

Female Pelvic Medicine and Reconstructive Surgery Milestones

The Accreditation Council for Graduate Medical Education



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Female Pelvic Medicine and Reconstructive Surgery Milestones

The Milestones are designed only for use in evaluation of residents or fellows in the context of their participation in ACGME-accredited residency or fellowship programs. The Milestones provide a framework for the assessment of the development of the 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 competency, nor are they designed to be relevant in any other context.

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Female Pelvic Medicine and Reconstructive Surgery Milestones Work Group

Sylvia Botros-Brey, MD, MSCI Felicia Lane, MD

Roger Dmochowski, MD, MMHC, FACS Maggie Mueller, MD

Erin Duecy, MD Raveen Syan, MD

Laura Edgar, EdD, CAE Elizabeth B. Takacs, MD

Tom Gregory, MD Tajnoos Yazdany, MD

Wynclette Knight, MPA Jacqueline Zillioux, MD

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American Board of Obstetrics and Gynecology

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American Urogynecologic Society

Review Committee for Obstetrics and Gynecology

Review Committee for Urology

Society of Urodynamics, Female Pelvic Medicine and Urogenital Reconstruction

Understanding Milestone Levels and Reporting

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

Milestones are arranged into levels. Tracking from Level 1 to Level 5 is synonymous with moving from novice to expert 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, a junior fellow may achieve higher levels early in the educational program just as a senior fellow may be at a lower level later in the educational program. There is no predetermined timing for a resident to attain any particular level. Fellows may also regress in achievement of their milestones. This may happen for many reasons, such as over scoring in a previous review, a disjointed experience in a particular procedure, or a significant act by the fellow.

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

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 Milestones as a sole assessment in high-stakes decisions (i.e., determination of eligibility for certification or credentialing). Level 5 is designed to represent an expert 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. The ACGME and its partners will continue to evaluate and perform research on the Milestones to assess their impact and value.

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

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

Supplemental Guides and other resources are available on the Milestones page of each specialty section of the ACGME website. On www.acgme.org, choose the applicable specialty under the "Specialties" menu, then select the "Milestones" link in the lower navigation bar.

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

| Patient Care 1: Patient and Pelvic Floor Evaluation | | | | |
|--|---|---|--|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Obtains history and physical exam to form a patient assessment | Evaluates patients; orders and interprets diagnostic testing | Develops a plan to manage patients with straightforward conditions | Develops a plan to manage patients with complex conditions and adapts plan for changing clinical situation | Develops a clinical pathway for the management of patients with complex conditions or identifies clinical trials for patients |
| | | | | |
| Comments: | | | | Completed Level 1 |
| middle of a le milestones in | esponse box in the vel implies that that level and in lower een substantially | Selecting a response between levels indicating in lower levels have demonstrated as well milestones in the high | ates that milestones been substantially Il as some | |

| Patient Care 1: Patient and Pelvic Floor Evaluation | | | | | |
|--|--|--|---|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Obtains history and physical exam to form a patient assessment | Evaluates patients; orders and interprets diagnostic testing | Develops a plan to manage patients with straightforward conditions | Develops a plan to manage patients with complex conditions and adapts the plan for changing clinical situation | Develops a clinical pathway for the management of patients with complex conditions or identifies clinical trials for patients | |
| | | | | | |
| Comments: | | | | ompleted Level 1 ssessable | |

| Patient Care 2: Office-Based Procedures | | | | |
|--|---|---|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Performs simple office- based procedures, with supervision | Independently performs simple office-based procedures | Performs complex office- based procedures, with supervision | Independently performs complex office-based procedures | Independently teaches and supervises complex office-based procedures |
| | | | | |
| Comments: | | | Not Yet Co | ompleted Level 1 |

| Patient Care 3: General Peri-Operative Management (Pre-, Intra-, and Post-Procedural) | | | | | |
|---|---|--|--|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Accurately and reliably gathers and reports clinical information pertaining to common peri-procedural risks and complications | Identifies alterations in normal physiology and anatomy | Independently identifies and manages common peri-procedural risks and complications | Independently identifies and manages complex peri-procedural risks and complications | Anticipates and implements strategies to prevent or mitigate complications, applying effective interdisciplinary team management skills to manage multiple scenarios simultaneously | |
| | | | | | |
| Comments: Not Yet Completed Level 1 Not Yet Assessable | | | | | |

| Patient Care 4: Endoscopic Procedures | | | | | |
|---|---------------------------------------|--|--|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Prepares patients and equipment for endoscopic procedures | Performs simple endoscopic procedures | Performs complex endoscopic procedures, with supervision | Independently performs complex endoscopic procedures | Independently performs complex endoscopic procedures in altered anatomy | |
| | | | | | |
| Comments: | | | Not Yet Co Not Yet As | ompleted Level 1 | |

| Patient Care 5: Vaginal Procedures | | | | |
|---|------------------------------------|---|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Demonstrates basic skills (e.g., positioning, knot tying, suturing) | Performs simple vaginal procedures | Performs complex vaginal procedures, with supervision | Independently performs complex vaginal procedures | Independently performs uncommon complex vaginal procedures |
| | | | | |
| Comments: | | | Not Yet Co Not Yet As | ompleted Level 1 |

| Patient Care 6: Incontinence and Lower Urinary Tract Procedures | | | | | |
|---|---|--|--|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Demonstrates basic skills | Performs simple (uncomplicated) incontinence and lower urinary tract procedures | Performs complex incontinence and lower urinary tract procedures, with supervision | Independently performs complex incontinence and lower urinary tract procedures | Independently performs uncommon complex incontinence and lower urinary tract procedures | |
| | | | | | |
| Comments: | | | Not Yet Co Not Yet As | ompleted Level 1 | |

| Patient Care 7: Minimally Invasive Procedures (Laparoscopic and Robotic) | | | | | |
|--|---|--|--|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Assists during minimally invasive procedures | Independently performs straightforward portions of procedures | Independently performs critical (complex) portions of procedures | Independently performs entirety of minimally invasive procedures | Independently teaches and supervises complex minimally invasive procedures | |
| | | | | | |
| Comments: | | | Not Yet C Not Yet As | ompleted Level 1 | |

| Medical Knowledge 1: Pelvic Floor Anatomy and Physiology | | | | |
|---|---|--|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Demonstrates understanding of normal anatomy and physiology of the pelvic floor and pelvic organs | Recognizes anatomic alteration of common disorders of the pelvic floor and their impact on physiology | Demonstrates knowledge of the impact of common anatomic abnormalities on normal physiology of the pelvic floor and pelvic organs | Demonstrates knowledge of anatomic alteration of complex and uncommon disorders of the pelvic floor and their impact on physiology | Develops innovative teaching methods for pelvic floor anatomy and physiology |
| Demonstrates knowledge of surgically relevant normal anatomy | Demonstrates knowledge of surgically relevant anatomic variations | With assistance, identifies surgically relevant anatomic variations and alters patient management accordingly | Independently identifies surgically relevant anatomic variations and alters patient management accordingly | Leads advanced anatomy discussion at a multidisciplinary conference and/or in the operating room |
| | | | | |
| Comments: Not Yet Completed Level 1 Not Yet Assessable | | | | |

| Medical Knowledge 2: Urinary Incontinence (UI) and Lower Urinary Tract Symptoms (LUTS) | | | | |
|---|--|--|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Lists a differential diagnosis for common clinical presentations for UI and LUTS | Provides a comprehensive differential diagnosis for a wide range of clinical presentations for UI and LUTS | Provides a focused differential diagnosis based on individual patient presentation for UI and LUTS | Interprets complex presentations and rare disorders of UI and LUTS | Studies and reports challenging diagnostic presentations of UI and LUTS |
| Lists therapeutic options for common clinical presentations | Explains effectiveness, risks, and benefits of standard therapeutic options | Justifies the optimal therapeutic option based on individual patient presentation and goals | Adapts the therapeutic choice to anomalous or rare patient presentations | Studies new therapeutic options |
| | | | | |
| Comments: Not Yet Completed Level 1 Not Yet Assessable | | | | |

| Medical Knowledge 3: Fecal Incontinence (FI) and Defecatory Dysfunction (DD) Treatment | | | | |
|--|--|--|--|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Describes the evaluation for FI and DD | Lists a differential diagnosis for common clinical presentations for FI and DD | Provides a comprehensive differential diagnosis for a wide range of clinical presentations for FI and DD | Provides a focused differential diagnosis based on individual patient presentation for FI and DD | Studies and reports challenging diagnostic presentations of FI and DD |
| | Lists therapeutic options for common clinical presentations | Explains effectiveness, risks, and benefits of standard therapeutic options | Justifies the optimal therapeutic option based on individual patient presentation and goals | Creates new or modifies existing therapeutic options |
| | | | | |
| Comments: | | | Not Yet Comple Not Yet Assessa | _ |

| Medical Knowledge 4: Pelvic Organ Prolapse (POP) Treatment | | | | |
|---|---|--|--|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Discusses the pathophysiology and differential diagnosis of POP | Using evidence-based medicine, discusses the advantages and disadvantages of diagnostic tests, procedures, and treatments | Articulates effectiveness, risks, and benefits of therapeutic modalities for straightforward POP | Articulates effectiveness, risks, and benefits of therapeutic modalities for complex or atypical POP | Studies and reports challenging diagnostic presentations and novel management strategies of POP |
| | | | | |
| Comments: | | | Not Yet Comple | |
| | | | Not Yet Assessa | able |

| Medical Knowledge 5: Urogenital Fistulas (UF) and Urethral Diverticula (UD) Treatment | | | | |
|---|---|--|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Discusses the pathophysiology and differential diagnosis of UF/UD | Using evidence-based medicine, discusses the advantages and disadvantages of diagnostic tests, procedures, and treatments | Articulates effectiveness, risks, and benefits of therapeutic modalities for straightforward UF/UD | Articulates effectiveness, risks, and benefits of therapeutic modalities for complex or atypical UF/UD | Studies and reports challenging diagnostic presentations of UF and UD |
| | | | | |
| Comments: Not Yet Completed Level 1 Not Yet Assessable | | | | |

| Medical Knowledge 6: Painful Bladder Syndrome (PBS) and Pelvic Floor Dysfunction (PFDys) | | | | | |
|--|---|--|--|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Discusses the pathophysiology and differential diagnosis of PBS/PFDys | Using EBM, discusses the advantages and disadvantages of diagnostic tests, procedures, and treatments | Articulates effectiveness, risks, and benefits of therapeutic modalities for straightforward PBS/PFDys | Articulates effectiveness, risks, and benefits of therapeutic modalities for complex or atypical PBS/PFDys | Studies and reports challenging diagnostic presentations and novel management strategies of PBS/PFDys | |
| | | | | | |
| Comments: Not Yet Completed Level 1 Not Yet Assessable | | | | | |

| Medical Knowledge 7: Urinary Tract Infection (UTI) and Hematuria | | | | |
|--|--|--|--|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Lists a differential diagnosis for common clinical presentations for UTI and hematuria | Provides a comprehensive differential diagnosis for a wide range of clinical presentations for recurrent UTI and hematuria | Provides a focused differential diagnosis based on individual patient presentation for recurrent UTI and hematuria | Interprets challenging presentations and rare disorders of recurrent UTI and hematuria | Studies and reports challenging diagnostic presentations of recurrent UTI and hematuria |
| Lists therapeutic options for common clinical presentations | Explains advantages and drawbacks of standard diagnostic and therapeutic options | Justifies the optimal therapeutic option based on individual patient presentation | Adapts the therapeutic choice to anomalous or rare patient presentations | Creates new or modifies existing therapeutic options |
| | | | | |
| Comments: Not Yet Completed Level 1 Not Yet Assessable | | | | |

| Medical Knowledge 8: Neuro-Urology and Neurogenic Lower Urinary Tract Dysfunction | | | | |
|--|---|--|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Demonstrates knowledge of neurophysiology of normal storage and emptying | Demonstrates basic understanding of how congenital or acquired neurologic conditions affect storage and voiding | Integrates understanding of the pathophysiology of neurologic conditions and pharmacologic management strategies for straightforward clinical conditions | Integrates understanding of the pathophysiology of neurologic conditions and management strategies for complex clinical conditions, with anticipation of the natural history of disease | Disseminates new information regarding the etiology of abnormal storage and voiding |
| Lists a differential diagnosis for common clinical presentations and diseases associated with neurogenic lower urinary tract dysfunction | Provides a comprehensive differential diagnosis for a wide range of clinical presentations for neurogenic lower urinary tract dysfunction | Provides therapeutic options for common clinical presentations, as well as efficacy, risks, and benefits of standard therapeutic options | Adapts the therapeutic choice to complex or rare patient presentations | Studies and reports challenging diagnostic presentations and management strategies of neurogenic lower urinary tract dysfunction |
| | | | | |
| Comments: Not Yet Completed Level 1 Not Yet Assessable | | | | |

| Systems-Based Practice 1: Patient Safety and Quality Improvement | | | | |
|--|--|---|---|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Identifies and reports patient safety events | Participates in disclosure of patient safety events to patients and their families (simulated or actual) | Participates in analysis of patient safety events, including formulation and implementation of action (simulated or actual) | Demonstrates the skills required to lead disclosure of patient safety events to patients and their families | Actively engages and leads teams and processes to prevent patient safety events |
| Describes local quality improvement initiatives | Participates in local quality improvement initiatives | Assesses local impact of health care inequities on quality of care | 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 and community health needs | Coordinates multidisciplinary care of patients in routine clinical situations, considering inequities for their local population | Coordinates multidisciplinary care of patients in complex clinical situation and incorporates local resources into the plan | Leads care coordination of patients with barriers or other inequities in care | Designs innovative care coordination strategies for populations with health care inequities |
| 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 | Supervises safe and effective transitions of care/hand-offs of more junior learners | Resolves conflicts in transitions of care between teams | Leads in the design and implementation of improvements to transitions of care |
| Comments: Not Yet Completed Level 1 | | | | |

| Systems-Based Practice 3: Physician Role in Health Care Systems | | | | | |
|---|---|--|---|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Demonstrates basic administrative skills for effective transition to practice | Demonstrates advanced use of information technology required for medical practice | Discusses how individual practice affects the broader system performance | Describes core administrative knowledge needed for transition to independent practice | Analyzes individual independent practice patterns and professional requirements in preparation for practice | |
| | | | | | |
| Comments: | | | Not Yet 0 | Completed Level 1 | |

| 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 available evidence | Articulates clinical questions to guide evidence-based care | Integrates best available evidence with patient preferences to guide care | Tailors patient care in the setting of conflicting or absent evidence | Coaches others to critically appraise and apply evidence for patients with complex conditions | |
| | | | | | |
| Comments: | | | Not Yet C | ompleted Level 1 | |

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|---|--|--|---|---|
| Identifies gap(s) between expectations and actual performance | Analyzes and reflects on the factors that contribute to gap(s) between expectations and actual performance | Institutes behavioral change(s) to narrow the gap(s) between expectations and actual performance | Continuously reflects on remaining gaps and institutes behavioral adjustments to narrow them | Coaches others on reflective practice |
| Establishes goals for personal and professional development | Identifies opportunities for performance improvement; designs a learning plan | Integrates practice data and feedback with humility to implement a learning plan | Uses performance data to measure the effectiveness of the learning plan and adapts when necessary | Coaches others in the design and implementation of learning plans |
| | | | | |

| Practice-Based Learning and Improvement 3: Scholarly Activity | | | | | |
|---|--|--|---|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Identifies potential topics for a scholarly project for which gaps in evidence exist | Develops specific questions/aims that can be measured in the scholarly project | Using appropriate design and methods, collects and analyzes data for the scholarly project | Completes and defends the scholarly project | Widely disseminates the scholarly project | |
| | | | | | |
| Comments: | | | Not Yet Co | ompleted Level 1 | |

| Professionalism 1: Professional Behavior and Ethical Principles | | | | |
|--|--|---|---|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Demonstrates professional behavior in routine situations and knows how to report professionalism lapses | Demonstrates insight into personal triggers for professionalism lapses; develops mitigation strategies | Demonstrates professional behavior in complex or stressful situations | Recognizes and intervenes in situations to prevent professionalism lapses in oneself and others | Coaches others when their behavior fails to meet professional expectations |
| Demonstrates knowledge of ethical principles underlying shared decision-making and patient confidentiality | Analyzes straightforward situations using ethical principles | Seeks help in managing and resolving complex ethical situations | Recognizes and uses appropriate resources for managing and resolving ethical dilemmas (e.g., ethics consultations, literature review) | Identifies and seeks to address system-level factors that induce or exacerbate ethical problems or impede their resolution |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

| Professionalism 2: Accountability/Conscientiousness | | | | |
|--|--|---|---|--|
| 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 and recognizes situations that may impact one's ability to accomplish this | Performs tasks and responsibilities in a timely manner with appropriate attention to detail in complex or stressful situations and proactively implements strategies to accomplish this | Recognizes situations that may impact others' ability to complete tasks and responsibilities in a timely manner and proposes solutions | Develops systems to ensure the best possible care of patients, including prioritizing tasks and mitigating burnout |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

| Professionalism 3: Well-Being and Awareness | | | | | |
|--|---|--|---|--|--|
| 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 | Recognizes risk to well- being and offers support when others' I responses or performance do not meet professional expectations | |
| | | | | | |
| Comments: Not Yet Completed Level 1 | | | | | |

This subcompetency is not intended to evaluate a fellow's well-being. Rather, the intent is to ensure that each fellow has the fundamental knowledge of factors that affect well-being, the mechanisms by which those factors affect well-being, and available resources and tools to improve well-being.

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|--|--|--|--|--|
| Demonstrates respect and establishes rapport with patients and their families | Establishes a therapeutic relationship in straightforward encounters | Establishes a therapeutic relationship in challenging encounters | Facilitates difficult discussions with patients and their families | Mentors others in situational awareness and critical self-reflection |
| Communicates with patients and their families in an understandable and respectful manner | Identifies barriers to effective communication | When prompted, reflects on personal biases while attempting to minimize communication barriers | Independently recognizes personal biases while attempting to proactively minimize communication barriers | Coaches others in the facilitation of crucial conversations |
| | | | | |

| Interpersonal and Communication Skills 2: Patient Counseling and Shared Decision Making | | | | |
|---|--|---|---|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Answers questions about the treatment plan and seeks guidance when appropriate | Counsels patients through the decision-making process, including answering questions, for simple clinical problems | Counsels patients through the decision-making process, including answering questions, for complex clinical problems | Counsels patients through the decision- making process, including answering questions, for uncommon clinical problems | Coaches others in patient counseling and the shared decision-making process |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

| Interpersonal and Communication Skills 3: Interprofessional and Team Communication | | | | | |
|--|--|--|--|-------------------------------|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Communicates in an approachable and productive manner to facilitate teamwork | Integrates contributions from interprofessional team members and health care team members into the care plan | Actively recognizes and mitigates communication barriers and biases with members of the health care team | Leads and coordinates recommendations from multidisciplinary members of the health care team | Leads a communication process | |
| | | | | | |
| Comments: Not Yet Completed Level 1 | | | | | |

| Interpersonal and Communication Skills 4: Communication within Health Care Systems | | | | | |
|---|--|---|--|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Demonstrates organized diagnostic and therapeutic reasoning through notes in the patient record | Concisely reports diagnostic and therapeutic reasoning in the patient record | Appropriately and efficiently uses the electronic health record for varied types of communication | Efficiently communicates in an organized fashion that includes contingency plans | Guides departmental or institutional communication around medical informatics | |
| | | | | | |
| Comments: Not Yet Completed Level 1 | | | | | |