

Anesthesiology Milestones

ACGME International, Inc. (ACGME-I)



Second Revision: March 2023 First Revision: May 2017

Anesthesiology Milestones

The Milestones are designed only for use in evaluation of residents and fellows in the context of their participation in ACGME-I-accredited residency and fellowship programs. The Milestones provide a framework for the assessment of the development of the resident or fellow in key dimensions of the elements of physician competence in a specialty or subspecialty. They neither represent the entirety of the dimensions of the six domains of physician competence, nor are they designed to be relevant in any other context.

Understanding Milestone Levels and Reporting

This document presents the Milestones, which programs use in a semi-annual review of resident or fellow performance, and then report to the ACGME-I. Milestones are knowledge, skills, attitudes, and other attributes for each of the ACGME-I Competencies organized in a developmental framework. The narrative descriptions are targets for resident/fellow performance throughout the educational program.

Milestones are arranged into levels. Tracking from Level 1 to Level 5 is synonymous with moving from novice to expert resident or fellow in the specialty or subspecialty. For each reporting period, the Clinical Competency Committee will review the completed evaluations to select the milestone levels that best describe each learner's current performance, abilities, and attributes for each subcompetency.

These levels *do not* correspond with post-graduate year of education. Depending on previous experience, more junior residents/fellows may achieve higher levels early in their educational program just as more senior residents/fellows may be at a lower level later in their educational program. There is no predetermined timing for a resident or fellow to attain any particular level. Residents and fellows may also regress in achievement of their milestones. This may happen for many reasons, such as overscoring in a previous review, a disjointed experience in a particular procedure, or a significant act by the resident/fellow.

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

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Additional Notes

Level 4 is designed as a graduation *goal* but *does not* represent a graduation *requirement*. Making decisions about readiness for graduation and unsupervised practice is the purview of the program director. Furthermore, Milestones 2.0 include revisions and changes that preclude using the Milestones as a sole assessment in high-stakes decisions. Level 5 is designed to represent an expert resident or fellow whose achievements in a subcompetency are greater than the expectation. Milestones are primarily designed for formative, developmental purposes to support continuous quality improvement for individual learners, education programs, and the specialty. ACGME-I and its partners will continue to evaluate and perform research on the Milestones to assess their impact and value.

Examples are provided for some milestones within this document. Note: The examples are not the required element or outcome; they are provided as a way to share the intent of the element.

Some milestone descriptions include statements about performing independently. These activities must occur in conformance with ACGME-I supervision guidelines as described in the applicable Program Requirements, as well as with institutional and program policies. For example, a resident who performs a procedure independently must, at a minimum, be supervised through oversight.

A Supplemental Guide is also available to provide more context regarding the intent of each subcompetency, as well as examples for each level, assessment methods or tools, and other resources. The Supplemental Guide, like examples contained within the Milestones, is designed only to assist the program director and Clinical Competency Committee; it is not meant to demonstrate any required element or outcome.

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The diagram below presents an example set of milestones for one subcompetency in the same format as the ACGME-I Report Worksheet. For each reporting period, a resident's/fellow's performance on the milestones within each subcompetency will be indicated by selecting the Milestones Level that best describes that individual'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 (simulated or actual) | Participates in disclosure of patient safety events to patients and their families (simulated or actual) | Discloses patient safety events to patients and their 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 Yet (| Completed Level 1 |
| Selecting a resp middle of a level milestones in the levels have been demonstrated. | implies that at level and in lower | Selecting a response between levels indicat in lower levels have b demonstrated as well milestones in the high | tes that milestones een substantially as some | |

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| Patient Care 1: Pre-Anesthetic Evaluation | | | | |
|---|--|---|---|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Performs basic chart review | Performs focused chart review, with indirect supervision | Interprets chart review information to assess need for further work-up | Evaluates diagnostic data and provides risk stratification based on comorbidities and anesthetic implications | |
| Conducts patient interview, with direct supervision | Interviews the patient and gathers pertinent information, with indirect supervision | Interprets information collected during patient interview, with assistance | Independently identifies the need for additional evaluation and suggests therapeutic interventions | |
| Conducts and interprets a physical examination, with direct supervision | Conducts a focused physical examination, with indirect supervision | Identifies comorbidities on physical examination that may require further evaluation, with indirect supervision | Independently identifies concerning physical exam findings that require further evaluation | Independently identifies a previously undiagnosed condition |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

| Patient Care 2: Perioperative Care and Management | | | | |
|--|--|---|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Identifies the components of an anesthetic plan | Develops an anesthetic plan for a healthy patient undergoing uncomplicated procedures | Develops an anesthetic plan for patients with well- controlled comorbidities or undergoing complicated procedures | Develops an anesthetic plan for patients with multiple uncontrolled comorbidities, and undergoing complicated procedures | |
| Identifies the components of a pain management plan | Implements simple perioperative pain management plan | Identifies patients with a history of chronic pain who require a modified perioperative pain management plan | Implements the anesthetic plan for patients with complex pain history and polypharmacy | In collaboration with other specialists, develops protocols for multimodal analgesia plan for patients with a complex pain history and substance use disorder |
| Identifies potential impact of anesthesia beyond intraoperative period | Identifies patient-specific risk factors for long-term anesthetic effects | Develops the anesthetic plan based on risk factors to mitigate the long-term impact of anesthesia | Implements the anesthetic plan to mitigate the long-term impact of anesthesia | Develops departmental or institutional protocols for reduction of the long-term impact of anesthesia |
| | | | | |
| Comments: Not Yet Completed Level 1 Not Yet Assessable | | | | |

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| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|--|---|--|---|---|
| Identifies standard monitors | Independently selects central and arterial catheters based on patient comorbidities and procedure | Selects advanced monitors based on patient comorbidities and procedure, with supervision | Independently selects advanced monitors based on patient comorbidities and procedure | |
| Applies standard monitors to patients | Inserts central and arterial catheters, with supervision | Inserts or applies advanced monitors, with supervision | Independently inserts or applies advanced invasive monitors | Functions as a consultant for difficult advanced monitor placement |
| Interprets standard monitoring data | Addresses malfunctions in standard monitors and interprets data from central and arterial lines, with supervision | Recognizes and addresses malfunctions in advanced monitors and interprets data, with supervision | Independently interprets data, recognizes and addresses malfunctions in monitors and other anesthesia equipment | Participates in the research and/or development of protocols for monitoring technology |
| | | | | |

| Patient Care 4: Intraoperative Care | | | | |
|--|--|---|---|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Assists in the initiation of the anesthetic | Plans and initiates the anesthetic for healthy patients undergoing uncomplicated procedures, with supervision | Plans and initiates the anesthetic in a patient with well-controlled comorbidities, or undergoing complicated procedures | Independently plans and initiates the anesthetic in a patient with multiple uncontrolled comorbidities undergoing complicated procedures | |
| Assists in maintenance of anesthetic care | Manages expected events during anesthetic care, with supervision | Independently manages expected events during anesthetic care | Independently manages unexpected events during anesthetic care | Manages rare events during anesthetic care |
| Assists with emergence from anesthesia | Anticipates and manages expected events during emergence, with supervision | Anticipates and manages unexpected events during emergence, with supervision | Independently anticipates and manages unexpected events during emergence | Manages rare events during emergence |
| | | | | |
| Comments: Not Yet Completed Level 1 Not Yet Assessable | | | | |

| Patient Care 5: Airway | lanagement | | | |
|--|--|--|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Performs basic airway assessment Performs bag-mask ventilation in uncomplicated airway | Uses the airway exam and identifiable risk factors to formulate a patient-specific plan Prepares basic equipment and manages an uncomplicated airway | Devises airway management plans that address contingencies, with supervision Prepares and incorporates advanced equipment in the | Independently devises airway management plans that address contingencies Independently prepares and incorporates advanced equipment in | Functions as an expert in an airway crisis for complicated airways |
| | | management of a complicated airway, with supervision | the management of a complicated airway | |
| Comments: | | | | ompleted Level 1 |
| | | | Not Yet A | · |

| Patient Care 6: Point-of-Care Ultrasound | | | | |
|--|--|--|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Lists and explains the basic science and terminology of ultrasound | Selects ultrasound equipment for procedures, with supervision | Selects ultrasound equipment for a patient with difficult anatomy, with supervision | Independently selects proper ultrasound equipment and settings for indicated scenarios | Participates in research of emerging ultrasound procedures |
| Identifies relevant anatomy using ultrasound | Conducts point-of-care ultrasound, with supervision | Interprets point-of-care ultrasound, with supervision | Independently conducts and interprets point-of- care ultrasound | Participates in the development of institutional protocols for point-of-care ultrasound |
| Uses ultrasound for vascular access in routine situations, with supervision | Uses ultrasound for vascular access in routine situations | Uses ultrasound for vascular access in complex situations, with supervision | Independently uses ultrasound for vascular access in complex situations | |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

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| Patient Care 7: Situational Awareness and Crisis Management | | | | |
|--|--|---|--|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Demonstrates vigilance during clinical care | Demonstrates awareness of case flow and developments throughout a procedure | Demonstrates awareness of case flow and developments throughout a procedure, including those outside of one's own immediate control, with supervision | Independently demonstrates awareness of case flow and developments throughout a procedure, including those outside of one's own immediate control | |
| Articulates causes of common perioperative crisis situations | Recognizes crisis situations; calls for help | Anticipates impending crisis and identifies possible etiologies, with supervision | Independently anticipates impending crisis and identifies possible etiologies | |
| Responds to crisis | Participates in | Initiates management and | Independently initiates | Leads the health care |
| situations as a reliable team member | management during crisis situations | resolves crisis situations, with supervision | management and resolves crisis situations | team in the management of crisis situations |
| | | | | |
| Comments: Not Yet Completed Level 1 Not Yet Assessable | | | | |

| Patient Care 8: Postoperative Care | | | | | |
|--|--|---|--|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Outlines postoperative disposition options for patients | Plans disposition for uncomplicated procedures | Identifies unexpected changes in patient status meriting change in disposition, with supervision | Independently identifies unexpected changes in patient status meriting change in disposition | Develops protocols for disposition based on procedure and patient comorbidities | |
| Lists complications commonly encountered postoperatively | Diagnoses, manages, and documents commonly encountered complications arising from anesthetic care, with supervision | Diagnoses, manages, and documents uncommon complications arising from anesthetic care, with supervision | Independently diagnoses, manages, and documents uncommon complications arising from anesthetic care | | |
| | | | | | |
| Comments: Not Yet Completed Level 1 | | | | | |

| Patient Care 9: Critical Care | | | | |
|--|--|--|---|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Acquires data for the care of the critically ill patient | Interprets routine diagnostic data in the care of critically ill patients | Interprets advanced diagnostic data in the care of critically ill patients, with supervision | Independently interprets advanced diagnostic data in the care of critically ill patients | |
| Recognizes when a patient is critically ill | Prioritizes the care of the critically ill patient | Prioritizes the care of multiple critically ill patients, with supervision | Independently prioritizes the care of multiple critically ill patients | Leads and deploys resources in the care of the critically ill patient |
| | Implements the care team's plan for a critically ill patient | Develops and implements a comprehensive plan of care for the critically ill patient, with supervision | Develops and implements a comprehensive plan of care for the critically ill patient | Functions in a supervisory role managing all patients in a unit and the unit's resources |
| | | | | |
| Comments: Not Yet Completed Level 1 Not Yet Assessable | | | | |

| Patient Care 10: Regional (Peripheral and Neuraxial) Anesthesia | | | | | |
|---|--|---|---|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Describes anatomy relevant to regional anesthesia | Describes indications and contraindications for regional anesthesia | Develops a patient- and procedure-specific regional anesthesia plan, with supervision | Independently develops a patient- and procedure-specific regional anesthesia plan | | |
| Prepares the patient and the equipment for common regional anesthesia techniques | Performs regional anesthesia techniques, with direct supervision | Performs regional anesthesia techniques, with indirect supervision | Independently performs regional anesthesia techniques | Serves as a consultant on advanced or difficult regional techniques | |
| Describes potential complications of regional anesthesia | Recognizes and manages complications of regional anesthesia, with direct supervision | Recognizes and manages complications of regional anesthesia, with indirect supervision | Independently recognizes and manages complications of regional anesthesia | Develops institutional protocol for using regional anesthesia and managing complications | |
| Comments: | | | | | |
| | Not Yet Completed Level 1 Image: Completed Level 1 Not Yet Assessable Image: Completed Level 1 | | | | |

| Medical Knowledge 1: Foundational Knowledge | | | | |
|--|--|---|--|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Demonstrates knowledge of pathophysiology and treatment of medical and surgical conditions | Demonstrates knowledge of common medical and surgical disease, treatments, and populations as it relates to anesthetic care | Demonstrates knowledge of complex medical and surgical disease, treatments, and populations as it relates to anesthetic care | Demonstrates comprehensive knowledge of medical and surgical disease as it relates to the full spectrum of the patient's perioperative care | Demonstrates scientific knowledge of uncommon, atypical, or complex conditions as it relates to the full spectrum of the patient's perioperative care |
| Identifies medications used to treat common comorbidities | Demonstrates knowledge of pharmacology of medications routinely used in anesthetic care | Demonstrates knowledge of medications used in subspecialty areas (e.g., cardiac, obstetrics) | Demonstrates comprehensive knowledge of pharmacology in the setting of complex comorbidities | Participates in research related to pharmacology |
| | | | | |
| Comments: Not Yet Completed Level 1 Not Yet Assessable | | | | |

| Medical Knowledge 2: C | linical Reasoning | | | |
|--|---|--|--|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Organizes and accurately summarizes information obtained from the patient evaluation to develop a clinical impression | Integrates information from all sources to develop a basic differential diagnosis for common patient presentations | Develops a thorough and prioritized differential diagnosis for common patient presentations | Develops prioritized differential diagnoses in complex patient presentations and incorporates subtle, unusual, or conflicting findings | Coaches others to develop prioritized differential diagnoses in complex patient presentations |
| Lists types of clinical reasoning errors | Identifies clinical reasoning errors within patient care, with guidance | Retrospectively applies clinical reasoning principles to identify errors | Continually reappraises own clinical reasoning to improve patient care in real time | Models how to recognize errors and reflect upon one's own clinical reasoning |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

| 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 (simulated or actual) | Participates in disclosure of patient safety events to patients and their families (simulated or actual) | Discloses patient safety events to patients and their 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 Yet Completed Level 1 | | | | |

| 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 the 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 hand-offs | Performs safe and effective transitions of care/hand-offs in routine clinical situations | Performs safe and effective transitions of care/hand-offs in complex clinical situations | Role models and advocates for safe and effective transitions of care/hand-offs 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 |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|--|---|---|---|---|
| Identifies key components of the complex health care system (e.g., hospital, skilled nursing facility, finance, personnel, technology) Describes the principles of cost-effective care | Describes how components of a complex health care system are interrelated, and how this impacts patient care Delivers care with consideration of each | Discusses how individual practice affects the broader system (e.g., length of stay, readmission rates, clinical efficiency) Engages with patients in shared decision making, | Manages various components of the complex health care system to provide efficient and effective patient care and transition of care Advocates for patient care needs (e.g., | Advocates for or leads systems change that enhances high value, efficient, and effective patient care and transition of care Participates in health policy advocacy activities |
| | patient's payment model | informed by cost-effective care principles | community resources, patient assistance resources) regardless of ability to pay | |
| | | | | |
| Comments: | | | | |
| Not Yet Completed Level 1 | | | | |

| 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 Completed 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 which contribute to gap(s) between expectations and actual performance | Analyzes and reflects on the factors which 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 | Recognizes need to seek help in managing and resolving complex ethical situations | Recognizes and utilizes appropriate resources for managing and resolving ethical dilemmas as needed (e.g., ethics consultations, literature | Identifies and seeks to address system-level factors that induce or exacerbate ethical problems or impede their |
| 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 | Analyzes complex situations using ethical principles | review, risk management/legal consultation) | resolution |
| | | | | |
| Comments: | | | Not Vot C | omploted Lovel 1 |
| | | | Not Yet C | ompleted Level 1 |

| | | | - | |
|---|---|---|---|---------------------------------------|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Takes responsibility for failure to complete tasks and responsibilities, identifies 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 | | |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

| Professionalism 3: Self-Awareness and Help-Seeking | | | | |
|---|--|---|--|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Recognizes status of personal and professional well-being, with 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 well-being | Coaches others when emotional responses or limitations in knowledge/ skills do not meet professional expectations |
| Recognizes limits in the knowledge/skills of self or team, with assistance | Independently recognizes limits in the knowledge/ skills of self or team and demonstrates appropriate help-seeking behaviors | 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 | |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

| Interpersonal and Communication Skills 1: Patient and Family-Centered Communication | | | | | | |
|--|--|---|--|--|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | | |
| Uses language and nonverbal 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 while identifying 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 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, including those with a high degree of uncertainty/conflict | | |
| | | | | | | |
| Comments: Not Yet Completed Level 1 | | | | | | |

| _evel 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 | | | |
| Jses language that /alues all members of he 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 | Communicates feedback and constructive criticism to superiors | Facilitates regular health care team-based feedback in complex situations | |
| | | | | | |

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|---|--|---|---|--|
| Accurately records information in the patient record | Demonstrates organized diagnostic and therapeutic reasoning through notes in the patient record | Concisely reports diagnostic and therapeutic reasoning in the patient record | Communicates clearly, concisely, timely, and in an organized written form, including anticipatory guidance | Models feedback to improve others' written communication |
| Safeguards patient personal health information | Demonstrates accurate, timely, and appropriate use of documentation shortcuts Documents required data in formats specified by institutional policy | Appropriately selects direct (e.g., telephone, in- person) and indirect (e.g., progress notes, text messages) forms of communication based on context | Achieves written or verbal communication (e.g., patient notes, email) 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) | Respectfully communicates concerns about the system | 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 (institution, health care system, field) |
| | | | | |