CSEF Milestones – Surgery Clerkship

This document illustrates the progression from 3^{rd} to 4^{th} year and the performance expectations of a 3^{rd} year versus a 4^{th} 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
 Delivers presentations that are accurate, clear, well organized, focused, and concise for most patients Accurately reports patient data (history, exam, tests) Engages audience with excellent public speaking skills Presents pertinent positive and negative findings Presents clinical reasoning, including a synthesis statement (i.e., "one-liner") with a leading diagnosis, a prioritized differential diagnosis with justification, and a management plan for common conditions 	Delivers presentations that are accurate, clear, well organized, focused, and concise for all patients Integrates/synthesizes new patient information in real time into presentation Proactively seeks to involve patient and family when presenting in front of the patient Able to tailor length and complexity of presentation to situation and receiver of information 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 Where relevant, able to provide structured sign-out to next provider shift using IPASS format.	Can effectively involve patient and family when presenting in front of the patient at the bedside Tailors length and complexity of presentation to situation and receiver of information with minimal advance warning at the bedside

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
 Writes notes that are complete, accurate, and well-organized Documents diagnostic reasoning, including a synthesis statement (i.e., "one-liner") with a leading diagnosis and a prioritized differential diagnosis, with positive and negative findings Provides an appropriate rationale for the management plan for common conditions 	 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 	 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 a 4 th Year
☐ Identifies and attempts to prioritize patients' major biopsychosocial problems and concerns, in the synthesis statement	Target Behaviors for 4 th Year/ Reach Behaviors for 3 rd Year ☐ Prioritizes differential diagnosis accurately for common and uncommon clinical problems	□ Often identifies "sick" vs. "not sick" patients correctly for common and uncommon presentations
(i.e., "one-liner") Prioritizes differential diagnosis accurately for majority of common clinical problems specific to the patient with pertinent positive and negative clinical findings Occasionally makes the correct diagnosis for typical presentations of common diseases	specific to the patient including "can't miss" diagnoses Justifies differential diagnosis logically for less common clinical presentations by using disease prevalence, pathophysiology, and pertinent positive and negative clinical findings 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	Filters, prioritizes, and synthesizes the history to develop a differential diagnosis in real time for complicated or atypical presentations Identifies one's own clinical reasoning errors within the diagnostic process, with guidance 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
 Provides appropriate management suggestions for most common conditions Attempts to provide appropriate management suggestions for less common conditions 	 □ Provides appropriate management suggestions for common and less common conditions □ Provides an appropriate rationale for the management of common and less common conditions □ Provides specific, accurate suggestions and changes to plan, based on patient specific factors, acuity, current response to treatment and new data. □ Incorporates best available evidence-based data into management planning using point of care resources □ Integrates/synthesizes new clinical data effectively in real time to modify diagnostic plans when appropriate □ Begins to incorporate contingency planning into management plans □ Defines discharge criteria/follow up plan for patients starting at admission and as part of daily management plan 	 Develops and implements an initial management plan for patients with urgent or emergent conditions, when applicable Consistently incorporates contingency planning into management plans Able to modify management plans in real time with minimal guidance based on new information or a change in status Accurately defines discharge criteria/follow up plan for all patients Share best available evidence-based data/guidelines with their supervisor, peer, and/or team

Teamwork & Professionalism

supervisors and clinical staff through appropriate verbal and nonverbal communication Integrates effectively into team activities by recognizing distinct roles, responsibilities, and contributions of interprofessional team members' and demonstrates understanding and limitations of supervisors and clinical staff through appropriate verbal and nonverbal communication Actively integrates into the team by anticipating appropriate verbal and nonverbal communication Actively integrates into the team by anticipating positively contributions team's efficiency patients in com situations, effer roles of interprofessional team members (e.g., Consults, referrals, PT, social Anticipates cordinates or appropriate verbal and nonverbal communication Team's efficiency patients in com situations, effer roles of interprofessional team members	grates into the team ng workflow and entributing to the ency by mentoring
Communicates with the interprofessional team, keeping members informed and up-to-date while maintaining clear and effective communication channels. □ Demonstrates trustworthiness and reliability including consistent punctuality, preparation, and commitment to assigned tasks, while maintaining confidentiality and ethical standards □ Incorporates recommendations from interprofessional team members into the care plan □ 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 □ Identifies opportunities for growth in □ Displays self-awareness of □ Incorporates recommendations from interprofessional team members into the care plan □ 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 □ Displays self-awareness of seeking behaviors.	ffectively utilizing the professional teams consultative needs rates ations develops strategies address limitations of skills, and emotions ficientified or chrough feedback from the feedback f

Patient Centered Communication & Humanistic Care

Target Behaviors for 3 rd Year	Target Behaviors for 4 th Year/	Reach Behaviors for a 4 th Year
	Reach Behaviors for 3 rd Year	
Provides accurate information to the patient Emphasizes key points of diagnosis and/orplan Encourages patient questions/perspectives/concerns Uses appropriate language based on patient's health literacy Avoids medical jargon for most patients Engages appropriately with interpreters when interpreters are needed Ensures that patient/family understands explanations/counseling using verbal and non-verbal techniques (reflective statements, summary statements, open body language, nodding, eye contact, etc Demonstrates humanism, empathy, compassion and cultural humility by acknowledging patients' emotional needs and responding with appropriate validation and support	Communicates about diagnostic testing and how results will influence diagnosis, further evaluation, and future plans of care Addresses patient questions while communicating plan Communicates appropriately about discharge readiness in discussions with patient/family Demonstrates ability to navigate difficult patient conversations and encourage behavioral change Identifies appropriate opportunities for basic patient counseling, motivational interviewing, teach-back and	 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

Surgical/Procedural Skills