#### Milestones: General Medicine Wards Evaluation



[Subject Name] [Subject Status] [Evaluation Dates] [Subject Rotation]

Evaluator
[ <b>Evaluator Name</b> ] [Evaluator Status]

Please complete the following evaluation of a sample of skills that should be learned during the resident's general medicine wards rotation. For each skill, please choose the level of entrustment you have for the resident. At what level of supervision do you TRUST the resident to do the particular skill?

Level 1: Resident cannot perform this skill even with assistance

Level 2: Resident should perform this skill under direct supervision of a senior resident or fellow

Level 3: Resident can perform this skill under indirect supervision of the attending

Level 4: Resident can perform this skill independently

Level 5: Resident can act as an instructor or supervisor for this skill (aspirational)

Most interns will start at a Level 2 and progress to a Level 3 on most measures by the end of the PGY-1 year. Most PGY2/3 residents will progress from Level 3 to Level 4 on most measures by the end of their residency. Please reserve level 5 for skills they perform at a truly aspirational level.

If you did not observe the resident performing a specific skill, please mark "Not Observed".

Content Skills (EPAs)						
1) Initiate insulin therapy and manage blood glucose over time	this skill <b>even</b>	this skill under <i>direct</i>	indirect	Resident can perform this skill		
	0	0	0	0	0	0

2)	Manage extremes of blood pressure	Resident cannot perform this skill even with assistance	Resident should perform this skill under <i>direct supervision</i> of a senior resident or fellow	this skill under <i>indirect</i>	Resident can perform this skill independently	Resident can act as an <i>instructor or</i> supervisor for this skill (aspirational)	Not Observed
3)	Initiate appropriate antibiotic(s) for common inpatient infections (PNA, UTI, Cellulitis, diverticulitis, etc)	Resident cannot perform this skill even with assistance	RACINANT CHAILIN NATTARM	Resident can perform this skill under indirect supervision of the attending	Resident can perform this skill	Resident can act as an <i>instructor or</i> supervisor for this skill (aspirational)	Not Observed
4)	Choose the appropriate form of VTE prophylaxis	Resident cannot perform this skill even with assistance	Resident should perform this skill under <i>direct supervision</i> of a senior resident or fellow	Resident can perform this skill under indirect supervision of the attending	Resident can perform this skill	Resident can act as an <i>instructor or</i> supervisor for this skill (aspirational)	Not Observed
5)	Recognize delirium and identify potential causes	Resident cannot perform this skill even with assistance	RACINANT CHAILIN NATTARM	Resident can perform this skill under indirect supervision of the attending	Resident can perform this skill	Resident can act as an <i>instructor or</i> supervisor for this skill (aspirational)	Not Observed
6)	Assess and treat pain as a part of daily plan	Resident cannot perform this skill even with assistance	RECIDENT CHAILIN NETTARM	Resident can perform this skill under indirect supervision of the attending	Resident can perform this skill	Resident can act as an <i>instructor or</i> supervisor for this skill (aspirational)	Not Observed
7)	Initiate workup and management of fever	Resident cannot perform this skill even with assistance	RECIDENT CHAILIN NETTARM	Resident can perform this skill under indirect supervision of the attending	Resident can perform this skill	Resident can act as an <i>instructor or supervisor</i> for this skill (aspirational)	Not Observed

8) Manage and escalate care in a patient with sepsis	Resident cannot perform this skill even with assistance	Resident should perform this skill under <i>direct</i> <i>supervision</i> of a senior resident or fellow	this skill under <i>indirect</i>	Resident can perform this skill independently  O	Resident can act as an <i>instructor or</i> supervisor for this skill (aspirational)	Not
<b>9)</b> Recognize and manage impending respiratory failure	Resident cannot perform this skill even with assistance	Resident should perform this skill under <i>direct</i> supervision of a senior resident or fellow	indirect	Resident can perform this skill	Resident can act as an <i>instructor or supervisor</i> for this skill (aspirational)	
<b>10)</b> Demonstrate appropriate use of blood products	Resident cannot perform this skill even with assistance	Resident should perform this skill under <i>direct</i> supervision of a senior resident or fellow	Resident can perform this skill under indirect supervision of the attending	Resident can perform this skill	Resident can act as an <i>instructor or supervisor</i> for this skill (aspirational)	
Process Skills (EPAs)						
11)Demonstrate the ability to interview a patient, gaining pertinent facts in an efficient and complete manner	Resident cannot perform this skill even with assistance	Resident should perform this skill under <i>direct</i> supervision of a senior resident or fellow	Resident can perform this skill under indirect supervision of the attending	Resident can perform this skill	Resident can act as an <i>instructor or supervisor</i> for this skill (aspirational)	
<b>12)</b> Perform and teach a complete and accurate physical exam	Resident cannot perform this skill even with assistance	Resident should perform this skill under <i>direct</i> supervision of a senior resident or fellow	Resident can perform this skill under indirect supervision of the attending	Resident can perform this skill		
13)Generate a reasonable differential diagnosis, evidence-based diagnostic and therapeutic plan	Resident cannot perform this skill even with assistance	Resident should perform this skill under <i>direct</i> <i>supervision</i> of a senior resident or fellow	indirect	Resident can perform this skill	Resident can act as an <b>instructor or</b> <b>supervisor</b> for this skill (aspirational)	

	0	0	0	0	0	0
<b>14)</b> Modify the differential diagnosis and care plan based on clinical course and data as appropriate	Resident cannot perform this skill even with assistance	Resident should perform this skill under <i>direct supervision</i> of a senior resident or fellow	Resident can perform this skill under indirect supervision of the attending	Resident can perform this skill independently	Resident can act as an <i>instructor or</i> supervisor for this skill (aspirational)	Not Observed
<b>15)</b> Demonstrate shared decision making with the patient and family	Resident cannot perform this skill even with assistance	Resident should perform this skill under <i>direct supervision</i> of a senior resident or fellow	Resident can perform this skill under indirect supervision of the attending	Resident can perform this skill independently  O	Resident can act as an <i>instructor or</i> supervisor for this skill (aspirational)	Not Observed
<b>16)</b> Recognize the scope of his/her abilities and ask for supervision and assistance appropriately	Resident cannot perform this skill even with assistance	Resident should perform this skill under <i>direct supervision</i> of a senior resident or fellow	Resident can perform this skill under indirect supervision of the attending	Resident can perform this skill independently  O	Resident can act as an <i>instructor or</i> supervisor for this skill (aspirational)	Not Observed
<b>17)</b> Integrate clinical evidence into decision making	Resident cannot perform this skill even with assistance	Resident should perform this skill under <i>direct supervision</i> of a senior resident or fellow	Resident can perform this skill under indirect supervision of the attending	Resident can perform this skill independently	Resident can act as an <i>instructor or</i> supervisor for this skill (aspirational)	Not Observed
<b>18)</b> Provide accurate, complete, and timely documentation	Resident cannot perform this skill even with assistance	Resident should perform this skill under <i>direct supervision</i> of a senior resident or fellow	Resident can perform this skill under indirect supervision of the attending	Resident can perform this skill independently	Resident can act as an <i>instructor or</i> supervisor for this skill (aspirational)	Not Observed
<b>19)</b> Stabilize patients with urgent or emergent medical conditions and	Resident cannot perform this skill even with	Resident should perform this skill under <i>direct</i> <i>supervision</i> of a senior resident or fellow	Resident can perform this skill under <i>indirect</i> <i>supervision</i> of the	Resident can perform this skill <b>independently</b>	Resident can act as an <i>instructor or</i> <i>supervisor</i> for this skill	

transfer to a higher level of care when necessary	assistance O	0	attending <b>O</b>	0	(aspirational)	0
<b>20)</b> Discharges or transfers patients with accurate and pertinent communication of active issues and medications to receiving provider	this skill <b>even</b>	ent should perfor skill under <b>direc</b> <b>Ipervision</b> of a or resident or fello	indirect	Resident can perform this skill independently	Resident can act as an <i>instructor of supervisor</i> for this skill (aspirational)	
Overall Clinical Performance						
21)Please evaluate the re current level of train Inadequate Performance/Significan Deficiencies	ing. Include summ	native comme		hs and weakn	esses.	ı their
Comments	0	0	0	0		
Remaining Characters: 5,000						
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#### Milestone General Medicine Wards Rotation Evaluation

Please complete the following evaluation of a sample of skills that should be learned during the resident's general medicine wards rotation. For each skill, please choose the level of entrustment you have for the resident. At what level of supervision do you TRUST the resident to do the particular skill?

- Level 1: Resident cannot perform this skill even with assistance
- Level 2: Resident should perform this skill under direct supervision of a senior resident or fellow
- Level 3: Resident can perform this skill under indirect supervision of the attending
- Level 4: Resident can perform this skill independently
- Level 5: Resident can act as an instructor or supervisor for this skill (aspirational)

Most interns will start at a Level 2 and progress to a Level 3 on most measures by the end of the PGY-1 year. Most PGY2/3 residents will progress from Level 3 to Level 4 on most measures by the end of their residency. Please reserve level 5 for skills they perform at a truly aspirational level.

If you did not observe the resident performing a specific skill, please mark "Not Observed".

# Rating scale for skills below:

- 1. Resident cannot perform this skill even with assistance
- 2. Resident should perform this skill under direct supervision of a senior resident or fellow
- 3. Resident can perform this skill under indirect supervision of the attending
- 4. Resident can perform this skill *independently*
- 5. Resident can act as an instructor or supervisor for this skill (aspirational)

## **Content Skills (EPAs)**

- 1. Initiate insulin therapy and manage blood glucose over time (PC1, PC2, PC3, MK1, PROF2)
- 2. Manage elevated blood pressure (vs Manage extremes of blood pressure) (PC1, PC2, PC3, MK1)
- 3. Initiate appropriate antibiotic(s) for common inpatient infections (PNA, UTI, Cellulitis, diverticulitis, etc) (PC1, PC2, PC3, MK1)
- 4. Choose the appropriate form of VTE prophylaxis (PC2, MK1)
- 5. Recognize delirium and identify potential causes (PC1, PC2, PC3, MK1, MK2)
- 6. Assess and treat pain as a part of daily plan (PC1, PC2, PC3, MK1)
- 7. Initiate workup and management of fever (PC1, PC2, MK1, MK2)
- 8. Manage and escalate care in a patient with sepsis (PC1, PC2, PC3, MK1, MK2, SPB1)

- 9. Recognize and manage impending respiratory failure (PC1, PC2, PC3, MK1)
- 10. Demonstrate appropriate use of blood products (PC1, PC2, PC3, MK1)

### **Process Skills (EPAs)**

- 1. Demonstrate the ability to interview a patient, gaining pertinent facts in an efficient and complete manner (PC1, PROF4, ICS 1)
- 2. Perform and teach a complete and accurate physical exam (PC1, MK1, PROF1)
- 3. Generate a reasonable differential diagnosis, evidence-based diagnostic and therapeutic plan (PC1, PC2, PROF3)
- 4. Modify the differential diagnosis and care plan based on clinical course and data as appropriate (PC1, PC2, PC3, PROF3, PBLI4)
- 5. Demonstrate shared decision-making with the patient (PC3, ICS1, PROF1, PROF3, PROF4)
- Recognize the scope of his/her abilities and ask for supervision and assistance appropriately -(PC3, PBLI1, PBLI4, PROF1, PROF2, ICS2)
- 7. Integrate clinical evidence into decision making (MK1, ICS2, PBLI1, PBLI4)
- 8. Provide accurate, complete, and timely documentation (PROF2, PROF4, ICS3)
- 9. Stabilize patients with urgent or emergent medical conditions and transfer to a higher level of care when necessary (PC3, PC5, SBP1, SBP4)
- 10. Discharges or transfers patients with accurate and pertinent communication of active issues and medications to receiving provider (PC3, ICS1, ICS3, SBP1, SBP 4, PROF4)

#### **Overall Clinical Performance**

Please evaluate the resident's overall clinical performance on the general medicine wards **based upon their current level of training**. Include summative comments on their strengths and weaknesses.

0	Inadequate Performance/Significant Deficiencies
0	Needs Continuous Direction
0	Expected Performance

- Consistently Performs Above Expectations
- Exceptional Performance

**General Comments:** 

### **Legend for Reporting Milestones**

- Gathers and synthesizes essential and accurate information to define each patient's clinical problem(s). (PC1)
- 2. Develops and achieves comprehensive management plan for each patient. (PC2)
- 3. Manages patients with progressive responsibility and independence. (PC3)
- 4. Skill in performing procedures. (PC4)
- 5. Requests and provides consultative care. (PC5)
- 6. Clinical knowledge (MK1)
- 7. Knowledge of diagnostic testing and procedures. (MK2)
- 8. Works effectively within an interprofessional team (e.g. peers, consultants, nursing, ancillary professionals and other support personnel). (SBP1)
- 9. Recognizes system error and advocates for system improvement. (SPB2)
- 10. Identifies forces that impact the cost of health care, and advocates for, and practices cost-effective care. (SBP3)
- 11. Transitions patients effectively within and across health delivery systems. (SBP4)
- 12. Monitors practice with a goal for improvement. (PBLI1)
- 13. Learns and improves via performance audit. (PBLI2)
- 14. Learns and improves via feedback. (PBLI3)
- 15. Learns and improves at the point of care. (PBLI4)
- 16. Has professional and respectful interactions with patients, caregivers and members of the interprofessional team (e.g. peers, consultants, nursing, ancillary professionals and support personnel). (PROF1)
- 17. Accepts responsibility and follows through on tasks. (PROF2)
- 18. Responds to each patient's unique characteristics and needs. (PROF3)
- 19. Exhibits integrity and ethical behavior in professional conduct. (PROF4)
- 20. Communicates effectively with patients and caregivers. (ICS1)
- 21. Communicates effectively in interprofessional teams (e.g. peers, consultants, nursing, ancillary professionals and other support personnel). (ICS2)

22. Appropriate utilization and completion of health records. (ICS3)