

1. A 6-week-old infant presents with fever in the emergency department (ED). You believe she needs to undergo a lumbar puncture to rule out meningitis. You are working with a third-year pediatrics resident whom you have not previously met. She tells you that she has been “signed off” on the entrustable professional activity (EPA) of performing a lumbar puncture.

What is your **BEST** next step as it pertains to your decision to delegate the lumbar puncture to the resident?

- a. You can delegate the task since a third-year pediatrics resident should have the necessary knowledge and skills to do a lumbar puncture.
- b. You can delegate the task if the resident tells you they are comfortable doing it.
- c. You can delegate the task because she has been deemed competent for that EPA by her program.
- d. You can delegate the task if, after a discussion with her, you believe she possesses the required knowledge and skills to perform it safely.

The correct answer is D. Supervisors need to assess a trainee’s knowledge, skills, and experience in order to appropriately delegate and decide on the level of supervision required.

2. A staff internist is caring for a patient with a malignant pleural effusion. She delegates the insertion of the chest tube to the senior resident, with whom she has previously worked and whose skills she has previously assessed. The resident accepts to perform the task and knows that the staff will be available in-house PRN. Unfortunately, the patient experiences a hemothorax and subsequently dies.

What statement describes a judge’s **MOST LIKELY** assessment about the delegation of the task?

- a. The resident should have told the internist it was unreasonable to expect them to insert the chest tube.
- b. The internist appropriately delegated the insertion of the chest tube to the senior resident.
- c. No formal supervision was required if the resident had passed that entrustable professional activity.
- d. The internist should have supervised the resident in person.

The correct answer is B. The internist appropriately delegated the insertion of the chest tube to the senior resident, whose knowledge, skills, and experience she knew well.

3. An emergency physician is working with a resident during his day shift and decides to let her discharge patients prior to reviewing them with him.

Which statement **BEST** justifies the attending physician's decision?

- a. The resident has uniformly been deemed to have stellar judgment by all other attendings.
- b. The resident has expressly stated that she wishes to have a high level of autonomy as a "stretch goal" during her rotation.
- c. The resident is in her final year of training and has to learn to make independent decisions.
- d. The emergency physician has previously worked with the resident and understands her abilities, trusts her insight, and deems her ready to do so.

The correct answer is D. As a supervisor, the emergency physician assesses the residents' knowledge, skills, and experience, to establish the required level of supervision.

4. A second year family medicine resident has worked in a dermatologist's clinic for the past 3 months. She sees a 28-year-old patient who presents with a left cheek lesion suspicious for melanoma. She is hoping that the staff physician will let her perform the procedure since she has had some experience with local biopsies, but the dermatologist insists that she will be performing the procedure herself.

Which of the following would be the most acceptable and **BEST** explanation for this decision?

- a. The staff has greater experience, which will optimize the likelihood of having clear margins with the smallest possible scar.
- b. The staff could not bill for the excision if the resident did it.
- c. The resident has already done many such procedures and does not need more experience.
- d. The staff can do the procedure more quickly than the resident.

The correct answer is A. The patient's best interests guided the dermatologist's decision. It is her prerogative to decide who is best placed to provide the best possible outcome for the patient.

5. A senior resident is keen to empower her team and to be there to support individual members of the team when she is on-call.

As it pertains to the safety of delegating tasks to junior residents, which approach is **MOST** likely to promote safe care?

- a. She should tell her team to always call her to review their decisions.
- b. She should tell her team that she trusts them to do the right thing and not to worry about calling her for “every little thing.”
- c. She should hold a team huddle at the beginning of her shift where she normalizes knowledge gaps and encourages her team to speak up about any concerns they have.
- d. She should ask the nurses on the unit to watch the juniors and “show them how it’s done.”

The correct answer is C. By creating an atmosphere where people are allowed to voice concerns and be vulnerable, the resident promotes psychological safety and will increase the likelihood that her team will call her when they need her.