Marshall University Joan C. Edwards School of Medicine Core Competencies with Milestones

Interpersonal and Communication Skills (IC)				
Students must demonstrate interpersonal and communication skills that facilitate effective interactions with patients and their families and other health professionals, specifically:				
Enabling Competency	**Milestones students should achieve**			
	Year 1	**Year 2**	**Year 3**	**Year 4**
A. Communicate effectively with patients, patients' families, colleagues, and other health care professionals.	IC1A1. Describe the important components of effective doctor-patient communication. IC1A2. Discuss barriers to effective doctor-patient communication in the clinical setting. IC1A3. Use written and electronic communication skills effectively within the classroom setting.	IC2A1. Effectively illicit and present (of a standardized or actual patient) the findings of a full history and physical examination in oral and written formats. IC2A2. Demonstrate effective oral communication skills with patient in clinical setting. (Standardized patient) IC2A3. Understand how and when it is appropriate to access interpreter services to facilitate communication with patient and their families.	IC3A1. Demonstrate effective oral communication skills with patients and their families in the clinical care setting. IC3A2. Demonstrate effective oral communication skills with colleagues and other health professionals in clinical care settings. IC3A3. Effectively present the findings of a history and physical examination, diagnostic test results, and management plan. IC3A4. Describe how an electronic medical record can be used to facilitate communication between health care professionals and patients. IC3A5. Assess the health literacy of at least one patient and discuss how healthy literacy impacts the care of this patient.	IC4A1. Use literacy-level appropriate language to overcome health literacy barriers in clinical care setting. IC4A2. Use written and electronic communication skills effectively within the clinical care setting. IC4A3. Effectively present the findings of a focused history and physical

B. Demonstrate collaborative teamwork skills and the ability to work effectively with other members of the health care team.	IC1B1. Work collaboratively with peers in team setting to solve basic science problems. IC1B2. List the major elements of highly performing teams and how these concepts can be applied to patient care.	IC2B1. Work collaboratively as a member of a team to solve clinical problems.	IC3B1. Apply team work skills in collaboration with other members of the health care team to provide appropriate health care to patients.	IC4B1. Demonstrate teamwork skills and initiative, working collaboratively with all members of the health care team in challenging clinical environments (e.g. ICU, ER).

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Medical Knowledge (MK)				
Students must demonstrate knowledge about established and evolving biomedical, clinical, and cognate (e.g., epidemiological and social-behavioral) science and the application of this knowledge in patient care.				
Enabling Competency	**Milestones students should achieve**			
	Year 1	**Year 2**	**Year 3**	**Year 4**
A. Describe the normal structure and function of the human body andof each of its major organ systems, across the life span.	**MK1A1.** Describe the normal structure and function of the human body at the sub-cellular, cellular, tissue, organ, and body level. **MK1A2.** Discuss the normal process of pregnancy.	**MK2A1.** Describe the normal structure and function of all major organ systems as systems, outlining how anatomy, cell biology, and physiology work together.	**MK3A2**. Discuss the normal process of growth in childhood, and maturation through adulthood to the end-of-life.	**MK4A1.** Integrate knowledge of the expected changes in organ function as well as normal physiologic changes across the lifespan into the care of critically ill and emergent patients and patients at the end-of-life.
B. Explain various causes (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, behavioral, and traumatic) of major diseases and conditions and the ways in which they operate on the body (pathogenesis).	**MK1B1**. Recognize variations of normal development and function of organs and systems due to various causes.	**MK2B1**. Describe the various causes of disease and how these are manifest in organ system dysfunction.	**MK3B1**. Explain the pathophysiologic factors underlying the clinical manifestations of common diseases.	**MK4B1**. Discuss the pathogenesis of major conditions related to area(s) of specialty/disciplinary interest.
C. Describe how the altered structure and function (pathology and pathophysiology) of the body and its major organ systems are manifest through major diseases and conditions.	**MK1C1**. Demonstrate the ability to recognize abnormal anatomic and physiologic function of the human body.	**MK2C1.** Describe the pathology and pathophysiology underlying the clinical manifestations of common conditions.	**MK3C1**. Use knowledge of pathology and pathophysiology to develop diagnostic and therapeutic plans for patients with common conditions.	**MK4C1.** Describe the altered structure and function of organ systems producing disease across the lifespan and incorporate this knowledge into the care of individual patients.
D. Describe the scientific principles underlying laboratory and radiologic diagnostic methodologies.	**MK1D1.** Describe the anatomical, histological and physiological principles that underlie physical, laboratory, and radiological testing.	**MK2D1.** Apply the concepts of sensitivity, specificity, positive and negative predictive values, and likelihood ratios to decisions regarding patient testing.	**MK3D1.** Discuss the cost and morbidity implications of diagnostic test imprecision and incidental findings associated with diagnostic evaluations.	**MK4D1.** Incorporate knowledge of the scientific principles underlying laboratory and radiologic diagnostic methodologies into the care of critically ill

			MK3D2. Incorporate knowledge of the scientific principles underlying laboratory and radiologic diagnostic methodologies into the care of patients with core medical problems. **MK3D3.** Describe how common clinical laboratory tests are used in diagnosis and treatment monitoring.	and emergent patients. **MK4D2**. Describe the scientific basis for the diagnostic tests used in area(s) of specialty/disciplinary interest. **MK4D3**. Discuss the basic scientific principles of radiologic diagnostic tests, and be able to give examples of how these tests should be used appropriately in patient care.
E. Identify the proximate and ultimate factors that contribute to the development of disease and illness, and, that contribute to health status within and across populations regionally, nationally, and globally.	**MK1E1.** Recognize the genetic basis of disease and complex interaction with social conditions and life experiences. **MK1E2**. Discuss the effects of socioeconomic status, diet, exercise, gender, and age on health and disease.	**MK2E1.** Describe the determinants of health and disease, and provide specific examples of how these determinants influence health outcomes in common/major diseases. **MK2E2.** Discuss social conditions and behaviors that predispose patients to disease and decreased function (e.g. alcohol addiction, obesity). **MK2E3.** List major contributors to health and disease in populations including mechanisms of action. **MK2E4.** Discuss how the determinants of health and disease relate to the host immune system, its development, function, and possible dysregulation.	**MK3E1.** Describe the determinants of disease and health for major clinical situations prevalent in W.V. (including regional variation), nationally, and globally **MK3E2**. Recognize the influence of common health determinates and illness on patients. **MK3E3**. Integrate knowledge of social conditions and behaviors that predispose patients to disease and decreased function into the managements plan for individual patients.	**MK4E1.** Implement interventions to reduce the impact of disease determinants (or improve the likelihood of health improvements) within patient care.
F. Demonstrate knowledge of the basic principles of human	**MK1F1**. Discuss the basic principles of normal human	**MK2F1**. Outline the taxonomy of abnormal	**MK3F1**. Recognize the behavioral milestones of	**MK4F1**. Practice advanced behavioral modification

behavior throughout the life cycle, including development during infancy, childhood, adolescence, adulthood, and end of life.	development form fetus to elder. MK1F2. Discuss variations in family and individual life cycle in view of the heterogeneity of the U.S. population.	human behavior and development.	normal child development and adult maturation, and use these milestones in patient care. MK3F2. Identify common behavioral pathology that contributes to health and illness in common disease/injury states. **MK3F3.** Describe human developmental milestones and characteristic behavioral changes expected throughout the life cycle.	strategies to help patients achieve lifestyle changes.
G. Recognize the medical consequences of common societal problems.	**MK1G1.** Describe the impact on health of life experiences, poverty, education, race, gender, culture, crime, and the health care system.	**MK2G1.** Recognize the contribution of social conditions and problems to the health and disease outcomes of patients.	**MK3G1.**Create discharge/management plans that address the impact of social conditions and problems on patients.	**MK4G1**.Describe strategies to ameliorate the impact of social conditions and problems on the health and disease outcomes of patients.
H. Apply the principles of pharmacology, therapeutics, and therapeutic decision-making to the care of an individual patient.		**MK2H1.** List mechanism of action, therapeutic indications] and common side effects for major drug classes. **MK2H2**. Discuss the mechanism of action, common adverse effects, effectiveness, risks, and costs of pharmacological therapeutics used to treat core medical conditions. Include discussion of brand versus generic medication. **MK2H3**. Discuss the use of alternative medications.	**MK3H1.** Select appropriate medications to treat core conditions in inpatient and outpatient settings. **MK3H2.** Discuss the rationale for selection of these medications including indications, side effects, cost, and effectiveness. **MK3H3.** Perform medication reconciliation for patients at time of discharge.	**MK4H1.** Differentiate between alternative medications for common conditions based on therapeutic effectiveness and cost considerations. **MK4H2.** Identify cost-related barriers to patient medication use with consideration to cost, gender, ethnicity sexual identity, socioeconomic status, rural setting, religious and cultural beliefs

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Patient Care/Clinical Skills (PC)				
Students must be able to provide care that is compassionate, appropriate, and effective for treating health problems and promoting health, specifically:				
Enabling Competency	**Milestones students should achieve**			
	Year 1	**Year 2**	**Year 3**	**Year 4**
A. Obtain an accurate, age-appropriate medical history	**PC1A1.** List the elements of the full medical history. **PC1A2.** Perform a focused history on an ambulatory adult patient. **PC1A3.** Include sexual history, functional status, relevant family history, community and family context of care, and cultural competence in medical history. Explain to reluctant patients why these components are included in the history. **PC1A4.** Demonstrate that the patient's autonomy and privacy are respected in the history taking process.	**PC2A1.** Perform a complete medical history of an adult patient integrating across organ systems and including elements necessary for development of a therapeutic plan. **PC2A4**. Discuss differences in the approach to patient history based on patient's presenting complaint.	**PC3A1.** Obtain appropriately focused and accurate history and physicals across all age groups and clinical settings. **PC3A2.** Obtain a medical history from a pediatric patient incorporating parent(s) as appropriate. **PC3A3.** Describe issues related to obtaining a medical history from geriatric patients and patients at the end of life. **PC3A4.** Identify and address barriers to history taking including patient's right to refuse to provide information and to censor information. **PC3A5.** Compare and contrast appropriate versus inappropriate methods for obtaining a history e.g. persuasion compared to manipulation and coercion.	**PC4A1.** Reliably obtain accurate information from patients, including children and patients with special situations (e.g., end-of-life, bedbound/demented patients, by telephone). **PC4A2.** Adjust interview to overcome potential barriers including socioeconomic circumstance, literacy levels, ethnicity, and cultural practices.
B. Demonstrate proper technique in performing both a complete and symptom-	**PC1B1.** Sensitively perform a focused physical examination in healthy men and women	**PC2B1.** Sensitively perform and interpret the results of a full physical examination in	**PC3B1.** Perform an independent, reliable examination across all organ	**PC4B1.** Perform focused physical examination in area(s) of

focused examination, addressing issues of patient modesty and comfort.	and identify basic abnormalities. **PC1B2.** Demonstrate comfort with the examination while assuring patient dignity, privacy, safety, and satisfaction. **PC1B3.** Sensitively perform male and female GU exam and female breast exam. **PC1B4.** Perform proper hand washing technique before each patient encounter.	patients with common abnormalities. **PC2B2.** Discuss differences in the approach to the physical examination based on patient presenting complaint. **PC2B3.** Perform a pediatric physical exam.	systems with respect to age and gender and identifying major abnormalities found.	specialty/disciplinary interest.
C.Perform routine technical procedures and tests under supervision and with minimal discomfort to the patient.	**PC1C1.** Identify important elements related to patient privacy, comfort, and safety during basic procedures. **PC1C2.** Describe proper procedure/protocol for gowning/draping of patients for procedures. **PC1C3.** Discuss technique(s) and basic science foundation for basic procedures. **PC1C4.** Perform basic procedures in a simulated setting. Discuss the indications for, and risks of, these procedures. **PC1C5.** Outline the important elements of, and process for, obtaining informed consent.	**PC2C1.** Discuss technique(s) and basic science foundation for advanced procedures. **PC2C2.** Perform advanced procedures in a simulated setting. Discuss the indications for, and risks of, these procedures. **PC2C3.** Identify important elements related to patient privacy, comfort, and safety during advanced procedures.	**PC3C1.** Assist with the performance of advanced procedures. Discuss the indications for, and risks of, these procedures **PC3C2.** Discuss under what circumstances a procedure should be halted including withdrawal of consent. **PC3C3.** Perform basic procedures under supervision and with minimal discomfort of the patient. Discuss the indications for, and risks of, these procedures.	**PC4C1.** Perform selected advanced procedures under supervision and with minimal discomfort of the patient. Discuss the indications for, and risks of, these procedures.

	PC1C6. Perform proper hand washing technique before each patient encounter.			
D. Justify each diagnostic test ordered and management strategy proposed with regard to cost, effectiveness, risks, and complications, and the patient's overall goals and values.	**PC1D1.** Discuss scientific basis for Clinical and diagnostic testing.	**PC2D1.** Explain the rationale, expected results, cost, risks, scientific basis and complications of diagnostic tests and therapeutic strategies commonly used in the clinical setting. **PC2D2**. List the common testing methodologies, the advantages and disadvantages of the tests, how test samples are procured, and how to prepare patients to undergo the tests. **PC2D3.** Identify the key questions to ask when developing a risk to benefit ration for any given diagnostic or therapeutic intervention.	**PC3D1.** Choose appropriate tests and management strategies based on effectiveness, risk, cost, and patient goals and values for core clinical conditions. **PC3D2.** Demonstrate that shared decision making is reflected in development of the diagnostic and management plan. **PC3D3.** Recognize the role of elective medications and procedures in patient care and discuss how to balance the risks and benefits in individual patients.	**PC4D2.** Recognize the limitations of rural diagnostic tests and management strategies.
E.Apply clinical reasoning and critical thinking skills in developing a differential diagnosis and management plan.	**PC1E1.** Generate a broad differential diagnosis based on mechanisms of disease and patient characteristics. **PC1E2.** Develop a plan to test diagnostic hypotheses.	**PC2E1.** Generate a broad differential diagnosis based on pathological mechanisms and disease prevalence, and identify the most likely diagnoses on that list. **PC2E2.** Develop a basic diagnostic and therapeutic plan based on this	**PC3E1.** Integrate information obtained from history, physical and diagnostic testing, and the medical literature to generate an appropriate differential diagnosis (incorporating knowledge of pretest probability, testing characteristics, and post-test	**PC4E1.** Integrate information obtained from history and physical examinations, and diagnostic testing, and review of the clinical literature to formulate and appropriate differential diagnosis and plan of care for critically ill and emergent patients.

		differential diagnosis.	probability) and basic management plan for core patient types. **PC3E2.** Develop appropriate care plans which reflect the cost, risks, and benefits of various diagnostic and therapeutic measures in the context of the patient's goals. **PC3E3.** Discuss how a patient is involved in developing care plans.	
F. Apply the principles of pharmacology, therapeutics, and therapeutic decision-making to the care of an individual patient.	**PC1F1.** Obtain a medication history and identify potential side effects and drug interactions.	**PC2F1.** List mechanism of action, therapeutic indications] and common side effects for major drug classes. **PC2F2.** Discuss the mechanism of action, common adverse effects, effectiveness, risks, and costs of pharmacological therapeutics used to treat core medical conditions. Include discussion of brand versus generic medication. **PC2F3.** Discuss the use of alternative medications.	**PC3F1.** Select appropriate medications to treat core conditions in inpatient and outpatient settings. **PC3F2.** Discuss the rationale for selection of these medications including indications, side effects, cost, and effectiveness. **PC3F3.** Perform medication reconciliation for patients at time of discharge.	**PC4F1.** Differentiate between alternative medications for common conditions based on therapeutic effectiveness and cost considerations. **PC4F2.** Identify cost-related barriers to patient medication use with consideration to cost, gender, ethnicity sexual identity, socioeconomic status, rural setting, religious and cultural beliefs
G. Identify and incorporate into the care of patient's appropriate prevention strategies for common conditions.	**PC1G1.** Identify the most common causes of morbidity and mortality in specific patient populations and discuss recommended	**PC2G1.** Apply principles of clinical epidemiology to select and evaluate prevention strategies for clinical cases.	**PC3G1**. Apply principles of clinical epidemiology to select and evaluate prevention strategies for patients with core medical	**PC4G1.** Select appropriate prevention strategies for disease management within diverse populations including intended and unintended

	screening test for these conditions. **PC1G2.** Identify the levels of prevention. **PC1G3.** Describe available strategies of prevention (screening, vaccination, education/counseling, etc.) and their respective characteristics, limitations, and benefits.	**PC2G2.** Complete a motivational interview and identify the basic principles of behavior change related to prevention.	conditions.	consequences.PC4G2. Counsel patients about preventive services in non-judgmental, culturally sensitive terms. **PC4G3**. Appropriately select and integrate prevention strategies into management of patients in area(s) of specialty/disciplinary interest. **PC4G4.** Discuss the use of national guidelines (e.g. US Preventive Services Task Force) in the care of individual patients. **PC4G5.** Critically evaluate the benefits and limitations of the use of guidelines for common conditions.
H. Identify when patients have life-threatening conditions and institute appropriate initial therapy.	**PC1H1.** Identify the normal and abnormal parameters for age specific vital signs. **PC1H2.** Achieve certification in Basic Life Support.	**PC2H1.** Discuss the etiology, presentation, and management of common life-threatening conditions.	**PC3H1.** Achieve certification in Advanced Cardiac Life Support. **PC3H2.** Participate in code-blue, trauma response, and rapid response for adult and pediatric patients. **PC3H3.** Identify the normal and abnormal parameters for adult vital signs	**PC4H1.** Participate in the diagnosis and management of common life-threatening conditions.
I. Sensitively address end-of-life issues with patients and	PC1I1. Describe the application of history-taking	PC2I1. Assess functionality, pain; support needs,	PC3I1. Identify salient end-of-life issues for discussion with	PC4I1. Assist with the creation of a multi-

their families, including do-not-resuscitate orders and pain management	elements to end-of-life care, e.g., health care beliefs, support system. PC1I2. Perform a basic evaluation of pain symptoms during history taking. PC1I3. Discuss death as a personal and cultural practice, including various conceptual approaches such as the Kubler-Ross stages of dying, or ideas about the afterlife.	familiarity with functions of DNR orders, health care power of attorney, advance directives and palliative care. PC2I2. Discuss the basic elements of therapeutic pain management. PC2I3. Identify the core elements of advance directives and palliative care.	patient and family; actively participate in discussion with patient and family alongside other treatment team members. PC3I2. Develop recommendations for treatment plans involving end-of-life care. PC3I3. Assess alternatives, risks and benefits re: options for pain and symptom control at the end-of-life.	dimensional treatment plan for patients at end-of-life. PC4I2. Collaborate with a patient in creating an advanced directive.

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Practice-Based Learning and Improvement (PB)				
Students must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their practice of medicine, specifically:				
Enabling Competency	**Milestones students should achieve**			
	Year 1	**Year 2**	**Year 3**	**Year 4**
A. Demonstrate skills in retrieving, critically assessing, and integrating biomedical information into clinical decision-making.	**PB1A1.** Retrieve pertinent biomedical information from electronic databases. **PB1A2.** Obtain, analyze, and synthesize information from the medical literature.	**PB2A1.** Critically assess and apply biomedical information to address diagnostic, prognostic and/or treatment questions in clinical care setting. **PB2A2.** Define internal and external validity. **PB2A3.** Formally assess the internal and external validity of original clinical research.	**PB3A1.** Critically assess and apply biomedical information to develop a plan of care for core patient types.	**PB4A1.** Critically assess and apply biomedical information to address diagnostic, prognostic and/or treatment question in area(s) of specialty/disciplinary interest.
B. Discuss the basic principles of basic, clinical, and translational research and how this research is applied to patient care.	**PB1B1**. Describe the fundamental components of basic, clinical and translational research. **PB1B2.** Discuss the fundamental principles underlying the conduct and application of clinical trials in patient care. **PB1B3.** Describe the role of the Institutional Review Board.	**PB2B1.** Discuss how research findings are incorporated into clinical decision making and identify barriers to this incorporation.	**PB3B1.** Develop a clinical question based on a real patient, identify relevant research findings, critically evaluate the validity and reliability of that research, and discuss the application of these findings to the care of this patient. **PB3B2.** Discuss how clinical and research roles may conflict, and how processes of consent may differ. **PB3B3.** Describe the process of obtaining appropriate informed consent for	**PB4B1.** Describe the application of research findings to patient care in area of specialty/disciplinary interest. **PB4B2.** Explain research findings to patients.

			participation in research.	
C. Apply principles of patient safety and quality improvement to enhance patient care	**PB1C1.** Discuss the importance of patient safety and describe the basic elements of patient safety programs. **PB1C2.** Define medical error and discuss the incidence of medical error in the United States and the impact of medical error on patient outcomes. **PB1C3.** Identify quality measures and describe how these measures are validated. **PB1C4.** Discuss the principles of quality improvement and describe the basic elements of quality improvement programs.	**PB2C1.** Identify clinical situations in which patient safety may be jeopardized.	**PB3C1.** Identify potential patient safety issues and identify strategies to improve outcomes in the clinical setting. **PB3C2.** Identify a change or changes in patient care at MUJCESOM that have resulted from a quality improvement project	**PB4C1.** Describe lessons learned from participation in a project to improve patient safety and present findings and recommendations. **PB4C2.** Incorporate the principles of quality improvement to improve the care of patients with core medical problems.

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Professionalism (PR)				
Students must demonstrate a commitment to professional service, adherence to ethical problems, Sensitivity to patients, and maintain personal health and well-being, specifically:				
Enabling Competency	**Milestones students should achieve**			
	Year 1	**Year 2**	**Year 3**	**Year 4**
A. Demonstrate honesty and integrity in all interactions with patients, their families and colleagues.	**PR1A1.** Demonstrate honesty and integrity in all settings including the classroom, in peer interactions, and during patient encounters.	**PR2A1.** Demonstrate honesty and integrity in all setting including the classroom, in peer interactions, and during patient encounters.	**PR3A1.** Demonstrate honesty and integrity in all settings including the classroom, in peer interactions, and during patient encounters.	**PR4A1.** Demonstrate honesty and integrity in all settings including the classroom, peer interactions, and during patient encounters. **PR4A2.** Demonstrate techniques which are useful in dealing with difficult situations involving patients and their families.
B. Identify and apply theories and principles that govern ethical decision-making to the practice of medicine.	**PR1B1.** List and discuss the fundamental principles which are the basis of modern medical ethics: autonomy, beneficence, non-malfeasance, justice. **PR1B2.** Discuss the ethical principles underlying informed consent.	**PR2B1.** Discuss underlying ethical principles and recommended action for patients with ethical issues impacting care decisions. **PR2B2.** Apply ethical principle to case studies.	**PR3B1.** Describe the process for obtaining a DNR order and how to access the state advance directives database **PR3B2.** Identify when consultation with ethics committees or with colleagues is advised. **PR3B3.** Discuss the procedures for obtaining an informed consent from a patient.	**PR4B1.** Identify resources within the hospital, as well as, medical and legal communities to assist practitioners in resolving complex ethical dilemmas. **PR4B2.** Apply fundamental ethical principles to case management of critically ill and emergent patients. **PR4B3.** Discuss when voluntary treatment options should consider or initiated.
C. Recognize and discuss the implications of conflicts of	**PR1C2.** Describe potential conflicts of interest in the	**PR2C1.** Discuss potential conflicts of interest	**PR3C1.** Identify potential conflicts of interest in	**PR4C1.** Describe the mechanism for reporting a

interest inherent in various financial and organizational arrangements for the practice of medicine and in medical education and research.	instructor-student, advisor-student relationship. **PR1C3.** Discuss the JCESOM conflict of interest and disclosure policy.	experienced by providers and payers arising from the reimbursement for medical care.	medical practice.	potential conflict of interest or potential conflict of interest in a research program or clinical setting.
D. Protect patient privacy and confidentiality.	**PR1D1.** Outline confidentiality provisions and describe how these apply to doctor-patient interactions.	**PR2D1.** Identify potential breaches to patient privacy and describe strategies to mitigate these risks.	**PR3D1.** Identify clinical situations where truth-telling and confidentiality may conflict and discuss appropriate strategies to deal with these situations.	**PR4D1.** Describe how patient health information may be appropriately used within the research setting.
E. Demonstrate personal accountability and admit professional mistakes openly and honestly with one's colleagues and instructors and critically evaluate these mistakes to promote professional development.	**PR1E1.** Outline methods of addressing mistakes (e.g. hospital, legal, government). **PR1E2.** Discuss appropriate responses to professional mistakes. **PR1E3.** Discuss the essential elements of the risk management process as it applies to patient care.	**PR2E1.** Discuss medical errors and their impact on patient care and outcomes	**PR3E1.** Describe the role of morbidity and mortality conferences in promoting professional development	**PR4E1.** Outline a plan to disclose a medical error with a patient or family.
F. Recognize unprofessional behaviors in one's self as well as in peers and other health professionals with whom one interacts and address these in a constructive manner.	**PR1F1.** List the professionalism competencies at JCESOM. **PR1F2.** Outline expectations related to medical student behavior in medical school, including social media. **PR1F3.** List possible consequences of unprofessional behavior in medical school. **PR1F4.** Reflect on ways to	**PR2F1.** Provide constructive feedback to peers and professors in small setting and evaluations.	**PR3F1.** Describe the possible consequences of improper professional behavior by residents, and by practicing physicians in the academic and private practice setting	**PR4F1.** List the formal mechanisms through which unprofessional behavior is addressed at the institutional, state and national level.

	prevent occurrences of unprofessional behavior in one ’s self. **PR1F5.** List institutional resources available to students with concerns re: professional behavior amongst peers, supervisors, etc.			
G. Maintain personal health and well-being and achieve a balance between priorities of patient care and personal and professional development.	**PR1G1.** List personal priorities and values and reflect on the interaction between these values and medical school. **PR1G2.** Reflect on work-life balance in first year and develop a study/work plan for second year. **PR1G3.** Identify warning signs of imbalance, e.g., depression, substance misuse and resources for addressing issues associated with imbalance.	**PR2G1.** Discuss challenges to the development of an appropriate work-life balance.	**PR3G1.** Reflect on work-life situations in which patient needs take priority to personal needs. **PR3G2.** Recognize situations in which patient needs take priority to personal needs.	**PR4G1.** Discuss strategies for balancing patient care responsibilities with personal and professional development. **PR4G2.** Recognize the importance of developing a study/work plan for PGY1 year.
H. Provide culturally sensitive care to patients of diverse cultures and belief systems.	**PR1H1.** Identify the core elements of cultural sensitivity and describe its relevance to the delivery of high quality medical care. **PR1H2.** Recognize the impact of patients’ life experiences, family, community, and ethnic background on health and response to illness.	**PR2H1.** Incorporate the core elements of cultural sensitivity into interactions with patients while obtaining histories and performing physical examinations. **PR2H2.** Discuss the role of life experiences, culture and belief systems on patient choice of diagnostic and therapeutic alternatives.	**PR3H1.** Demonstrate cultural and gender sensitivity skills in interactions with patients, families, peers, and colleagues. **PR3H2.** Identify the impact of culture and belief systems on patient and family decision making in the patient care setting.	**PR4H1.** Incorporate knowledge of patients’ life experiences, family, community and ethnic background to provide culturally sensitive care to patients of diverse cultures and belief systems.

	PR1H3. Demonstrate respect and understanding for diversity in gender, sexual identity, culture, ethnicity, socioeconomic status, and rural settings among peers and patients. **PR1H4.** Discuss the importance of diversity in gender, sexual identity, culture and ethnicity among peers and patients and how this diversity shapes interactions with peers and with patients.	**PR2H3.** Identify the clinically important contextual issues related to family, social class, ethnicity, gender and sexual identity.		
I. Develop empathetic, caring relationships with patients.	**PR1I1.** Identify behaviors that communicate empathy and caring to patients and ones that do not. **PR1I2.** Demonstrate the use of affective components of empathic care, including self-disclosure, expressions of emotion, and answering 'what would you do?' in clinical setting.	**PR2I1.** Reflect on personal patient encounters and identify opportunities to enhance patient interactions.	**PR3I1.** Demonstrate empathic caring relationships with patients in difficult clinical situations (e.g. end-of-life). **PR3I2.** Reflect on difficult patient encounters and identify opportunities to enhance patient interactions. **PR3I3.** Demonstrate empathy and caring in all patient encounters.	**PR4I1.** Demonstrate empathic caring relationships with patients in area(s) of specialty/disciplinary interest.
J. Identify gaps in medical knowledge, clinical skills (including communication skills), and professionalism, and develop a strategy for self-improvement.	**PR1J1.** Recognize that professionalism entails a process of continuous self-assessment and improvement.	**PR2J1.** Develop a list of profession-related strengths and weaknesses and identify strategies for self-improvement. **PR2J2.** Identify development gaps in knowledge, skills, and professionalism and	**PR3J1.** Enumerate learning objectives and personal development strategies that address areas of weakness. **PR3J2.** Develop a 4th year schedule that enhances personal and professional development	**PR4J1.** Develop a plan for continued self-improvement of knowledge, skills, and professionalism during PGY1 year.

		formulate strategies to address these gaps.		
K. Actively seek and respond to feedback about professional performance.	**PR1K1.** Define feedback and list formative sources of feedback received during the academic year. **PR1K2.** List and describe proper methods to request and process feedback. **PR1K3.** Provide appropriate feedback to fellow medical students and faculty.	**PR2K1.** Actively request feedback from patients in simulated setting. **PR2K2.** Set goals for clinical rotations and seek out feedback regarding self-identified goals.	**PR3K1.** Reflect on feedback received from faculty and others in clinical settings. **PR3K2.** Actively request and respond to feedback from other members of the health care team.	**PR4K1.** Demonstrate insight as to profession-related strengths and weaknesses based on feedback from peers, colleagues, and faculty and develop a plan for personal and professional development based on this feedback. **PR4K2.** Provide appropriate feedback to other members of the health care team.

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Systems-based Practice (SB)				
Students must demonstrate an awareness of and responsiveness to the larger context and systems of health care and the ability to call on system resources to provide care that is of optimal value, specifically:				
Enabling Competency	**Milestones students should achieve**			
	Year 1	**Year 2**	**Year 3**	**Year 4**
A. Use electronic and other information tools (e.g. including electronic health records and computer order entry) for systems-based patient care.	**SB1A1.** Compose a patient care note in an electronic record. **SB1A2.** Access external software applications for use with patient care.	**SB2A1.** Describe HIPAA and security implications of electronic health information. **SB2A2.** Describe the basic elements of An EHR and CPOE.	**SB3A1.** Use an electronic health record (EHR), computerized patient medical record (CPOE), and picture archiving and communication systems (PACS), in the care of assigned patients.	**SB4A1.** Use electronic health information to identify possible enhancements in patient care systems. **SB4A2.** Use an electronic patient registry.
B. Identify necessary elements for coordinated care of patients with complex and chronic diseases.	**SB1B1.** Discuss the rules and regulations impacting the coordination of care for patients.	**SB2B1.** Discuss the role of primary and specialty physicians in the coordinated care of patients with a chronic illness. **SB2B2.** Identify major community and online resources available to patients with chronic disease and their families.	**SB3B1.** Use algorithms in the care of core patient types. **SB3B2.** Arrange for a patient referral and follow up with a primary care team. **SB3B3.** Develop a case management plan for a patient. **SB3B4.** Attend multidisciplinary conference such as tumor board. **SB3B5.** Discuss the role of community-based resources in the coordinated care of patients with chronic illness. **SB3B6.** Describe the important elements of the	**SB4B1.** Incorporate community and online resources into care of patients with complex and chronic diseases. Identify which resources are optimal for individual patients. **SB4B2.** Discuss when it is appropriate for a patient to move between levels of care including discharge. **SB4B3.** Describe the important elements of patient hand-off/care transitions. **SB4B4.** Identify the impact of financial policies (of health systems; of insurance companies) on health and

			referral process.	health acre of individual patient seen in clinical rotations.
C.Advocate for enhanced access to health care for members of underserved populations.	**SB1C1.** Describe venues (institutional, state, nation) within which physicians can advocate for improved access to care.	**SB2C1.** List systems-based factors that limit patient access to health care. **SB2C2.** Describe programs designed to assist indigent and underserved patients.	**SB3C1.** Actively assist in arranging for appropriate community resources for a patient who is being discharged, or who has access challenges.	**SB4C1.** Describe alternative hospital/physician payment policies including charity care and discuss the impact of these policies on patient access to care.
D. Describe the principles underlying the delivery of high quality patient care and effective patient systems.	**SB1D1.** Describe the major principles underlying high quality patient care.	**SB2D1.** Describe the basic elements of highly functioning health delivery systems.	**SB3D1.** Discuss the application of high quality patient care principles to the care of individual patients and examples where these principles were not followed and the ensuing impact on patient care.	**SB4D1.** Identify specific opportunities for enhancement of patient care delivery systems across different levels of care.
E.Outline the roles of the various members of the healthcare team and describe how these roles can be integrated for optimal patient care.	**SB1E1.** Discuss the role and responsibilities of health care team members in the care of patients.	**SB2E1.** Recognize barriers to effective health care team function and how to overcome these barriers to provide optimal patient care. **SB2E2.** Describe how health care team members are effectively integrated to optimize patient care in the hospital and clinic setting.	**SB3E1.** Develop patient care plans integrating the roles of health acre team members in the hospital and clinic setting. **SB3E2.** Describe how health care team members are effectively integrate dot optimize patient care across different levels of care.	**SB4E1.** Develop patient care plans integrating the roles of health care team members across different levels of care.