**Clinical Competency Committee (CCC) Reviewer Script**

I reviewed (*categorical vs. preliminary*) (*PGY-class*) resident, (*name*). We have faculty evaluations from the following rotations over the past 6 months: (*list of completed rotations*)

**Faculty Evaluations:**

His/her faculty evaluations reveal the following themes:

**Clinic Evaluation:**

His/her faculty clinic evaluations reveal the following themes:

**Direct Observation Evaluations:**

This semester, (#) direct observation evaluations were collected which reveal the following themes:

**Procedures:**

Given his/her level of training, the resident has recorded (*fewer procedures than expected, a satisfactory number of procedures, more procedures than expected*). The resident (*has or has not*) completed all ABIM-required procedures for graduation. Procedure evaluations are (*excellent, satisfactory, below average with the following concerns, or N/A*):

**Peer/Nursing/Patient Evaluations:**

We received (*#*) peer evaluations this semester. His/her average scores are (outstanding, above average, on par with peers, or *below avg*) and include the following themes:

Nursing evaluations were collected from (*name of inpatient unit and/or ambulatory site*) and are (*excellent, satisfactory, or below average with the following concerns*):

In addition, (*#*) patient evaluations were collected which are (*excellent, satisfactory, or below average with the following concerns*):

**In-Service Exam:**

The resident (*took vs. did not take*) the in-service exam this semester. He/she scored at the (*percentile*). *(For PGY-2s and 3s)* This score is (*equal to, slightly above, significantly above, slightly below, or significantly below*) his/her in-service exam performance last year.

**Medical Records:**

He/she (*is or is not*) meeting expectations regarding medical records and documentation compliance. (*Any further* *comments):*

**Conference Attendance:**

He/she averaged (*%*) conference attendance this semester which (*meets, far exceeds, or falls below*) our attendance expectations.

**Asynchronous Learning:**

He/she (*is or is not*) meeting expectations regarding completion of the ambulatory quizzes, modules, chart reviews, and other required asynchronous learning. (*Any further comments*):

**Other:**

He/she also had evaluations on (*Journal Club, M&M, QI, Patient Safety, Simulation Course, and/or other*) which revealed the following themes:

This semester, he/she achieved the following scholarly activity: (*None, Poster, Presentation, Publication, Grant, etc.*)

This semester, he/she (*received or did not receive*) formal commendations and/or formal complaints from patients or staff. (*Any further comments*):

On his/her self-evaluation, he/she identified the following as areas of desired growth including the following self-action plans:

**Summary:**

Overall, the resident (*is or is not*) on track for promotion because the resident (*is or is not*) progressing as expected on the ACGME Milestones.

*[For a resident not progressing as expected]:* The resident is struggling in the following

ACGME Milestones: *(List Milestones)*

To address these concerns, I recommend the CCC consider the following:

*(Require a resident meeting with PD and development of a formal action plan,*

*formal letter of* *notification from the CCC, formal remediation, formal probation,*

*and/or consideration for termination)*

*[For all residents]:*

The resident is excelling particularly in the following ACGME Milestones: (*List Milestones or None*)

The following ACGME Milestones provide potential areas of growth: (*List of Milestones*)

My recommended SMART action items for continued professional growth include: *(See CCC Reviewer Form action items)*