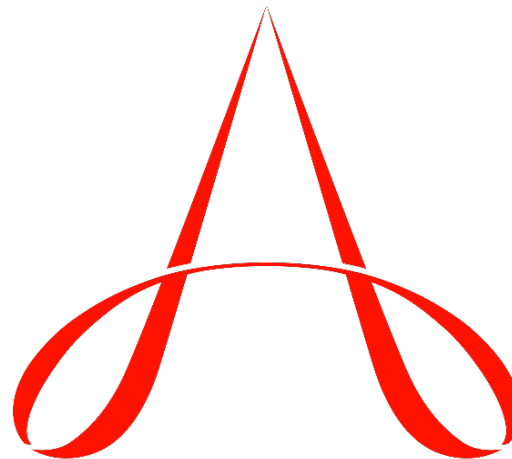# Pain Medicine Milestones

The Accreditation Council for Graduate Medical Education

ACGME

Implementation: July 2022
Second Revision: September 2021
First Revision: August 2014

Pain Medicine Milestones

The Milestones are designed only for use in evaluation of fellows in the context of their participation in ACGME-accredited residency or fellowship programs. The Milestones provide a framework for the assessment of the development of the fellow in key dimensions of the elements of physician competence in a specialty or subspecialty. They neither represent the entirety of the dimensions of the six domains of physician competency, nor are they designed to be relevant in any other context.

Pain Medicine Milestones Work Group

Anuj Aggarwal, MD

Meredith Barad, MD

Diane Braza, MD

Laura Edgar, EdD, CAE

Julie Hammack, MD

Lynn Kohan, MD, MS

Anjali Koka, MD

Debbie Lee, MD

David Lee, EdD

Sam Meyer, MD, MEHP

Anne Marie McKenzie-Brown, MD

Kiran V. Patel

Rene Przkora

Alexandra Szabova, MD

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

American Board of Anesthesiology

American Board of Physical Medicine and Rehabilitation

American Board of Psychiatry and Neurology

Review Committee for Anesthesiology

Review Committee for Neurology

Review Committee for Physical Medicine and Rehabilitation

Understanding Milestone Levels and Reporting

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

Milestones are arranged into levels. Tracking from Level 1 to Level 5 is synonymous with moving from novice to expert fellow in the specialty or subspecialty. For each reporting period, the Clinical Competency Committee will review the completed evaluations to select the milestone levels that best describe each learner's current performance, abilities, and attributes for each subcompetency.

These levels *do not* correspond with post-graduate year of education. Depending on previous experience, a junior fellow may achieve higher levels early in the educational program just as a senior fellow may be at a lower level later in the educational program. There is no predetermined timing for a resident to attain any particular level. Fellows may also regress in achievement of their milestones. This may happen for many reasons, such as over scoring in a previous review, a disjointed experience in a particular procedure, or a significant act by the fellow.

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

Additional Notes

Level 4 is designed as a graduation *goal* but *does not* represent a graduation *requirement*. Making decisions about readiness for graduation and unsupervised practice is the purview of the program director. Furthermore, Milestones 2.0 include revisions and changes that preclude using Milestones as a sole assessment in high-stakes decisions (i.e., determination of eligibility for certification or credentialing). Level 5 is designed to represent an expert fellow whose achievements in a subcompetency are greater than the expectation. Milestones are primarily designed for formative, developmental purposes to support continuous quality improvement for individual learners, education programs, and the specialty. The ACGME and its partners will continue to evaluate and perform research on the Milestones to assess their impact and value.

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

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

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

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

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 and institutional reporting system	Identifies and reports patient safety events	Participates in analysis of patient safety events (simulated or actual)	Offers strategies (simulated or actual) to prevent patient safety events	Actively engages and leads teams and processes to prevent patient safety events
Demonstrates knowledge of basic quality improvement methodologies and metrics	Describes local quality improvement initiatives	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 ☐

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: Gathers and Synthesizes Essential and Accurate Information to Define Each Patient's Clinical Problem(s) (Neurology and Musculoskeletal)

Level 1	Level 2	Level 3	Level 4	Level 5
Acquires accurate medical histories	Acquires accurate and relevant pain histories	Acquires accurate and relevant pain histories in the context of a patient with complex medical conditions	Efficiently acquires accurate and relevant pain history in the context of a patient with complex medical conditions	Acts as a role model and teaches the effective use of history taking, biopsychosocial, and physical examination skills to efficiently identify and treat multiple complex pain conditions
Performs accurate physical exams	Performs relevant pain-based physical exams	Performs accurate and relevant physical exams that are targeted to the patient's problems	Performs hypothesis-driven physical exams that identify subtle or unusual physical exam findings in patients with uncommon conditions	
Develops limited differential diagnoses	Uses and synthesizes collected data, including patient-reported outcomes, to define a patient's central clinical problem(s) and generate a prioritized differential diagnosis and problem list	Efficiently uses the biopsychosocial data to inform the differential diagnosis	Efficiently uses all sources of secondary data to inform differential diagnosis	
☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐

Comments:

Not Yet Completed Level 1   ☐

Not Yet Assessable   ☐

Patient Care 2: Gathers and Synthesizes Essential and Accurate Information to Define Each Patient's Clinical Problem(s) (Psychiatric and Pain Comorbidities)				
Level 1	Level 2	Level 3	Level 4	Level 5
Acquires accurate psychiatric histories and conducts mental status examinations when relevant	Consistently acquires accurate psychiatric histories and conducts mental status examinations when relevant	Consistently and efficiently acquires accurate psychiatric histories and conducts mental status examinations when relevant; screens for common psychiatric comorbidities	Consistently uses screening to narrow the differential diagnosis for a patient with psychiatric comorbidities	Acts as a role model and teaches the effective use of history taking and conducting a mental status examination when relevant
Identifies common psychiatric diagnoses	Screens patients for common psychiatric comorbidities	Consistently screens for adverse childhood events, trauma, substance use disorders (SUDs), and safety	Consistently follows trends in functional assessment of a patient with common psychiatric comorbidities	Acts as a role model and teaches how to screen for adverse childhood events, trauma, SUDs, and safety

Comments:

Not Yet Completed Level 1 ☐
Not Yet Assessable ☐

Patient Care 3: In Collaboration with the Patient, Develops, and Achieves a Comprehensive Pain Treatment Plan for Each Patient; Includes Consideration of Available Pharmacologic, Behavioral, Rehabilitative, Interventional, Complementary/Alternative Approaches

Level 1	Level 2	Level 3	Level 4	Level 5
Develops a plan for straightforward cases, with assistance	Independently develops a plan for a straightforward case and implements it, with assistance	Develops a plan for a complex case and implements it, with minimal assistance	Independently develops, implements, and monitors a comprehensive treatment plan	Effectively manages unusual, rare, or complex disorders in all appropriate clinical settings
Consistently recognizes situations that require consultations or help from an attending physician	Obtains appropriate consultations with specific questions for the consultant	Incorporates consultation results into a treatment plan	Applies learning from consultants to similar patient care scenarios	Acts as role model and teaches complex patient-centered care
Manages straightforward cases, with direct supervision	Manages complex cases, with direct supervision	Manages cases with indirect supervision	Independently manages patients across applicable inpatient, outpatient, and ambulatory clinical settings	Actively advances novel pain therapies

☐	☐	☐	☐	☐	☐	☐	☐	☐	

Comments:

Not Yet Completed Level 1 ☐

Not Yet Assessable ☐

Patient Care 4: Patient Counseling for Testing and Procedures				
Level 1	Level 2	Level 3	Level 4	Level 5
Discusses the indications, contraindications, and potential risks of diagnostic testing and straightforward procedures and obtains and documents informed consent	Discusses the indications, contraindications, and potential risks of invasive diagnostic testing and complex procedures and obtains and documents informed consent	Discusses the indications, contraindications, potential risks, and controversies of procedures for patients with common comorbidities and obtains and documents informed consent	Discusses the indications, contraindications, potential risks, and controversies procedures for patients with complex comorbidities and obtains and documents informed consent	Quantifies evidence for risk-benefit analysis while obtaining informed consent for invasive diagnostic testing, complex procedures, or therapies
☐	☐	☐	☐	☐	☐	☐	☐	☐

Comments:

Not Yet Completed Level 1   ☐

Not Yet Assessable   ☐

Patient Care 5: Demonstrates Skill in Performing Interventions

Level 1	Level 2	Level 3	Level 4	Level 5
Performs straightforward interventions, ensuring patient safety and comfort, with supervision	Independently performs straightforward interventions, ensuring patient safety and comfort	Performs complex interventions, ensuring patient safety and comfort, with supervision	Independently performs complex interventions, ensuring patient safety and comfort	Independently performs complex interventions for a patient with complex comorbidities, ensuring patient safety and comfort
Recognizes and manages complications in patients with common comorbidities, with supervision	Independently recognizes and manages complications in patients with common comorbidities	Recognizes and manages complications in patients with complex comorbidities, with supervision	Independently recognizes and manages complications in patients with complex comorbidities	Demonstrates expertise to teach and supervise others in the performance of invasive procedures

Comments:

Not Yet Completed Level 1　☐

Not Yet Assessable　☐

Patient Care 6: Provides Consultative Care				
Level 1	Level 2	Level 3	Level 4	Level 5
Respectfully receives and provides a timely response to consultation requests	Clarifies the consultative question after gathering data about a patient with a basic pain condition, with supervision	Communicates the redefined problem with the referring team when a recommendation differs from the original consultation question, with supervision	Independently communicates the redefined problem with the referring team when a recommendation differs from the original consultation question	Is identified as a role model for consultative care across the spectrum of disease complexity and social determinants of health
Recognizes the need for timely consultation based on disease acuity, with supervision	Independently recognizes the need for timely consultation based on disease acuity	Prioritizes management steps	Recognizes the economic impact and role of medical team dynamics when making recommendations to the referring team	Leads the multidisciplinary team to evaluate and integrate divergent recommendations to formulate a unified plan

☐   ☐   ☐   ☐   ☐   ☐   ☐   ☐   ☐

Comments:	
	Not Yet Completed Level 1 ☐
	Not Yet Assessable ☐

6

Medical Knowledge 1: Possesses Clinical Knowledge

Level 1	Level 2	Level 3	Level 4	Level 5
Possesses basic knowledge of the anatomy, physiology, and pharmacology of pain for common pain conditions	Possesses knowledge of the anatomy, physiology, and pharmacology of pain for common pain conditions	Possesses knowledge of the anatomy, physiology, biopsychosocial factors, and pharmacology of pain for comprehensive pain care	Possesses knowledge of the anatomy, physiology, biopsychosocial factors, and pharmacology of pain for comprehensive pain care of complex cases	Possesses knowledge of the anatomy, physiology, biopsychosocial factors, and pharmacology of pain for comprehensive pain care of rare or diagnostically ambiguous pain cases
Possesses basic knowledge of pain assessment and treatment modalities for common pain conditions	Possesses knowledge of pain assessment and treatment modalities for common pain conditions	Possesses knowledge of pain assessment and treatment modalities for comprehensive pain care	Possesses knowledge of pain assessment and treatment modalities for comprehensive pain care of complex cases	Possesses knowledge of pain assessment and treatment modalities for comprehensive pain care of rare or diagnostically ambiguous pain cases
Possesses basic knowledge of common interventional strategies to treat pain	Possesses knowledge of common interventional strategies to treat pain	Possesses knowledge of interventional strategies to treat pain, including knowledge of non-standard cases	Possesses knowledge of less commonly used interventional strategies to treat pain	Possesses knowledge to develop and postulate new interventional targets and methods to treat pain

Comments:

Not Yet Completed Level 1 ☐
Not Yet Assessable ☐

Medical Knowledge 2: Diagnostic Testing and Imaging (e.g., electrodiagnostics, radiology, laboratory)				
Level 1	Level 2	Level 3	Level 4	Level 5
Discusses a general diagnostic approach appropriate to the clinical presentation	Considers diagnostic testing based on cost effectiveness and likelihood that results will influence clinical management	Prioritizes the sequence and urgency of diagnostic studies	Correlates diagnostic testing with the clinical presentation	
Interprets common diagnostic tests, with supervision	Consistently interprets common diagnostic tests	Consistently interprets results of complex diagnostic tests accurately while accounting for sensitivity and specificity	Anticipates and accounts for subtle nuances of interpreting diagnostic tests	Pursues knowledge of new and emerging diagnostic tests

Comments:

Not Yet Completed Level 1   ▢

Not Yet Assessable   ▢

Systems-Based Practice 1: Patient Safety and Quality Improvement

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of common events that impact patient safety	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 their families (simulated or actual)	Discloses patient safety events to patients and their 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 departmental quality improvement initiatives	Participates in department 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 level or above

| ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

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 in routine clinical situations, effectively using the roles of interprofessional team members	Coordinates care of patients in complex clinical situations, effectively collaborating with members of the interprofessional team	Role models effective coordination of patient-centered care among different professions 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	Role models and advocates for safe and effective transitions of care/hand-offs within and across health care delivery systems and 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 inequities	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 while minimizing health care inequities	Participates in changing and adapting practice to provide for the needs of specific populations	Leads innovations and advocacy in partnership with populations and communities experiencing 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
Describes basic health payment systems (e.g., government, private, public, uninsured care) and practice models	Describes how components of a complex health care system are interrelated, and how this impacts delivery of pain management	Practices pain management in the context of a complex health care system to deliver effective care	Navigates the various components of the complex health care system to provide efficient and effective patient care and transitions of care	Advocates for or leads 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)	Delivers care with consideration of each patient's payment model (e.g., insurance type)	Engages with patients in shared decision making, informed by each patient's payment model	Advocates for patient care needs (e.g., community resources, patient assistance resources) with consideration of the limitations of each patient's payment model	Participates in health policy advocacy activities
	Demonstrates use of information technology required for medical practice (e.g., electronic health record, documentation required for billing and coding)	Describes core administrative knowledge needed for transition to practice (e.g., contract negotiations, malpractice insurance, government regulation, compliance)	Analyzes individual practice patterns and professional requirements in preparation for independent 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	Locates and applies the best available evidence, integrated with patients' preferences, to the care of straightforward patients	Locates and applies the best available evidence, integrated with patients' preferences, to the care of complex patients	Critically appraises and 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 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 form goals	Seeks performance data episodically, with adaptability and humility	Intentionally seeks performance data consistently, with adaptability and humility	Role models consistently seeking performance data, with adaptability and humility
Identifies the factors that contribute to performance gaps	Analyzes and acknowledges the factors that contribute to performance gaps	Institutes behavioral change(s) to improve performance	Considers alternatives to improve performance	Models reflective practice
Actively seeks opportunities to improve knowledge and skills	Designs and implements a learning plan, with prompting	Independently creates and implements a learning plan	Integrates performance data to adapt the learning plan	Facilitates the design and implementation of learning plans for others

▢	▢	▢	▢	▢	▢	▢	▢	▢	

Comments:

Not Yet Completed Level 1   ▢

Practice-Based Learning and Improvement 3: Participates in Scholarship (Foundation, Investigation, Analysis, and Dissemination)				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies a topic for a scholarly project and a mentor	Develops a research question for the scholarly project	Develops a research plan and timeline for completion of the scholarly project with one's mentor	Completes a scholarly project	Leads or provides mentorship for a scholarly project
Communicates and/or disseminates knowledge in the field of pain medicine during straightforward clinical care	Communicates scientific literature as applied to more complex clinical situations	Presents at journal club, quality improvement meetings, or clinical conferences, and/or effectively describes and discusses one's own scholarly work or research	Presents scholarly project at local or regional meetings, and/or submits an abstract summarizing the scholarly work to regional/state/ national meetings, and/or publishes non-peer-reviewed manuscript(s) (reviews, book chapters)	Presents scholarly work at national and international meetings, or publishes peer-reviewed manuscript(s) containing scholarly work (clinical practice, quality improvement, patient safety, education, or research), or obtains research funding
☐	☐	☐	☐	☐	☐	☐	☐	☐

Comments:

Not Yet Completed Level 1　☐

Professionalism 1: Professional Behavior and Ethical Principles				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies potential triggers for professionalism lapses	Demonstrates insight into professional behavior in routine situations	Demonstrates professional behavior in complex or stressful situations	Recognizes situations that may trigger professionalism lapses and intervenes to prevent lapses in oneself	Coaches others when their behavior fails to meet professional expectations
Describes when and how to report lapses in professionalism	Takes responsibility for one's own professionalism lapses	Recognizes need to seek help in managing and resolving complex interpersonal situations	Implements recommendations to resolve complex interpersonal situations	
Demonstrates knowledge of the ethical principles underlying patient care	Analyzes straightforward situations using ethical principles	Analyzes complex situations using ethical principles	Recognizes and utilizes resources for managing and resolving ethical dilemmas	Participates in committees that works to promote ethical behavior
☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐

Comments:

Not Yet Completed Level 1   ☐

Professionalism 2: Accountability/Conscientiousness

Level 1	Level 2	Level 3	Level 4	Level 5
Responds promptly to requests or reminders to complete tasks	Performs tasks and responsibilities in a timely manner	Performs tasks and responsibilities in a timely manner with appropriate attention to detail in routine situations	Prioritizes tasks and responsibilities in a timely manner with appropriate attention to detail in complex or stressful situations	
Takes responsibility for failure to complete tasks	Recognizes situations that may impact one's own ability to complete tasks and responsibilities in a timely manner	Takes responsibility for tasks not completed in a timely manner and identifies strategies to prevent recurrence	Proactively implements strategies to ensure that the needs of patients, teams, and systems are met	Designs and implements an institutional systems approach to ensure timely task completion and shared responsibility

☐	☐	☐	☐	☐	☐	☐	☐	☐

Comments:

Not Yet Completed Level 1   ☐

Professionalism 3: Well-Being				
Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes the importance of addressing personal and professional well-being	Lists available resources for addressing personal and professional well-being	With assistance, proposes a plan to promote personal and professional well-being	Independently develops a plan to promote personal and professional well-being	Serves as a well-being coach and leads a well-being initiative
☐	☐	☐	☐	☐	☐	☐	☐	☐	
Comments: Not Yet Completed Level 1 ☐				

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

Professionalism 4: Patient-Centered Care/Cultural Competence				
Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes the need to respect the dignity of patients of all backgrounds	Demonstrates specific elements of verbal and physical communication that reflect respect for patients	Recognizes the impact of a patient's background on delivery of care	Integrates a patient's background into the care one provides	Serves as a role model and resource for others by coaching them in behaviors and actions that optimize the comfort, dignity, and respect of patients of all backgrounds

Comments:

Not Yet Completed Level 1   ☐

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 a patient's/patient's family's concerns and context, regardless of complexity	Mentors others in developing positive therapeutic relationships
Identifies common barriers to effective communication (e.g., language, disability)	Identifies complex barriers to effective communication (e.g., health literacy, cultural differences)	When prompted, reflects on personal biases while attempting to minimize communication barriers	Independently recognizes personal biases while proactively minimizing communication barriers	Role models self-awareness practice while teaching a contextual approach to minimize communication barriers
Accurately communicates one's own role within the health care system	Organizes and initiates communication with a patient/patient's family by clarifying expectations and verifying understanding of the clinical situation	With guidance, uses shared decision making to align a patient's/patient's family's values, goals, and preferences with treatment options to make a personalized care plan	Independently uses shared decision making to align a patient's/patient's family's values, goals, and preferences with treatment options to make a personalized care plan	Role models shared decision-making in patient/family communication, including in situations with a high degree of uncertainty/conflict

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 or receives consultations	Clearly, concisely, and promptly requests or responds to a consultation	Uses closed-loop communication to verify understanding	Coordinates recommendations from different members of the health care team to optimize patient care	Role models flexible communication strategies that value input from all health care team members, resolving conflict when needed
Uses language that values all members of the health care team	Communicates information effectively with all health care team members	Adapts communication style to fit team needs	Manages communication among team members in complex patient situations	Coaches others in managing communication among team members in complex patient situations
Respectfully receives feedback from health care team members	Solicits feedback on performance as a member of the health care team	Communicates concerns and provides feedback to peers and learners	Communicates constructive feedback to faculty members and supervisors	Facilitates regular health care team-based feedback in complex situations

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 records information in the patient record while safeguarding patients' personal health information	Demonstrates organized and complete diagnostic and therapeutic reasoning through notes in the patient record, including appropriate modifications when using copy-and-paste function	Communicates clearly, concisely, timely, and in an organized written form, including anticipatory recommendations	Provides feedback to improve others' written communication	Models feedback to improve others' written communication
Demonstrates basic knowledge of appropriate channels of communication within the institution (e.g., pager callback, timely response to emails)	Communicates through appropriate channels as required by institutional policy (e.g., patient safety reports)	Appropriately selects direct (e.g., telephone, in-person) and indirect (e.g., progress notes, text messages) forms of communication based on context	Produces written or verbal communication that serves as an example for others to follow	Guides departmental or institutional communication around policies and procedures
☐	☐	☐	☐	☐	☐	☐	☐	☐

Comments:
Not Yet Completed Level 1   ☐