The Dermatopathology Milestone Project

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 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.
Dermatopathology Milestones

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Milestone Reporting

This document presents Milestones designed for programs to use in semi-annual review of fellow performance and reporting to the ACGME. Milestones are knowledge, skills, attitudes, and other attributes for each of the ACGME competencies organized in a developmental framework from less to more advanced. They are descriptors and targets for fellow performance as a fellow moves from entry into fellowship through graduation. In the initial years of implementation, the Review Committee will examine Milestone performance data for each program’s fellows as one element in the Next Accreditation System (NAS) to determine whether fellows overall are progressing.

For each period, review and reporting will involve selecting milestone levels that best describe each fellow’s current performance and attributes. Milestones are arranged into numbered levels. Tracking from Level 1 to Level 5 is synonymous with moving from novice to expert in the subspecialty. These levels do not correspond with post-graduate year of education.

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

Level 1: The fellow demonstrates milestones expected of an incoming fellow.

Level 2: The fellow is advancing and demonstrates additional milestones, but is not yet performing at a mid-fellowship level.

Level 3: The fellow continues to advance and demonstrate additional milestones, consistently including the majority of milestones targeted for fellowship.

Level 4: The fellow has advanced so that he or she now substantially demonstrates the milestones targeted for fellowship. This level is designed as the graduation target.

Level 5: The fellow has advanced beyond performance targets set for fellowship and is demonstrating “aspirational” goals which might describe the performance of someone who has been in practice for several years. It is expected that only a few exceptional fellows will reach this level.
Additional Notes

Level 4 is designed as the graduation target and does not represent a graduation requirement. Making decisions about readiness for graduation is the purview of the fellowship program director. Study of Milestone performance data will be required before the ACGME and its partners will be able to determine whether milestones in the first four levels appropriately represent the developmental framework, and whether Milestone data are of sufficient quality to be used for high-stakes decisions.

Examples are provided with some milestones. Please note that 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 the ACGME supervision guidelines, 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.

Answers to Frequently Asked Questions about Milestones are available on the Milestones web page:

http://www.acgme.org/acgmeweb/Portals/0/MilestonesFAQ.pdf.
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 fellow’s performance on the milestones for each sub-competency will be indicated by selecting the level of milestones that best describes that fellow’s performance in relation to those milestones.

<table>
<thead>
<tr>
<th>Dermatopathologic Diagnosis – PC1</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Level 1</strong></td>
</tr>
<tr>
<td>Differentiates between normal and abnormal histology; recognizes basic pathologic changes</td>
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</tbody>
</table>

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).
### Dermatopathologic Diagnosis – PC1

<table>
<thead>
<tr>
<th>Level</th>
<th>Level 1</th>
<th>Level 2</th>
<th>Level 3</th>
<th>Level 4</th>
<th>Level 5</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Differentiates between normal and abnormal histology; recognizes basic pathologic changes</td>
<td>Diagnoses many common skin disorders; forms a differential diagnosis for most cases</td>
<td>Consistently diagnoses common skin disorders; develops a competent differential diagnosis and work-up plan for more difficult or complex cases</td>
<td>Consistently perceives subtle clues in the course of diagnosing cutaneous diseases; often makes correct diagnosis and suggestions for work-up of difficult cases</td>
<td>Serves as a role model in the teaching and practice of dermatopathology; sought out by other health care providers as a consultant</td>
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**Comments:**

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### Ancillary Testing – PC2

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<thead>
<tr>
<th>Level</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Recognizes importance of ancillary studies in histologic diagnosis</td>
<td>Demonstrates knowledge of relevant ancillary studies in histologic diagnosis</td>
<td>Usually selects cost-effective and relevant ancillary studies in common disorders</td>
<td>Consistently selects cost-effective and relevant ancillary studies</td>
<td>Instructs others in the use of cost-effective and relevant ancillary studies</td>
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</tbody>
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**Comments:**

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<table>
<thead>
<tr>
<th>Histopathologic Patterns – MK1</th>
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<tbody>
<tr>
<td><strong>Level 1</strong></td>
<td><strong>Level 2</strong></td>
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<tr>
<td>Demonstrates knowledge of the difference between inflammatory and neoplastic patterns</td>
<td>Demonstrates knowledge of the types of inflammatory reaction patterns and types of neoplasia</td>
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<td>Comments:</td>
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<table>
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<tr>
<th>Immunohistochemistry – MK2</th>
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<tbody>
<tr>
<td><strong>Level 1</strong></td>
<td><strong>Level 2</strong></td>
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<tr>
<td>Understands application and purpose of immunohistochemistry testing and has a basic understanding of tissue processing</td>
<td>Demonstrates knowledge of situations in which immunohistochemical stains are necessary</td>
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<tr>
<td></td>
<td>Can select a reasonable panel of antibodies for diagnosis of cutaneous disease</td>
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<td>Comments:</td>
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### Health Care teams — SBP1

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<tr>
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<th>Level 5</th>
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<tbody>
<tr>
<td>Understands the importance of the dermatopathologist’s role in the health care team</td>
<td>With substantial guidance, plays a role in the health care team (e.g., case presentation, consultation, biopsy technique guidance)</td>
<td>With minimal guidance, plays a role in the health care team (e.g., case presentation, consultation, biopsy technique guidance)</td>
<td>Independently plays a role in the health care team (e.g., case presentation, consultation, biopsy technique guidance)</td>
<td>Participates on an institutional patient care team (e.g., risk management committee, cancer committee)</td>
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<tr>
<th>Patient Safety — SBP2</th>
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<tr>
<td><strong>Level 1</strong></td>
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<tr>
<td>Understands the importance of identity and integrity of the specimen and verifies the identity of the specimen</td>
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<tr>
<td>Understands the risk inherent in hand-offs</td>
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<td>Handles deviations from policies (waivers) with supervision</td>
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### Evidence-based Practice — PBLI1

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<tbody>
<tr>
<td>Understands the importance of evidence-based practice</td>
<td>With substantial guidance, critically reviews the literature</td>
<td>With minimal guidance, critically reviews the literature</td>
<td>Independently performs critical reviews of the literature</td>
<td>Contributes to the evidence-based utilization of the literature</td>
</tr>
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### Process Improvement and Patient Safety — PBLI2

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<tr>
<td>Demonstrates awareness of common sources of error in laboratory processes and transitions in care</td>
<td>Consistently demonstrates work habits that minimize error; consistently and promptly communicates discrepancies to appropriate team members and acts to resolve them</td>
<td>Assists with practice change based on an identified error or systematic problem (e.g., post-analytic, pre-analytic, laboratory or interpretative)</td>
<td>Able to develop and lead a process improvement exercise (e.g., root-cause analysis, work-flow analysis)</td>
<td>Participates in an institutional quality improvement team</td>
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### Accountability, Honesty, and Integrity — PROF1

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<tbody>
<tr>
<td>Understands the importance of completing assigned tasks on time</td>
<td>Dependably completes assigned tasks in a timely manner; assists team members when requested; respects assigned schedules</td>
<td>Anticipates team needs and steps in to assist as needed</td>
<td>Anticipates team needs and takes a leadership role to independently implement solutions</td>
<td>Exemplifies effective management of multiple competing tasks, with reliable follow up; is source of support/guidance to other members of the health care team</td>
</tr>
<tr>
<td>Behaves honestly and understands the concepts of ethical behavior; seeks counsel when ethical questions arise</td>
<td>Acknowledges personal near misses and errors, and putting the needs of patients first; engages in ethical behavior</td>
<td>Demonstrates honesty with all members of the health care team</td>
<td>Is viewed by members of the health care team as a role model in accepting personal responsibility, and in always putting the needs of the patient above his/her own interests</td>
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<td></td>
<td>Identifies, communicates, and corrects errors</td>
<td>Practices ethical ordering of ancillary testing</td>
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<td>Recognizes conflict of interest in the ethical ordering of ancillary testing</td>
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<tr>
<td>Receives feedback constructively</td>
<td>Accepts feedback constructively and modifies practice in response to feedback</td>
<td>Provides constructive feedback</td>
<td>Exemplifies giving and receiving constructive feedback; encourages and actively seeks feedback to improve performance</td>
<td>Models giving and receiving constructive feedback; encourages and actively seeks feedback to improve performance</td>
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<tbody>
<tr>
<td>Understands the challenge in managing clinical, clerical, and laboratory personnel (e.g., competency assessment, performance evaluation)</td>
<td>With substantial guidance, manages clinical, clerical, and laboratory personnel</td>
<td>With minimal guidance, manages clinical, clerical, and laboratory personnel</td>
<td>Demonstrates the ability to independently manage clinical, clerical, and laboratory personnel</td>
<td>Develops job descriptions and competency assessments for clinical, clerical, and laboratory personnel</td>
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<tr>
<td>Understands the importance of conflict management</td>
<td>With substantial guidance, manages conflicts and complaints</td>
<td>With minimal guidance, manages conflicts and complaints</td>
<td>Independently manages conflicts and complaints</td>
<td>Teaches concepts of emotional intelligence and team building</td>
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<tr>
<td>Understands the importance of personal emotional awareness and empathy and their impact on team members</td>
<td>Understands the importance of a collegial and respectful atmosphere among all team members</td>
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<td>Fosters a collegial and respectful atmosphere among all team members</td>
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### Diagnostic Reporting — ICS2

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<tbody>
<tr>
<td>Understands the importance of timely and effective communication of diagnosis, and their impact on patients</td>
<td>With substantial guidance, provides timely and effective communication of diagnosis</td>
<td>With minimal guidance, provides timely and effective communication of diagnosis</td>
<td>Effectively communicates complex, difficult, or challenging information (e.g., errors, adverse events)</td>
<td>Serves as a role model for effective and professional communication to health care providers</td>
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<tr>
<td>Understands that the written report is a form of communication that must be clear and understandable to the treating clinician</td>
<td>With substantial guidance, produces a clear and understandable written report</td>
<td>Recognizes when direct communication is required with the clinician</td>
<td>Designs a clear and effective written report</td>
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<tr>
<td>Becomes familiar with synoptic reports</td>
<td>Knows when synoptic reporting is required</td>
<td>With minimal guidance, produces a clear and understandable written report</td>
<td>Teaches synoptic reporting to junior learners</td>
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<td></td>
<td>ComPLEtes a synoptic report accurately</td>
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