Trainee Evaluation Form for General Medicine Ward Rotation

The numbering and description of each level is NOT included on the actual evaluation form

<table>
<thead>
<tr>
<th>1 (Early Intern)</th>
<th>2 (Mid-term Intern)</th>
<th>3 (Graduating Intern)</th>
<th>4 (JAR)</th>
<th>5 (SAR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete supervision</td>
<td>Less supervision</td>
<td>Minimal supervision</td>
<td>Nearly independent</td>
<td>Ready for independent practice</td>
</tr>
</tbody>
</table>

Blue: ABIM/ACGME reporting milestones
Red: AAIM Education Redesign Taskforce designation for milestones

PATIENT CARE (PC)- how the house officer evaluates and treats sick patients

**EVALUATION SKILLS**

1. **Elicit patient information through history taking and use of secondary sources**
   - **PC1, A1-4**
     - Requires direct supervision to conduct an organized interview and to obtain complete and accurate history
     - Interviews are organized; history complete and accurate; uses secondary sources of information most of the time

2. **Perform and interpret a physical examination**
   - **PC1, B1-4**
     - Performs appropriately focused basic exam that includes the key components consistently; knows common maneuvers and able to recognize and elicit findings; may need assistance with specific exam maneuvers; learning to teach medical students

3. **Utilize laboratory/diagnostic tests to evaluate patients**
   - **MK2, B1-3; PC-E1-2**
     - Routine diagnostic tests are consistently ordered appropriately, followed and acted upon in a timely manner; interprets most routine test results correctly; rarely orders unnecessary tests
     - Capable of supervising junior trainees in appropriate ordering and follow up of routine tests; applies test results to clinical decision making with decreasing supervision; learning indications and interpretation of some specialized diagnostic tests

**DIAGNOSIS SKILLS**

4. **Synthesize information from history, exam and laboratory tests to formulate diagnosis**
   - **PC1, C1-4, F1**
     - Articulates a comprehensive assessment and >4 differential diagnoses; reaches correct diagnosis for common and complex conditions; able to supervise and teach junior trainees with basic synthesis and diagnosis skills; recognizes the sick patient with subtle or complex conditions
     - Capable of independently synthesizing clinical data of both routine and complicated cases and reach correct diagnosis; routinely recognizes and uses subtle findings to aid diagnosis; capable of role-modeling diagnostic skills to multiple junior trainees on team
PATIENT MANAGEMENT SKILLS

5. Formulate and implement initial treatment plan for patients with common acute medical conditions PC2, F4-5

Requires direct supervision to formulate and to initiate a basic treatment plan; learning to enter accurate and complete orders; learning to deliver urgent care to stabilize a sick patient under supervision

Formulates a basic treatment plan for the central problem; requires assistance with prioritization and implementation of plan; needs supervision to initiate treatment for multiple problems; needs supervision with entering complete and accurate orders; needs supervision to deliver urgent care to stabilize a sick patient

Formsulates and implements a basic treatment plan for the central problem; plan is prioritized; orders are accurate and complete; delivers urgent care to stabilize sick patient under decreasing levels of supervision; may require assistance when multiple associated medical problems are present

Manages most acute medical conditions independently; ready to supervise junior trainees to formulate and implement initial treatment plan and order entry; delivers urgent care to stabilize a sick patient under minimal supervision

6. Efficiently manage multiple patients with common or complex disorders during hospitalization PC3, F5, F8-9

Requires active, direct supervision to monitor patients daily by focused physical exam, follow-up of laboratory tests, consideration of alternative diagnostic possibilities as clinical picture evolves, to alter treatment plan as clinical and laboratory data or patient needs change, to prioritize the evaluation and treatment needs of multiple patients during daily workflow

Monitors patients daily by focused physical exam and beginning to elicit important changes; may need assistance in following laboratory tests; requires supervision to reevaluate alternative diagnostic possibilities as clinical picture evolves; needs assistance to alter treatment plan as clinical and laboratory data or patient needs change; needs assistance to prioritize the evaluation and treatment needs of multiple patients during daily workflow

Monitors patients daily by focused physical exam to elicit important changes effectively; follows on laboratory tests consistently and takes action; prioritizes the evaluation and treatment needs of multiple patients during daily workflow; evaluates alternative diagnostic possibilities as clinical picture evolves; alters treatment plan under supervision as clinical and laboratory data or patient needs change

Manages multiple patients with common disorders under decreasing levels of supervision; manages time to prioritize evaluation of sickest patients on team; ready to supervise junior trainees on the team to manage multiple patients

Capable of independently managing multiple patients with either common or complex medical conditions; teaches junior trainees how to prioritize multiple patients; serves as a role model for junior trainees on the team as the leader of the team

COORDINATION OF PATIENT CARE

7. Recognize when to seek assistance from a colleague or a consultation from another specialty PC5, F2

Requires supervision to recognize the need for assistance; learning to recognize the requirement for a consultation, how to inform patients prior to a consultation, how to request consultations in a timely manner, and how to implement consultant recommendations appropriately

Beginning to recognize when to seek assistance and how to request a consultation; informs patients and their families prior to consultation request; may require assistance in communicating with consultants; requires supervision to implement recommendations appropriately

Knows when to seek assistance or request a consultation; communicates effectively with consultants when articulating the reason for consult; implements recommendations appropriately under decreasing level of supervision

Capable of implementing consultant recommendations appropriately with minimal supervision; ready to teach junior trainees when to seek assistance and supervise how to communicate with consultants and implement recommendations

Understands the benefits and potential limitations associated with consultant involvement in patient care; exhibits expert communication skills with consultants; serves as a role model for junior trainees while coordinating patient care as the team leader

8. Manage patient care transitions effectively and safely SBP4, A2-3; ICS2, C1-2

Learning how to perform handoffs for hospitalized patients and during discharge planning under direct active supervision; learning to communicate with primary physician and arrange outpatient follow up

Handoffs contain relevant and key information most of the time; may require assistance to deliver concise and prioritized handoffs; supervision needed for implementation of comprehensive discharge planning; prescriptions need to be reviewed prior to discharge; learning to communicate with primary physician and arrange outpatient follow up

Handoffs are complete, prioritized, and well-communicated with decreasing level of supervision; discharge planning is comprehensive most of the time; summaries are accurate; requires feedback to maintain concise discharge summaries; prescriptions are accurate and do not require review; communication with primary physician and outpatient follow up consistently in place with decreasing level of supervision

Handoffs and safe discharge planning are completed with minimal supervision; models appropriate handoffs to junior trainees; ready to supervise junior trainees during handoffs; discharge practice as a role model

Handoffs and safe discharge planning are completed independently; capable of supervising multiple junior trainees during handoff rounds and ensuring safe discharge practice as a role model.
MEDICAL KNOWLEDGE (MK)- what the house officer knows

9. Integrate medical knowledge with clinical reasoning skills to diagnose and manage common medical conditions MK1, A1-2, A4, A7-8

- Articulates basic knowledge of some common disorders and disease pathophysiology; requires assistance to apply medical knowledge to formulate a basic differential diagnosis and to prioritize problem list; requires direction at times to apply medical knowledge effectively to formulate assessment and treatment plan

- Articulates basic knowledge of most common disorders and disease pathophysiology; capable of using medical knowledge to formulate a basic differential diagnosis and to prioritize problem list; uses medical knowledge effectively to formulate assessment and treatment plan under decreasing level of supervision

- Articulates comprehensive knowledge of common disorders and disease pathophysiology; uses medical knowledge to formulate a comprehensive differential diagnosis and to implement treatment plan with minimal supervision

- Possesses in-depth knowledge across a broad spectrum of medical disorders; integrates medical knowledge effectively with diagnostic skills to identify and treat common, rare, or complex disorders and multiple coexistent conditions

PRACTICE-BASED LEARNING AND IMPROVEMENT (PBLI)- how the house officer gets better

10. Integrate self-directed learning and evidence-based medicine PBLI1, B1-3; PBLI4, C1-4

- Freely discusses and assesses own experience and incorporates evidence-based practice into daily practice

- Routinely uses information gained through self-directed learning in daily clinical practice; understands and incorporates principles of evidence-based medicine in daily practice

- Capable of citing own experience and evidence supporting common clinical practice; capable of independently assessing and teaching principles of evidence-based practice to junior trainees and peers

INTERPERSONAL COMMUNICATION SKILLS (ICS)- how the house officer interacts with others

11. Establish rapport and communicate effectively with patients and their families ICS1, A1-4, A6, A8

- Articulates comprehensive knowledge of common disorders and disease pathophysiology; uses medical knowledge to formulate a comprehensive differential diagnosis and to implement treatment plan with minimal supervision

- Consistently willing to seek out answers he/she does not know under minimal supervision; consistently utilizes information technology effectively to support decisions and for self-improvement; understands the principles of evidence-based practice and beginning to apply to daily practice

- Routinely uses information gained through self-directed learning in daily clinical practice; understands and incorporates principles of evidence-based medicine in daily practice

- Capable of citing own experience and evidence supporting common clinical practice; capable of independently assessing and teaching principles of evidence-based practice to junior trainees and peers

12. Demonstrate professional interactions with colleagues and other members of the health care team ICS2, C1-2, D2-3

- Articulates basic knowledge of some common disorders and disease pathophysiology; requires assistance to apply medical knowledge to formulate a basic differential diagnosis and to prioritize problem list; requires direction at times to apply medical knowledge effectively to formulate assessment and treatment plan

- Routinely uses information gained through self-directed learning in daily clinical practice; understands and incorporates principles of evidence-based medicine in daily practice

- Capable of citing own experience and evidence supporting common clinical practice; capable of independently assessing and teaching principles of evidence-based practice to junior trainees and peers

- Serves as a role model as team leader supervising multiple learners and the interdisciplinary healthcare team

- Able to conduct difficult situation discussions independently and with expertise; serves as a role model to junior trainees and peers with exemplary communication skills with patients and their families

- Handles difficult situation discussions independently and with expertise; serves as a role model to junior trainees and peers with exemplary communication skills with patients and their families

- Ready to serve as team leader supervising junior learners; regularly seeks contributions of others on the health care team and provides constructive feedback

- Serves as a role model as team leader supervising multiple learners and the interdisciplinary healthcare team
PROFESSIONALISM (PROF)- how the house officer acts as a medical professional

13. Exhibit behavior that is consistent with dedication to the needs and best interests of patients and society

Learning under direct supervision to consistently demonstrate respect and compassion for all patients, to respect patient confidentiality, adhere to ethical principles of clinical practice, to exhibit honest and trustworthy behavior at all times, and to advocate for the best interests of patients

- Demonstrates respect and compassion for patients; adheres to ethical principles of clinical practice; respects patient confidentiality; consistently exhibits honesty and trustworthiness; advocates for the best interests of patients under supervision

- Demonstrates respect and compassion for patients; adheres to ethical principles of clinical practice; respects patient confidentiality; consistently exhibits honesty and trustworthiness; independently advocates for the best interests of patients at all times

- Demonstrates respect and compassion for patients; adheres to ethical principles of clinical practice; respects patient confidentiality; consistently exhibits honesty and trustworthiness; independently advocates for the best interests of patients at all times; ready to supervise junior learners on the team

- Demonstrates respect and compassion for patients; demonstrates team leadership while adhering to ethical principles of clinical practice; respects patient confidentiality; consistently exhibits honesty and trustworthiness; independently advocates for the best interests of patients at all times; capable of serving as a role model for junior trainees and peers