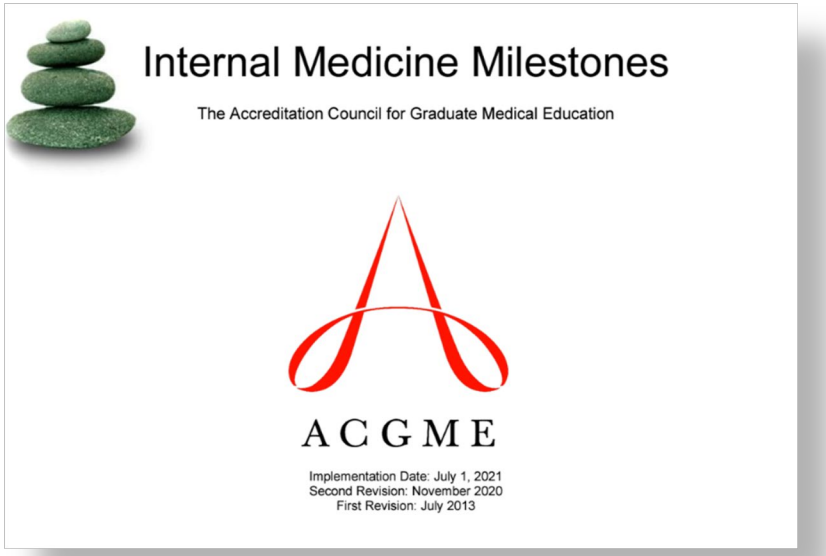
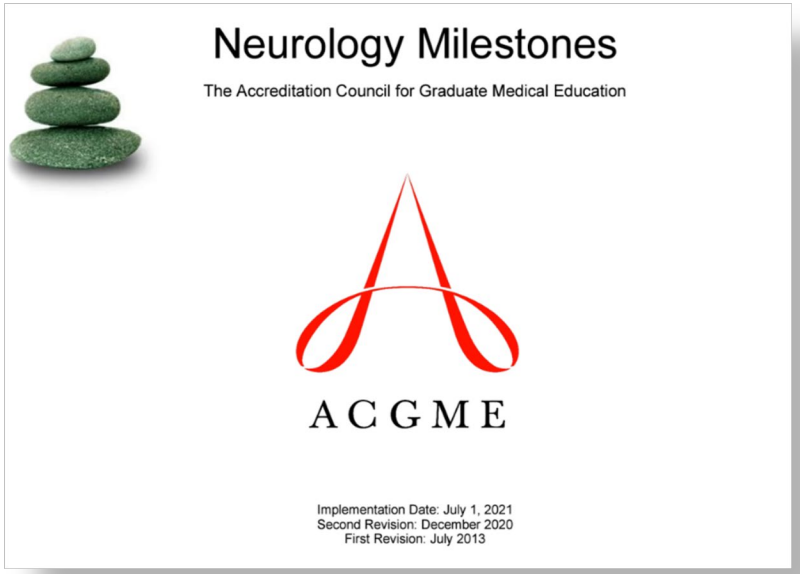
Internal Medicine and Neurology (combined) programs must annually report on **each** set of Milestones.





Internal Medicine Milestones

The Accreditation Council for Graduate Medical Education

ACGME

Implementation Date: July 1, 2021
Second Revision: November 2020
First Revision: July 2013

Internal Medicine Milestones

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

Internal Medicine Milestones
Work Group

Eva Aagaard, MD, FACP
Cinnamon Bradley, MD
Fred Buckhold, MD
Alfred Burger, MD, MS, FACP, SFHM
Stephanie Call, MD, MSPH
Shobhina Chheda, MD, MPH
Davoren Chick, MD, FACP
Jack DePriest, MD, MACM
Benjamin Doolittle, MD, MDiv
Laura Edgar, EdD, CAE
Christin Giordano McAuliffe, MD
Neil Kothari, MD
Heather Laird-Fick, MD, MPH, FACP
Jonathan Lim, MD
Monica Lypson, MD, MHPE
Allan Markus, MD, MS, MBA, FACP
Bernadette Miller, MD
Attila Nemeth, MD
Jacob Perrin, MD
Raul Ramirez Velazquez, DO
Rachel Robbins, MD
Jacqueline Stocking, PhD, MBA, RN
Jane Trinh, MD
Mark Tschanz, DO, MACM
Asher Tulsky, MD
Eric Warm, MD

Advisory Group

Mobola Campbell-Yesufu, MD, MPH
Gretchen Diemer, MD
Jodi Friedman, MD
Janae Heath, MD
Benjamin Kinnear, MD
Subha Ramani, MBBS, MMed, MPH
Brijen Shah, MD
C. Christopher Smith, MD
Abby Spencer, MD, MS
Nicole Swallow, MD, FACP

The ACGME would like to thank the following organizations for their continued support in the development of the Milestones:

Alliance for Academic Internal Medicine

American Board of Internal Medicine

American College of Physicians

Association of Medical Colleges

Review Committee for Internal Medicine

Society of Hospital Medicine

Society of General Internal Medicine

Understanding Milestone Levels and Reporting

This document presents the Milestones, which programs use in a semi-annual review of resident 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 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 resident 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 resident may achieve higher levels early in his/her educational program just as a senior resident may be at a lower level later in his/her educational program. There is no predetermined timing for a resident to attain any particular level. Residents 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 resident.

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

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 resident 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.

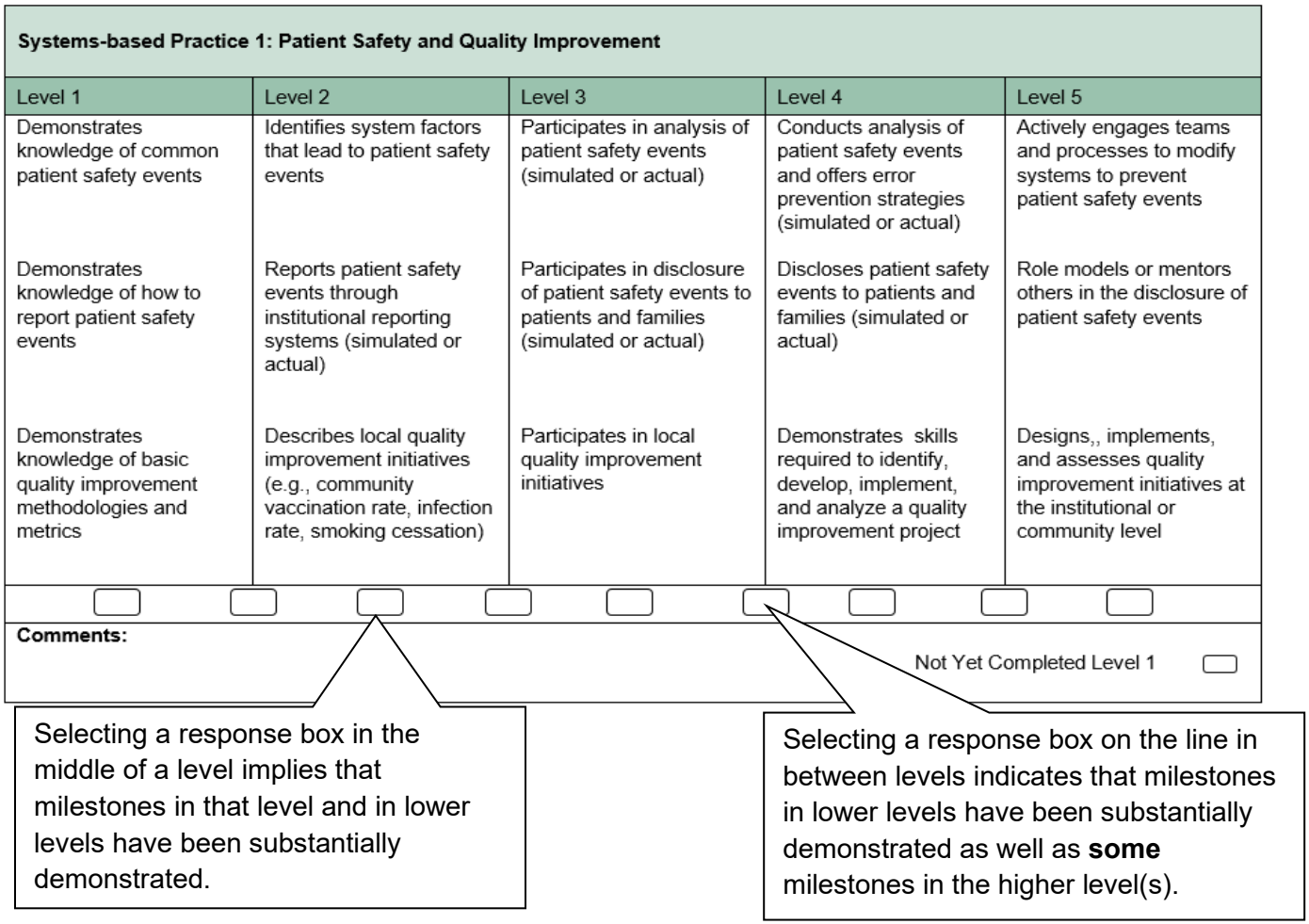
Examples are provided for some milestones within this document. Please note: the examples are not the required element or outcome; they are provided as a way to share the intent of the element.

Some milestone descriptions include statements about performing independently. These activities must occur in conformity to ACGME supervision guidelines as described in the Program Requirements, as well as to 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 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 sub-competency in the same format as the ACGME Report Worksheet. For each reporting period, a resident's performance on the milestones for each sub-competency will be indicated by selecting the level of milestones that best describes that resident'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 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 skills required to identify, develop, implement, and analyze a quality improvement project	Designs,, implements, and assesses quality improvement initiatives at the institutional or community level

Comments:

Not Yet Completed Level 1

Selecting a response box in the middle of a level implies that milestones in that level and in lower levels have been substantially demonstrated.

Selecting a response box on the line in between levels indicates that milestones in lower levels have been substantially demonstrated as well as **some** milestones in the higher level(s).

Patient Care 1: History				
Level 1	Level 2	Level 3	Level 4	Level 5
Elicits and reports a comprehensive history for common patient presentations, with guidance Seeks data from secondary sources, with guidance	Elicits and concisely reports a hypothesis-driven patient history for common patient presentations Independently obtains data from secondary sources	Elicits and concisely reports a hypothesis-driven patient history for complex patient presentations Reconciles current data with secondary sources	Efficiently elicits and concisely reports a patient history, incorporating pertinent psychosocial and other determinants of health Uses history and secondary data to guide the need for further diagnostic testing	Efficiently and effectively tailors the history taking, including relevant historical subtleties, based on patient, family, and system needs Models effective use of history to guide the need for further diagnostic testing
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

Patient Care 2: Physical Examination				
Level 1	Level 2	Level 3	Level 4	Level 5
Performs a general physical examination while attending to patient comfort and safety Identifies common abnormal findings	Performs a hypothesis-driven physical examination for a common patient presentation Interprets common abnormal findings	Performs a hypothesis-driven physical examination for a complex patient presentation Identifies and interprets uncommon and complex abnormal findings	Uses advanced maneuvers to elicit subtle findings Integrates subtle physical examination findings to guide diagnosis and management	Models effective evidence-based physical examination technique Teaches the predictive values of the examination findings to guide diagnosis and management
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

Patient Care 3: Clinical 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 Identifies clinical reasoning errors within patient care, with guidance	Develops a thorough and prioritized differential diagnosis for common patient presentations Retrospectively applies clinical reasoning principles to identify errors	Develops prioritized differential diagnoses in complex patient presentations and incorporates subtle, unusual, or conflicting findings Continually re-appraises one's own clinical reasoning to improve patient care in real time	Coaches others to develop prioritized differential diagnoses in complex patient presentations Models how to recognize errors and reflect upon one's own clinical reasoning
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				

Not Yet Completed Level 1 ☐
Not Yet Assessable ☐

Patient Care 4: Patient Management – Inpatient				
Level 1	Level 2	Level 3	Level 4	Level 5
Formulates management plans for common conditions, with guidance	Develops and implements management plans for common conditions, recognizing acuity, and modifies based on the clinical course	Develops and implements value-based (high value) management plans for patients with multisystem disease and comorbid conditions; modifies based on the clinical course	Uses shared decision making to develop and implement value-based (high value) comprehensive management plans for patients with comorbid and multisystem disease, including those patients requiring critical care	Develops and implements comprehensive management plans for patients with rare or ambiguous presentations or unusual comorbid conditions
Identifies opportunities to maintain and promote health	Develops and implements management plans to maintain and promote health, with guidance	Independently develops and implements plans to maintain and promote health, incorporating pertinent psychosocial and other determinants of health	Independently develops and implements comprehensive plans to maintain and promote health, incorporating pertinent psychosocial and other determinants of health	
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

Patient Care 5: Patient Management – Outpatient				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies opportunities to maintain and promote health	Develops and implements management plans to maintain and promote health	Develops and implements plans to maintain and promote health, incorporating pertinent psychosocial and other determinants of health	Develops and implements value-based (high-value) comprehensive plans to maintain and promote health	
Formulates management plans for a common chronic condition, with guidance	Develops and implements management plans for common chronic conditions	Develops and implements management plans for multiple chronic conditions	Develops and implements value-based (high value) comprehensive management plans for multiple chronic conditions, incorporating pertinent psychosocial and other determinants of health	Creates and leads a comprehensive patient-centered management plan for the patient with highly complex chronic conditions, integrating recommendations from multiple disciplines
Formulates management plans for acute common conditions, with guidance	Develops and implements management plans for common acute conditions	Develops and implements an initial management plan for patients with urgent or emergent conditions in the setting of chronic comorbidities	Develops and implements value-based (high value) management plans for patients with acute conditions	Develops and implements management plans for patients with subtle presentations, including rare or ambiguous conditions
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐

Comments:

Not Yet Completed Level 1 ☐
Not Yet Assessable ☐

Patient Care 6: Digital Health				
Level 1	Level 2	Level 3	Level 4	Level 5
Uses electronic health record (EHR) for routine patient care activities Identifies the required components for a telehealth visit	Expands use of EHR to include and reconcile secondary data sources in patient care activities Performs assigned telehealth visits using approved technology	Effectively uses EHR capabilities in managing acute and chronic care of patients Identifies clinical situations that can be managed through a telehealth visit	Uses EHR to facilitate achievement of quality targets for patient panels Integrates telehealth effectively into clinical practice for the management of acute and chronic illness	Leads improvements to the EHR Develops and innovates new ways to use emerging technologies to augment telehealth visits
☐	☐	☐	☐	☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

Patient Care
The resident is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The resident is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____Yes _____No _____Conditional on Improvement

Medical Knowledge 1: Applied Foundational Sciences				
Level 1	Level 2	Level 3	Level 4	Level 5
Explains the scientific knowledge (e.g., physiology, social sciences, mechanism of disease) for normal function and common medical conditions	Explains the scientific knowledge for complex medical conditions	Integrates scientific knowledge to address comorbid conditions within the context of multisystem disease	Integrates scientific knowledge to address uncommon, atypical, or complex comorbid conditions within the context of multisystem disease	Demonstrates a nuanced understanding of the scientific knowledge related to uncommon, atypical, or complex conditions
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

Medical Knowledge 2: Therapeutic Knowledge				
Level 1	Level 2	Level 3	Level 4	Level 5
Explains the scientific basis for common therapies	Explains the indications, contraindications, risks, and benefits of common therapies	Integrates knowledge of therapeutic options in patients with comorbid conditions, multisystem disease, or uncertain diagnosis	Integrates knowledge of therapeutic options within the clinical and psychosocial context of the patient to formulate treatment options	Demonstrates a nuanced understanding of emerging, atypical, or complex therapeutic options
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

Medical Knowledge 3: Knowledge of Diagnostic Testing				
Level 1	Level 2	Level 3	Level 4	Level 5
Explains the rationale, risks, and benefits for common diagnostic testing Interprets results of common diagnostic tests	Explains the rationale, risks, and benefits for complex diagnostic testing Interprets complex diagnostic data	Integrates value and test characteristics of various diagnostic strategies in patients with common diseases Integrates complex diagnostic data accurately to reach high-probability diagnoses	Integrates value and test characteristics of various diagnostic strategies in patients with comorbid conditions or multisystem disease Anticipates and accounts for limitations when interpreting diagnostic data	Demonstrates a nuanced understanding of emerging diagnostic tests and procedures
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

Medical Knowledge
The resident is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The resident is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____ Yes _____ No _____Conditional on Improvement

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	Contributes to the analysis of patient safety events (simulated or actual)	Conducts analysis of patient safety events and offers error prevention strategies (simulated or actual)	Leads 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)	Models 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)	Contributes to local quality improvement initiatives	Demonstrates the skills required to identify, develop, implement, and analyze a quality improvement project	Creates, implements, and assesses sustainable 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 by effectively engaging interprofessional teams in routine clinical situations	Coordinates care of patients by effectively engaging interprofessional teams in complex clinical situations	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	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
Demonstrates knowledge of population and community health needs and disparities	Identifies specific population and community health needs and inequities for the 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 Completed Level 1 ☐

Systems-Based Practice 3: Physician Role in Health Care Systems				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies key components of the health care system Describes basic health payment systems	Describes how components of a complex health care system are interrelated, and how this impacts patient care Delivers care with consideration of each patient's payment model	Discusses how individual practice affects the regional and national health care system Engages with patients in shared decision making, informed by each patient's payment models	Manages various components of the complex health care system to provide efficient and effective patient care Advocates for patient care needs with consideration of the limitations of each patient's payment model	Advocates for or leads systems change that enhances high-value, efficient, and effective patient care Actively engaged in influencing health policy through advocacy activities at the local, regional, or national level
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments: Not Yet Completed Level 1 ☐				

Systems-Based Practice
The resident is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The resident is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____ Yes _____ No _____ Conditional on Improvement

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, categorize, and analyze clinical evidence, with guidance	Articulates clinical questions and elicits patient preferences and values to guide evidence-based care	Critically appraises and applies the best available evidence, integrated with patient preference, to the care of complex patients	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 to patient care
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐

Practice-Based Learning and Improvement 2: Reflective Practice and Commitment to Personal Growth				
Level 1	Level 2	Level 3	Level 4	Level 5
Accepts responsibility for personal and professional development by establishing goals Identifies the factors that contribute to gap(s) between ideal and actual performance, with guidance	Demonstrates openness to performance data (feedback and other input) to inform goals Analyzes and reflects on the factors which contribute to gap(s) between ideal and actual performance, with guidance Actively seeks opportunities to improve	Seeks performance data episodically, with adaptability, and humility Institutes behavioral change(s) to narrow the gap(s) between ideal and actual performance Designs and implements an individualized learning plan, with prompting	Seeks performance data consistently with adaptability, and humility Challenges one's own assumptions and considers alternatives in narrowing the gap(s) between ideal and actual performance Independently creates and implements an individualized learning plan	Models consistently seeking performance data with adaptability and humility Coaches others on reflective practice Uses performance data to measure the effectiveness of the individualized learning plan and when necessary, improves it
☐	☐	☐	☐	☐
Comments: Not Yet Completed Level 1 ☐				

Practice-Based Learning and Improvement
The resident is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The resident is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____ Yes _____ No _____ Conditional on Improvement

Professionalism 1: Professional Behavior				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates professional behavior in routine situations	Identifies potential triggers for professionalism lapses and accepts responsibility for one's own professionalism lapses	Demonstrates a pattern of professional behavior in complex or stressful situations	Recognizes situations that may trigger professionalism lapses and intervenes to prevent lapses in oneself and others	Coaches others when their behavior fails to meet professional expectations
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐				

Professionalism 2: Ethical Principles				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of basic ethical principles	Applies basic principles to address straightforward ethical situations	Analyzes complex situations using ethical principles and identifies the need to seek help in addressing complex ethical situations	Analyzes complex situations and engages with appropriate resources for managing and addressing ethical dilemmas as needed	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 3: Accountability/Conscientiousness				
Level 1	Level 2	Level 3	Level 4	Level 5
Performs administrative tasks and patient care responsibilities, with prompting	Performs administrative tasks and patient care responsibilities in a timely manner in routine situations	Performs administrative tasks and patient care responsibilities in a timely manner in complex or stressful situations	Proactively implements strategies to ensure that the needs of patients, teams, and systems are met	Creates strategies to enhance other's ability to efficiently complete administrative tasks and patient care responsibilities
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐				

Professionalism 4: Knowledge of Systemic and Individual Factors of Well-Being*				
Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes the importance of getting help when needed to address personal and professional well-being	Lists resources to support personal and professional well-being Recognizes that institutional factors affect well-being	With prompting, reflects on how personal and professional well-being may impact one's clinical practice Describes institutional factors that affect well-being	Reflects on actions in real time to proactively respond to the inherent emotional challenges of physician work Suggests potential solutions to institutional factors that affect well-being	Participates in institutional changes to promote personal and professional well-being
☐	☐	☐	☐	☐
Comments: Not Yet Completed Level 1 ☐				

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

Professionalism
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_____ Yes _____ No _____ Conditional on Improvement

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 and maintains a therapeutic relationship using effective communication behaviors in straightforward encounters Identifies common barriers to effective communication	Establishes and maintains a therapeutic relationship using effective communication behaviors in challenging patient encounters Identifies complex barriers to effective communication, including personal bias	Establishes and maintains therapeutic relationships using shared decision making, regardless of complexity Mitigates communication barriers	Coaches others in developing and maintaining therapeutic relationships and mitigating communication barriers Models the mitigation of communication barriers
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments: Not Yet Completed Level 1 ☐				

Interpersonal and Communication Skills 2: Interprofessional and Team Communication				
Level 1	Level 2	Level 3	Level 4	Level 5
Respectfully requests and responds to a consultation	Clearly and concisely requests and responds to a consultation	Checks own and others' understanding of recommendations when providing or receiving consultation	Coordinates recommendations from different consultants to optimize patient care	Facilitates conflict resolution between and amongst consultants when disagreement exists
Uses verbal and non-verbal communication that values all members of the interprofessional team	Communicates information, including basic feedback with all interprofessional team members	Facilitates interprofessional team communication to reconcile conflict and provides difficult feedback	Adapts communication style to fit interprofessional team needs and maximizes impact of feedback to the team	Models flexible communication strategies that facilitate excellence in interprofessional teamwork
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐				

Interpersonal and Communication Skills 3: Communication within Health Care Systems				
Level 1	Level 2	Level 3	Level 4	Level 5
Accurately documents comprehensive and current information	Documents clinical encounter, including reasoning, through organized notes	Documents clinical encounter through concise and thorough notes	Documents clinical encounter clearly, concisely, timely, and in an organized form, including anticipatory guidance	Guides departmental or institutional communication policies and procedures
Communicates using formats specified by institutional policy to safeguard patient personal health information	Selects direct (e.g., telephone, in-person) and indirect (e.g., progress notes, text messages) forms of communication based on context, with assistance	Appropriately selects direct and indirect forms of communication based on context	Models effective written and verbal communication	
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐				
Comments:				
Not Yet Completed Level 1 ☐				

Interpersonal and Communication Skills
The resident is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The resident is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____ Yes _____ No _____ Conditional on Improvement

Overall Clinical Competence

This rating represents the assessment of the resident's development of overall clinical competence during this year of training:

____Superior: Far exceeds the expected level of development for this year of training

____Satisfactory: Always meets and occasionally exceeds the expected level of development for this year of training

____Conditional on Improvement: Meets some developmental milestones but occasionally falls short of the expected level of development for this year of training. An improvement plan is in place to facilitate achievement of competence appropriate to the level of training.

____Unsatisfactory: Consistently falls short of the expected level of development for this year of training.

Neurology Milestones

The Accreditation Council for Graduate Medical Education

ACGME

Implementation Date: July 1, 2021
Second Revision: December 2020
First Revision: July 2013

Neurology Milestones

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Neurology Milestones

Work Group

Diana Barratt, MD, MPH, FAAN

Nicole Chiota-McCollum, MD, MEd

Jeffrey Dewey, MD, MHA

Laura Edgar, EdD, CAE

Laurie Gutmann, MD

Shannon Kilgore, MD

Steven L. Lewis, MD

Jeffrey McClean, MD

Sonja Potrebic, MD, PhD

Anita Shelgikar, MD, MHPE

Bryan Walker, MHS, PA-C

Jayne Ward, DO

The ACGME would like to thank the following organizations for their continued support in the development of the Milestones:

American Board of Psychiatry and Neurology

American Osteopathic Board of Neurology and Psychiatry

Consortium of Neurology Program Directors

Review Committee for Neurology

Understanding Milestone Levels and Reporting

This document presents the Milestones, which programs use in a semi-annual review of resident 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 performance throughout their educational program.

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These levels *do not* correspond with post-graduate year of education. Depending on previous experience, a junior resident may achieve higher levels early in his/her educational program just as a senior resident may be at a lower level later in his/her educational program. There is no predetermined timing for a resident to attain any particular level. Residents 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 resident.

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

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 resident 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.

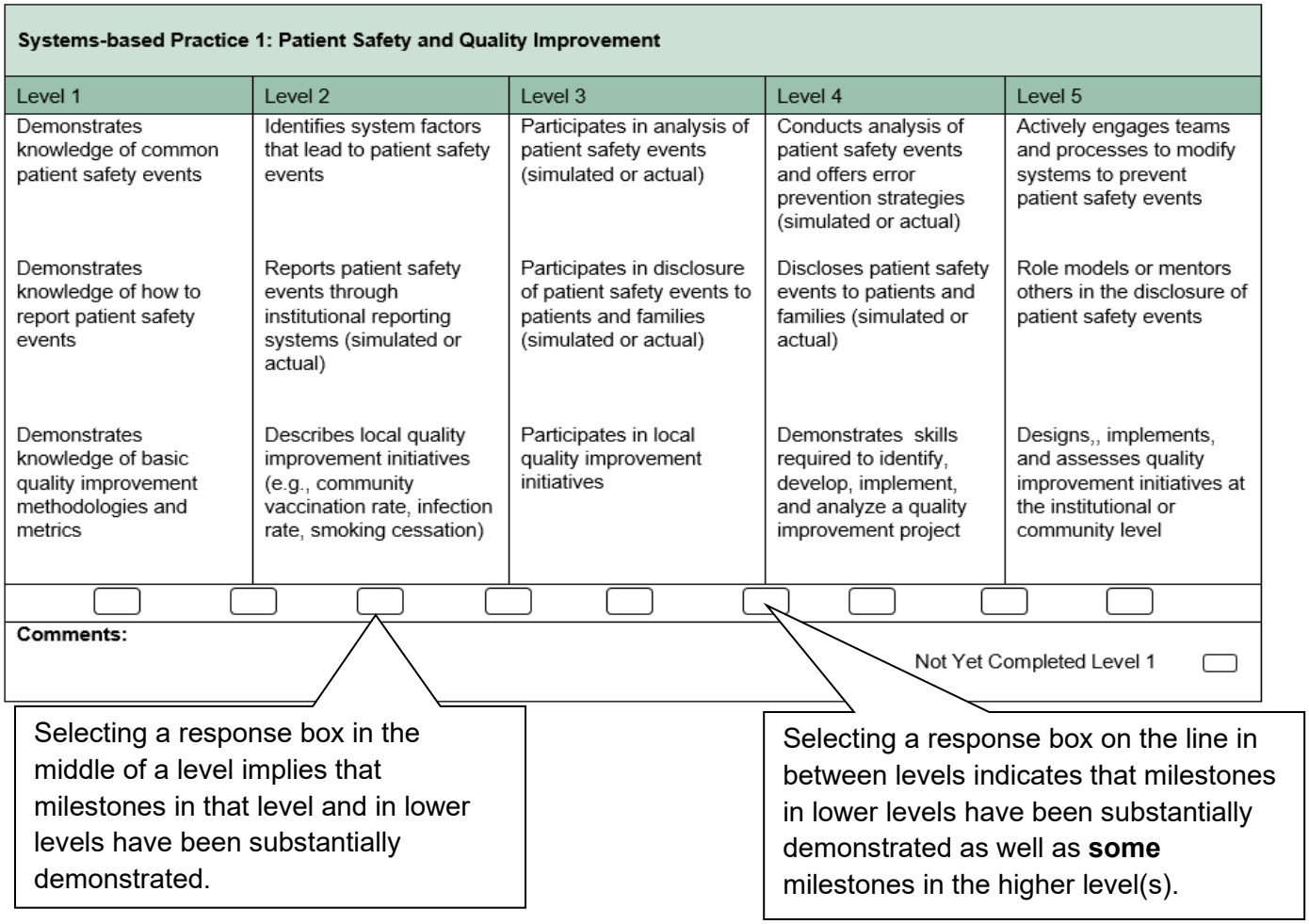
Examples are provided for some milestones within this document. Please note: the examples are not the required element or outcome; they are provided as a way to share the intent of the element.

Some milestone descriptions include statements about performing independently. These activities must occur in conformity to ACGME supervision guidelines as described in the Program Requirements, as well as to 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 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 sub-competency in the same format as the ACGME Report Worksheet. For each reporting period, a resident's performance on the milestones for each sub-competency will be indicated by selecting the level of milestones that best describes that resident'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 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 skills required to identify, develop, implement, and analyze a quality improvement project	Designs,, implements, and assesses quality improvement initiatives at the institutional or community level

Patient Care 1: History				
Level 1	Level 2	Level 3	Level 4	Level 5
Obtains a basic neurologic history	Obtains a complete and relevant neurologic history	Obtains an organized neurologic history, including collateral information as appropriate	Efficiently obtains an organized hypothesis-driven neurologic history	Serves as a role model in obtaining a hypothesis-driven neurologic history
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐

Comments:

Not Yet Completed Level 1 ☐

Not Yet Assessable ☐

Patient Care 2: Neurologic Exam				
Level 1	Level 2	Level 3	Level 4	Level 5
Performs some components of a neurologic exam	Performs a standard neurologic exam accurately	Performs a relevant neurologic exam incorporating additional appropriate maneuvers	Performs a hypothesis-driven neurologic exam	Serves as a role model for performing a hypothesis-driven, complete, relevant, and organized neurologic exam
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

Patient Care 3: Formulation				
Level 1	Level 2	Level 3	Level 4	Level 5
Summarizes history and exam findings	Generates a broad differential diagnosis based on history, exam, and localization	Synthesizes relevant information to focus and prioritize diagnostic possibilities	Continuously reconsiders diagnosis in response to changes in clinical circumstances and available data	Serves as a role model for clinical reasoning by demonstrating sophisticated formulation in complex presentations
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

Patient Care 4: Diagnosis and Management of Neurologic Disorders in the Outpatient Setting				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies typical presentations of commonly encountered neurologic conditions	Diagnoses commonly encountered neurologic conditions Develops an initial treatment plan for commonly encountered neurologic disorders	Identifies atypical presentations of commonly encountered neurologic conditions Individualizes management and follow-up plan for commonly encountered neurologic disorders, considering risks, benefits, and non-pharmacologic strategies	Diagnoses uncommon neurologic conditions Adapts management plan based upon patient response and complications of therapy; identifies when to change acuity of care	Identifies atypical presentations of uncommon neurologic conditions Longitudinally manages uncommon neurologic conditions
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

Patient Care 5: Diagnosis and Management of Neurologic Disorders in the Inpatient Setting				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies typical presentations of commonly encountered neurologic conditions	Diagnoses commonly encountered neurologic conditions Develops an initial treatment plan for commonly encountered neurologic disorders	Identifies atypical presentations of commonly encountered neurologic conditions Individualizes management plan, ensuring the appropriate level of care throughout hospitalization and upon discharge	Diagnoses uncommon neurologic conditions Adapts management plan based upon treatment response, disease progression, and complications of therapy	Identifies atypical presentations of uncommon neurologic conditions Leads the management of patients with complex and uncommon neurologic conditions
☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

Patient Care 6: Diagnosis and Management of Neurologic Emergencies				
Level 1	Level 2	Level 3	Level 4	Level 5
Describes the typical presentation of neurologic emergencies Seeks assistance and conveys pertinent details during a neurologic emergency	Recognizes when a patient's presentation is a neurologic emergency Initiates management for a neurologic emergency	Diagnoses neurologic emergencies, using appropriate diagnostic testing Manages patients with common neurologic emergencies	Re-appraises diagnostic considerations based on treatment response, disease progression, and complications of therapy Manages complex neurologic emergencies	Serves as a role model for management of neurologic emergencies
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

Patient Care 7: Determination of Death by Neurologic Criteria				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of medical and legal significance of death by neurologic criteria	Lists the components for determining death by neurologic criteria	Describes supplemental testing used to determine death by neurologic criteria	Accurately performs determination of death by neurologic criteria	Educates others in the determination of death by neurologic criteria, including appropriate use of supplemental testing, as well as controversies
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

Patient Care 8: Interpretation of Neuroimaging				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies basic neuroanatomy on brain and vascular anatomy of the head and neck magnetic resonance (MR) and computed tomography (CT)	Identifies major abnormalities of the brain and cerebrovascular system on MR and CT Identifies basic anatomy of the spine and spinal cord on MR and CT	Interprets typical abnormalities of the brain and cerebrovascular system on MR and CT Identifies abnormalities of the spine and spinal cord on MR and CT	Interprets subtle abnormalities of brain and cerebrovascular system on MR and CT Interprets MR and CT of the spine	Interprets advanced neuroimaging
☐	☐	☐	☐	☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

Patient Care 9: Electroencephalogram (EEG)				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies patients for whom EEG is appropriate	Recognizes normal EEG features, including common artifacts, in children and adults	Recognizes patterns of status epilepticus, normal EEG variants, and common abnormalities in children and adults	Interprets common EEG abnormalities and patterns that could represent status epilepticus	Interprets uncommon EEG abnormalities and creates a report
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

Patient Care 10: Nerve Conduction Study/Electromyogram (NCS/EMG)				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies patients for whom NCS/EMG is appropriate	Identifies NCS/EMG findings for common disorders	Correlates NCS/EMG results to patient presentation, including identification of potential study limitations	Formulates basic NCS/EMG plan and interprets data for common clinical presentations	Performs, interprets, and creates a report for NCS/EMG
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

Patient Care 11: Lumbar Puncture				
Level 1	Level 2	Level 3	Level 4	Level 5
Lists the indications, contraindications, and complications for lumbar puncture	Performs lumbar puncture under direct supervision	Performs lumbar puncture without direct supervision and manages complications	Performs lumbar puncture on patients with challenging anatomy	Performs lumbar puncture using image guidance
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				

Not Yet Completed Level 1 ☐
Not Yet Assessable ☐

Patient Care 12: Psychiatric and Functional Aspects of Neurology				
Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes contributions of common psychiatric disorders and their treatment to neurologic diseases	Develops a treatment plan that considers psychiatric comorbidities and side effects of psychiatric medications	Accurately differentiates psychiatric or functional contributions to neurologic symptoms	Leads a discussion with a patient and/or caregiver that explains the psychiatric or functional contribution to the patient's neurologic symptoms	Develops a shared management plan that addresses the psychiatric or functional contribution to neurologic symptoms
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

Medical Knowledge 1: Localization				
Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes the role of localization in neurologic diagnosis	Localizes lesions to general regions of the nervous system	Localizes lesions to specific regions of the nervous system	Localizes lesions to discrete structures of the nervous system	Consistently demonstrates sophisticated and detailed knowledge of neuroanatomy in localizing lesions
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

Medical Knowledge 2: Diagnostic Investigation				
Level 1	Level 2	Level 3	Level 4	Level 5
Discusses a general diagnostic approach appropriate to clinical presentation	Lists indications, contraindications, risks, and benefits of diagnostic testing	Prioritizes and interprets diagnostic tests appropriate to clinical urgency and complexity	Uses complex diagnostic approaches in uncommon situations	Demonstrates sophisticated knowledge of diagnostic testing and controversies
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
				Not Yet Completed Level 1 ☐
				Not Yet Assessable ☐

Systems-Based Practice 1: Patient Safety				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of commonly reported patient safety events Demonstrates knowledge of how to report patient safety events	Identifies system factors that lead to patient safety events Reports patient safety events through institutional reporting systems	Participates in analysis of patient safety events Participates in disclosure of patient safety events to patients and patients' families	Conducts analysis of patient safety events and offers error prevention strategies Discloses patient safety events to patients and patients' families	Actively engages teams and processes to modify systems to prevent patient safety events Role models or mentors others in the disclosure of patient safety events
☐	☐	☐	☐	☐
Comments:				
Not Yet Completed Level 1 ☐				

Systems-Based Practice 2: Quality Improvement				
Level 1	Level 2	Level 3	Level 4	Level 5
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 3: 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 using the roles of the interprofessional team members	Coordinates care of patients in complex clinical situations effectively using the roles of the interprofessional team members	Role models effective coordination of patient-centered care among different disciplines and specialties	Improves quality of transitions of care within and across health care delivery systems to optimize patient outcomes
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 transitions of care by other team members	Role models safe and effective transitions of care/hand-offs within and across health care delivery systems, including outpatient settings	
Demonstrates knowledge of population and community health needs and disparities	Identifies specific population and community health needs and inequities for the local population and community	Effectively uses local resources to meet the needs of a patient population and community	Adapts practice to provide for the needs of specific populations	Leads innovations in adapting practice and systems for populations and communities with health care disparities
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐				
Comments:				
Not Yet Completed Level 1 ☐				

Systems-Based Practice 4: Physician Role in Health Care Systems				
Level 1	Level 2	Level 3	Level 4	Level 5
Describes basic health care payment systems, (e.g., government, private, public, uninsured care) and practice models	Delivers patient-centered care, considering the patient's economic constraints	Engages with patients in shared decision making, informed by each patient's payment models	Uses available resources to promote optimal patient care (e.g., community resources, patient assistance resources) considering each patient's payment model	Advocates for systems change that enhances high-value, efficient, and effective patient care
Identifies basic knowledge domains for effective transition to practice (e.g., information technology, legal, billing and coding, financial, personnel)	Demonstrates use of information technology required for medical practice (e.g., electronic health record, documentation required for billing and coding)	Consistently demonstrates timely and accurate documentation, including coding and billing requirements	Implements changes in individual practice patterns in response to professional requirements and in preparation for practice	Educates others to prepare them for transition to practice
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
				Not Yet 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 and use available evidence, and to incorporate patient preferences and values to care for a routine patient	Articulates clinical questions and elicits patient preferences and values 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 interprets 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 ☐				

Practice-Based Learning and Improvement 2: Reflective Practice and Commitment to Personal Growth				
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) to inform goals	Seeks performance data sporadically, with adaptability and humility	Seeks performance data consistently	Role models 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	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
☐	☐	☐	☐	☐
Comments:				
Not Yet Completed Level 1 ☐				

Professionalism 1: Professional Behavior and Ethical Principles				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies and describes potential triggers for professionalism lapses and how to report Demonstrates knowledge of ethical principles related to patient care	Demonstrates insight into professional behavior in routine situations and takes responsibility Analyzes straightforward situations using ethical principles	Demonstrates professional behavior in complex or stressful situations Analyzes complex situations using ethical principles	Intervenes to prevent professionalism lapses in oneself and others Recognizes and uses appropriate resources for managing and resolving ethical dilemmas as needed	Coaches others when their behavior fails to meet professional expectations 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 Responds promptly to requests or reminders to complete tasks and responsibilities	Performs tasks and responsibilities in a timely manner with appropriate attention to detail in routine situations Recognizes situations that may impact own ability to complete tasks and responsibilities in a timely manner	Performs tasks and responsibilities in a timely manner with appropriate attention to detail in complex or stressful situations Proactively implements strategies to ensure that the needs of patients, teams, and systems are met	Recognizes situations in which one's own behavior may impact others' ability to complete tasks and responsibilities in a timely manner	Develops or implements strategies to improve system-wide problems to improve ability for oneself and others to complete tasks and responsibilities in a timely fashion
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments: Not Yet Completed Level 1 ☐				

Professionalism 3: Well-Being				
Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes sense 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
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐

This subcompetency is not intended to evaluate a resident's well-being. Rather, the intent is to ensure that each resident 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.

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 the patient's/patient's family's concerns and context, regardless of complexity	Mentors others in situational awareness and critical self-reflection to consistently develop positive therapeutic relationships
Identifies the need to individualize communication strategies based on the patient's/patient's family's expectations and understanding	Communicates compassionately with the patient/patient's family to clarify expectations and verify understanding of the clinical situation	Communicates medical information in the context of the patient's/patient's family's values, uncertainty and conflict	Uses shared decision making to align the patient's/patient's family's values, goals, and preferences with treatment options	Role models shared decision making in the context of the patient's/patient's family's values, uncertainty and conflict
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐

Interpersonal and Communication Skills 2: Barrier and Bias Mitigation				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies common barriers to effective patient care (e.g., language, disability)	Identifies complex barriers to effective patient care (e.g., health literacy, cultural)	Recognizes personal biases and mitigates barriers to optimize patient care, when prompted	Recognizes personal biases and proactively mitigates barriers to optimize patient care	Mentors others on recognition of bias and mitigation of barriers to optimize patient care
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
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
Respectfully requests a consultation	Confirms understanding of consultant recommendations	Clearly and concisely formulates a consultation request	Coordinates recommendations from different members of the health care team to optimize patient care	Role models and facilitates flexible communication strategies that value input from all health care team members, resolving conflict when needed
Recognizes the role of a neurology consultant	Respectfully accepts a consultation request	Clearly and concisely responds to a consultation request		
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 and communicates feedback to other members of the health care team	
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
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
Documents accurate and up-to-date patient information Communicates in a way that safeguards patient information	Demonstrates diagnostic reasoning through organized and timely notes Communicates through appropriate channels as required by institutional policy	Communicates the diagnostic and therapeutic reasoning Selects optimal mode of communication based on clinical context	Demonstrates concise, organized written and verbal communication, including anticipatory guidance	Guides departmental or institutional communication policies and procedures
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments: Not Yet Completed Level 1 ☐				