



**Internal Medicine Promotion Criteria Policy**  
**Addendum to the MHG Promotion, Non-renewal, and**  
**Dismissal Policy 500.05**  
**Effective July 2024**

Promotion to each subsequent year of training requires demonstrating competence that meets expectations on the specific learning objectives of the evaluations across all clinical rotations during that year of training. Failing to meet this standard will be reviewed by the internal medicine clinical competency committee which may elect to withhold promotion and initiate a remediation plan or promote with an accompanying remediation plan. See GME 500.05 Promotion, Non-Renewal, and Dismissal Policy for details.

**PGY-1 Promotion to PGY-2**

Acquire accurate and relevant history from the patient in an efficiently customized, prioritized, and hypothesis driven fashion (6 months)

Recognize situations with a need for urgent or emergent medical care including life threatening conditions (6 months)

Recognize when to seek additional guidance (6 months)

Synthesize all available data, including interview, physical examination, and preliminary laboratory data, to define each patient's central clinical problem (12 months)

Develop prioritized differential diagnoses, evidence based diagnostic and therapeutic plan for common inpatient conditions (12 months)

Manage patients with minimal supervision that have common clinical disorders seen in the practice of inpatient IM (12 months)

Initiate management/stabilize patients with emergent medical conditions (12 months)

Demonstrate sufficient knowledge to diagnose and treat common conditions in the outpatient setting or that require hospitalization (12 months)

Describe and comprehend the indications, contraindications, risks, and benefits of common IM procedures (12 months)

Interpret the results of common IM procedures and apply the results to the management of their patient (12 months)

Identify learning needs (clinical questions) as they emerge in patient care activities (12 months)

Demonstrate how to access medical information resources to answer clinical questions and library resources to support decision making (12 months)

Respond welcomingly and productively to feedback from all members of the health care team including faculty, peer residents, students, nurses, allied health workers, patients and their advocates (12 months)

Construct legible, accurate, complete, and timely written communication that is congruent with medical standards (6 months)

Deliver appropriate, succinct, hypothesis-driven oral presentations (6 months)

Request consultative services in an effective manner (6 months)

Demonstrate you can effectively communicate plan of care to members of the health care team (6 months)

Demonstrate you can effectively communicate with other caregivers in order to maintain appropriate continuity during transitions of care (12 months)

Demonstrate you can use verbal and non-verbal skills to create rapport with patients/families (12 months)

Demonstrate you can communicate the role of consultant to the patient, in support of the primary care relationship (12 months)

Accept personal errors and honestly acknowledge them (1 month)

Dress and behave appropriately (1 month)

Ensure prompt completion of clinical, administrative and curricular tasks (1 month)

Recognize the scope of his/her abilities and ask for supervision and assistance appropriately (6 months)

Demonstrate understanding of the roles of various health care providers, including, but not limited to, consultants, therapists, nurses, home care workers, pharmacists, and social workers (6 months)

Identify, reflect upon, and learn from critical incidents such as near misses and preventable medical errors (6 months)

Reflect awareness of common socio-economic barriers that impact patient care (12 months)

In addition, there are a variety of individual educational requirements that must be successfully completed as listed below.

- USMLE Step 3/COMLEX Level 3: Take by 15 March
- USMLE Step 3/COMLEX Level 3: Pass by 30 June of PGY1 level year
- EBM: 1 during ID rotation
- JC: Monthly except July, Aug and June
- Continuity clinic practice project (Dec and June)
- Hopkins modules as assigned
- AMA modules as assigned
- Back to basics presentation 1 per full ward month (5 total)

## **PGY-2 Promotion to PGY-3**

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 (18 months)

Appropriately provide post-procedure management for common procedures (18 months)

Demonstrate and teach how to elicit important physical findings for junior members of the healthcare team (24 months)

Modify Diff Dx/care plan based upon clinical course and data with near independence (24 months)

Demonstrate sufficient knowledge to diagnose and treat undifferentiated and emergent conditions (18 months)

Demonstrate sufficient knowledge to identify and treat medical conditions that require intensive care (24 months)

Classify and precisely articulate clinical questions (24 months)

Customize clinical evidence for an individual patient (24 months)

Reflect on feedback in developing plans for improvement (24 months)

Engage patients/advocates in shared decision making for uncomplicated diagnostic and therapeutic scenarios (24 months)

Ensure succinct, relevant, and patient-specific written communication (24 months)

Provide support (physical, psychological, social and spiritual) for dying patients and their families (24 months)

Provide leadership for a team that respects patient dignity and autonomy (24 months)

Manage and coordinate care and care transitions across multiple delivery systems, including ambulatory, subacute, acute, rehabilitation, and skilled nursing (18 months)

Identify risk with other health care members for the prevention of medical error (24 months)

In addition, there are a variety of individual educational requirements that must be successfully completed as listed below.

- Clinical Pathology Conference: Endocrinology rotation
- QIP project/presentation: Start on first elective→presentation on last elective
- Continuity clinic practice project (Dec and June)
- AMA modules as assigned
- Hopkins modules as assigned

## **PGY-3 Graduation**

Manage patients with conditions that require intensive care (36 months)

Independently manage patients with a broad spectrum of clinical disorders seen in the practice of general internal medicine (36 months)

Manage complex or rare medical conditions (36 months)

Customize care in the context of the patient's preferences/overall health (36 months)

Demonstrate sufficient knowledge to evaluate complex or rare medical conditions and multiple coexistent conditions (36 months)

Independently integrate clinical evidence and patient preferences into decision-making (36 months)

Engage patients/advocates in shared decision making for difficult, ambiguous or controversial scenarios. (36 months)

Demonstrate effective communication skills in challenging situations (36 months)

Effectively advocate for individual patient needs (30 months)

Embrace physicians' role in assisting the public and policy makers in understanding and addressing causes of disparity in disease and suffering (36 months)

Demonstrate how to manage the team by utilizing the skills and coordinating the activities of interprofessional team members (36 months)

Negotiate patient-centered care among multiple care providers (36 months)

In addition, there are a variety of individual educational requirements that must be successfully completed as listed below.

- IM Boards: Register for IM Boards typically no later than 15 April
- Patient Safety and Quality Improvement Conference: Rheumatology rotation
- Grand Rounds: Last elective
- Continuity clinic practice project (Dec and June)

- AMA modules as assigned
- Hopkins modules as assigned

## **Scholarly Activity**

Poster/podium presentation at ACP or approved reasonable alternative, publish case presentation/original research, or write research protocol at least once during residency

Resident Name: \_\_\_\_\_

Resident Signature: \_\_\_\_\_

Date: \_\_\_\_\_