

The Curricular Milestones (CMs)

Based on Competency 1: Patient Care (PC)

Taking a History

PC-A1: 6 months

Acquire accurate and relevant history from the patient in an efficiently customized, prioritized, and hypothesis driven fashion

PC-A2: 9 months

Seek and obtain appropriate, verified, and prioritized data from secondary sources (e.g. family, records, pharmacy)

PC-A3: 18 months

Obtain relevant historical subtleties that inform and prioritize both differential diagnoses and diagnostic plans, including sensitive, complicated, and detailed information that may not often be volunteered by the patient

PC-A4: 30 months

Role model gathering subtle and reliable information from the patient for junior members of the healthcare team

Performing a Physical Exam

PC-B1: 6 months

Perform an accurate physical examination that is appropriately targeted to the patient's complaints and medical conditions. Identify pertinent abnormalities using common maneuvers.

PC-B2: 12 months

Accurately track important changes in the physical examination over time in the outpatient and inpatient settings

PC-B3: 24 months

Demonstrate and teach how to elicit important physical findings for junior members of the healthcare team

PC-B4: 30 months

Routinely identify subtle or unusual physical findings that may influence clinical decision making, using advanced maneuvers where applicable

Clinical Reasoning

PC-C1: 12 months

Synthesize all available data, including interview, physical examination, and preliminary laboratory data, to define each patient's central clinical problem

PC-C2: 12 months

Develop prioritized differential diagnoses, evidence-based diagnostic and therapeutic plan for common inpatient and ambulatory conditions

PC-C3: 24 months

Modify differential diagnosis and care plan base on clinical course and data as appropriate

PC-C4: 36 months

Recognize disease presentations that deviate from common patterns and that require complex decision making

Invasive Procedures

PC-D1: 18 months

Appropriately perform invasive procedures and provide post-procedure management for common procedures

Diagnostic Tests

PC-E1: 12 months

Make appropriate clinical decisions based on the results of common diagnostic testing, including but not limited to routine blood chemistries, hematologic

studies, coagulations tests, arterial blood gases, ECG, chest radiographs, pulmonary function tests, urinalysis and other body fluids

PC-E2: 18 months

Make appropriate clinical decisions based upon the results of more advanced diagnostic tests

Patient Management

PC-F1: 6 months

Recognize situations with a need for a need for urgent or emergent medical care, including life-threatening conditions

PC-F2: 6 months

Recognize when to seek additional guidance

PC-F3:

Provide appropriate preventive care and teach patient regarding self-care

PC-F4: 6 months

With minimal supervision, manage patients with common clinical disorders seen in the practice of inpatient and ambulatory general internal medicine

PC-F5: 12 months

With supervision, manage patients with common and complex clinical disorders seen in the practice of inpatient and ambulatory general internal medicine

PC-F6: 12 months

Initiate management and stabilize patients with emergent medical conditions

PC-F7: 36 months

Manage patients with conditions that require intensive care

PC-F8: 36 months

Independently manage patient with a broad spectrum of clinical disorders seen in the practice of general internal medicine

PC-F9: 36 months

Manage complex or rare medical conditions

PC-F10: 36 months

Customize care in the context of the patient's preferences and overall health

Consultative Care

PC-G1: 24 months

Provide specific, responsive consultation to other services

PC-G2: 36 months

Provide internal medicine consultation for patients with more complex clinical problems require detailed risk assessment