and the importance of identifying associated developmental and/or behavioral co-morbidities.</li> <li>5. Identifying the processes that underlie problems in development/behavior: delay, dissociation, and deviation.</li> <li>6. Recognizing patterns of developmental delay -- static, acute, and progressive – and how these patterns affect medical work-up and recommendations for therapy.</li> <li>7. Identifying prenatal, perinatal, and postnatal biomedical risk factors for developmental-behavioral disorders, such as:             <ol style="list-style-type: none"> <li>a) Genetic/metabolic disorders, genetic-environmental interaction (epigenetic factors)</li> <li>b) Neurological disorders: structural brain</li> </ol> </li> </ol>

	<p>anomalies, hydrocephalus, meningoencephalitis, traumatic brain injury, malnutrition, epilepsy, sleep disorders</p> <ul style="list-style-type: none"><li>c) High risk neonates: Prematurity, congenital anomalies, hypoxic-ischemic encephalopathy, in utero infections, prenatal teratogen exposure</li><li>d) Chronic medical conditions</li></ul> <p>8. Demonstrate an understanding of the impact of environmental stimulation and the impact of toxic stress on early brain development; identifying adverse childhood events (ACES) that constitute risk factors for developmental-behavioral disorders, such as</p> <ul style="list-style-type: none"><li>a) Poverty</li><li>b) Parental depression/substance abuse/mental health issues</li><li>c) Child abuse and neglect, domestic violence</li><li>d) Family systems [divorce, single parents, teen parents, blended families, birth order, sibling/peer relationships]</li><li>e) Foster care and international adoption</li><li>f) Cultural and community factors [violence, quality of schools/daycare, television/electronic media]</li><li>g) Lack of resilience factors</li></ul> <p>9. Performing a culturally-sensitive developmental-behavioral history through effective elicitation of the temporal pattern of milestone acquisition across developmental streams Performing comprehensive neurodevelopmental examinations, including the use of standardized instruments available to DBP physicians to perform extended developmental testing and neurobehavioral status assessments</p> <p>10. Interpreting results from standardized instruments used by early intervention programs, schools, and allied health professionals (psychology, speech/language pathology, OT, PT) in the assessment of cognitive, language, motor, adaptive, and academic abilities</p> <p>11. Integrating all information obtained from developmental and behavioral histories, results of standardized testing (from early intervention programs, schools, and allied health personnel) and neurodevelopmental examinations (including extended developmental testing and/or neurobehavioral status assessments) to formulate comprehensive developmental/behavioral diagnoses.</p>
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August 16, 2013

<b>3. Judicious mapping to domains of competence</b>	<input checked="" type="checkbox"/> Patient Care <input checked="" type="checkbox"/> Medical Knowledge <input type="checkbox"/> Practice-based Learning and Improvement <input type="checkbox"/> Interpersonal & Communication Skills <input type="checkbox"/> Professionalism <input type="checkbox"/> Systems-based Practice <input type="checkbox"/> Personal and Professional Development
<b>4. Competencies within each domain critical to entrustment decisions</b>	
<b>5. Curriculum</b>	Knowledge skills and attitudes needed to execute EPA safely (refer back to functions in activity description)