

Otolaryngology – Head and Neck Surgery Milestones

The Accreditation Council for Graduate Medical Education



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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 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.

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Work Group

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American Board of Otolaryngology – Head and Neck Surgery Otolaryngology Program Directors Organization Review Committee for Otolaryngology – Head and Neck 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 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).

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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.

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>.

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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 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.

Patient Care 1: Airway Emergency and Management					
Level 1	Level 2	Level	3	Level 4	Level 5
Identifies potential airway emergencies as part of an evaluation team	Performs airway assessment and focused history and physical		s in straightforward / emergency dures	Performs straightforward airway emergency procedures	Performs complex airway emergency procedures
Escalates care of emergency airway (e.g., alerts airway team)	Describes the airway management algorithm from least to most invasive	manag	es the airway gement algorithm east to most ve	Implements airway management plan	Develops anticipatory airway management plan
Comments: Not Yet Completed Level 1					
Selecting a response box in the middle of a level implies that milestones in that level and in lower levels have been substantially demonstrated.			between levels in lower levels demonstrated a	ponse box on the line indicates that milestor have been substantiall as well as some he higher level(s).	nes

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Patient Care 1: Airway E	mergency and Managemen	t		
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies potential airway emergencies as part of an evaluation team	Performs airway assessment and focused history and physical	Assists in straightforward airway emergency procedures	Performs straightforward airway emergency procedures	Performs complex airway emergency procedures
Escalates care of emergency airway (e.g., alerts airway team)	Describes the airway management algorithm from least to most invasive	Initiates the airway management algorithm from least to most invasive	Implements airway management plan	Develops anticipatory airway management plan
Comments: Not Yet Completed Level 1				

Patient Care 2: Facial Trauma				
Level 1	Level 2	Level 3	Level 4	Level 5
Performs a history and physical examination in patients with a facial trauma	Formulates a diagnostic and treatment plan for a patient with facial trauma	Explains the risks and benefits of treatment plans for facial trauma	Describes typical treatment plan	Adapts standard treatment plans and techniques to special circumstances
Assists with routine peri- operative care for facial trauma patients	Provides routine peri- operative care for facial trauma patients	Assists with routine surgical management for facial trauma	Performs routine surgical management for facial trauma, assists with complex facial trauma	Performs operative management of complex facial trauma
Recognizes common complications	Initiates work-up of common complications	Manages common complications and recognizes uncommon/infrequent complications	Manages uncommon/infrequent complications	Serves as a peer resource for managing uncommon/infrequent complications
Comments: Not Yet Completed Level 1				

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Level 1	Level 2	Level 3	Level 4	Level 5
Performs a history and physical examination in patients with head and neck neoplasm	Formulates a diagnostic plan for a patient with head and neck neoplasm	Explains the risks and benefits of treatment plans for head and neck neoplasm	Describes typical treatment plan	Adapts standard treatment plans and techniques to special circumstances
Assists with routine peri- operative care for patients with head and neck neoplasm	Provides routine peri- operative care for patients with head and neck neoplasm	Assists with routine surgical management for head and neck neoplasm	Performs routine surgical management for head and neck disease, assists with complex head and neck neoplasm	Performs operative management of complex head and neck neoplasm
Recognizes common complications	Initiates work-up of common complications	Manages common complications and recognizes uncommon/infrequent complications	Manages uncommon/infrequent complications	Serves as a peer resource for managing uncommon/infrequent complications

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Patient Care 4: Otologic Disease				
Level 1	Level 2	Level 3	Level 4	Level 5
Performs a history and physical examination in patients with ear disease and/or hearing loss	Formulates a diagnostic and treatment plan for a patient with ear disease and/or hearing loss	Orders routine diagnostic studies for ear disease and/or hearing loss	Explains the risks, benefits, and alternatives of medical and surgical interventions for ear disease and/or hearing loss	Adapts standard treatment plans and interventions to special circumstances
Assists with set-up, performs placement of ventilation tubes, and opens and closes postauricular incisions	Elevates tympanomeatal flap, performs cortical mastoidectomy	Begins to perform middle ear dissection	Dissects middle ear structures, performs a facial recess approach, and performs an ossicular reconstruction and cholesteatoma dissection	Skeletonizes facial nerve, sigmoid sinus, and dura, and begins to perform lateral temporal bone resection
Interprets routine audiograms	Identifies surgical and disease-relevant anatomy on a computerized tomography (CT) scan	Identifies normal and disease-relevant anatomy on a magnetic resonance imaging (MRI)	Interprets specialized audiometric and vestibular testing	Leads an otology patient care conference
Comments: Not Yet Completed Level 1				

Patient Care 5: Rhinologic Disease				
Level 1	Level 2	Level 3	Level 4	Level 5
Performs a history and physical examination in a patient with rhinologic disease	Formulates a diagnostic and treatment plan for a patient with rhinologic disease	Explains the risks and benefits of treatment plans for rhinologic disease	Identifies when typical treatment plans should be modified	Adapts standard treatment plans and techniques to special circumstances
Assists with routine perioperative care for patients with rhinologic disease	Provides routine perioperative care for patients with rhinologic disease	Assists with routine surgical management for patients with rhinologic disease	Performs routine surgical management and assists with complex surgical management for patients with rhinologic disease	Performs complex surgical management for patients with rhinologic disease
Recognizes common complications associated with rhinologic disease	Initiates work-up of common complications associated with rhinologic disease	Manages common complications and recognizes uncommon/infrequent complications associated with rhinologic disease	Manages uncommon/infrequent complications associated with rhinologic disease	Serves as a peer resource for managing uncommon/infrequent complications associated with rhinologic disease
Comments: Not Yet Completed Level 1 Not Yet Assessable				

Patient Care 6: Laryngologic Disease					
Level 1	Level 2	Level 3	Level 4	Level 5	
Performs a history and physical examination in patients with laryngologic disease	Formulates a diagnostic and treatment plan for a patient with laryngologic disease	Explains the risks and benefits of treatment plans for laryngologic disease	Identifies when typical treatment plans should be modified	Adapts standard treatment plans and techniques to special circumstances	
Assists with routine perioperative care for patients with laryngologic disease	Provides routine perioperative care for patients with laryngologic disease, including both direct and indirect laryngoscopy	Assists with routine surgical management for patients with laryngologic disease, including direct laryngoscopy, microlaryngeal techniques, and vocal fold injections	Performs routine surgical management and assists with complex surgical management for patients with laryngologic disease	Performs complex surgical management for patients with laryngologic disease, including laryngotracheal reconstruction and arytenoid procedures	
Recognizes common complications associated with laryngologic disease	Initiates work-up of common complications associated with laryngologic disease	Manages common complications and recognizes uncommon/infrequent complications associated with laryngologic disease	Manages uncommon/infrequent complications associated with laryngologic disease	Serves as a peer resource for managing uncommon/infrequent complications associated with laryngologic disease	
Comments: Not Yet Completed Level 1 Not Yet Assessable					

Level 1	Level 2	Level 3	Level 4	Level 5
Performs an age- appropriate history and physical examination with developmental assessment	Formulates a diagnostic and treatment plan for a pediatric patient	Explains the risks and benefits of pediatric procedures; adapts diagnoses to age-related variations	Adapts standard treatment plans to special circumstances (e.g., syndromic children and infants)	Actively participates in discussion at an interdisciplinary pediatric case conference or specialty clinic
Assists with pediatric otolaryngology procedures	Performs routine pediatric procedures on typical patients (e.g., ear tube placement, tonsillectomy, adenoidectomy)	Performs routine pediatric procedures on atypical patients (e.g., syndromic), and airway and soft tissue pediatric otolaryngology procedures (e.g., bronchoscopy, branchial cleft excision)	Performs airway and soft tissue pediatric procedures; assists with complex pediatric procedures	Performs complex pediatric otolaryngology procedures
Provides routine peri- operative care for pediatric otolaryngology procedures	Recognizes and initiates work-up of routine complications of treatment	Manages routine complications and recognizes complex complications of treatment	Manages uncommon complications of treatment	Serves as a peer resource for managing uncommon/infrequent complications associated with pediatric procedures

Patient Care 8: Facial Plastic and Reconstructive Surgery				
Level 1	Level 2	Level 3	Level 4	Level 5
Performs a history and physical examination in patients with aesthetic/functional concerns	Formulates a diagnostic and treatment plan for a patient with aesthetic/functional concerns	Explains the risks and benefits of treatment plans for aesthetic/functional surgery	Identifies best treatment plan to address patient concerns	Adapts standard treatment plans and techniques to special circumstances
Assists with routine peri- operative care for patients receiving head and neck aesthetic/functional surgery	Provides routine peri- operative care for patients receiving head and neck aesthetic/functional surgery	Assists with routine surgical management for head and neck aesthetic/functional surgery	Performs routine surgical management for patients requiring head and neck aesthetic/functional surgery	Performs operative management of complex head and neck aesthetic/functional surgery
Recognizes common complications	Initiates work-up of common complications	Manages common complications and recognizes uncommon/infrequent complications	Manages uncommon/infrequent complications	Serves as a peer resource for managing uncommon/infrequent complications
Comments: Not Yet Completed Level 1 Not Yet Assessable				

Patient Care 9: Sleep				
Level 1	Level 2	Level 3	Level 4	Level 5
Performs a history and physical examination in a patient with sleep concerns	Formulates a diagnostic and treatment plan for a patient with sleep concerns	Explains the risks and benefits of treatment plans for sleep disorders	Identifies when standard sleep interventions should be modified	Adapts standard treatment plans for sleep disorders to individual circumstances
Assists with routine peri- operative care for sleep surgery patients	Provides routine peri- operative care for sleep surgery patients	Assists with routine surgical management of sleep disorders	Performs common surgical management of sleep disorders	Performs complex surgical management of sleep disorders
Recognizes common complications of sleep surgery and sleep disorders	Initiates work-up of common complications associated with sleep surgery and sleep disorders	Manages common complications and recognizes uncommon/infrequent complications associated with sleep surgery and sleep disorders	Manages uncommon/infrequent complications associated with sleep surgery and sleep disorders	Serves as a peer resource for managing uncommon/infrequent complications
Comments: Not Yet Completed Level 1 Not Yet Assessable				

Medical Knowledge 1: Anatomy					
Level 1	Level 2	Level 3	Level 4	Level 5	
Identifies normal anatomy during common operations Articulates the steps of	Identifies variations in anatomy during common operations Articulates the	Identifies normal anatomy during complex operations Articulates the steps of	Identifies variations in anatomy during complex operations Articulates the	Leads anatomy instruction for students and co- residents Teaches complex	
common operations	implications of varying anatomy on the steps of common operations	complex operations	implications of varying anatomy on the steps of complex operations	variations of anatomy and implications for surgical approaches	
Comments: Not Yet Completed Level 1					

Medical Knowledge 2: Allergy				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of allergic hypersensitivity and resulting clinical manifestations	Discusses pathophysiology of immunoglobulin E (IgE) – mediated hypersensitivity and roles of exposure and sensitization	Demonstrates knowledge of interventions, including avoidance, pharmacotherapy, and antigen-specific immunotherapy	Interprets data from allergy in-vitro or skin testing	Reliably resolves discrepancies between testing results and clinical findings
Explains common clinical manifestations of hypersensitivity and allergic disease	Explains common complications and comorbid conditions associated with allergic disease	Articulates a treatment plan for clinical manifestations of allergic rhinitis	Determines appropriateness of antigen-specific immunotherapy	Synthesizes data to modify testing strategies and treatment for difficult/high-risk patients
Describes the potential severity of severe allergic responses	Demonstrates knowledge of risk factors associated with systemic reaction to allergen exposure	Describes the early signs of anaphylaxis and/or systemic reaction	Describes the basic intervention and treatment of anaphylaxis	Describes advanced treatment of anaphylaxis
Comments: Not Yet Completed Level 1 Not Yet Assessable				

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Medical Knowledge 3: Pa	athophysiology			
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of normal physiology, pathophysiology, and clinical findings for otolaryngologic conditions routinely managed by non- otolaryngologists	Demonstrates basic knowledge of pathophysiology and clinical findings for common otolaryngologic conditions	Demonstrates advanced knowledge of pathophysiology and clinical findings for commonly encountered otolaryngologic conditions	Demonstrates knowledge of pathophysiology and clinical findings for uncommon otolaryngologic conditions	Contributes new knowledge for pathophysiology and clinical findings for otolaryngologic conditions (e.g., publication, curriculum development)
Comments:				ssessable

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	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

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Systems-Based Practice	2: System Navigation for F	Patient-Centered Care		
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of care coordination	Coordinates care of patients in routine clinical situations effectively using the roles of the interprofessional teams	Coordinates care of patients in complex clinical situations effectively using the roles of their interprofessional teams	Role 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	Role 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 their 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
Comments:			Not Yet C	ompleted Level 1

Systems-Based Practice	Systems-Based Practice 3: Physician Role in Health Care Systems			
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies key components of the complex health care system (e.g., hospital, skilled nursing facility, finance, personnel, technology)	Describes how components of a complex health care system are interrelated, and how this impacts patient care	Discusses how individual practice affects the broader system (e.g., length of stay, readmission rates, clinical efficiency)	Manages various components of the complex health care system to provide efficient and effective patient care and transition of care	Advocates for or leads systems change that enhances high-value, efficient, and effective patient care and transition of care
Describes basic health payment systems, including government, private, public, uninsured care, and practice models	Delivers care with consideration of each patient's payment model (e.g., insurance type)	Engages with patients in shared decision making, informed by each patient's payment models	Advocates for patient care needs (e.g., community resources, patient assistance resources) with consideration of the limitations of each patient's payment model	Participates in health policy advocacy activities
Identifies basic knowledge domains for effective transition to practice (e.g., information technology, legal, billing and coding, financial, personnel)	Describes core administrative knowledge needed for transition to practice (e.g., contract negotiations, malpractice insurance, government regulation, compliance)	Demonstrates use of information technology required for medical practice (e.g., electronic health record, documentation required for billing and coding)	Analyzes individual practice patterns and professional requirements in preparation for practice	Educates others to prepare them for transition to practice
Comments:			Not Yet C	completed Level 1

Practice-Based Learning	and Improvement 1: Evide	ence-Based and Informed P	Practice	_
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates how to access available evidence, and incorporate patient preferences and values to take care of a routine patient	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 complex patients	Critically appraises and applies evidence even in the face of uncertainty and conflicting evidence to guide care to the individual patient	Coaches others to critically appraise and apply evidence for complex patients; and/or participates in the development of guidelines
Comments:			Not Yet 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	Intentionally seeks performance data consistently with adaptability	Role models consistently seeking performance data with adaptability
Identifies the factors which contribute to gap(s) between expectations and actual performance	Analyzes and reflects on the factors which contribute to gap(s) between expectations and actual performance	Analyzes, reflects on, and institutes behavioral change(s) to narrow the gap(s) between expectations and actual performance	Challenges assumptions and considers alternatives in narrowing the gap(s) between expectations and actual performance	Coaches others on reflective practice
Actively seeks opportunities to improve	Designs and implements a learning plan, with prompting	Independently creates and implements a learning plan	Uses performance data to measure the effectiveness of the learning plan and when necessary, improves it	Facilitates the design and implementing learning plans for others

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies and describes potential triggers for professionalism lapses	Demonstrates insight into professional behavior in routine situations and how to appropriately report professionalism lapses	Demonstrates professional behavior in complex or stressful situations	Recognizes situations that may trigger professionalism lapses and intervenes to prevent lapses in self and others	Coaches others when their behavior fails to meet professional expectations
Demonstrates knowledge of the ethical principles underlying patient care, including informed consent, surrogate decision making, advance directives, confidentiality, error disclosure, stewardship of limited resources, and related topics	Analyzes straightforward situations using ethical principles	Analyzes complex situations using ethical principles and recognizes need to seek help in managing and resolving complex ethical situations	Recognizes and uses appropriate resources for managing and resolving ethical dilemmas as needed	Identifies and seeks to address system-level factors that induce or exacerbate ethical problems or impede their resolution

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Professionalism 2: Acco	untability/Conscientiousne	SS		
Level 1	Level 2	Level 3	Level 4	Level 5
Takes responsibility for failure to complete tasks and responsibilities, identifies potential contributing factors, and describes strategies for ensuring timely task completion in the future	Performs tasks and responsibilities in a timely manner with appropriate attention to detail in routine situations	Performs tasks and responsibilities in a timely manner with appropriate attention to detail in complex or stressful situations	Recognizes situations that may impact others' ability to complete tasks and responsibilities in a timely manner	Leads system outcomes
Responds promptly to requests or reminders to complete tasks and responsibilities	Recognizes situations that may impact own ability to complete tasks and responsibilities in a timely manner	Proactively implements strategies to ensure that the needs of patients, teams, and systems are met		
Comments:			Not Yet C	completed Level 1

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Professionalism 3: 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 o 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:			Not Yet C	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.

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Interpersonal and Comm	Interpersonal and Communication Skills 1: Patient- and Family-Centered Communication			
Level 1	Level 2	Level 3	Level 4	Level 5
Uses language and nonverbal behavior to demonstrate respect and establish rapport	Establishes a therapeutic relationship in straightforward encounters using active listening and clear language	Establishes a therapeutic relationship in challenging patient encounters	Easily establishes therapeutic relationships, with attention to patient/family concerns and context, regardless of complexity	Mentors others in situational awareness and critical self-reflection to consistently develop positive therapeutic relationships
Identifies common barriers to effective communication (e.g., language, disability) while accurately communicating own role within the health care system	Identifies complex barriers to effective communication (e.g., health literacy, cultural)	When prompted, reflects on personal biases while attempting to minimize communication barriers	Independently recognizes personal biases while attempting to proactively minimize communication barriers	Role models self- awareness while identifying a contextual approach to minimize communication barriers
Identifies the need to adjust communication strategies based on assessment of patient/family expectations and understanding of their health status and treatment options	Organizes and initiates communication with patient/family by introducing stakeholders, setting the agenda, clarifying expectations, and verifying understanding of the clinical situation	With guidance, sensitively and compassionately delivers medical information, elicits patient/family values, goals, and preferences, and acknowledges uncertainty and conflict	Independently, uses shared decision making to align patient/family values, goals, and preferences with treatment options to make a personalized care plan	Role models shared decision making in patient/family communication including those with a high degree of uncertainty/conflict
Comments:			Not Yet C	ompleted Level 1

Level 1	Level 2	Level 3	Level 4	Level 5
Respectfully requests/receives a consultation	Clearly and concisely requests/responds to a consultation	Receives follow-up and feedback on the outcome of the consultation	Coordinates recommendations from different members of the health care team to optimize patient care	Role models flexible communication strategies that value input from all health care team members, resolving conflict when needed
Uses language that values all members of the health care team	Communicates information effectively with all health care team members	Uses active listening to adapt communication style to fit team needs	Communicates feedback and constructive criticism to superiors	Facilitates health care team-based feedback in complex situations
	Respectfully receives feedback on performance as a member of the health care team	Solicits feedback on performance as a member of the health care team	Communicates concerns and provides feedback to peers and learners	Facilitates teaching of team-based communication and feedback

Level 1	Level 2	Level 3	Level 4	Level 5
Accurately records information in the patient record	Demonstrates organized diagnostic and therapeutic reasoning through notes in the patient record	Concisely reports diagnostic and therapeutic reasoning in the patient record	Communicates clearly, concisely, timely, and in an organized written form, including anticipatory guidance	Models feedback to improve others' written communication
Safeguards patient personal health information	Documents required data in formats specified by institutional policy	Appropriately selects direct (e.g., telephone, in- person) and indirect (e.g., progress notes, text messages) forms of communication based on context	Achieves written or verbal communication (e.g., patient notes, email) that serves as an example for others to follow	Guides departmental or institutional communication around policies and procedures

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