



Subject Name

Status
 Employer
 Program
 Rotation
 Evaluation Dates

Evaluated by:

Evaluator Name

Status
 Employer
 Program

INPATIENT MEDICINE EVALUATION

Instructions:

- Mark the level which best describes the resident's ability for each component of clinical competency observed.
- In-between levels indicated the resident has consistently demonstrated competency of the lower level and has started to progress to the next higher level.

1* Patient Care 1: History

Level 1	Level 2	Level 3	Level 4	Level 5
Elicits and reports a comprehensive history for common patient presentations, with guidance.	Elicits and concisely reports a hypothesis-driven patient history for common patient presentations.	Elicits and concisely reports a hypothesis-driven patient history for complex patient presentations	Efficiently elicits and concisely reports a patient history, incorporating pertinent psychosocial and other determinants of health	Efficiently and effectively tailors the history taking, including relevant historical subtleties, based on patient, family, and system needs
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

2* Patient Care 1: History 2

Level 1	Level 2	Level 3	Level 4	Level 5
Seeks data from secondary sources, with guidance.	Independently obtains data from secondary sources.	Reconciles current data with secondary sources.	Uses history and secondary data to guide the need for further diagnostic testing	Models and teaches the effective use of history and physical examination skills to minimize the need for further diagnostic testing.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

3 Patient Care 2: Physical Examination

Level 1	Level 2	Level 3	Level 4	Level 5
Performs a general physical examination while attending to patient comfort and safety	Performs a hypothesis-driven physical examination for a common patient presentation	Performs a hypothesis-driven physical examination for a complex patient presentation	Uses advanced maneuvers to elicit subtle findings	Models effective evidence-based physical examination technique
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

Comment

4* Patient Care 2: Physical Examination 2

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies common abnormal findings	Interprets common abnormal findings	Identifies and interprets uncommon and complex abnormal findings	Integrates subtle physical examination findings to guide diagnosis and management	Teaches the predictive values of the examination findings to guide diagnosis and management
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

5* Patient Care 3: Clinical Reasoning

Level 1	Level 2	Level 3	Level 4	Level 5
Organizes and accurately summarizes information obtained from the patient evaluation to develop a clinical impression	Integrates information from all sources to develop a basic differential diagnosis for common patient presentations	Develops a thorough and prioritized differential diagnosis for common patient presentations	Develops prioritized differential diagnoses in complex patient presentations and incorporates subtle, unusual, or conflicting findings	Coaches others to develop prioritized differential diagnoses in complex patient presentations
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

6* Patient Care 3: Clinical Reasoning 2

Level 1	Level 2	Level 3	Level 4	Level 5
No level 1 for this sub competency	Identifies clinical reasoning errors within patient care, with guidance	Retrospectively applies clinical reasoning principles to identify errors	Continually re-appraises one's own clinical reasoning to improve patient care in real time	Models how to recognize errors and reflect upon one's own clinical reasoning
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Not yet assessable

7* Patient Care 4: Patient Management - Inpatient

Level 1	Level 2	Level 3	Level 4	Level 5
Formulates management plans for common conditions, with guidance	Develops and implements management plans for common conditions, recognizing acuity, and modifies based on the clinical course	Develops and implements value-based (high value) management plans for patients with multisystem disease and comorbid conditions; modifies based on the clinical course	Uses shared decision making to develop and implement value-based (high value) comprehensive management plans for patients with comorbid and multisystem disease, including those patients requiring critical care	Develops and implements comprehensive management plans for patients with rare or ambiguous presentations or unusual comorbid conditions
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

8* Patient Care 4: Patient Management - Inpatient 2

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies opportunities to maintain and promote health	Develops and implements management plans to maintain and promote health, with guidance	Independently develops and implements plans to maintain and promote health, incorporating pertinent psychosocial and other determinants of health	Independently develops and implements comprehensive plans to maintain and promote health, incorporating pertinent psychosocial and other determinants of health	No level 5 for this sub competency
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

9* Patient Care 6: Digital Health

Level 1	Level 2	Level 3	Level 4	Level 5
Uses electronic health record (EHR) for routine patient care activities	Expands use of EHR to include and reconcile secondary data sources in patient care activities	Effectively uses EHR capabilities in managing acute and chronic care of patients	Uses EHR to facilitate achievement of quality targets for patient panels	Leads improvements to the EHR
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

10* Medical Knowledge 1: Applied Foundational Sciences

Level 1	Level 2	Level 3	Level 4	Level 5
Explains the scientific knowledge (e.g., physiology, social sciences, mechanism of disease) for normal function and common medical conditions	Explains the scientific knowledge for complex medical conditions	Integrates scientific knowledge to address comorbid conditions within the context of multisystem disease	Integrates scientific knowledge to address uncommon, atypical, or complex comorbid conditions within the context of multisystem disease	Demonstrates a nuanced understanding of the scientific knowledge related to uncommon, atypical, or complex conditions
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

11* Medical Knowledge 2: Therapeutic Knowledge

Level 1	Level 2	Level 3	Level 4	Level 5
Explains the scientific basis for common therapies	Explains the indications, contraindications, risks, and benefits of common therapies	Integrates knowledge of therapeutic options in patients with comorbid conditions, multisystem disease, or uncertain diagnosis	Integrates knowledge of therapeutic options within the clinical and psychosocial context of the patient to formulate treatment options	Demonstrates a nuanced understanding of emerging, atypical, or complex therapeutic options
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

12* Medical Knowledge 3: Knowledge of Diagnostic Testing

Level 1	Level 2	Level 3	Level 4	Level 5
Explains the rationale, risks, and benefits for common diagnostic testing	Explains the rationale, risks, and benefits for complex diagnostic testing	Integrates value and test characteristics of various diagnostic strategies in patients with common diseases	Integrates value and test characteristics of various diagnostic strategies in patients with comorbid conditions or multisystem disease	Demonstrates a nuanced understanding of emerging diagnostic tests and procedures
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

13* Medical Knowledge 3: Knowledge of Diagnostic Testing 2

Level 1	Level 2	Level 3	Level 4	Level 5
Interprets results of common diagnostic tests	Interprets complex diagnostic data	Integrates complex diagnostic data accurately to reach high-probability diagnoses	Anticipates and accounts for limitations when interpreting diagnostic data	No level 5 for this sub competency
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

14* Systems-Based Practice 1: Patient Safety and Quality Improvement

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of how to report patient safety events	Reports patient safety events through institutional reporting systems (actual or simulated)	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)	Models the disclosure of patient safety events
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

15* Systems-Based Practice 2 - System Navigation for Patient-Centered Care

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of care coordination	Coordinates care of patients by effectively engaging interprofessional teams in routine clinical situations	Coordinates care of patients by effectively engaging interprofessional teams in complex clinical situations	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
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Not yet assessable

16* Systems-Based Practice 2 System Navigation for Patient-Centered Care - 2

Level 1	Level 2	Level 3	Level 4	Level 5
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	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
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

17* 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	Delivers care with consideration of each patient's payment model	Engages with patients in shared decision making, informed by each patient's payment models	Advocates for patient care needs with consideration of the limitations of each patient's payment model	Actively engaged in influencing health policy through advocacy activities at the local, regional, or national level
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

18* 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, categorize, and analyze clinical evidence, with guidance	Articulates clinical questions and elicits patient preferences and values to guide evidence-based care	Critically appraises and applies the best available evidence, integrated with patient preference, to the care of complex patients	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 to patient care
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

19* 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 performance data (feedback and other input) to inform goals	Seeks performance data episodically, with adaptability, and humility	Seeks performance data consistently with adaptability, and humility	Models consistently seeking performance data with adaptability and humility
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

20* Professionalism 1: Professional Behavior

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates professional behavior in routine situations. Respond appropriately to calls and pages. Dress and behave appropriately Maintain patient confidentiality. Demonstrate empathy and compassion to all patients	Identifies potential triggers for professionalism lapses and accepts responsibility for one's own professionalism lapses	Demonstrates a pattern of professional behavior in complex or stressful situations. Provide support (physical, psychological, social and spiritual) for dying patients and their families. Effectively advocate for individual patient needs	Serve as a professional role model for more junior members of the team. Recognizes situations that may trigger professionalism lapses and intervenes to prevent lapses in oneself and others	Coaches others when their behavior fails to meet professional expectations
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

21* Professionalism 2: Ethical Principles

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of basic ethical principles	Applies basic principles to address straightforward ethical situations	Analyzes complex situations using ethical principles and identifies the need to seek help in addressing complex ethical situations	Analyzes complex situations and engages with appropriate resources for managing and addressing ethical dilemmas as needed	Identifies and seeks to address system-level factors that induce or exacerbate ethical problems or impede their resolution
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

22* Professionalism 3: Accountability / Conscientiousness

Level 1	Level 2	Level 3	Level 4	Level 5
Performs administrative tasks and patient care responsibilities, with prompting	Performs administrative tasks and patient care responsibilities in a timely manner in routine situations	Performs administrative tasks and patient care responsibilities in a timely manner in complex or stressful situations	Proactively implements strategies to ensure that the needs of patients, teams, and systems are met	Creates strategies to enhance other's ability to efficiently complete administrative tasks and patient care responsibilities
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

23* 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 and maintains a therapeutic relationship using effective communication behaviors in straightforward encounters.	Establishes and maintains a therapeutic relationship using effective communication behaviors in challenging patient encounters.	Establishes and maintains therapeutic relationships using shared decision making, regardless of complexity.	Coaches others in developing and maintaining therapeutic relationships and mitigating communication barriers.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

24* Interpersonal and Communication Skills 1: Patient and Family-Centered Communication 2

Level 1	Level 2	Level 3	Level 4	Level 5
No level 1 for this sub competency	Identifies common barriers to effective communication.	Identifies complex barriers to effective communication, including personal bias.	Mitigates communication barriers.	Models the mitigation of communication barriers.
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

25* Interpersonal and Communication Skills 2: Interprofessional and Team Communication

Level 1	Level 2	Level 3	Level 4	Level 5
Respectfully requests and responds to a consultation	Clearly and concisely requests and responds to a consultation	Checks own and others' understanding of recommendations when providing or receiving consultation	Coordinates recommendations from different consultants to optimize patient care	Facilitates conflict resolution between and amongst consultants when disagreement exists
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

26* Interpersonal and Communication Skills 2: Interprofessional and Team Communication 2

Level 1	Level 2	Level 3	Level 4	Level 5
Uses verbal and non-verbal communication that values all members of the interprofessional team	Communicates information, including basic feedback with all interprofessional team members	Facilitates interprofessional team communication to reconcile conflict and provides difficult feedback	Adapts communication style to fit interprofessional team needs and maximizes impact of feedback to the team	Models flexible communication strategies that facilitate excellence in interprofessional teamwork
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Not yet assessable

27* Interpersonal and Communication Skills 3: Communication within Health Care Systems

Level 1	Level 2	Level 3	Level 4	Level 5
Accurately documents comprehensive and current information	Documents clinical encounter, including reasoning, through organized notes	Documents clinical encounter through concise and thorough notes	Documents clinical encounter clearly, concisely, timely, and in an organized form, including anticipatory guidance	Guides departmental or institutional communication policies and procedures
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Could not assess

28* Create a discharge summary that accurately and concisely communicates key elements from the hospital stay and those items requiring follow-up after discharge.

The resident is trusted to participate in this activity

With direct supervision only	With indirect supervision but direct supervision immediately available	With indirect supervision, but direct supervision is out of the hospital	Independently	As an instructor of junior colleagues	Did not observe
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

29* Provide a concise oral presentation and be able to identify and know when to seek assistance in situations that are complex, uncertain, or ambiguous

The resident is trusted to participate in this activity

With direct supervision only	With indirect supervision but direct supervision immediately available	With indirect supervision, but direct supervision is out of the hospital	Independently	As an instructor of junior colleagues	Did not observe
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

30* Function successfully in a true multidisciplinary care environment. Demonstrate effective interactions and utilization of the multidisciplinary care team to include nurse practitioners, critical care nurses, respiratory therapists, pharmacists, nutritionists, physical therapists, technicians and case managers

The resident is trusted to participate in this activity

With direct supervision only	With indirect supervision but direct supervision immediately available	With indirect supervision, but direct supervision is out of the hospital	Independently	As an instructor of junior colleagues	Did not observe
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

31* Provide general internal medicine consultation to non-medical specialties

The resident is trusted to participate in this activity

With direct supervision only	With indirect supervision but direct supervision immediately available	With indirect supervision, but direct supervision is out of the hospital	Independently	As an instructor of junior colleagues	Did not observe
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

32* Recognize, evaluate, provide initiate stabilization, and manage a patient with sepsis.

The resident is trusted to participate in this activity

With direct supervision only	With indirect supervision but direct supervision immediately available	With indirect supervision, but direct supervision is out of the hospital	Independently	As an instructor of junior colleagues	Did not observe
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

33* Recognize, evaluate, and devise an initial manage plan for a patient with undifferentiated chest pain

The resident is trusted to participate in this activity

With direct supervision only	With indirect supervision but direct supervision immediately available	With indirect supervision, but direct supervision is out of the hospital	Independently	As an instructor of junior colleagues	Did not observe
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

34* Recognize, evaluate, and devise an initial manage plan for a patient with undifferentiated dyspnea.

The resident is trusted to participate in this activity

With direct supervision only	With indirect supervision but direct supervision immediately available	With indirect supervision, but direct supervision is out of the hospital	Independently	As an instructor of junior colleagues	Did not observe
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

35* Recognize, evaluate, and devise an initial manage plan for a patient with undifferentiated altered mental status

The resident is trusted to participate in this activity

With direct supervision only	With indirect supervision but direct supervision immediately available	With indirect supervision, but direct supervision is out of the hospital	Independently	As an instructor of junior colleagues	Did not observe
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

36* Recognize, evaluate, and manage acute kidney injury to include appropriate timing for nephrology referral.

The resident is trusted to participate in this activity

With direct supervision only	With indirect supervision but direct supervision immediately available	With indirect supervision, but direct supervision is out of the hospital	Independently	As an instructor of junior colleagues	Did not observe
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

37* Recognize when an inpatient needs more urgent care and initiate initial management strategies when appropriate.

The resident is trusted to participate in this activity

With direct supervision only	With indirect supervision but direct supervision immediately available	With indirect supervision, but direct supervision is out of the hospital	Independently	As an instructor of junior colleagues	Did not observe
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Overall Comment