Otolaryngology Milestones for Singapore



May 2017

Otolaryngology Milestones for Singapore The Milestones are designed only for use in evaluation of residents in the context of their participation in ACGME-I-accredited residency programs. The Milestones provide a framework for the assessment of the development of the resident in key dimensions of the

competency, nor are they designed to be relevant in any other context.

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elements of physician competency in a specialty. They neither represent the entirety of the dimensions of the six domains of physician

Milestones Reporting

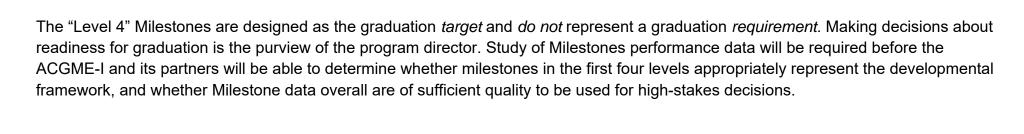
This document presents milestones designed for programs to use in semi-annual review of resident performance and reporting to the ACGME-I. Milestones are knowledge, skills, attitudes, and other attributes for each of the ACGME-I competencies organized in a developmental framework from less to more advanced. They are descriptors and targets for resident performance as a learner moves from entry into their program through graduation.

For each period, review and reporting will involve selecting milestone levels that best describe each resident's current performance and attributes. Milestones are arranged in numbered levels. Tracking from "Level 1" to "Level 5" is synonymous with moving from novice to expert in the specialty. These levels do not correspond with time in the educational program. Dependent upon previous education and experience, residents may enter a program at varying points in the Milestones.

Selection of a level implies that the resident substantially demonstrates the milestones in that level, as well as those in lower levels (see the diagram on page v).

- **Level 1:** The resident demonstrates milestones expected of an incoming resident.
- **Level 2:** The resident is advancing and demonstrates additional milestones, but is not yet performing at a mid-residency level.
- **Level 3:** The resident continues to advance and demonstrate additional milestones, consistently including the majority of milestones targeted for residency.
- **Level 4:** The resident has advanced so that he or she now substantially demonstrates the milestones targeted for residency. This level is designed as the graduation target.
- **Level 5:** The resident has advanced beyond performance targets set for residency and is demonstrating "aspirational" goals, which might describe the performance of someone who has been in practice for several years. It is expected that only a few exceptional residents will reach this level.

Additional Notes



Answers to Frequently Asked Questions about Milestones are posted on the ACGME-I website.

The diagram below presents an example set of milestones for one sub-competency in the same format as the ACGME-I Report Worksheet. For each reporting period, a learner's performance on the milestones for each sub-competency will be indicated by selecting the level of milestones that best describes that learner's performance in relation to those milestones.

Systems-Based Practice 1: Patient Safety and Quality Improvement					
Level 1	Level 2	Level 3	Level 4	Level 5	
Demonstrates knowledge of common patient safety events	Identifies system factors that lead to patient safety events	Participates in analysis of patient safety events (simulated or actual)	Conducts analysis of patient safety events and offers error prevention strategies (simulated or actual)	Actively engages teams and processes to modify systems to prevent patient safety events	
Demonstrates knowledge of how to report patient safety events	Reports patient safety events through institutional reporting systems (actual or simulated)	Participates in disclosure of patient safety events to patients and families (simulated or actual)	Discloses patient safety events to patients and families (simulated or actual)	Role models or mentors others in the disclosure of patient safety events	
Demonstrates knowledge of basic quality improvement methodologies and metrics	Describes local quality improvement initiatives (e.g., community vaccination rate, infection rate, smoking cessation)	Participates in local quality improvement initiatives	Demonstrates the skills required to identify, develop, implement, and analyze a quality improvement project	Creates, implements, and assesses quality improvement initiatives at the institutional or community level	
Comments:					
			Not y	et achieved Level 1	
Selecting a response box in of a level implies that mile that level and in lower leve substantially demonstrate	stones in els have been	Selecting a response between levels indicat lower levels have been demonstrated as well the higher level(s).	es that milestones in a substantially		

Patient Care 1: Salivary Disease						
Level 1	Level 2	Level 3	Level 4	Level 5		
Obtains basic history and physical	Obtains focused history and physical, including comprehensive head and neck exam, neck and cranial nerve exam; orders appropriate labs, fineneedle aspiration (FNA), and radiologic studies	Interprets appropriate lab, pathologic, and radiologic studies	Accurately tumor node metastasis (TNM) stages a specific patient	Performs ultrasound guided FNA of salivary gland mass		
Understands normal salivary gland function	Understands factors precipitating inflammatory salivary disease	Describes an accurate differential diagnosis of a salivary gland mass; able to clinically distinguish neoplastic from non- neoplastic etiologies	Makes correct diagnosis from clinical, radiologic, and pathologic information; knows histopathologic findings of common neoplastic processes	Teaches pathophysiology		
Knows treatment of Sialadenitis	Discusses treatment modality options in general terms (including adjuvant treatment)	Discusses appropriate therapeutic options and understands implications of those options	Formulates appropriate treatment plan for a specific salivary gland cancer patient based on primary site, disease stage, and patient factors	Performs extended dissection of parotid bed neoplasm with preservation of neurovascular (NV) structures as appropriate; teaches procedure		
Knows how to scrub; performs surgical time out; maintains sterile field	Performs intra-operative patient prep; raises skin flaps in appropriate plane; able to aesthetically close wound	Performs procedure with assistance; identifies neurovascular structures	Completes procedure with oversight	Treats complex complications		

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	Lists so complic	me potential ations	complica appropria	zes common tions; obtains ate consultatio nt managemer	ns	treat ar	nizes and is ab nd/or develop ent plan for col cations				
Comments:								Not Y	et Achieve	d Level 1	

Patient Care 2: Aerodigestive Tract Lesions (ADT)						
Level 1	Level 2	Level 3	Level 4	Level 5		
Obtains basic history and physical	Obtains focused history and physical, including comprehensive aerodigestive tract and cranial nerve clinic exam with recognition of normal anatomy and obvious abnormalities	Orders appropriate labs, functional, and radiologic studies; performs flexible and rigid endoscopic evaluation	Interprets appropriate lab, functional, and radiologic studies	Performs flexible fiberoptic laryngoscopy with manipulation with oversight		
Demonstrates limited understanding of normal laryngeal function	Understands normal laryngeal and esophageal function; understands factors precipitating inflammatory laryngeal disease	Knows differential diagnosis of vocal cord lesion; able to clinically distinguish neoplastic from non- neoplastic etiologies	Makes correct diagnosis from clinical, radiologic, and pathologic information; knows histopathologic findings of common neoplastic processes	Teaches pathophysiology		
Demonstrates limited knowledge of treatment options	Discusses treatment modality options in general terms	Discusses appropriate therapeutic options and understands implications of each	Formulates appropriate treatment plan for a specific vocal cord lesion patient based on lesion and patient factors	Teaches management of complex aerodigestive tract (ADT) lesions		
	Positions patient properly for laryngoscopy, and sometimes able to visualize the larynx	Able to consistently visualize the larynx during laryngoscopy and perform binocular microlaryngoscopy	Performs microlaryngoscopy consistently with complete exposure of the anterior commissure	Performs microlaryngoscopy in the difficult to expose patient with complete exposure of the anterior commissure		
	Positions patient properly for esophagoscopy, and	Performs esophagoscopy with biopsy in patients with favorable anatomy	Recognizes and is able to treat and/or develop treatment plan for	Performs esophagoscopy with complex intervention efficiently in the difficult		

	sometimes able to visualize the esophagus		common complications	to expose patient
	Lists some potential complications (e.g., identifies and appropriately treats local injury from endoscopic instruments)	Recognizes common complications; obtains appropriate consultations for patient management		Treats complex complications
Comments:			Not Y	et Achieved Level 1

evel 1	Level 2	Level 3	Level 4	Level 5
btains general history nd performs basic nysical exam	Recognizes signs and symptoms of SDB and the differences between children and adults; orders appropriate routine lab, radiologic, and sleep studies	Performs detailed examination with evaluation of upper airway anatomy and interprets basic diagnostic testing	Interprets examination and advanced diagnostic testing	Teaches focused history and physical exam
	Demonstrates basic understanding of spectrum of sleep disorders in children and adults	Demonstrates moderate understanding of spectrum of sleep disorders in children and adults	Demonstrates thorough understanding of spectrum of sleep disorders in children and adults	Recognizes interaction between SDB and other sleep disorders in children and adults
	Demonstrates beginning understanding of treatment measures	Demonstrates deepening understanding of medical treatments, role of surveillance, and alternate therapies	Able to list and prioritize treatment options for the patient with SDB in complicated patient populations	Identifies indications and risks of non-surgical treatment plans for sleep disorders other than SDB, and disorders of initiating and maintaining sleep
	Performs tonsillectomy and/or adenoidectomy (T&A) on typical pediatric or adult patient	Performs palatopharyngoplasty on typical patient	Performs T&A and palatopharyngoplasty on complex patients	Teaches T&A and palatopharyngoplasty
	Lists common potential complications	Lists rare complications; recognizes common complications and is able to initiate treatment in the typical patient	Recognizes and is able to treat and/or develop treatment plan for common and uncommon complications in the complex patient	

Patient Care 4: Rhinology						
Level 1	Level 2	Level 3	Level 4	Level 5		
Obtains basic sinonasal symptom history and performs basic head and neck exam	Obtains focused history and physical, including detailed sinonasal symptom inventory	Distinguishes the pathophysiologic and clinical presentations of the various subtypes of chronic rhinosinusitis	Identifies nasal endoscopic pathologic findings in the previously operated patient; facile with interpretation/use of appropriate laboratory, pathologic and radiologic diagnostic studies	Provides treatment of recurrent/extensive frontal sinus disease		
Recognizes symptoms that indicate sinonasal pathology	Demonstrates understanding of the anatomy of the nasal cavity and paranasal sinuses, including the blood supply	Distinguishes the various causes of nasal obstruction, and appreciates the different patients who require endonasal septoplasty versus open septorhinoplasty	Teaches nasal endoscopy Recognizes and diagnoses the possible uncommon etiologies of chronic bacterial sinusitis refractory to standard therapy	Performs revision and advanced endoscopic sinus surgery		
Demonstrates minimal knowledge of treatment options	Explains the diagnostic distinction between viral upper respiratory infections (URI) and acute bacterial sinusitis	Understands the anatomy of the nasolacrimal system and the work-up of nasolacrimal duct obstruction	Understands the principles and steps of endoscopic dacryocystorhinostomy, and is able to manage these patients post- operatively	Treats complex complications		
Performs surgical time out; familiar with pre-op documentation requirements (e.g., consent, history and physical, imaging)	Discusses treatment modality options in general terms; prescribes medical therapy for simple common conditions (e.g., viral URI, allergic rhinitis [AR], acute bacterial rhinosinusitis [ABRS])	Understands the work-up of cerebrospinal fluid (CSF) rhinorrhea, and the principles of CSF leak repair	Understands the principles of trans-sphenoidal pituitary surgery, and is able to manage these patients post-operatively			

Knows how to scrub		Performs simple septoplasty, not involving caudal septal correction			
Lists some complications of rhinosinusitis	Performs nasal endoscopy and recognizes basic sinonasal pathology; demonstrates basic understanding of appropriate laboratory, pathologic, and radiologic diagnostic studies	Performs inferior turbinate surgery Performs basic endoscopic sinus surgery (ESS) i.e. uncinectomy, maxillary antrostomy, anterior ethmoidectomy, with supervision; recognizes endoscopic surgical landmarks			
Comments:			Not Yet Achiev	ed Level 1)

Level 1	Level 2	Level 3	Level 4	Level 5
Obtains basic history and performs basic head and neck exam	Obtains focused history and physical	Performs limited dynamic nasal function analysis and anterior rhinoscopy	Performs comprehensive dynamic nasal function analysis; identifies aesthetic/cosmetic abnormalities; correlates examination findings with underlying structural etiologies	Performs analysis in revision/post-surgical setting
Demonstrates minimal knowledge of treatment options	Demonstrates understanding of normal nasal physiology	Differentiates between variable and fixed nasal obstruction contributors	Identifies specific components of nasal pathophysiology in functional obstruction	
Performs surgical time out; knows how to scrub	Discusses treatment modality options in general terms; prescribes medical therapy for simple common condition	Discusses appropriate therapeutic options for common nasal deformities	Formulates appropriate treatment plan for patient with fixed and/or dynamic nasal obstruction	Formulates appropriate treatment plan for patient requiring revision surgery
	Prepares patient intra- operatively			
	Plans, performs, and closes incisions that would be needed for adequate exposure; able to intraoperatively prepare patient (i.e., pack nose with decongestant pledgets, inject nose with local	Plans and performs incisions that would be needed for both intranasal and external rhinoplasty; cognizant of landmarks that mark important neurovascular structures	Resects, recontours, and corrects septal abnormalities	
	anesthetic)	Elevates septal mucosal flaps adequately to		

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		address identified structural abnormalities		
	Demonstrates limited knowledge of potential complications	Recognizes common complications	Recognizes and is able to treat and/or develop treatment plan for common complications	
Comments:			Not Yet Acl	hieved Level 1

Level 1	Level 2	Level 3	Level 4	Level 5
Performs general history and physical	Obtains pertinent otologic history and performs hand-held otoscopy; differentiates middle ear/mastoid disease from otitis externa; performs cranial nerve exam	Performs reliable otomicroscopic exam; orders appropriate audiometry, laboratory, and radiologic studies	Accurately interprets appropriate diagnostic studies; understands the indications for operative intervention; recognizes acute complications in the setting of COM	Interprets less commonly utilized diagnostic tests
Knows some common symptoms of ear infections	Identifies Eustachian tube (ET) dysfunction and the normal and abnormal physiologic contributors	Clinically differentiates otitis media (OM), otitis externa (OE), necrotizing OE, chronic otitis media (COM), mastoiditis, and cholesteatoma	Understands mechanisms underlying the development of intratemporal and intracranial complications of chronic ear disease	Manages chronic otitis media in an only hearing ear
Demonstrates limited knowledge of chronic ear disease	Prescribes appropriate systemic and/or topical antibiotic therapy for chronic otitis media; understands basics of post-operative wound care	Recognizes clinical failure of medical management; describes surgical risks, benefits, and alternatives; understands concept of recidivism and understands need for long-term surveillance plan	Formulates appropriate treatment plan for care of a patient with complications of chronic ear disease	Performs canal wall down mastoidectomy skillfully; able to proficiently perform facial recess approach
Demonstrates little knowledge of medical/surgical treatments for ear disease	Positions, preps, and drapes patient; able to inject local anesthetic; makes post-auricular incision; able to aesthetically close wound	Performs ear canal incisions and elevates tympanomeatal flap; performs cortical mastoidectomy and identifies antrum/horizontal semicircular canal;	Removes granulation tissue and/or cholesteatoma from middle ear/mastoid; skeletonizes vertical segment of facial nerve; performs tympanoplasty under supervision	Performs ossiculoplasty under supervision

Knows how to scrub; performs surgical time out; maintains sterile field	Lists potential complications of ear surgery	skeletonizes posterior canal wall Able to manage routine post- operative complications	Recognizes major complications	Treats major post- surgical complications
Comments:			Not Ye	t Achieved Level 1

Patient Care 7: Pediatric C	Diitis Media			
Level 1	Level 2	Level 3	Level 4	Level 5
Performs basic history and physical examination	Performs focused clinical examination and is able to correctly diagnose acute OM, OM with effusion, and OE some of the time; knows when to order basic audiometric testing	Performs pneumatic otoscopy and accurately diagnose acute OM, OM with effusion, and OE; knows when additional imaging is required for diagnosis	Skilled pneumatic otoscopist in children of all ages; recognizes complications of acute OM, OM with effusion, and OE	Skilled pneumatic otoscopist in syndromic children
Understands concept of OM and OE	Describes the etiologic organisms most commonly associated with OM and OE; understands the predisposing factors associated with each type of ear infection	Accurately diagnoses patients along the OM natural history spectrum and identifies ramifications of treated/untreated OM	Diagnoses intra- and extracranial complications of ear infections	Places tympanostomy tube safely in patients with difficult anatomy
Participates in surgical time out	Appropriately prescribes topical and/or oral antibiotics for ear infections; demonstrates familiarity with effectiveness/ ineffectiveness of non-antibiotic medications and alternative treatments	Recognizes treatment failures/refractoriness and indications for surgical intervention	Treats complications of ear infections	
	Inserts ear speculum and safely cleans cerumen from ear canal	Identifies tympanic membrane and external auditory canal (EAC) landmark and structures; able to consistently perform appropriate myringotomy	Places tympanostomy tube safely in all patients with easy anatomy and in some patients with difficult anatomy	

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	Lists pote complicat	complica appropria	zes common tions; obtains ate consultations at management	3	Recognizes treat and/or treatment pl common cor	develop an for				
Comments:							Not Y	et Achieved	d Level 1	

Medical Knowledge 1: Faci	Medical Knowledge 1: Facial Trauma						
Level 1	Level 2	Level 3	Level 4	Level 5			
Understands how to obtain history and how to perform basic physical exam	Recognizes symptoms of mandible and facial fractures; able to discuss assessment for airway, breathing, and circulation (ABC's) and need for urgent intervention	Understands how to obtain focused history and perform focused exam, including airway evaluation and survey for other head and neck injuries; and how to order appropriate routine lab and radiologic studies	Interprets appropriate lab and radiologic studies; identifies	Develops appropriate treatment plan for panfacial fracture patient			
Demonstrates basic knowledge of normal facial skeleton and relationships	Localizes zones of the traumatically involved facial skeleton (i.e., frontal, orbital, midface, and mandible) using detailed familiarity with normal facial boney and soft tissue anatomy	Identifies common facial skeleton fracture patterns	Accurately diagnoses location and extent of specific facial trauma	Understands principles for revision/infected mandibular fracture ORIF			
Demonstrates limited knowledge of treatment options	Discusses treatment modality options in general terms; demonstrates limited knowledge of potential indications for operative open reduction and internal fixation (ORIF) of the spectrum of facial fractures	Discusses appropriate therapeutic options for major facial fracture types/patterns	Develops appropriate treatment plan and ORIF method for a facial fracture patient with combined mandible and midface fracture Able to list common complications and their treatment	Able to list and discuss plans for complex complications			
Demonstrates limited familiarity with complications	Understands different methods of maxillo- mandibular fixation and types of intraoral and external incisions	Understands how to establish baseline patient occlusion and how to decide appropriate surgical approaches (location and					

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	Lists some	fra ex R	extent) to visualize ractures and provide dequate exposure for ORIF Recognizes common omplications					
Comments:					Not Y	et Achieve	ed Level 1	

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates basic understanding of UADT and neck anatomy	Demonstrates moderate knowledge of UADT and neck anatomy; teaches anatomy to medical students in the operating room (OR)	Demonstrates proficient knowledge of normal anatomy; teaches anatomy to junior residents in the OR	Correlates anatomic knowledge with disease physical examination (PEx) and radiologic findings	Gives lectures on anatomy
Knows normal UADT function (mastication, deglutition, respiration, and phonation)	Knows abnormal UADT physiologic function and locoregional manifestations; knows tobacco is correlated with UADT cancer	Knows major risk factors for UADT cancer according to type of cancer Knows most common disease progression routes for UADT malignancy	Understands molecular basis for UADT cancer; knows benign and malignant differential diagnoses of common site presentations	Articulates treatment protocol specifics for primary chemoradiation therapy
Obtains basic history and physical	Knows most common disease state presentations for UADT malignancies	Interprets appropriate lab, pathologic, and radiologic studies	Knows staging system for most common UADT cancers, and can accurately stage using available clinical and radiologic data	
	Performs focused history and physical, including clinic laryngoscopy; understands appropriate labs, FNA, and radiologic studies for workup	Understands concepts of neo-adjuvant, primary, and adjuvant treatments; describes options for securing the difficult airway in the OR	Understands the prognostic indicators of tumor pathology, including molecular markers	
	Describes basic treatment algorithm for UADT malignancies		Describes treatment options based on primary site, disease stage, and patient factors	

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates limited knowledge of temporal bone and cochleovestibular anatomy	Demonstrates proficient knowledge of temporal bone and cochleovestibular gross anatomy/embryology	Demonstrates proficient knowledge of normal temporal bone and cochleovestibular histopathology	Understands congenital variations of temporal bone and cochleovestibular anatomy	Demonstrates knowledge of central auditory pathways
Demonstrates limited understanding of the physiology of hearing	Understands normal middle ear mechanics and cochlear physiology	Generates differential diagnosis for hearing loss in adult patients	Generates differential diagnosis for hearing loss in children, and identifies uncommon causes of hearing loss in adults	
Demonstrates limited understanding of the natural history of hearing loss	Understands the natural history of presbycusis and noise-induced hearing loss	Understands the natural history of adult onset hearing loss	Understands the natural history of pediatric hearing loss and uncommon causes of adult-onset hearing loss	
	Recognizes normal ear exam and normal audiometry; able to identify basic hearing loss classifications on an audiogram; demonstrates limited knowledge of options for diagnostic work-up of hearing loss	Recognizes an abnormal ear exam/audiogram; orders appropriate routine audiometric, laboratory, and imaging tests for work-up	Considers unusual causes for hearing loss and orders/interprets appropriate advanced audiometric, laboratory, and imaging studies	

	Demonstrates awareness of non-surgical aural rehabilitation options; understands importance of hearing surveillance	Demonstrates comprehensive awareness of aural rehabilitation options, including surgical management of hearing loss	Describes indications/ contraindications and complications of the surgical aural rehabilitation techniques; tailors aural rehabilitation to patient-specific needs	
Comments:			Not Y	et Achieved Level 1

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates limited understanding of aerodigestive functional anatomy	Understands basic anatomy and physiology of voice and swallowing	Demonstrates mid-level understanding of anatomy and physiology of voice and swallowing	Demonstrates thorough knowledge of anatomy and physiology of voice and swallowing	Teaches pathophysiology
Demonstrates limited understanding of common voice and swallowing disorders	Demonstrates basic understanding of common voice and swallowing disorders	Demonstrates mid-level understanding of common voice and swallowing disorders	Demonstrates comprehensive understanding of most voice and swallowing disorders, including voice and swallowing manifestations of systemic diseases (i.e., autoimmune disorders, sarcoid, neuromuscular disorders)	
Demonstrates limited knowledge of disease progression and sequelae of untreated voice and swallowing disorders	Understands age-related changes to voice and swallowing	Demonstrates knowledge of disease progression and sequelae of untreated voice and swallowing disorders	Articulates comprehensive understanding of risk factors and timeframe for malignant transformation of premalignant conditions (laryngopharyngeal reflux disease [LPRD], Barrett's, Dysplasia/ Leukoplakia, recurrent respiratory papillomatosis [RRP])	

Obtains basic history and physical	Obtains focused history and physical, including clinic laryngoscopy; able to list appropriate diagnostic modalities for work-up of voice and swallowing disorders	Interprets appropriate lab, pathologic, and radiologic studies	Correlates laboratory and radiologic work-up with clinical diagnosis	
Demonstrates minimal understanding of treatment options and rationales, and risks/benefits of each treatment option	Demonstrates beginning understanding of treatment options and rationales, and risks/benefits of each treatment option	Demonstrates mid-level understanding of treatment options and rationales, and risks/benefits of each treatment option	Demonstrates understanding of treatment options and rationales, risks/benefits of each treatment option, and surveillance algorithms for malignant disease	
Comments:			Not Ye	et Achieved Level 1

_evel 1	Level 2	Level 3	Level 4	Level 5
Demonstrates familiarity with basic nasal anatomy and normal respiratory mucosa histology	Demonstrates basic understanding of derangements in nasal anatomy and mucosal inflammation	Demonstrates knowledge of histopathology of allergic rhinitis and anatomic factors affecting the nasal airway	Demonstrates thorough understanding of anatomic impact of allergic inflammation on the nasal airway	Demonstrates advanced understanding of allergy diagnostic testing
Demonstrates familiarity with normal functions of nasal mucosa and nasal cavities	Knows pathophysiology of allergic rhinitis (AR)	Knows pathophysiology of non-allergic rhinitis	Distinguishes presentations of allergic and non-allergic rhinitis patients; demonstrates knowledge of cellular and molecular features of inhalant allergy	Is facile with multiple methods of immunotherapy
Demonstrates limited knowledge of allergy work-up	Describes comorbidities in AR	Describes the natural history and components of severity in allergic disease	Describes systems for AR subtype and severity (e.g., seasonal vs. perennial, intermittent vs. persistent, etc.) and incorporates knowledge of severity and natural history into patient management	
	Demonstrates familiarity with clinical presentations of allergic disease	Demonstrates knowledge of testing methods in allergic disease	Combines clinical features and test results to correctly diagnose allergic disease	
	Prescribes basic medical treatment for AR	Prescribes advanced medical treatment for allergic disease	Demonstrates a working knowledge of immunotherapy for allergic disease	

Systems-Based Practice 1: Patient Safety and Quality Improvement						
Level 1	Level 2	Level 3	Level 4	Level 5		
Demonstrates knowledge of common patient safety events	Identifies system factors that lead to patient safety events	Participates in analysis of patient safety events (simulated or actual)	Conducts analysis of patient safety events and offers error prevention strategies (simulated or actual)	Actively engages teams and processes to modify systems to prevent patient safety events		
Demonstrates knowledge of how to report patient safety events	Reports patient safety events through institutional reporting systems (actual or simulated)	Participates in disclosure of patient safety events to patients and families (simulated or actual)	Discloses patient safety events to patients and families (simulated or actual)	Role models or mentors others in the disclosure of patient safety events		
Demonstrates knowledge of basic quality improvement methodologies and metrics	Describes local quality improvement initiatives (e.g., community vaccination rate, infection rate, smoking cessation)	Participates in local quality improvement initiatives	Demonstrates the skills required to identify, develop, implement, and analyze a quality improvement project	Creates, implements, and assesses quality improvement initiatives at the institutional or community level		
Comments:	Comments: Not Yet Achieved Level 1					

Systems-Based Practice 2	Systems-Based Practice 2: System Navigation for Patient-Centered Care					
Level 1	Level 2	Level 3	Level 4	Level 5		
Demonstrates knowledge of care coordination	Coordinates care of patients in routine clinical situations effectively utilizing the roles of the interprofessional teams	Coordinates care of patients in complex clinical situations effectively utilizing the roles of their interprofessional teams	Role models effective coordination of patient-centered care among different disciplines and specialties	Analyzes the process of care coordination and leads in the design and implementation of improvements		
Identifies key elements for safe and effective transitions of care and handoffs	Performs safe and effective transitions of care/handoffs in routine clinical situations	Performs safe and effective transitions of care/handoffs in complex clinical situations	Role models and advocates for safe and effective transitions of care/handoffs within and across health care delivery systems, including outpatient settings	Improves quality of transitions of care within and across health care delivery systems to optimize patient outcomes		
Demonstrates knowledge of population and community health needs and disparities	Identifies specific population and community health needs and inequities for their local population	Uses local resources effectively to meet the needs of a patient population and community	Participates in changing and adapting practice to provide for the needs of specific populations	Leads innovations and advocates for populations and communities with health care inequities		
Comments:			Not Yet Ac	hieved Level 1		

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies components of the complex health care system	Describes the physician's role and how the interrelated components of complex health care system impact patient care	Analyzes how personal practice affects the system	Manages the interrelated components of the complex health care systems for efficient and effective patient care	Advocates for or leads change to enhance systems for high value, efficient, and effective patient care
Describes basic health payment systems, including government, private, public, and uninsured care and different practice models	Delivers care informed by patient specific payment model	Utilizes shared decision making in patient care, taking into consideration payment models	Advocates for patient care understanding the limitations of each patient's payment model (e.g., community resources, patient assistance resources)	Participates in advocacy activities for health policy to better align payment systems with high value care
		Identifies resources and effectively plans for transition to practice (e.g., information technology, legal, billing and coding, financial, personnel)	Describes basic elements needed to transition to practice (e.g., contract negotiations, malpractice insurance, government regulation, compliance)	

Practice-Based Learning and Improvement 1: Evidence-Based and Informed Practice						
Level 1	Level 2	Level 3	Level 4	Level 5		
Demonstrates how to access and use available evidence, and incorporate patient preferences and values in order to take care of a routine patient	Articulates clinical questions and elicits patient preferences and values in order to guide evidence-based care	Locates and applies the best available evidence, integrated with patient preference, to the care of complex patients	Critically appraises and applies evidence even in the face of uncertainty and conflicting evidence to guide care, tailored to the individual patient	Coaches others to critically appraise and apply evidence for complex patients; and/or participates in the development of guidelines		
Comments:			Not Yet	Achieved Level 1		

Level 1	Level 2	Level 3	Level 4	Level 5
Accepts responsibility for personal and professional development by establishing goals	Demonstrates openness to performance data (feedback and other input) in order to inform goals	Seeks performance data episodically, with adaptability and humility	Intentionally seeks performance data consistently, with adaptability and humility	Role models consistently seeking performance data, with adaptability and humility
Identifies the factors that contribute to gap(s) between expectations and actual performance	Analyzes and reflects on the factors that contribute to gap(s) between expectations and actual performance	Analyzes, reflects on, and institutes behavioral change(s) to narrow the gap(s) between expectations and actual performance	Challenges assumptions and considers alternatives in narrowing the gap(s) between expectations and actual performance	Coaches others on reflective practice
Actively seeks opportunities to improve	Designs and implements a learning plan, with prompting	Independently creates and implements a learning plan	Uses performance data to measure the effectiveness of the learning plan and, when necessary, improves it	Facilitates the design and implementation of learning plans for others

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies and describes potential triggers for professionalism lapses	Demonstrates insight into professional behavior in routine situations	Demonstrates professional behavior in complex or stressful situations	Recognizes situations that may trigger professionalism lapses and intervenes to prevent lapses in self and others	Coaches others when their behavior fails to meet professional expectations
Describes when and how to appropriately report professionalism lapses, including strategies for addressing common barriers	Takes responsibility for own professionalism lapses	Analyzes complex situations using ethical principles	Recognizes and utilizes appropriate resources for managing and resolving ethical dilemmas as needed (e.g., ethics consultations, literature review, risk management/legal consultation)	Identifies and seeks to address system-level factors that induce or exacerbate ethical problems or impede their resolution
Demonstrates knowledge of the ethical principles underlying informed consent, surrogate decision making, advance directives, confidentiality, error disclosure, stewardship of limited resources, and related topics	Analyzes straightforward situations using ethical principles	Recognizes need to seek help in managing and resolving complex ethical situations		

₋evel 1	Level 2	Level 3	Level 4	Level 5
Takes responsibility for ailure to complete tasks and responsibilities, dentifies potential contributing factors, and describes strategies for ensuring timely task completion in the future	Performs tasks and responsibilities in a timely manner with appropriate attention to detail in routine situations	Performs tasks and responsibilities in a timely manner with appropriate attention to detail in complex or stressful situations	Recognizes situations that may impact others' ability to complete tasks and responsibilities in a timely manner	Takes ownership of system outcomes
Responds promptly to requests or reminders to complete tasks and responsibilities	Recognizes situations that may impact own ability to complete tasks and responsibilities in a timely manner	Proactively implements strategies to ensure that the needs of patients, teams, and systems are met		

evel 1	Level 2	Level 3	Level 4	Level 5
decognizes status of ersonal and rofessional well-being, rith assistance	Independently recognizes status of personal and professional well-being	With assistance, proposes a plan to optimize personal and professional well-being	Independently develops a plan to optimize personal and professional wellbeing	Coaches others when emotional responses or limitations in knowledge/skills do not meet professional expectations
decognizes limits in the nowledge/skills of self r team, with assistance	Independently recognizes limits in the knowledge/skills of self or team	With assistance, proposes a plan to remediate or improve limits in the knowledge/skills of self or team	Independently develops a plan to remediate or improve limits in the knowledge/skills of self or team	
	Demonstrates appropriate help-seeking behaviors			

Interpersonal and Communi	Interpersonal and Communication Skills 1: Patient- and Family-Centered Communication				
Level 1	Level 2	Level 3	Level 4	Level 5	
Uses language and non- verbal behavior to demonstrate respect and establish rapport	Establishes a therapeutic relationship in straightforward encounters using active listening and clear language	Establishes a therapeutic relationship in challenging patient encounters	Easily establishes therapeutic relationships, with attention to patient/family concerns and context, regardless of complexity	Mentors others in situational awareness and critical self- reflection to consistently develop positive therapeutic relationships	
Identifies common barriers to effective communication (e.g., language, disability) while accurately communicating own role within the health care system	Identifies complex barriers to effective communication (e.g., health literacy, cultural)	When prompted, reflects on personal biases while attempting to minimize communication barriers	Independently recognizes personal biases while attempting to proactively minimize communication barriers	Role models self- awareness practice while identifying teaching a contextual approach to minimize communication barriers	
Identifies the need to adjust communication strategies based on assessment of patient/family expectations and understanding of their health status and treatment options	Organizes and initiates communication with patient/family by introducing stakeholders, setting the agenda, clarifying expectations, and verifying an understanding of the clinical situation	With guidance, sensitively and compassionately delivers medical information; elicits patient/family values, goals and preferences; and acknowledges uncertainty and conflict	Independently uses shared decision making to align patient/family values, goals, and preferences with treatment options to make a personalized care plan	Role models shared decision making in patient/family communication in situations with a high degree of uncertainty/conflict	
Comments:			Not Yet	Achieved Level 1	

Interpersonal and Communication Skills 2: Interprofessional and Team Communication				
Level 1	Level 2	Level 3	Level 4	Level 5
Respectfully requests a consultation	Clearly and concisely requests a consultation	Checks own understanding of consultant recommendations	Coordinates recommendations from different members of the health care team to optimize patient care	Role models flexible communication strategies that value input from all health care team members, resolving conflict when needed
Respectfully receives a consultation request	Clearly and concisely responds to a consultation request	Checks understanding of recommendations when providing consultation	Communicates feedback and constructive criticism to superiors	Facilitates regular health care team-based feedback in complex situations
Uses language that values all members of the health care team	Communicates information effectively with all health care team members	Uses active listening to adapt communication style to fit team needs		
	Solicits feedback on performance as a member of the health care team	Communicates concerns and provides feedback to peers and learners		
Comments:			Not Ye	t Achieved Level 1

Level 1	Level 2	Level 3	Level 4	Level 5
Accurately records	Demonstrates organized	Concisely reports	Communicates clearly,	Models feedback to
information in the patient record	diagnostic and therapeutic reasoning through notes in the patient record	diagnostic and therapeutic reasoning in the patient record	concisely, in a timely manner, and in an organized written form, including anticipatory guidance	improve others' written communication
Safeguards patient personal health information	Demonstrates accurate, timely, and appropriate use of documentation shortcuts	Appropriately selects direct (e.g., telephone, in- person) and indirect (e.g., progress notes, text messages) forms of communication based on context	Produces written or verbal communication (e.g., patient notes, e-mail, etc.) that serves as an example for others to follow	Guides departmental or institutional communication around policies and procedures
Communicates through appropriate channels as required by institutional policy (e.g., patient safety reports, cell phone/pager usage)	Documents required data in formats specified by institutional policy Respectfully	Uses appropriate channels to offer clear and constructive suggestions to improve the system	Initiates difficult conversations with appropriate stakeholders to improve the system	Facilitates dialogue regarding systems issues among larger community stakeholders (e.g., institution, health care system, field)
	communicates concerns about the system			