

CSEF Milestones – Emergency Medicine Clerkship

This document illustrates the progression from 3rd to 4th year and the performance expectations of a 3rd year versus a 4th year student.

Oral Presentations

Target Behaviors for 3 rd Year	Target Behaviors for 4 th Year/ Reach Behaviors for 3 rd Year	Reach Behaviors for a 4 th Year
<ul style="list-style-type: none"><input type="checkbox"/> Delivers an accurate, clear, and well-organized EM-style presentation in under 3 minutes that includes pertinent information from other sections of the history (past medical/surgical history, social history, family history, etc.) for most patients<input type="checkbox"/> Presents pertinent positive and negative findings in a manner that enables listener to recognize/prioritize the differential diagnosis<input type="checkbox"/> Presents a summary statement (0-2 sentences) that includes the patient's chief concern, abbreviated HPI, followed by a leading diagnosis and a prioritized differential diagnosis including "can't miss" diagnoses with justifications of why/why not	<ul style="list-style-type: none"><input type="checkbox"/> Delivers presentations that are accurate, clear, well organized, focused, and concise for all patients<input type="checkbox"/> Integrates/synthesizes new patient information in real time into presentation<input type="checkbox"/> Proactively seeks to involve patient and family when presenting in front of the patient<input type="checkbox"/> Able to tailor length and complexity of presentation to situation and receiver of information<input type="checkbox"/> Presents clinical reasoning effectively, including a concise, well-organized synthesis statement with a leading diagnosis, a prioritized differential diagnosis with justification, and a clear management plan for common and less common conditions<input type="checkbox"/> Where relevant, able to provide structured sign-out to next provider shift using IPASS format.	<ul style="list-style-type: none"><input type="checkbox"/> Can effectively involve patient and family when presenting in front of the patient<input type="checkbox"/> Tailors length and complexity of presentation to situation and receiver of information with minimal advance warning

Documentation

Target Behaviors for 3 rd Year	Target Behaviors for 4 th Year/ Reach Behaviors for 3 rd Year	Reach Behaviors for a 4 th Year
<ul style="list-style-type: none"> • Attempts to document diagnostic reasoning, medical decision making, and management plan for common ED chief concerns • Attempts to document a brief synthesis statement with a leading diagnosis and a prioritized differential diagnosis, justifying why/why not with positive and negative findings 	<ul style="list-style-type: none"> • Documents pertinent positive and negative findings in a manner that enables reader to recognize/prioritize the differential diagnosis and rule in/out diseases • Documents diagnostic reasoning clearly, including a synthesis statement with a leading diagnosis and a prioritized differential diagnosis, justifying it with relevant epidemiology (e.g., prevalence), positive and negative findings, and pathophysiology • Creates a problem list that is appropriately prioritized and complete for major and minor biopsychosocial problems • Provides an appropriate rationale for the management plan for common conditions, citing relevant guidelines and evidence where applicable • Includes discharge criteria/follow up plan as part of documentation 	<ul style="list-style-type: none"> • Provides an appropriate rationale for the management plan for common and less common conditions, citing relevant guidelines and evidence, where applicable • Proactively updates discharge documentation (when relevant) in real time to facilitate transfer of care and handoffs • Updates electronic handover tool with clear, relevant, and succinct documentation, when applicable • Sometimes documents patient's values and goals of care which may include advanced care planning

Data Synthesis/Diagnostic Skills

Target Behaviors for 3 rd Year	Target Behaviors for 4 th Year/ Reach Behaviors for 3 rd Year	Reach Behaviors for a 4 th Year
<ul style="list-style-type: none"> <input type="checkbox"/> Reliably synthesizes data from multiple sources (patient, medical records, nursing, family, etc.) into a complete differential, prioritizing “can’t miss” diagnoses <input type="checkbox"/> Recognizes and attempts to interpret abnormal vital signs and trends, seeks help when appropriate <input type="checkbox"/> Identifies and attempts to prioritize patients' major biopsychosocial problems and concerns <input type="checkbox"/> Occasionally makes the correct diagnosis for typical presentations of common ED chief concerns 	<ul style="list-style-type: none"> <input type="checkbox"/> Identifies “sick” vs. “not sick” patients correctly <input type="checkbox"/> Prioritizes differential diagnosis accurately for common and uncommon clinical problems specific to the patient including “can’t miss” diagnoses <input type="checkbox"/> Justifies differential diagnosis logically for less common clinical presentations by using disease prevalence, pathophysiology, and pertinent positive and negative clinical findings <input type="checkbox"/> Makes the correct diagnosis for typical presentations of common diseases and occasionally makes the correct diagnosis for atypical presentation of common diseases or typical presentations of uncommon diseases 	<ul style="list-style-type: none"> <input type="checkbox"/> Often identifies “sick” vs. “not sick” patients correctly for common and uncommon presentations <input type="checkbox"/> Filters, prioritizes, and synthesizes the history to develop a differential diagnosis in real time for complicated or atypical presentations <input type="checkbox"/> Identifies one’s own clinical reasoning errors within the diagnostic process, with guidance <input type="checkbox"/> Makes the correct diagnosis for typical presentations of common diseases and often makes the correct diagnosis for atypical presentation of common diseases or typical presentations of uncommon diseases

Management Planning

Target Behaviors for 3 rd Year	Target Behaviors for 4 th Year/ Reach Behaviors for 3 rd Year	Reach Behaviors for a 4 th Year
<ul style="list-style-type: none"> <input type="checkbox"/> Suggests a work-up and management plan for basic EM chief concerns including chest pain, shortness of breath, abdominal pain, headache, minor trauma, etc. <input type="checkbox"/> Attempts to suggest appropriate management suggestions for less common EM chief concerns <input type="checkbox"/> Re-evaluates patients and follows-up results in a timely manner, integrates data into ongoing management plan 	<ul style="list-style-type: none"> <input type="checkbox"/> Provides appropriate management suggestions for common and less common conditions <input type="checkbox"/> Provides an appropriate rationale for the management of common and less common conditions <input type="checkbox"/> Provides specific, accurate suggestions and changes to plan, based on patient specific factors, acuity, current response to treatment and new data <input type="checkbox"/> Incorporates best available evidence-based data into management planning using point of care resources <input type="checkbox"/> Integrates/synthesizes new clinical data effectively in real time to modify diagnostic plans when appropriate <input type="checkbox"/> Begins to incorporate contingency planning into management plans <input type="checkbox"/> Defines discharge criteria/follow up plan for patients starting at admission and as part of daily management plan <input type="checkbox"/> Integrates/synthesizes new clinical data effectively in real time to modify diagnostic plans when appropriate <input type="checkbox"/> Begins to incorporate contingency planning into management plans <input type="checkbox"/> Defines discharge criteria/follow up plan for patients starting at admission and as part of daily management plan 	<ul style="list-style-type: none"> <input type="checkbox"/> Develops and implements an initial management plan for patients with urgent or emergent conditions, when applicable <input type="checkbox"/> Consistently incorporates contingency planning into management plans <input type="checkbox"/> Able to modify management plans in real time with minimal guidance based on new information or a change in status <input type="checkbox"/> Accurately defines discharge criteria/follow up plan for all patients <input type="checkbox"/> Share best available evidence-based data/guidelines with their supervisor, peer, and/or team

Teamwork & Professionalism

Target Behaviors for 3 rd Year	Target Behaviors for 4 th Year/ Reach Behaviors for 3 rd Year	Reach Behaviors for a 4 th Year
<ul style="list-style-type: none"> <input type="checkbox"/> Shows respect towards peers, supervisors and clinical staff through appropriate verbal and nonverbal communication <input type="checkbox"/> Integrates effectively into team activities by recognizing distinct roles, responsibilities, and contributions of interprofessional team members' and demonstrates understanding and limitations of their role and where they can proactively participate in meeting needs of team <input type="checkbox"/> Communicates with the interprofessional team, keeping members informed and up-to-date while maintaining clear and effective communication channels. <input type="checkbox"/> Demonstrates trustworthiness and reliability including consistent punctuality, preparation, and commitment to assigned tasks, while maintaining confidentiality and ethical standards <input type="checkbox"/> Identifies opportunities for growth in one's performance through self-reflection, being receptive to feedback and actively using it to improve behavior and performance 	<ul style="list-style-type: none"> <input type="checkbox"/> Shows respect towards peers, supervisors and clinical staff through appropriate verbal and nonverbal communication <input type="checkbox"/> Actively integrates into the team by anticipating workflow and positively contributing to the team's efficiency <input type="checkbox"/> Proactively communicates with interprofessional team members (e.g., Consults, referrals, PT, social work, VNA) to improve patient care <input type="checkbox"/> Able to articulate an appropriate consult question prior to initiating a consult <input type="checkbox"/> Incorporates recommendations from interprofessional team members into the care plan <input type="checkbox"/> Demonstrates trustworthiness and reliability, appreciates the professional role and gravity of being the "doctor" by being fully engaged in patient care activities, while maintaining confidentiality and ethical standards <input type="checkbox"/> Displays self-awareness of knowledge, skills, and limitations by engaging in appropriate help-seeking behaviors, and soliciting input from supervisors 	<ul style="list-style-type: none"> <input type="checkbox"/> Actively integrates into the team by anticipating workflow and positively contributing to the team's efficiency by mentoring students <input type="checkbox"/> Leads coordination of care of patients in complex clinical situations, effectively utilizing the roles of interprofessional teams <input type="checkbox"/> Anticipates consultative needs and incorporates recommendations <input type="checkbox"/> Proactively develops strategies and plans to address limitations of knowledge, skills, and emotions whether self-identified or highlighted through feedback from others <input type="checkbox"/> Demonstrates flexibility and maturity in adjusting to change and constructive feedback <input type="checkbox"/> Displays self-awareness of knowledge, skills, and limitations by engaging in appropriate help-seeking behaviors, and soliciting input from supervisors in an efficient and timely way

Patient Centered Communication & Humanistic Care

Target Behaviors for 3 rd Year	Target Behaviors for 4 th Year/ Reach Behaviors for 3 rd Year	Reach Behaviors for a 4 th Year
<ul style="list-style-type: none"> <input type="checkbox"/> Provides accurate information to the patient <input type="checkbox"/> Emphasizes key points of diagnosis and/or plan <input type="checkbox"/> Encourages patient questions/perspectives/concerns <input type="checkbox"/> Uses appropriate language based on patient's health literacy <input type="checkbox"/> Avoids medical jargon for most patients <input type="checkbox"/> Engages appropriately with interpreters when interpreters are needed <input type="checkbox"/> Ensures that patient/family understands explanations/counseling using verbal and non-verbal techniques (reflective statements, summary statements, open body language, nodding, eye contact, etc.) <input type="checkbox"/> Demonstrates humanism, empathy, compassion and cultural humility by acknowledging patients' emotional needs and responding with appropriate validation and support 	<ul style="list-style-type: none"> <input type="checkbox"/> Communicates about diagnostic testing and how results will influence diagnosis, further evaluation, and future plans of care <input type="checkbox"/> Addresses patient questions while communicating plan <input type="checkbox"/> Communicates appropriately about discharge readiness in discussions with patient/family <input type="checkbox"/> Demonstrates ability to navigate difficult patient conversations and encourage behavioral change <input type="checkbox"/> Identifies appropriate opportunities for basic patient counseling, motivational interviewing, teach-back and provides patient centered education/resources when applicable <input type="checkbox"/> Demonstrates cultural humility through active learning, seeking patient perspectives on their experiences with the healthcare system and adjusting approach accordingly. 	<ul style="list-style-type: none"> • Identifies and attempts to mitigate barriers to effective communication • Attempts to lead challenging conversations, i.e. family meetings, delivering bad news, and discussing goals of care with patients and families when applicable • Engages in shared decision-making with consideration of patient values and psychosocial determinants • Consistently demonstrates cultural humility and mentors students in developing these skills