

# Musculoskeletal Oncology Milestones

The Accreditation Council for Graduate Medical Education



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## Musculoskeletal Oncology Milestones

The Milestones are designed only for use in evaluation of fellows in the context of their participation in ACGMEaccredited 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.

#### **Musculoskeletal Oncology Milestones**

#### **Working Group**

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American Board of Orthopaedic Surgery

ACGME Review Committee for Orthopaedic Surgery

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### **Understanding Milestone Levels and Reporting**

This document presents the Milestones, which programs use in a semi-annual review of resident/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 resident/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 resident/fellow may achieve higher levels early in his/her educational program just as a senior resident/fellow may be at a lower level later in his/her educational program. There is no predetermined timing for a resident to attain any particular level. Residents/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 resident/fellow.

Selection of a level implies the resident/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 resident/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.

Examples are provided for some milestones within this document. Please note: 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 ACGME supervision guidelines as described in the Program Requirements, as well as to institutional and program policies. For example, a resident who performs a procedure independently must, at a minimum, be supervised through oversight.

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

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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.

| Medical Knowledge 2: Clinical Research  |   |  |  |  |  |
|---|---|--|--|--|--|
| Level 1   | Level 2   | Level 3  | Level 4  | Level 5  |  |
| Describes the basics of<br>clinical study design and<br>levels of evidence  | Understands the different<br>phases of oncologic<br>clinical research | Demonstrates general<br>knowledge of clinical<br>research design, including<br>Institutional Review Board<br>process | Disseminates scholarly<br>activity through<br>publication or<br>presentation   | Designs and develops a<br>clinical trial                       |  |
|   |   |  |  |  |  |
| Comments: Not Yet Completed Level 1   |   |  |  |  |  |
| Selecting a response box in the<br>middle of a level implies that<br>milestones in that level and in lower<br>levels have been substantially<br>demonstrated. |   |  | Selecting a response<br>between levels indica<br>in lower levels have to<br>demonstrated as well<br>milestones in the high | ates that milestones<br>been substantially<br>l as <b>some</b> |  |

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| Level 1   | Level 2  | Level 3  | Level 4  | Level 5   |
|---|--|--|--|---|
| Independently develops<br>a simple surgical plan          | Independently develops a<br>surgical plan for routine<br>procedures that includes<br>identification of potential<br>challenges and technical<br>complexities | Independently develops a<br>surgical plan for complex<br>procedures, including<br>contingencies for<br>complications, and<br>coordinates treatment<br>with other specialties | Independently plans<br>complex procedures,<br>including management<br>of peri-operative<br>complications |   |
| Performs surgical<br>approach, with minimal<br>assistance | Performs prophylactic<br>procedures (e.g.,<br>prophylactic fixation)   | Independently performs<br>routine procedures (e.g.,<br>intramedullary nail, plate<br>and cement for pathologic<br>fracture)  | Independently performs<br>complex procedures<br>(e.g., endoprosthesis for<br>pathologic fracture)        | Independently performs<br>rare procedures (e.g.,<br>acetabular) |
| Manages simple<br>complications                           | Identifies complex complications   | Develops a plan for<br>managing complex<br>complications   | Develops a plan and<br>implements treatment of<br>complex complications                                  |   |
|   |  |  |  |   |

| Patient Care 2: Benign and Malignant Bone Lesion |  |   |  |   |
|--|--|---|--|---|
| Level 1  | Level 2  | Level 3   | Level 4  | Level 5   |
| Independently develops<br>a simple surgical plan | Independently develops a<br>surgical plan for routine<br>procedures that includes<br>identification of potential<br>challenges and technical<br>complexities | Independently develops a<br>surgical plan for complex<br>procedures, including<br>contingencies for<br>complications  | Independently plans<br>complex procedures,<br>including management<br>of peri-operative<br>complications   |   |
| Performs a bone biopsy                           | Performs curettage for<br>benign lesions (e.g., distal<br>femur)   | Independently performs<br>routine procedures on<br>bone lesions (e.g.,<br>surgical management of<br>intramedullary tumors,<br>reconstruction of a non-<br>aggressive tumor) | Independently performs<br>procedures on complex<br>bone lesions (e.g.,<br>acetabular or sacral<br>benign lesion, resection<br>and reconstruction of a<br>distal femur, proximal<br>humerus resections,<br>pediatric tumors, higher<br>level amputations) and<br>coordinates care with<br>the multidisciplinary<br>team | Independently performs<br>rare procedures (e.g.,<br>pelvic resection (internal<br>and external<br>hemipelvectomies), sacral<br>tumor resection,<br>forequarter amputation,<br>Tikhoff-Linberg<br>procedures,<br>rotationplasty) |
| Manages simple<br>complications                  | Identifies complex complications   | Develops a plan for<br>managing complex   | Develops a plan and implements treatment of  |   |
|  |  | complications   | complex complications  |   |
|  |  |   |  |   |
| Comments:  |  |   | Not Yet C<br>Not Yet A   | ompleted Level 1  |

| Patient Care 3: Benign and Malignant Soft Tissue Tumor |  |  |   |   |
|--|--|--|---|---|
| Level 1  | Level 2  | Level 3  | Level 4   | Level 5   |
| Independently develops<br>a simple surgical plan       | Independently develops a<br>surgical plan for routine<br>procedures that includes<br>identification of potential<br>challenges and technical<br>complexities | Independently develops a<br>surgical plan for complex<br>procedures, including<br>contingencies for<br>complications   | Independently plans<br>complex procedures,<br>including management<br>of peri-operative<br>complications  |   |
| Performs a soft tissue<br>biopsy                       | Performs excision of<br>superficial benign soft<br>tissue tumors (e.g.,<br>subcutaneous lipoma,<br>Schwannoma excision)                                      | Independently performs<br>routine procedures on<br>deep benign soft tissue<br>tumors (e.g.,<br>intermuscular lipoma,<br>atypical lipomatous<br>tumors) and superficial<br>sarcomas | Independently performs<br>procedures on complex<br>soft tissue tumors (e.g.,<br>deep soft tissue<br>sarcoma, pediatric soft<br>tissue sarcomas) and<br>coordinates care with<br>the multidisciplinary<br>team | Independently performs<br>rare procedures (e.g.,<br>proximal thigh with<br>vascular reconstruction,<br>combined reconstruction,<br>pelvic soft tissue<br>sarcoma) |
| Manages simple<br>complications                        | Identifies complex complications   | Develops a plan for<br>managing complex<br>complications   | Develops a plan and<br>implements treatment of<br>complex complications   |   |
|  |  |  |   |   |
| Comments:  |  |  | Not Yet C<br>Not Yet A  | ompleted Level 1  |

|  |   |   | Level 4   | Level 5  |
|--|---|---|---|--|
| Demonstrates<br>knowledge of<br>pathophysiology and<br>complications of<br>common<br>musculoskeletal<br>conditions                 | Demonstrates knowledge<br>of pathophysiology and<br>complications of complex<br>musculoskeletal<br>conditions | Synthesizes and applies<br>knowledge of<br>pathophysiology, non-<br>surgical treatments, and<br>complications of complex<br>musculoskeletal<br>conditions | Serves as a resource<br>for knowledge of<br>pathophysiology, non-<br>surgical treatments, and<br>complications of<br>complex<br>musculoskeletal<br>conditions | Advances knowledge of<br>pathophysiology, non-<br>surgical treatments, and<br>complications of complex<br>musculoskeletal<br>conditions  |
| Synthesizes and<br>prioritizes differential<br>diagnoses for common<br>musculoskeletal<br>conditions, with indirect<br>supervision | Synthesizes and<br>prioritizes differential<br>diagnoses for common<br>musculoskeletal<br>conditions          | Independently<br>synthesizes and<br>prioritizes differential<br>diagnoses for complex<br>musculoskeletal<br>conditions                                    | Synthesizes and<br>prioritizes differential<br>diagnoses and<br>anticipates potential<br>complications for<br>complex<br>musculoskeletal<br>conditions        | Is recognized by peers as<br>an expert in synthesizing<br>and prioritizing differential<br>diagnoses for complex<br>musculoskeletal<br>conditions and<br>anticipating potential<br>complications |

| Medical Knowledge 2: Clinical Research                                     |   |  |  |                                       |  |
|--|---|--|--|---------------------------------------|--|
| Level 1  | Level 2   | Level 3  | Level 4  | Level 5                               |  |
| Describes the basics of<br>clinical study design and<br>levels of evidence | Understands the different<br>phases of oncologic<br>clinical research | Demonstrates general<br>knowledge of clinical<br>research design, including<br>Institutional Review Board<br>process | Disseminates scholarly<br>activity through<br>publication or<br>presentation | Designs and develops a clinical trial |  |
|  |   |  |  |                                       |  |
| Comments:  |   |  | Not Yet C<br>Not Yet As  | ompleted Level 1                      |  |

| Level 1   | Level 2   | Level 3   | Level 4   | Level 5   |
|---|---|---|---|---|
| Demonstrates<br>knowledge of common<br>patient safety events                              | Identifies system factors<br>that lead to patient safety<br>events                                      | Participates in analysis of<br>patient safety events<br>(simulated or actual)                                     | Conducts analysis of<br>patient safety events<br>and offers error<br>prevention strategies<br>(simulated or actual)     | Actively engages teams<br>and processes to modify<br>systems to prevent<br>patient safety events                      |
| Demonstrates<br>knowledge of how to<br>report patient safety<br>events                    | Reports patient safety<br>events through<br>institutional reporting<br>systems (simulated or<br>actual) | Participates in disclosure<br>of patient safety events to<br>patients and their families<br>(simulated or actual) | Discloses patient safety<br>events to patients and<br>their families (simulated<br>or actual)                           | Role models or mentors<br>others in the disclosure of<br>patient safety events  |
| Demonstrates<br>knowledge of basic<br>quality improvement<br>methodologies and<br>metrics | Describes local quality<br>improvement initiatives  | Participates in local<br>quality improvement<br>initiatives   | Demonstrates the skills<br>required to identify,<br>develop, implement,<br>and analyze a quality<br>improvement project | Creates, implements, and<br>assesses quality<br>improvement initiatives at<br>the institutional or<br>community level |
|   |   |   |   |   |

| Level 1   | Level 2  | Level 3  | Level 4   | Level 5  |
|---|--|--|---|--|
| Demonstrates<br>knowledge of care<br>coordination   | Coordinates care of<br>patients in routine clinical<br>situations effectively using<br>the roles of<br>interprofessional team<br>members | Coordinates care of<br>patients in complex<br>clinical situations<br>effectively using the roles<br>of interprofessional team<br>members | Role models effective<br>coordination of patient-<br>centered care among<br>multidisciplinary teams | Analyzes the process of<br>care coordination and<br>leads in the design and<br>implementation of<br>improvements               |
| Identifies key elements<br>for safe and effective<br>transitions of care and<br>hand-offs | Performs safe and<br>effective transitions of<br>care/hand-offs in<br>straightforward clinical<br>situations                             | Performs safe and<br>effective transitions of<br>care/hand-offs in complex<br>clinical situations  | Role models and<br>advocates for safe and<br>effective transitions of<br>care/hand-offs             | Improves quality of<br>transitions of care within<br>and across health care<br>delivery systems to<br>optimize patient outcome |
|   |  |  |   |  |

| Systems-Based Practice 3: Physician Role in Health Care Systems  |  |  |   |  |  |
|--|--|--|---|--|--|
| Level 1  | Level 2  | Level 3  | Level 4   | Level 5  |  |
| Describes basic health<br>payment systems,<br>including government,<br>private, public, and<br>uninsured care as well<br>as different practice<br>models | Describes how working<br>within the health care<br>system impacts patient<br>care, including billing and<br>coding | Analyzes how personal<br>practice affects the<br>system (e.g., length of<br>stay, readmission rates,<br>clinical efficiency) | Uses shared decision-<br>making in patient care,<br>taking into consideration<br>costs to the patient | Participates in advocacy<br>activities for health policy |  |
|  |  |  |   |  |  |
| Comments:  | Comments:  |  |   |  |  |

| Practice-Based Learning and Improvement 1: Evidence-Based and Informed Practice   |   |   |   |   |  |
|---|---|---|---|---|--|
| Level 1   | Level 2   | Level 3   | Level 4   | Level 5   |  |
| Demonstrates how to<br>access and use available<br>evidence, and<br>incorporates patient<br>preferences and values<br>to the care of a<br>straightforward condition | Articulates clinical<br>questions and elicits<br>patient preferences and<br>values to guide evidence-<br>based care | Locates and applies the<br>best available evidence,<br>integrated with patient<br>preference, to the care of<br>a complex condition | Critically appraises and<br>applies evidence, even<br>in the face of<br>uncertainty and<br>conflicting evidence, to<br>guide care tailored to<br>the individual patient | Coaches others to<br>critically appraise and<br>apply evidence for<br>complex conditions and/or<br>participates in the<br>development of guidelines |  |
|   |   |   |   |   |  |
| Comments:   | Comments:   |   |   |   |  |

| Level 1  | Level 2   | Level 3  | Level 4  | Level 5   |
|--|---|--|--|---|
| Accepts responsibility for<br>personal and<br>professional<br>development by<br>establishing goals | Demonstrates openness<br>to feedback and other<br>input to inform goals   | Responds to feedback<br>and other input<br>episodically, with<br>adaptability and humility           | Actively seeks feedback<br>and other input, with<br>adaptability and humility  | Role models consistently<br>seeking feedback and<br>other input with<br>adaptability and humility |
| Identifies the strengths,<br>deficiencies, and<br>limitations in one's<br>knowledge and expertise  | Analyzes and reflects on<br>the strengths,<br>deficiencies, and<br>limitations in one's<br>knowledge and expertise<br>to design a learning plan,<br>with assistance | Creates and implements<br>a learning plan to<br>optimize educational and<br>professional development | Uses ongoing reflection,<br>feedback, and other<br>input to measure the<br>effectiveness of the<br>learning plan and, when<br>necessary, improves it | Coaches others on reflective practice   |
|  |   |  |  |   |

| Practice-Based Learning and Improvement 3: Mentorship and Teaching |   |  |  |   |  |
|--|---|--|--|---|--|
| Level 1  | Level 2   | Level 3  | Level 4  | Level 5   |  |
| Demonstrates self-<br>awareness                                    | Teaches medical<br>students, other residents,<br>and patients in informal<br>settings; develops faculty<br>mentorship for oneself | Teaches health<br>professionals in formal<br>settings (e.g., nursing in-<br>service training, residency<br>teaching conference);<br>mentors medical students | Organizes educational<br>activities at the program<br>level; mentors residents<br>and other health care<br>professionals | Designs and implements<br>clinical rotations,<br>curricula, or learning and<br>assessment tools; models<br>and teaches mentoring to<br>others |  |
|  |   |  |  |   |  |
| Comments:  |   |  | Not Yet C  | ompleted Level 1  |  |

| Level 1  | Level 2   | Level 3   | Level 4   | Level 5   |
|--|---|---|---|---|
| Identifies and describes<br>inciting events for<br>professionalism lapses  | Demonstrates insight into<br>professional behavior in<br>straightforward situations                   | Demonstrates<br>professional behavior in<br>complex situations                                    | Recognizes situations<br>that may promote<br>professionalism lapses<br>and intervenes to<br>prevent lapses in<br>oneself and others   | Coaches others when<br>their behavior fails to<br>meet professional<br>expectations   |
| Demonstrates<br>knowledge of the ethical<br>principles underlying<br>patient care (e.g.,<br>informed consent,<br>surrogate decision<br>making, advance<br>directives, confidentiality,<br>error disclosure,<br>stewardship of limited<br>resources, and related<br>topics) | Applies ethical principles<br>in straightforward<br>situations and takes<br>responsibility for lapses | Integrates ethical<br>principles and recognizes<br>the need to seek help in<br>complex situations | Recognizes and uses<br>appropriate resources<br>for managing and<br>resolving ethical<br>dilemmas (e.g., ethics<br>consultations, literature<br>review, risk<br>management/legal<br>consultation) | Identifies and seeks to<br>address system-level<br>factors that induce or<br>exacerbate ethical<br>problems or impede their<br>resolution |
|  |   |   |   |   |

| Level 1  | Level 2   | Level 3  | Level 4   | Level 5   |
|--|---|--|---|---|
| Reliably arrives to<br>clinical activities on time<br>and describes strategies<br>for ensuring timely task<br>completion | Performs tasks and<br>responsibilities in a timely<br>manner with appropriate<br>attention to detail in<br>straightforward situations | Prioritizes tasks and<br>responsibilities in a timely<br>manner with appropriate<br>attention to detail in<br>complex situations | Recognizes barriers<br>that may impact others'<br>ability to complete tasks<br>and responsibilities in a<br>timely manner | Develops processes to<br>enhance other's ability to<br>efficiently complete<br>patient care tasks and<br>responsibilities |
| Responds promptly to<br>requests or reminders to<br>complete tasks and<br>responsibilities                               | Completes tasks and responsibilities without reminders  | Proactively completes<br>tasks and responsibilities<br>to ensure that the needs<br>of patients, teams, and<br>systems are met    |   |   |
|  |   |  |   |   |

| Professionalism 3: Well-Being  |  |  |  |  |
|--|--|--|--|--|
| Level 1  | Level 2  | Level 3  | Level 4  | Level 5  |
| Recognizes the<br>importance of<br>addressing personal and<br>professional well-being<br>(e.g., physical and | Lists available resources<br>for personal and<br>professional well-being     | Discusses a plan to<br>promote personal and<br>professional well-being<br>with institutional support | Independently develops<br>a plan to promote<br>personal and<br>professional well-being       | Creates institutional level<br>interventions that promote<br>colleagues' well-being            |
| emotional health)  | Describes institutional<br>resources that are meant<br>to promote well-being | Recognizes which<br>institutional factors affect<br>well-being                                       | Describes institutional<br>factors that positively<br>and/or negatively affect<br>well-being | Describes institutional<br>programs designed to<br>examine systemic<br>contributors to burnout |
|  |  |  |  |  |
| Comments:  | ended to evaluate a fellow's wel   | I being but to oncure each falle   |  | ompleted Level 1   |

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

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| Interpersonal and Communication Skills 1: Patient- and Family-Centered Communication  |   |  |  |  |
|---|---|--|--|--|
| Level 1   | Level 2   | Level 3  | Level 4  | Level 5  |
| Demonstrates respect<br>and establishes rapport<br>with patients and their<br>families (e.g., situational<br>awareness of language,<br>disability, health literacy<br>level, cultural<br>differences) | Establishes a therapeutic<br>relationship in<br>straightforward<br>encounters                         | Establishes a therapeutic<br>relationship in challenging<br>encounters (e.g., shared<br>decision making) | Facilitates difficult<br>discussions to patients<br>and their families, (e.g.,<br>explaining<br>complications,<br>therapeutic uncertainty) | Coaches others in the<br>facilitation of difficult<br>conversations                    |
| Communicates with<br>patients and their<br>families in an<br>understandable and<br>respectful manner  | Identifies barriers to<br>effective communication<br>(e.g., health literacy,<br>cultural differences) | When prompted, reflects<br>on personal biases while<br>attempting to minimize<br>communication barriers  | Recognizes biases and<br>integrates the patient's<br>viewpoint and autonomy<br>to ensure effective<br>communication                        | Mentors others in<br>situational awareness and<br>critical self-reflection             |
| Demonstrates basic<br>understanding of<br>informed consent<br>process   | Answers questions about<br>straightforward treatment<br>plans, with assistance                        | Counsels patients through<br>the decision-making<br>process for<br>straightforward conditions            | Counsels patients<br>through the decision-<br>making process for<br>complex conditions   | Counsels patients through<br>the decision-making<br>process for uncommon<br>conditions |
| Comments:   |   |  | Not Yet C  | ompleted Level 1   |

| Interpersonal and Comm   | unication Skills 2: Comple   | x Communication Around   | Serious Illness   |   |
|--|--|--|---|---|
| Level 1  | Level 2  | Level 3  | Level 4   | Level 5   |
| Identifies prognostic<br>communication as a key<br>element for shared<br>decision making   | Assesses the patient's<br>family's/caregiver's<br>prognostic awareness<br>and identifies preferences<br>for receiving prognostic<br>information  | Delivers basic prognostic<br>information and attends to<br>emotional responses of<br>the patient and patient's<br>family/caregiver(s)  | Tailors communication<br>of prognosis according<br>to disease<br>characteristics and<br>trajectory, patient<br>consent, patient's<br>family's needs, and<br>medical uncertainty,<br>and manages intense<br>emotional response   | Coaches others in the<br>communication of<br>prognostic information                         |
| Identifies the need to<br>assess the<br>patient's/patient's<br>family's expectations and<br>understanding of their<br>health status and<br>treatment options | Facilitates communication<br>with the patient/patient's<br>family by introducing<br>stakeholders, setting the<br>agenda, clarifying<br>expectations, and<br>verifying an<br>understanding of the<br>clinical situation | Sensitively and<br>compassionately delivers<br>medical information;<br>elicits the<br>patient's/patient's family's<br>values, goals, and<br>preferences; and<br>acknowledges uncertainty<br>and conflict, with<br>guidance | Independently uses<br>shared decision making<br>to align the<br>patient's/patient's<br>family's values, goals,<br>and preferences with<br>treatment options to<br>make a personalized<br>care plan in situations<br>with a high degree of<br>uncertainty and conflict | Coaches shared decision-<br>making in communication<br>with the patient/patient's<br>family |
|  |  |  |   |   |
| Comments:  |  |  | Not Yet C   | ompleted Level 1  |

| Interpersonal and Communication Skills 3: Interprofessional and Team Communication   |  |  |  |   |
|--|--|--|--|---|
| Level 1  | Level 2  | Level 3  | Level 4  | Level 5   |
| Recognizes the value<br>and role of each team<br>member and respectfully<br>interacts with all<br>members of health care<br>team | Communicates in a<br>professional and<br>productive manner to<br>facilitate teamwork (e.g.,<br>active listening, updates<br>in timely fashion) | Actively recognizes and<br>mitigates communication<br>barriers and biases with<br>the health care team | Facilitates respectful<br>communications and<br>conflict resolution with<br>the multidisciplinary<br>health care team (e.g.,<br>leading sarcoma<br>conference) | Leads respectful<br>communications and<br>conflict resolution with the<br>multidisciplinary health<br>care team |
|  |  |  |  |   |
| Comments:  |  |  | Not Yet C  | ompleted Level 1  |

| Level 1  | Level 2   | Level 3  | Level 4   | Level 5  |
|--|---|--|---|--|
| Accurately records<br>information in the patient<br>record while<br>safeguarding patient<br>personal health<br>information | Demonstrates accurate,<br>timely, and efficient use of<br>the electronic health<br>record to communicate<br>with the health care team | Concisely reports<br>diagnostic and<br>therapeutic reasoning<br>while incorporating<br>relevant outside data | Independently<br>communicates via<br>written or verbal<br>methods based on<br>urgency and context       | Facilitates improved<br>written and verbal<br>communication of others                      |
|  | Uses appropriate<br>communication methods<br>(e.g., face-to-face, voice,<br>electronic)   | Respectfully initiates<br>communications about<br>concerns in the system                                     | Uses appropriate<br>channels to offer clear<br>and constructive<br>suggestions to improve<br>the system | Guides departmental or<br>institutional<br>communication around<br>policies and procedures |
|  |   |  |   |  |