

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 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.

Musculoskeletal Oncology Milestones

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American Board of Orthopaedic Surgery

ACGME Review Committee for Orthopaedic Surgery

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.

Additional resources are available in the <u>Milestones</u> section of the ACGME website. Follow the links under "What We Do" at <u>www.acgme.org</u>.

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 clinical study design and levels of evidence | Understands the different phases of oncologic clinical research | Demonstrates general knowledge of clinical research design, including Institutional Review Board process | Disseminates scholarly activity through publication or presentation | Designs and develops a clinical trial |
| | | | | |
| Comments: Not Yet Completed Level 1 'at Yet Assessable | | | | |
| Selecting a respo middle of a level i milestones in that levels have been demonstrated. | mplies that level and in lower | | Selecting a response between levels indicating in lower levels have a demonstrated as well milestones in the high | ates that milestones been substantially I as some |

| Patient Care 1: Metastatic Bone Lesion | | | | |
|--|---|--|--|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Independently develops a simple surgical plan | Independently develops a surgical plan for routine procedures that includes identification of potential challenges and technical complexities | Independently develops a surgical plan for complex procedures, including contingencies for complications, and coordinates treatment with other specialties | Independently plans complex procedures, including management of peri-operative complications | |
| Performs surgical approach, with minimal assistance | Performs prophylactic procedures (e.g., prophylactic fixation) | Independently performs routine procedures (e.g., intramedullary nail, plate and cement for pathologic fracture) | Independently performs complex procedures (e.g., endoprosthesis for pathologic fracture) | Independently performs rare procedures (e.g., acetabular) |
| Manages simple complications | Identifies complex complications | Develops a plan for managing complex complications | Develops a plan and implements treatment of complex complications | |
| | | | | |
| Comments: Not Yet Completed Level 1 Not Yet Assessable | | | | |

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|--|---|---|--|--|
| Independently develops a simple surgical plan | Independently develops a surgical plan for routine procedures that includes identification of potential challenges and technical complexities | Independently develops a surgical plan for complex procedures, including contingencies for complications | Independently plans complex procedures, including management of peri-operative complications | |
| Performs a bone biopsy | Performs curettage for benign lesions (e.g., distal femur) | Independently performs routine procedures on bone lesions (e.g., surgical management of intramedullary tumors, reconstruction of a nonaggressive tumor) | Independently performs procedures on complex bone lesions (e.g., acetabular or sacral benign lesion, resection and reconstruction of a distal femur, proximal humerus resections, pediatric tumors, higher level amputations) and coordinates care with the multidisciplinary team | Independently performs rare procedures (e.g., pelvic resection (internal and external hemipelvectomies), sacral tumor resection, forequarter amputation, Tikhoff-Linberg procedures, rotationplasty) |
| Manages simple complications | Identifies complex complications | Develops a plan for managing complex complications | Develops a plan and implements treatment of complex complications | |
| | | | | |

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

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| Medical Knowledge 1: Anatomy, Pathophysiology, and Therapeutics | | | | |
|---|---|---|---|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Demonstrates knowledge of pathophysiology and complications of common musculoskeletal conditions | Demonstrates knowledge of pathophysiology and complications of complex musculoskeletal conditions | Synthesizes and applies knowledge of pathophysiology, nonsurgical treatments, and complications of complex musculoskeletal conditions | Serves as a resource for knowledge of pathophysiology, non- surgical treatments, and complications of complex musculoskeletal conditions | Advances knowledge of pathophysiology, non-surgical treatments, and complications of complex musculoskeletal conditions |
| Synthesizes and prioritizes differential diagnoses for common musculoskeletal conditions, with indirect supervision | Synthesizes and prioritizes differential diagnoses for common musculoskeletal conditions | Independently synthesizes and prioritizes differential diagnoses for complex musculoskeletal conditions | Synthesizes and prioritizes differential diagnoses and anticipates potential complications for complex musculoskeletal conditions | Is recognized by peers as an expert in synthesizing and prioritizing differential diagnoses for complex musculoskeletal conditions and anticipating potential complications |
| | | | | |
| Comments: Not Yet Completed Level 1 Not Yet Assessable | | | | |

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

| Systems-Based Practic | e 1: Patient Safety and Qual | 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 their families (simulated or actual) | Discloses patient safety events to patients and their families (simulated or actual) | Role models or mentors others in the disclosure of patient safety events |
| Demonstrates knowledge of basic quality improvement methodologies and metrics | Describes local quality improvement initiatives | Participates in local quality improvement initiatives | Demonstrates the skills required to identify, develop, implement, and analyze a quality improvement project | Creates, implements, and assesses quality improvement initiatives at the institutional or community level |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

| | e 2: System Navigation for F | | I | |
|---|---|---|---|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Demonstrates knowledge of care coordination | Coordinates care of patients in routine clinical situations effectively using the roles of interprofessional team members | Coordinates care of patients in complex clinical situations effectively using the roles of interprofessional team members | Role models effective coordination of patient- centered care among multidisciplinary teams | 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 straightforward clinical situations | Performs safe and effective transitions of care/hand-offs in complex clinical situations | Role models and advocates for safe and effective transitions of care/hand-offs | Improves quality of transitions of care within and across health care delivery systems to optimize patient outcomes |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

| Systems-Based Practice 3: Physician Role in Health Care Systems | | | | |
|--|--|--|---|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Describes basic health payment systems, including government, private, public, and uninsured care as well as different practice models | Describes how working within the health care system impacts patient care, including billing and coding | Analyzes how personal practice affects the system (e.g., length of stay, readmission rates, clinical efficiency) | Uses shared decision- making in patient care, taking into consideration costs to the patient | Participates in advocacy activities for health policy |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

| Practice-Based Learning and Improvement 1: Evidence-Based and Informed Practice | | | | |
|---|--|---|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Demonstrates how to access and use available evidence, and incorporates patient preferences and values to the care of a straightforward condition | Articulates clinical questions and elicits patient preferences and values to guide evidence-based care | Locates and applies the best available evidence, integrated with patient preference, to the care of a complex condition | Critically appraises and applies evidence, even in the face of uncertainty and conflicting evidence, to guide care tailored to the individual patient | Coaches others to critically appraise and apply evidence for complex conditions and/or participates in the development of guidelines |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

| Practice-Based Learning and Improvement 2: Reflective Practice and Commitment to Personal Growth | | | | |
|---|---|---|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Accepts responsibility for personal and professional development by establishing goals | Demonstrates openness to feedback and other input to inform goals | Responds to feedback and other input episodically, with adaptability and humility | Actively seeks feedback and other input, with adaptability and humility | Role models consistently seeking feedback and other input with adaptability and humility |
| Identifies the strengths, deficiencies, and limitations in one's knowledge and expertise | Analyzes and reflects on the strengths, deficiencies, and limitations in one's knowledge and expertise to design a learning plan, with assistance | Creates and implements a learning plan to optimize educational and professional development | Uses ongoing reflection, feedback, and other input to measure the effectiveness of the learning plan and, when necessary, improves it | Coaches others on reflective practice |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

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

| Professionalism 1: Professional Behavior and Ethical Principles | | | | |
|---|--|--|---|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Identifies and describes inciting events for professionalism lapses | Demonstrates insight into professional behavior in straightforward situations | Demonstrates professional behavior in complex situations | Recognizes situations that may promote professionalism lapses and intervenes to prevent lapses in oneself and others | Coaches others when their behavior fails to meet professional expectations |
| Demonstrates knowledge of the ethical principles underlying patient care (e.g., informed consent, surrogate decision making, advance directives, confidentiality, error disclosure, stewardship of limited resources, and related topics) | Applies ethical principles in straightforward situations and takes responsibility for lapses | Integrates ethical principles and recognizes the need to seek help in complex situations | Recognizes and uses appropriate resources for managing and resolving ethical dilemmas (e.g., ethics consultations, literature review, risk management/legal consultation) | Identifies and seeks to address system-level factors that induce or exacerbate ethical problems or impede their resolution |
| | | | | |
| Comments: Not Yet Completed Level 1 | | | | |

| Professionalism 2: Accountability/Conscientiousness | | | | | | |
|---|---|--|---|---|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | | |
| Reliably arrives to clinical activities on time and describes strategies for ensuring timely task completion Responds promptly to requests or reminders to | Performs tasks and responsibilities in a timely manner with appropriate attention to detail in straightforward situations Completes tasks and responsibilities without | Prioritizes tasks and responsibilities in a timely manner with appropriate attention to detail in complex situations Proactively completes tasks and responsibilities | Recognizes barriers that may impact others' ability to complete tasks and responsibilities in a timely manner | Develops processes to enhance other's ability to efficiently complete patient care tasks and responsibilities | | |
| complete tasks and responsibilities | reminders | to ensure that the needs of patients, teams, and systems are met | | | | |
| | | | | | | |
| Comments: Not Yet Completed Level 1 | | | | | | |

| Professionalism 3: Well-Being | | | | | |
|--|--|---|--|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Recognizes the importance of addressing personal and professional well-being (e.g., physical and | Lists available resources for personal and professional well-being | Discusses a plan to promote personal and professional well-being with institutional support | Independently develops a plan to promote personal and professional well-being | Creates institutional level interventions that promote colleagues' well-being | |
| emotional health) | Describes institutional resources that are meant to promote well-being | Recognizes which institutional factors affect well-being | Describes institutional factors that positively and/or negatively affect well-being | Describes institutional programs designed to examine systemic contributors to burnout | |
| | | | | | |
| Comments: Not Yet Completed 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 well-being, the mechanisms by which those factors impact well-being, and available resources and tools to improve well-being.

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

| Identifies prognostic communication as a key element for shared decision making Identifies the need to assess the patient's patient's/patient's family's expectations and understanding of their health status and treatment options Identifies the need to discovered patient's/patient's family's expectations and understanding of their limited meatment options Identifies the need to assess the patient's family by introducing stakeholders, setting the alth status and treatment options Identifies the need to assess the patient's family by introducing stakeholders, and verifying an understanding of the clinical situation Identifies the need to assess the patient's family shared decision making to align the patient's/patient's family shall be pa | Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|--|---|---|---|---|--|
| assess the patient/s/patient's family by introducing stakeholders, setting the and treatment options with the patient/patient's family by introducing stakeholders, setting the agenda, clarifying expectations, and verifying an understanding of the clinical situation with the patient/patient's family by introducing stakeholders, setting the agenda, clarifying expectations, and verifying an understanding of the clinical situation with the patient/patient's medical information; elicits the patient's/patient's family's values, goals, and preferences with treatment options to make a personalized care plan in situations with a high degree of | communication as a key element for shared | family's/caregiver's prognostic awareness and identifies preferences for receiving prognostic | information and attends to emotional responses of the patient and patient's | of prognosis according to disease characteristics and trajectory, patient consent, patient's family's needs, and medical uncertainty, and manages intense | communication of |
| | assess the patient's/patient's family's expectations and understanding of their health status and | with the patient/patient's family by introducing stakeholders, setting the agenda, clarifying expectations, and verifying an understanding of the | compassionately delivers medical information; elicits the patient's/patient's family's values, goals, and preferences; and acknowledges uncertainty and conflict, with | shared decision making to align the patient's/patient's family's values, goals, and preferences with treatment options to make a personalized care plan in situations with a high degree of | making in communicatior with the patient/patient's |

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

| Interpersonal and Communication Skills 4: Communication within Health Care Systems | | | | | |
|---|---|--|---|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Accurately records information in the patient record while safeguarding patient personal health information | Demonstrates accurate, timely, and efficient use of the electronic health record to communicate with the health care team | Concisely reports diagnostic and therapeutic reasoning while incorporating relevant outside data | Independently communicates via written or verbal methods based on urgency and context | Facilitates improved written and verbal communication of others | |
| | Uses appropriate communication methods (e.g., face-to-face, voice, electronic) | Respectfully initiates communications about concerns in the system | Uses appropriate channels to offer clear and constructive suggestions to improve the system | Guides departmental or institutional communication around policies and procedures | |
| | | | | | |
| Comments: Not Yet Completed Level 1 | | | | | |