This document presents the program’s overall learning objectives for each level of training in each of the six ACGME Core Competencies: patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice. These learning objectives are collected for the convenience of our residents and faculty, allowing rapid review of expectations for each training level.

Second-year residents (PGY-2) are expected to achieve all objective listed for first-year residents (PGY-1) in addition to those listed for the second year.

Third-year residents (PGY-3) are expected to achieve all objectives listed for first-year (PGY-1) and second-year residents (PGY-2) in addition to those listed for the third year.

Please note that stated objectives should never limit our achievement expectations. Residents of all training years should strive to continuously improve their competency in the diverse skills of consummate internists. These collected objectives simply guide faculty and resident progress expectations.
I. Patient Care

A. Obtain a medical history

1. PGY-1 residents will:
   a) acquire accurate and relevant history from the patient in an efficiently customized, prioritized, and hypothesis driven fashion; and
   b) seek and obtain appropriate, verified, and prioritized data from secondary sources (e.g. family, records, pharmacy).

2. PGY-2 residents will:
   a) 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.

3. PGY-3 residents will:
   a) role model gathering subtle and reliable information from the patient for junior members of the healthcare team.

B. Perform a physical examination

1. PGY-1 residents will:
   a) perform an accurate physical examination that is appropriately targeted to the patient's complaints and medical conditions. Identify pertinent abnormalities using common maneuvers; and
   b) accurately track important changes in the physical examination over time in the outpatient and inpatient settings.

2. PGY-2 residents will:
   a) demonstrate and teach how to elicit important physical findings for junior members of the healthcare team.

3. PGY-3 residents will:
   a) routinely identify subtle or unusual physical findings that may influence clinical decision making, using advanced maneuvers where applicable.

C. Clinical Reasoning

1. PGY-1 residents will:
   a) synthesize all available data, including interview, physical examination, and preliminary laboratory data, to define each patient’s central clinical problem;
   b) develop prioritized differential diagnoses, evidence-based diagnostic and therapeutic plan for common inpatient and ambulatory conditions; and
   c) formulate a comprehensive problem list for each patient.

2. PGY-2 residents will:
   a) modify problem formulation, differential diagnosis, and care plan based upon the evolution of clinical data over time;
3. PGY-3 residents will:
   a) recognize disease presentations that deviate from common patterns and that require complex decision making.

D. Perform invasive procedures
1. PGY-3 residents will:
   a) appropriately perform invasive procedures required by the ABIM and provide post-procedure management.

E. Select and interpret diagnostic tests
1. PGY-1 residents will:
   a) make appropriate clinical decisions based upon the results of common diagnostic testing, including but not limited to routine blood chemistries, hematologic studies, coagulation tests, arterial blood gases, electrocardiograms, chest radiographs, pulmonary function tests, and urinalysis.

2. PGY-2 residents will:
   a) make appropriate clinical decision based upon the results of more advanced diagnostic tests.

3. PGY-3 residents will:
   a) consider the costs, risks, and benefits when recommending diagnostic tests.

F. Patient management
1. PGY-1 residents will:
   a) recognize situations with a need for urgent or emergent medical care including life threatening conditions;
   b) recognize when to seek additional guidance; and
   c) with supervision, manage patients with common clinical disorders seen in the practice of inpatient internal medicine.

2. PGY-2 residents will:
   a) provide appropriate care for health maintenance and disease prevention;
   b) with supervision, manage patients with common clinical disorders seen in the practice of ambulatory general internal medicine; and
   c) with minimal supervision, manage patients with common and complex clinical disorders seen in the practice of inpatient and ambulatory general internal medicine.

3. PGY-3 residents will:
   a) initiate management and stabilize patients with emergent medical conditions;
   b) manage patients with conditions that require intensive care;
c) independently manage patients with a broad spectrum of clinical disorders seen in the practice of general internal medicine, including gender-specific diseases;

d) coordinate the care of patients with complex or rare medical conditions; and

e) customize care in the context of the patient’s preferences and overall health.

G. Consultative care

1. PGY-2 residents will:
   a) provide specific, responsive consultation to other services.

2. PGY-3 residents will:
   a) provide internal medicine consultation for patients with more complex clinical problems requiring detailed risk assessment.
II. Medical Knowledge

A. Knowledge of core content

1. PGY-1 residents will:
   a) understand the relevant pathophysiology and basic science for common medical conditions; and
   b) demonstrate sufficient knowledge to diagnose and treat common conditions that require hospitalization.

2. PGY-2 residents will:
   a) demonstrate sufficient knowledge to evaluate common ambulatory conditions;
   b) demonstrate sufficient knowledge to diagnose and treat undifferentiated and emergent conditions;
   c) demonstrate sufficient knowledge to provide health maintenance and preventive care; and
   d) demonstrate sufficient knowledge to identify and treat common medical conditions that require intensive care.

3. PGY-3 residents will:
   a) demonstrate sufficient knowledge to evaluate and coordinate the care of complex medical conditions and multiple coexistent conditions at the level of a board-certified internist; and
   b) demonstrate sufficient knowledge of socio-behavioral sciences including but not limited to health care economics, medical ethics, and medical education.

B. Knowledge about diagnostic tests

1. PGY-1 residents will:
   a) Understand indications for and basic interpretation of common diagnostic testing, including but not limited to routine blood chemistries, hematologic studies, coagulation tests, arterial blood gases, ECG, chest radiographs, pulmonary function tests, urinalysis and other body fluids.

2. PGY-2 residents will:
   a) understand indications for and has basic skills in interpreting more advanced diagnostic tests; and
   b) understand prior probability and test performance characteristics.
III. Practice-Based Learning and Improvement

A. Improve the quality of care of a panel of patients
   1. PGY-1 residents will:
      a) appreciate the responsibility to assess and improve care collectively for a panel of patients;
      b) perform or review audit of a panel of patients using standardized, disease-specific, and evidence-based criteria;
      c) reflect on audit compared with local or national benchmarks and explore possible explanations for deficiencies, including doctor-related, system-related, and patient related factors; and
      d) identify areas in resident’s own practice and local system that can be changed to improve affect of the processes and outcomes of care.
   2. PGY-3 residents will:
      a) engage in a quality improvement intervention.

B. Ask answerable questions for emerging information needs
   1. PGY-1 residents will:
      a) identify learning needs (clinical questions) as they emerge in patient care activities.
   2. PGY-2 residents will:
      a) classify and precisely articulate clinical questions; and
      b) develop a system to track, pursue, and reflect on clinical questions.

C. Acquire the best evidence
   1. PGY-1 residents will:
      a) access medical information resources to answer clinical questions and library resources to support decision making.
   2. PGY-2 residents will:
      a) effectively and efficiently search NLM database for original clinical research articles; and
      b) effectively and efficiently search evidence-based summary medical information resources.
   3. PGY-3 residents will:
      a) appraise the quality of medical information resources and select among them based on the characteristics of the clinical question.

D. Appraise the evidence
   1. PGY-1 residents will:
      a) with assistance, appraise the validity, importance, and applicability of clinical research papers.
2. PGY-2 residents will:
   a) with assistance, appraise clinical guideline recommendations for bias.

E. Apply the evidence to decision-making for individual patients
1. PGY-1 residents will:
   a) determine if clinical evidence can be generalized to an individual patient.

2. PGY-3 residents will:
   a) customize clinical evidence for an individual patient;
   b) communicate risks and benefits of alternatives to patients; and
   c) integrate clinical evidence, clinical context, and patient preferences into decision making.

F. Improve via feedback
1. PGY-1 residents will:
   a) 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; and
   b) actively seek feedback from all members of the health care team.

2. PGY-2 residents will:
   a) reflect on feedback in developing plans for improvement.

3. PGY-3 residents will:
   a) calibrate self-assessment with feedback and other external data.

G. Improve via self-assessment
1. PGY-2 residents will:
   a) maintain awareness of the situation in the moment, and respond to meet situational needs.

2. PGY-3 residents will:
   a) reflect (in action) when surprised, applies new insights to future clinical scenarios, and reflect (on action) back on the process.

H. Participate in the education of all members of the healthcare team
1. PGY-1 residents will:
   a) actively participate in teaching conferences.

2. PGY-2 residents will:
   a) integrate teaching, feedback, and evaluation with supervision of interns’ and students’ patient care.

3. PGY-3 residents will:
   a) take a leadership role in the education of all members of the health care team.
IV. Interpersonal and Communication Skills

A. Communicate effectively with patients
   1. PGY-1 residents will:
      a) engage patients/advocates in shared decision-making for uncomplicated diagnostic and therapeutic scenarios;
      b) utilize patient-centered education strategies; and
      c) engage patients/advocates in shared decision-making for difficult, ambiguous or controversial scenarios.
   2. PGY-2 residents will:
      a) appropriately counsel patients about the risks and benefits of tests and procedures highlighting cost awareness and resource allocation.
   3. PGY-3 residents will:
      a) role-model effective communication skills in challenging situations.

B. Intercultural sensitivity
   1. PGY-1 residents will:
      a) effectively use an interpreter to engage patients in the clinical setting including patient education; and
      b) demonstrate sensitivity to differences in patients including but not limited to race, culture, gender, sexual orientation, socioeconomic status, literacy, and religious beliefs.
   2. PGY-3 residents will:
      a) actively seek to understand patient differences and views and reflects this in respectful communication and shared decision-making with the patient and the healthcare team.

C. Transitions of care
   1. PGY-1 residents will:
      a) effectively communicate with other caregivers in order to maintain appropriate continuity during transitions of care.
   2. PGY-2 residents will:
      a) role-model and teach effective communication with next caregivers during transition of care.

D. Interprofessional team
   1. PGY-1 residents will:
      a) deliver appropriate, succinct, hypothesis-driven oral presentations; and
      b) effectively communicate plan of care to all members of the healthcare team.
   2. PGY-2 residents will:
a) engage in collaborative communication with all members of the health care team.

E. Consultation

1. PGY-1 residents will:
   a) request consultative services in an effective manner.

2. PGY-2 residents will:
   a) clearly communicate the role of consultant to the patient, in support of the primary care relationship.

3. PGY-3 residents will:
   a) communicate consultative recommendations to the referring team in an effective manner.

F. Health records

1. PGY-1 residents will:
   a) provide legible, accurate, complete, and timely written communication that is congruent with medical standards.

2. PGY-2 residents will:
   a) ensure succinct, relevant, and patient-specific written communication.
V. Professionalism

A. Adhere to basic ethical principles
   1. PGY-1 residents will:
      a) document and report clinical information truthfully;
      b) follow formal policies; and
      c) accept personal errors and acknowledge them.
   2. PGY-3 residents will:
      a) uphold ethical expectations of research and scholarly activity.

B. Demonstrate compassion and respect
   1. PGY-1 residents will:
      a) demonstrate empathy and compassion to all;
      b) demonstrate a commitment to relieve suffering; and
      c) provide support (physical, psychological, social and spiritual) for dying patients and their families.
   2. PGY-3 residents will:
      a) provide leadership for a team that respects patient dignity and autonomy.

C. Provide timely and constructive feedback
   1. PGY-1 residents will:
      a) communicate constructive feedback to other members of the health care team.
   2. PGY-2 residents will:
      a) recognize, respond to and report impairment in colleagues or substandard care.

D. Maintain accessibility
   1. PGY-1 residents will:
      a) respond promptly and appropriately to clinical responsibilities including calls and pages; and
      b) carry out timely interactions with colleagues, patients and their designated caregivers.

E. Recognize conflicts of interest
   1. PGY-1 residents will:
      a) recognize and manage obvious conflicts of interest, such as caring for family members and professional associates as patients.
   2. PGY-3 residents will:
      a) maintain ethical relationships with industry; and
      b) recognize and manage subtler conflicts of interest.
F. Practice individual patient advocacy
   1. PGY-1 residents will:
      a) recognize when it is necessary to advocate for individual patient needs.
   2. PGY-3 residents will:
      a) effectively advocate for individual patient needs.

G. Comply with public health policies
   1. PGY-2 residents will:
      a) recognize and take responsibility for situations where public health supersedes individual health (e.g. reportable infectious diseases).

H. Demonstrate personal accountability
   1. PGY-1 residents will:
      a) dress and behave appropriately;
      b) maintain appropriate professional relationships with patients, families and staff;
      c) ensure prompt completion of clinical, administrative, and curricular tasks;
      d) recognize the scope of his/her abilities and ask for supervision and assistance appropriately; and
      e) recognize and address personal, psychological, and physical limitations that may affect professional performance.
   2. PGY-2 residents will:
      a) recognize the need to assist colleagues in the provision of duties.
   3. PGY-3 residents will:
      a) serve as a professional role model for more junior colleagues (e.g., medical students, interns).

I. Respect the dignity, culture, beliefs, values, and opinions of the patient
   1. PGY-1 residents will:
      a) treat patients with dignity, civility and respect, regardless of race, culture, gender, ethnicity, age or socioeconomic status.
   2. PGY-3 residents will:
      a) recognize and manage conflict when patient values differ from their own.

J. Respect patient confidentiality
   1. PGY-1 residents will:
      a) maintain patient confidentiality.
   2. PGY-2 residents will:
      a) educate and hold others accountable for patient confidentiality.

K. Recognize and address disparities in healthcare
1. PGY-1 residents will:
   a) recognize that disparities exist in health care among populations and that they may impact care of the patient.

2. PGY-3 residents will:
   a) embrace physicians’ role in assisting the public and policy makers in understanding and addressing causes of disparity in disease and suffering; and
   b) advocates for appropriate allocation of limited health care resources.
VI. Systems-Based Practice

A. Works effectively within multiple healthcare settings
   1. PGY-1 residents will:
      a) understand unique roles and services provided by local healthcare delivery systems.
   2. PGY-2 residents will:
      a) manage and coordinate care and care transitions across multiple healthcare settings, including ambulatory, subacute, acute, rehabilitation, and skilled nursing.
   3. PGY-3 residents will:
      a) negotiate patient-centered care among multiple care providers.

B. Works effectively within a team
   1. PGY-1 residents will:
      a) appreciate roles of a variety of health care providers, including, but not limited to, consultants, therapists, nurses, home care workers, pharmacists, and social workers;
      b) work effectively as a member within the interprofessional team to ensure safe patient care; and
      c) consider alternative solutions provided by other teammates.
   2. PGY-3 residents will:
      a) demonstrate how to manage the team by utilizing the skills and coordinating the activities of interprofessional team members.

C. Effectively contributes to system improvement
   1. PGY-1 residents will:
      a) recognize system issues that increase the risk for error including barriers to optimal patient care.
   2. PGY-2 residents will:
      a) identify, reflect upon, and learn from critical incidents such as near misses and preventable medical errors; and
      b) dialogue with care team members to identify risk for and prevention of medical error.
   3. PGY-3 residents will:
      a) understand mechanisms for analysis and correction of systems errors;
      b) demonstrate ability to understand and engage in a system level quality improvement intervention; and
      c) partner with other healthcare professionals to identify, propose improvement opportunities within the system.
D. Identifies forces that impact the cost of healthcare and advocates for cost-effective care

1. PGY-1 residents will:
   a) reflect awareness of common socio-economic barriers that impact patient care.

2. PGY-2 residents will:
   a) understand how cost-benefit analysis is applied to patient care (i.e., via principles of screening tests and the development of clinical guidelines).

3. PGY-3 residents will:
   a) identify the role of various health care stakeholders including providers, suppliers, financiers, purchasers and consumers and their varied impact on the cost of and access to health care; and
   b) understand coding and reimbursement principles.

E. Practices cost-effective care

1. PGY-1 residents will
   a) minimize unnecessary care including tests, procedures, therapies and ambulatory or hospital encounters.

2. PGY-2 residents will:
   a) identify costs for common diagnostic or therapeutic tests; and
   b) demonstrate the incorporation of cost-awareness principles into standard clinical judgments and decision-making.

3. PGY-3 residents will:
   a) demonstrate the incorporation of cost-awareness principles into complex clinical scenarios.