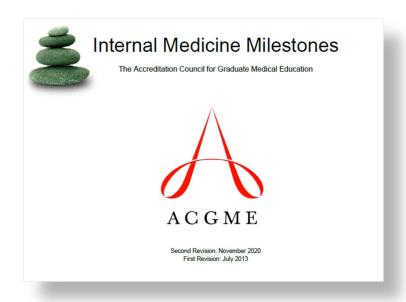
Internal Medicine and Preventive Medicine (combined) programs must annually report on **each** set of Milestones.







Internal Medicine Milestones

The Accreditation Council for Graduate Medical Education



Implementation Date: July 1, 2021 Second Revision: November 2020 First Revision: July 2013

Internal Medicine Milestones

The Milestones are designed only for use in evaluation of residents in the context of their participation in ACGME-accredited residency programs. The Milestones provide a framework for the assessment of the development of the resident 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.

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

Alliance for Academic Internal Medicine
American Board of Internal Medicine
American College of Physicians
Association of Medical Colleges
Review Committee for Internal Medicine
Society of Hospital Medicine
Society of General Internal Medicine

Understanding Milestone Levels and Reporting

This document presents the Milestones, which programs use in a semi-annual review of resident 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 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 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 may achieve higher levels early in his/her educational program just as a senior resident 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 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.

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

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 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.

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 sub-competency in the same format as the ACGME Report Worksheet. For each reporting period, a resident's performance on the milestones for each sub-competency will be indicated by selecting the level of milestones that best describes that resident's performance in relation to those milestones.

Systems-based Practice	1: Patient Safety and Quali	ity Improvement		
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of common patient safety events	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 families (simulated or actual)	Discloses patient safety events to patients and 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 local quality improvement initiatives (e.g., community vaccination rate, infection rate, smoking cessation)	Participates in local quality improvement initiatives	Demonstrates skills required to identify, develop, implement, and analyze a quality improvement project	Designs,, implements, and assesses quality improvement initiatives at the institutional or community level
Comments:			Not Yet C	ompleted Level 1
Selecting a respo middle of a level i milestones in that levels have been demonstrated.	mplies that level and in lower		between levels ind	

Level 2	Level 3	Level 4	Level 5
Elicits and concisely reports a hypothesis-driven patient history for common patient presentations	Elicits and concisely reports a hypothesis-driven patient history for complex patient presentations	Efficiently elicits and concisely reports a patient history, incorporating pertinent psychosocial and other determinants of health	Efficiently and effectively tailors the history taking, including relevant historical subtleties, based on patient, family, and system needs
Independently obtains data from secondary sources	Reconciles current data with secondary sources	Uses history and secondary data to guide the need for further diagnostic testing	Models effective use of history to guide the need for further diagnostic testing
			ompleted Level 1
	reports a hypothesis- driven patient history for common patient presentations Independently obtains data from secondary	Elicits and concisely reports a hypothesis-driven patient history for common patient presentations Elicits and concisely reports a hypothesis-driven patient history for complex patient presentations Reconciles current data with secondary sources	Elicits and concisely reports a hypothesis-driven patient history for common patient presentations Elicits and concisely reports a hypothesis-driven patient history for complex patient presentations Elicits and concisely reports a patient history, incorporating pertinent psychosocial and other determinants of health Reconciles current data with secondary sources Efficiently elicits and concisely reports a patient history, incorporating pertinent psychosocial and other determinants of health Uses history and secondary data to guide the need for further diagnostic testing

Level 1	Level 2	Level 3	Level 4	Level 5
Performs a general physical examination while attending to patient comfort and safety	Performs a hypothesis- driven physical examination for a common patient presentation	Performs a hypothesis- driven physical examination for a complex patient presentation	Uses advanced maneuvers to elicit subtle findings	Models effective evidence-based physical examination technique
Identifies common abnormal findings	Interprets common abnormal findings	Identifies and interprets uncommon and complex abnormal findings	Integrates subtle physical examination findings to guide diagnosis and management	Teaches the predictive values of the examination findings to guide diagnosis and management

Patient Care 3: Clinical Reasoning				
Level 1	Level 2	Level 3	Level 4	Level 5
Organizes and accurately summarizes information obtained from the patient evaluation to develop a clinical impression	Integrates information from all sources to develop a basic differential diagnosis for common patient presentations	Develops a thorough and prioritized differential diagnosis for common patient presentations	Develops prioritized differential diagnoses in complex patient presentations and incorporates subtle, unusual, or conflicting findings	Coaches others to develop prioritized differential diagnoses in complex patient presentations
	Identifies clinical reasoning errors within patient care, with guidance	Retrospectively applies clinical reasoning principles to identify errors	Continually re-appraises one's own clinical reasoning to improve patient care in real time	Models how to recognize errors and reflect upon one's own clinical reasoning
Comments:				ompleted Level 1 ssessable

Level 1	Level 2	Level 3	Level 4	Level 5
Formulates management plans for common conditions, with guidance	Develops and implements management plans for common conditions, recognizing acuity, and modifies based on the clinical course	Develops and implements value-based (high value) management plans for patients with multisystem disease and comorbid conditions; modifies based on the clinical course	Uses shared decision making to develop and implement value-based (high value) comprehensive management plans for patients with comorbid and multisystem disease, including those patients requiring critical care	Develops and implements comprehensive management plans for patients with rare or ambiguous presentations or unusual comorbid conditions
Identifies opportunities to maintain and promote health	Develops and implements management plans to maintain and promote health, with guidance	Independently develops and implements plans to maintain and promote health, incorporating pertinent psychosocial and other determinants of health	Independently develops and implements comprehensive plans to maintain and promote health, incorporating pertinent psychosocial and other determinants of health	

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies opportunities to maintain and promote health	Develops and implements management plans to maintain and promote health	Develops and implements plans to maintain and promote health, incorporating pertinent psychosocial and other determinants of health	Develops and implements value-based (high-value) comprehensive plans to maintain and promote health	
Formulates management plans for a common chronic condition, with guidance	Develops and implements management plans for common chronic conditions	Develops and implements management plans for multiple chronic conditions	Develops and implements value-based (high value) comprehensive management plans for multiple chronic conditions, incorporating pertinent psychosocial and other determinants of health	Creates and leads a comprehensive patient-centered management plan for the patient with highly complex chronic conditions, integrating recommendations from multiple disciplines
Formulates management plans for acute common conditions, with guidance	Develops and implements management plans for common acute conditions	Develops and implements an initial management plan for patients with urgent or emergent conditions in the setting of chronic comorbidities	Develops and implements value-based (high value) management plans for patients with acute conditions	Develops and implements management plans for patients with subtle presentations, including rare or ambiguous conditions

Level 1	Level 2	Level 3	Level 4	Level 5
Uses electronic health record (EHR) for routine patient care activities	Expands use of EHR to include and reconcile secondary data sources in patient care activities	Effectively uses EHR capabilities in managing acute and chronic care of patients	Uses EHR to facilitate achievement of quality targets for patient panels	Leads improvements to the EHR
Identifies the required components for a telehealth visit	Performs assigned telehealth visits using approved technology	Identifies clinical situations that can be managed through a telehealth visit	Integrates telehealth effectively into clinical practice for the management of acute and chronic illness	Develops and innovates new ways to use emerging technologies to augment telehealth visits
Comments:			Not Yet Co Not Yet As	ompleted Level 1 sessable

Patient Care

Yes	No	Conditional on Improvemen	t

Medical Knowledge 1: A	pplied Foundational Science	ces		
Level 1	Level 2	Level 3	Level 4	Level 5
Explains the scientific knowledge (e.g., physiology, social sciences, mechanism of disease) for normal function and common medical conditions	Explains the scientific knowledge for complex medical conditions	Integrates scientific knowledge to address comorbid conditions within the context of multisystem disease	Integrates scientific knowledge to address uncommon, atypical, or complex comorbid conditions within the context of multisystem disease	Demonstrates a nuanced understanding of the scientific knowledge related to uncommon, atypical, or complex conditions
Comments:				ompleted Level 1 ssessable

Medical Knowledge 2: Therapeutic Knowledge				
Level 1	Level 2	Level 3	Level 4	Level 5
Explains the scientific basis for common therapies	Explains the indications, contraindications, risks, and benefits of common therapies	Integrates knowledge of therapeutic options in patients with comorbid conditions, multisystem disease, or uncertain diagnosis	Integrates knowledge of therapeutic options within the clinical and psychosocial context of the patient to formulate treatment options	Demonstrates a nuanced understanding of emerging, atypical, or complex therapeutic options
Comments:			Not Yet C	ompleted Level 1
				ssessable

evel 1	Level 2	Level 3	Level 4	Level 5
Explains the rationale, isks, and benefits for common diagnostic esting	Explains the rationale, risks, and benefits for complex diagnostic testing	Integrates value and test characteristics of various diagnostic strategies in patients with common diseases	Integrates value and test characteristics of various diagnostic strategies in patients with comorbid conditions or multisystem disease	Demonstrates a nuanced understanding of emerging diagnostic tests and procedures
nterprets results of common diagnostic tests	Interprets complex diagnostic data	Integrates complex diagnostic data accurately to reach high-probability diagnoses	Anticipates and accounts for limitations when interpreting diagnostic data	

Medical Knowledge

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of common patient safety events	Identifies system factors that lead to patient safety events	Contributes to the analysis of patient safety events (simulated or actual)	Conducts analysis of patient safety events and offers error prevention strategies (simulated or actual)	Leads 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 (actual or simulated)	Participates in disclosure of patient safety events to patients and families (simulated or actual)	Discloses patient safety events to patients and families (simulated or actual)	Models the disclosure of patient safety events
Demonstrates knowledge of basic quality improvement methodologies and metrics	Describes local quality improvement initiatives (e.g., community vaccination rate, infection rate, smoking cessation)	Contributes to local quality improvement initiatives	Demonstrates the skills required to identify, develop, implement, and analyze a quality improvement project	Creates, implements, and assesses sustainable quality improvement initiatives at the institutional or community level
Comments:				

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of care coordination	Coordinates care of patients by effectively engaging interprofessional teams in routine clinical situations	Coordinates care of patients by effectively engaging interprofessional teams in complex clinical situations	Models effective coordination of patient-centered care among different disciplines 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	Models and advocates for safe and effective transitions of care/hand- offs within and across health care delivery systems, including outpatient 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 disparities	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	Participates in changing and adapting practice to provide for the needs of specific populations	Leads innovations and advocates for populations and communities with health care inequities

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies key components of the health care system	Describes how components of a complex health care system are interrelated, and how this impacts patient care	Discusses how individual practice affects the regional and national health care system	Manages various components of the complex health care system to provide efficient and effective patient care	Advocates for or leads systems change that enhances high-value, efficient, and effective patient care
Describes basic health payment systems	Delivers care with consideration of each patient's payment model Engages with patients in shared decision making, informed by each patient's payment model		Advocates for patient care needs with consideration of the limitations of each patient's payment model	Actively engaged in influencing health policy through advocacy activities at the local, regional, or national level

Systems-Based Practice

Yes	No	Conditional on I	mnrovement
165	INO	Conditional on i	mprovement

Practice-Based Learning	and Improvement 1: Evide	ence-Based and Informed F	Practice	
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates how to access, categorize, and analyze clinical evidence, with guidance	Articulates clinical questions and elicits patient preferences and values to guide evidence-based care	Critically appraises and applies the best available evidence, integrated with patient preference, to the care of complex patients	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 to patient care
Comments:			Not Yet C	Completed Level 1

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 inform goals	Seeks performance data episodically, with adaptability, and humility	Seeks performance data consistently with adaptability, and humility	Models consistently seeking performance data with adaptability and humility
Identifies the factors that contribute to gap(s) between ideal and actual performance, with guidance	Analyzes and reflects on the factors which contribute to gap(s) between ideal and actual performance, with guidance	Institutes behavioral change(s) to narrow the gap(s) between ideal and actual performance	Challenges one's own assumptions and considers alternatives in narrowing the gap(s) between ideal and actual performance	Coaches others on reflective practice
	Actively seeks opportunities to improve	Designs and implements an individualized learning plan, with prompting	Independently creates and implements an individualized learning plan	Uses performance data to measure the effectiveness of the individualized learning plan and when necessary, improves it

Practice-Based Learning and Improvement

Yes	No	Conditional	on	Improve	ement

Level 1	Level 2	Level 3	Level 4	Level 5	
Demonstrates professional behavior in routine situations	Identifies potential triggers for professionalism lapses and accepts responsibility for one's own professionalism lapses	Demonstrates a pattern of professional behavior in complex or stressful situations	Recognizes situations that may trigger professionalism lapses and intervenes to prevent lapses in oneself and others	Coaches others when their behavior fails to meet professional expectations	

Level 1	Level 2	Level 3	Level 4	Level 5	
Demonstrates knowledge of basic ethical principles	Applies basic principles to address straightforward ethical situations	Analyzes complex situations using ethical principles and identifies the need to seek help in addressing complex ethical situations	Analyzes complex situations and engages with appropriate resources for managing and addressing ethical dilemmas as needed	Identifies and seeks to address system-level factors that induce or exacerbate ethical problems or impede their resolution	

Professionalism 3: Acco	untability/Conscientiousne	ss			
Level 1	Level 2	Level 3	Level 4	Level 5	
Performs administrative tasks and patient care responsibilities, with prompting	Performs administrative tasks and patient care responsibilities in a timely manner in routine situations	Performs administrative tasks and patient care responsibilities in a timely manner in complex or stressful situations	Proactively implements strategies to ensure that the needs of patients, teams, and systems are met	Creates strategies to enhance other's ability to efficiently complete administrative tasks and patient care responsibilities	
Comments:			Not Yet C	ompleted Level 1	

Professionalism 4: Know	ledge of Systemic and Ind	ividual Factors of Well-Bei	ng*	
Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes the importance of getting help when needed to address personal and professional well-being	Lists resources to support personal and professional well-being Recognizes that institutional factors affect well-being	With prompting, reflects on how personal and professional well-being may impact one's clinical practice Describes institutional factors that affect well-being	Reflects on actions in real time to proactively respond to the inherent emotional challenges of physician work Suggests potential solutions to institutional factors that affect well-being	Participates in institutional changes to promote personal and professional well-being
Comments:				ompleted Level 1

Professionalism

	,	Yes	No	Conditional	on In	nprovement
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^{*}This subcompetency is not intended to evaluate a resident's well-being. Rather, the intent is to ensure that each resident has the fundamental knowledge of factors that impact well-being, the mechanism by which those factors impact well-being, and available resources and tools to improve well-being.

Level 1	Level 2	Level 3	Level 4	Level 5
Uses language and non- verbal behavior to demonstrate respect and establish rapport	Establishes and maintains a therapeutic relationship using effective communication behaviors in straightforward encounters	Establishes and maintains a therapeutic relationship using effective communication behaviors in challenging patient encounters	Establishes and maintains therapeutic relationships using shared decision making, regardless of complexity	Coaches others in developing and maintaining therapeutic relationships and mitigating communication barriers
Identifies common barriers to effective communication		Identifies complex barriers to effective communication, including personal bias	Mitigates communication barriers	Models the mitigation of communication barriers

Interpersonal and Communication Skills 2: Interprofessional and Team Communication				
Level 1	Level 2	Level 3	Level 4	Level 5
Respectfully requests and responds to a consultation	Clearly and concisely requests and responds to a consultation	Checks own and others' understanding of recommendations when providing or receiving consultation	Coordinates recommendations from different consultants to optimize patient care	Facilitates conflict resolution between and amongst consultants when disagreement exists
Uses verbal and non- verbal communication that values all members of the interprofessional team	Communicates information, including basic feedback with all interprofessional team members	Facilitates interprofessional team communication to reconcile conflict and provides difficult feedback	Adapts communication style to fit interprofessional team needs and maximizes impact of feedback to the team	Models flexible communication strategies that facilitate excellence in interprofessional teamwork
Comments: Not Yet Completed Level 1				

Level 1	Level 2	Level 3	Level 4	Level 5
Accurately documents comprehensive and current information	Documents clinical encounter, including reasoning, through organized notes	Documents clinical encounter through concise and thorough notes	Documents clinical encounter clearly, concisely, timely, and in an organized form, including anticipatory guidance	Guides departmental or institutional communication policies and procedures
Communicates using formats specified by institutional policy to safeguard patient personal health information	Selects direct (e.g., telephone, in-person) and indirect (e.g., progress notes, text messages) forms of communication based on context, with assistance	Appropriately selects direct and indirect forms of communication based on context	Models effective written and verbal communication	

Interpersonal and Communication Skills

Yes	No	Conditional on	Improvement

Overall Clinical Competence

his rating represents the assessment of the resident's development of overall clinical competence during this year of training:	
Superior: Far exceeds the expected level of development for this year of training	
Satisfactory: Always meets and occasionally exceeds the expected level of development for this year of training	
Conditional on Improvement: Meets some developmental milestones but occasionally falls short of the expected level of developme this year of training. An improvement plan is in place to facilitate achievement of competence appropriate to the level of training.	nt for
Unsatisfactory: Consistently falls short of the expected level of development for this year of training.	



Public Health and General Preventive Medicine Milestones

The Accreditation Council for Graduate Medical Education



Implementation Date: July 2022 Second Revision: April 2022 First Revision: August 201

Public Health and General Preventive Medicine Milestones

The Milestones are designed only for use in evaluation of residents or 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.

Public Health and General Preventive Medicine Milestones Work Group

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

American Board of Preventive Medicine

Review Committee for Preventive Medicine

Understanding Milestone Levels and Reporting

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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/fellow 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 vi).

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 sub-competency 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.

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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 resident's/fellow's performance on the milestones for each subcompetency will be indicated by selecting the level of milestones that best describes that resident's/fellow's performance in relation to those milestones.

		ence-Based and Informed P		Lovel 5	
Level 1 Recognizes the need for evidence in decision making in order to care for a routine patient, situation, or public health problem	Level 2 Identifies evidence and elicits patient or population preferences and values to guide a patient or population intervention	Level 3 Applies the best available evidence, integrated with patient or population preferences and values	Level 4 Critically appraises and applies evidence, even in the face of uncertainty and conflicting evidence, to guide care tailored to an individual or population	Level 5 Trains others to critically appraise and apply evidence to complex situations	
Comments: Not Yet Completed Level 1			ompleted 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.		between levels indi in lower levels have demonstrated as w	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).		

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Patient Care 1: Emergency Preparedness and Response – Apply Skills in Emergency Preparedness and Response				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies examples of public health threats that might warrant an emergency response	Describes how a response to a public health emergency is organized	Plans and/or participates in an emergency preparedness event (actual or simulated)	Evaluates an emergency preparedness event (actual or simulated)	Provides leadership during an emergency preparedness event (actual or simulated)
Comments: Not Yet Completed Level 1 Not Yet Assessable				

Patient Care 2: Policies and Plans – Develop Policies and Plans to Support Individual and Community Health Efforts					
Level 1	Level 2	Level 3	Level 4	Level 5	
Identifies pertinent policies and interventions for individual patient care	Describes how policies and plans are developed and implemented to support the health of individuals and communities	Applies policies and plans for disease prevention and health promotion to individuals and/or communities	Evaluates policies and plans for disease prevention and health promotion that have been applied to individuals and/or communities	Develops and/or implements policies or plans to improve community health	
Comments: Not Yet Completed Level 1 Not Yet Assessable					

Patient Care 3: Clinical and Community Preventive Services				
Level 1	Level 2	Level 3	Level 4	Level 5
Locates and appraises evidence about a clinical preventive service for an individual patient	Discusses the strengths and weaknesses of an individual study relevant to a clinical preventive service	Examines the quality and strength of evidence of a clinical preventive service	Participates in the analysis of a guideline to address a clinical preventive service	Evaluates the implementation of an evidence-based guideline to address a clinical preventive service and identifies barriers and proposes solutions to improving system-level adherence
Recognizes distinctions between population and individual health services	Describes the usefulness and value of population-based health services in meeting the needs of target populations	Assesses evidence for population-based health services	Uses established performance criteria to evaluate a population-based health service, to include identifying barriers to services and strategies for improvement	Develops program goals and/or performance criteria to evaluate a population-based health service for strategic or operational improvements
Comments:				ompleted Level 1 ssessable

Patient Care 4: Lifestyle Medicine					
Level 1	Level 2	Level 3	Level 4	Level 5	
Lists modifiable and non- modifiable risk factors associated with the development of prevalent chronic conditions	Identifies evidence of utilizing lifestyle interventions that reduce the risk of developing, or to mitigate the effects of, prevalent chronic conditions	Recommends lifestyle interventions to mitigate and treat prevalent chronic conditions in individuals	Evaluates or develops a plan for management of lifestyle factors associated with prevalent chronic conditions at the population or community level	Implements and evaluates a population- based strategy for an evidence-based lifestyle program or policy that mitigates prevalent chronic conditions at the population or community level	
Comments: Not Yet Completed Level 1 Not Yet Assessable					

Medical Knowledge 1: Environmental Health				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies common illnesses that may be caused or influenced by exposure to environmental hazards	Identifies the components of an environmental exposure history	Takes a complete environmental exposure history, including individual factors that impact susceptibility to environmental hazards	Recommends methods for reducing or eliminating exposure to environmental hazards and methods for addressing the health effects resulting from these exposures	Evaluates and interprets the results of individual and/or population-level environmental monitoring
Identifies major classes of environmental hazards and their routes of human exposure	Describes situations that warrant an environmental risk assessment	Identifies the steps in an environmental risk assessment and describes how the results are used to manage and communicate risk	Conducts a population- level environmental risk assessment (actual or simulated)	Makes policy recommendations based on the results of an environmental risk assessment
Comments: Not Yet Completed Level 1 Not Yet Assessable				

Medical Knowledge 2: Biostatistics					
Level 1	Level 2	Level 3	Level 4	Level 5	
Recognizes common statistical concepts and tests	Identifies statistical test(s) for a given research question and data set	Performs data analyses using various statistical methods	Interprets the statistical and clinical significance of a data set and evaluates the generalizability of the results to a population	Analyzes and interprets large data sets using complex statistical methods and submits the results for publication or presentation	
Comments: Not Yet Completed Level 1 Not Yet Assessable					

Medical Knowledge 3: Epidemiology				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies sources of data and common measures for descriptive epidemiology	Defines basic measures of disease frequency and excess risk	Calculates measures of disease frequency and excess risk for a specified disease or condition	Uses data to characterize the health of a local population and compares it with that of other populations	Teaches use of data to characterize the health of a population and compare it with that of other populations
Describes the basic types of research studies	Compares and contrasts commonly used study designs	Critiques epidemiologic studies, including assessing external and internal validity and distinguishing between association and causation	Participates in epidemiological research, including evaluating and interpreting results	Independently designs and conducts epidemiologic research
Describes the natural history of disease and relevance to primary, secondary, and tertiary prevention	Identifies criteria for effective screening tests	Assesses the validity and reliability of individual screening tests	Uses evidence about individual screening tests, interventions, and harms to weigh the potential benefits and harms of screening programs	Provides expert opinion on the benefits and harms of screening programs
Comments: Not Yet Completed Level 1 Not Yet Assessable				

Medical Knowledge 4: Public Health Regulations				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies examples of public health regulatory agencies	Describes the regulatory requirements for a specific public health topic	Interprets regulatory requirements as applied to individuals and/or populations	Develops or modifies a public health policy based upon regulatory requirements or public health laws (actual or simulated)	Contributes to the development or modification of a proposed regulatory requirement or public health law
Comments: Not Yet Completed Level 1 Not Yet Assessable				

Medical Knowledge 5: Infectious Diseases of Public Health Significance					
Level 1	Level 2	Level 3	Level 4	Level 5	
Describes common methods for preventing the transmission of infectious diseases	Discusses aspects of disease and common environmental, health, and behavioral risk factors associated with infectious diseases of public health significance	Describes the epidemiology, risk factors, prevention strategies, diagnosis, and treatment for infectious diseases of public health significance	Applies knowledge of the epidemiology, risk factors, prevention strategies, diagnosis, and treatment for infectious diseases of public health significance to the individual or population- level	Designs a plan for the prevention, diagnosis, and treatment of an infectious disease of public health significance at the population level	
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
Lists common patient safety events and describes how to report patient safety events	Identifies system factors that lead to patient safety events	Participates in a root cause analysis (actual or simulated)	Conducts analysis of patient safety events and offers error prevention strategies (actual or simulated)	Actively modifies systems to prevent patient safety events
Discusses basic quality improvement methodologies and metrics	Describes quality improvement initiatives	Participates in local quality improvement initiatives	Demonstrates the skills required to identify, develop, implement, and analyze a quality improvement project	Leads the conduct and implementation of a quality improvement project
Comments: Not Yet Completed Level 1				

Systems-Based Practice 2: System Navigation for Patient- and Population-Centered Care				
Level 1	Level 2	Level 3	Level 4	Level 5
Lists examples of care coordination in a health care system	Demonstrates coordination of care of patients in routine clinical situations, effectively using the roles of interprofessional team members and care settings	Demonstrates coordination of care of patients in complex clinical situations, effectively using the roles of interprofessional team members	Models effective coordination of patient- and population-centered care among different disciplines and specialties/settings	Analyzes the process of care coordination and leads in the design and implementation of improvements
Recognizes population and community health needs and inequities	Identifies specific population and community health needs and inequities for the local population	Uses local resources effectively address the health needs and inequities of a patient population and community	Participates in changing and adapting practice to provide for the health needs and inequities experienced by specific populations	Leads innovations and advocates for populations and communities with health needs and inequities
Comments: Not Yet Completed Level 1				

Systems-Based Practice 3: Physician Leadership in Health Care and Community Health Systems				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies key components of the health care system	Describes how components of a health care system are inter- related, and how they impact patient and/or population/stakeholder care	Discusses how individual practice affects the broader system	Navigates components of the complex health care system to promote efficient and effective patient and/or population/stakeholder care	Leads health care systems change that enhances high-value, efficient, and effective patient care
Identifies key agencies involved in community health efforts	Describes the interactions between agencies and how these impact the overall health of the community	Discusses how each agency impacts the broader goal of a healthy community	Participates in a community needs assessment to identify and improve the overall health of a community (actual or simulated)	Leads a community needs assessment to identify and improve the overall health of a community
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
Recognizes the need for evidence in decision-making to care for a routine patient, situation, or public health problem	Identifies evidence and elicits patient or population preferences and values to guide a patient or population intervention	Applies the best available evidence, integrated with patient or population preferences and values	Critically appraises and applies evidence, even in the face of uncertainty and conflicting evidence, to guide care tailored to an individual or population	Trains others to critically appraise and apply evidence to complex situations
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
Establishes goals for personal and professional development	Demonstrates openness to feedback and other input to inform goals	Analyzes, reflects on, and institutes behavioral change(s) to narrow the gap(s) between expectations and actual performance	Intentionally seeks feedback consistently, with adaptability and humility	Role models consistently seeking feedback with adaptability and humility
Actively seeks opportunities to improve	Designs and implements a learning plan, with prompting	Independently creates and implements a learning plan	Uses feedback to measure the effectiveness of the learning plan and, when necessary, improves it	Facilitates the design and implementation of learning plans for others
Comments: Not Yet Completed Level 1				

Practice-Based Learning and Improvement 3: Disease Outbreak and Surveillance Systems					
Level 1	Level 2	Level 3	Level 4	Level 5	
Discusses common causes of disease clusters and outbreaks	Describes the steps of a cluster or outbreak investigation	Analyzes an outbreak, assessing for steps taken, mitigation strategies, results, and areas for improvement in the approach	Participates in the planning and implementation of a cluster/outbreak investigation (actual or simulated)	Leads a team to investigate and manage an outbreak, including supervision of staff members, assignment of roles, program design, monitoring of effectiveness, etc.	
Recognizes the need to report selected diseases to public health authorities and describes the need for surveillance systems in a variety of settings	Identifies and summarizes commonly used surveillance systems	Lists the challenges in designing and maintaining a surveillance system	Analyzes surveillance data to identify appropriate targets for individual, community, and/or systems interventions and to evaluate the quality of the system	Independently designs and implements a new surveillance system	
Comments: Not Yet Completed Level 1 Not Yet Assessable				•	

Professionalism 1: Professional Behavior and Ethical Principles					
Level 1	Level 2	Level 3	Level 4	Level 5	
Identifies potential triggers for and reporting of professionalism lapses	Demonstrates insight into professional behavior in routine situations	Demonstrates professional behavior in complex or stressful situations	Intervenes to prevent or mitigate lapses in professional behavior of oneself and others	Coaches others when their behavior fails to meet professional expectations	
Defines the ethical principles underlying informed consent, surrogate decision-making, advance directives, privacy and confidentiality, error disclosure, stewardship of limited resources, and related topics	Analyzes straightforward situations using ethical principles	Uses appropriate resources for managing ethical dilemmas	Develops an approach to manage and resolve complex ethical situations	Implements system-level factors to improve ethical behavior in health care professionals	
Comments: Not Yet Completed Level 1					

Professionalism 2: Accountability/Conscientiousness					
Level 1	Level 2	Level 3	Level 4	Level 5	
Recognizes situations that may impact one's own ability to complete tasks and takes responsibility	Responds promptly to requests to complete tasks and responsibilities	Proactively implements strategies to ensure responsibilities are met	Recognizes situations that may impact others' ability to complete tasks and responsibilities in an accurate and timely manner	Modifies/develops a system of accountability to ensure completeness of tasks and responsibilities in an accurate and timely manner	
Comments: Not Yet Completed Level 1					

Professionalism 3: Self-Awareness and Help-Seeking Behaviors					
Level 1	Level 2	Level 3	Level 4	Level 5	
Recognizes status of personal and professional well-being, with assistance	Independently recognizes status of personal and professional well-being	With assistance, proposes a plan to optimize personal and professional well-being	Independently develops a plan to optimize personal and professional well-being	Coaches others when emotional responses or limitations in knowledge/skills do not meet professional expectations	
Comments: Not Yet Completed Level 1					

This subcompetency is not intended to evaluate a resident's well-being. Rather, the intent is to ensure that each resident 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

Interpersonal and Communication Skills 1: Community- and Population-Centered Communication and Shared Decision-Making					
Level 1	Level 2	Level 3	Level 4	Level 5	
Identifies common barriers to effective communication while accurately communicating one's own role and responsibilities within the health system	Identifies complex barriers to effective communication	Recognizes personal biases while attempting to minimize communication barriers	Independently uses shared decision-making to align community/population values, goals, and preferences with preventive services	Practices shared decision-making in community/population communication, including in situations with a high degree of uncertainty/conflict	
Comments: Not Yet Completed Level 1					

Interpersonal and Communication Skills 2: Interprofessional Team Communication					
Level 1	Level 2	Level 3	Level 4	Level 5	
Uses language that values all members of an interprofessional team	Communicates information effectively, including the use of active listening and feedback, with all members of an interprofessional team and/or with community stakeholders	Adapts communication style to fit the needs of health care team members or community stakeholders	Facilitates interprofessional team and community group communication using multiple communication strategies	Serves as a role model for effective interprofessional team communication	
Recognizes the importance of the role of feedback within an interprofessional team	Solicits feedback on performance as a member of an interprofessional team or community group	Communicates concerns and provides feedback to peers and learners	Uses constructive criticism skills in communicating with interprofessional team members, community stakeholders, and leaders		
Comments: Not Yet Completed Level 1					