Neurology Milestones

ACGME International, Inc. (ACGME-I)

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Neurology Milestones

The Milestones are designed only for use in evaluation of residents and fellows in the context of their participation in ACGME-I-accredited residency and fellowship programs. The Milestones provide a framework for the assessment of the development of the resident or fellow in key dimensions of the elements of physician competence in a specialty or subspecialty. They neither represent the entirety of the dimensions of the six domains of physician competence, nor are they designed to be relevant in any other context.

Understanding Milestone Levels and Reporting

This document presents the Milestones, which programs use in a semi-annual review of resident or fellow performance, and then report to the ACGME-I. Milestones are knowledge, skills, attitudes, and other attributes for each of the ACGME-I Competencies organized in a developmental framework. The narrative descriptions are targets for resident/fellow performance throughout the educational program.

Milestones are arranged into levels. Tracking from Level 1 to Level 5 is synonymous with moving from novice to expert resident or fellow in the specialty or subspecialty. For each reporting period, the Clinical Competency Committee will review the completed evaluations to select the milestone levels that best describe each learner's current performance, abilities, and attributes for each subcompetency.

These levels *do not* correspond with post-graduate year of education. Depending on previous experience, more junior residents/fellows may achieve higher levels early in their educational program just as more senior residents/fellows may be at a lower level later in their educational program. There is no predetermined timing for a resident or fellow to attain any particular level. Residents and fellows may also regress in achievement of their milestones. This may happen for many reasons, such as over-scoring in a previous review, a disjointed experience in a particular procedure, or a significant act by the resident/fellow.

Selection of a level implies the resident/fellow substantially demonstrates the milestones in that level, as well as those in lower levels (see the diagram on page v).

Additional Notes

Level 4 is designed as a graduation *goal* but *does not* represent a graduation *requirement*. Making decisions about readiness for graduation and unsupervised practice is the purview of the program director. Furthermore, Milestones 2.0 include revisions and changes that preclude using the Milestones as a sole assessment in high-stakes decisions. Level 5 is designed to represent an expert resident or fellow whose achievements in a subcompetency are greater than the expectation. Milestones are primarily designed for formative, developmental purposes to support continuous quality improvement for individual learners, education programs, and the specialty. ACGME-I and its partners will continue to evaluate and perform research on the Milestones to assess their impact and value.

Examples are provided for some milestones within this document. Note: The examples are not the required element or outcome; they are provided as a way to share the intent of the element.

Some milestone descriptions include statements about performing independently. These activities must occur in conformance with ACGME-I supervision guidelines as described in the applicable Program Requirements, as well as with institutional and program policies. For example, a resident who performs a procedure independently must, at a minimum, be supervised through oversight.

A Supplemental Guide is also available to provide more context regarding the intent of each subcompetency, as well as examples for each level, assessment methods or tools, and other resources. The Supplemental Guide, like examples contained within the Milestones, is designed only to assist the program director and Clinical Competency Committee; it is not meant to demonstrate any required element or outcome.

The diagram below presents an example set of milestones for one subcompetency in the same format as the ACGME-I Report Worksheet. For each reporting period, a resident's/fellow's performance on the milestones within each subcompetency will be indicated by selecting the Milestones Level that best describes that individual's performance in relation to those milestones.

Systems-Based Practice 1: Patient Safety and Quality Improvement

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of common patient safety events	Identifies system factors that lead to patient safety events	Participates in analysis of patient safety events (simulated or actual)	Conducts analysis of patient safety events and offers error prevention strategies (simulated or actual)	Actively engages teams and processes to modify systems to prevent patient safety events
Demonstrates knowledge of how to report patient safety events	Reports patient safety events through institutional reporting systems (simulated or actual)	Participates in disclosure of patient safety events to patients and their families (simulated or actual)	Discloses patient safety events to patients and their families (simulated or actual)	Role models or mentors others in the disclosure of patient safety events
Demonstrates knowledge of basic quality improvement methodologies and metrics	Describes local quality improvement initiatives (e.g., community vaccination rate, infection rate, smoking cessation)	Participates in local quality improvement initiatives	Demonstrates the skills required to identify, develop, implement, and analyze a quality improvement project	Creates, implements, and assesses quality improvement initiatives at the institutional or community level

Comments:

Not Yet Completed Level 1 ☐

Selecting a response box in the middle of a level implies that milestones in that level and in lower levels have been substantially demonstrated.

Selecting a response box on the line in between levels indicates that milestones in lower levels have been substantially demonstrated as well as **some** milestones in the higher level(s).

Patient Care 1: History				
Level 1	Level 2	Level 3	Level 4	Level 5
Obtains a basic neurologic history	Obtains a complete and relevant neurologic history	Obtains an organized neurologic history, including collateral information as appropriate	Efficiently obtains an organized, hypothesis-driven neurologic history	Serves as a role model in obtaining a hypothesis-driven neurologic history
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Comments:

Not Yet Completed Level 1   ☐

Not Yet Assessable   ☐

Patient Care 2: Neurologic Exam

Level 1	Level 2	Level 3	Level 4	Level 5
Performs some components of a neurologic exam	Performs a standard neurologic exam accurately	Performs a relevant neurologic exam incorporating additional appropriate maneuvers	Performs a hypothesis-driven neurologic exam	Serves as a role model for performing a hypothesis-driven, complete, relevant, and organized neurologic exam
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Comments:

Not Yet Completed Level 1 ☐

Not Yet Assessable ☐

Patient Care 3: Formulation				
Level 1	Level 2	Level 3	Level 4	Level 5
Summarizes history and exam findings	Generates a broad differential diagnosis based on history, exam, and localization	Synthesizes relevant information to focus and prioritize diagnostic possibilities	Continuously reconsiders diagnosis in response to changes in clinical circumstances and available data	Serves as a role model for clinical reasoning by demonstrating sophisticated formulation in complex presentations
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Comments:

Not Yet Completed Level 1 ☐

Not Yet Assessable ☐

Patient Care 4: Diagnosis and Management of Neurologic Disorders in the Outpatient Setting				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies typical presentations of commonly encountered neurologic conditions	Diagnoses commonly encountered neurologic conditions	Identifies atypical presentations of commonly encountered neurologic conditions	Diagnoses uncommon neurologic conditions	Identifies atypical presentations of uncommon neurologic conditions
	Develops an initial treatment plan for commonly encountered neurologic disorders	Individualizes management and follow-up plan for commonly encountered neurologic disorders, considering risks, benefits, and non-pharmacologic strategies	Adapts management plan based upon patient response and complications of therapy; identifies when to change acuity of care	Longitudinally manages uncommon neurologic conditions

Comments:

Not Yet Completed Level 1 ☐

Not Yet Assessable ☐

Patient Care 5: Diagnosis and Management of Neurologic Disorders in the Inpatient Setting

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies typical presentations of commonly encountered neurologic conditions	Diagnoses commonly encountered neurologic conditions	Identifies atypical presentations of commonly encountered neurologic conditions	Diagnoses uncommon neurologic conditions	Identifies atypical presentations of uncommon neurologic conditions
	Develops an initial treatment plan for commonly encountered neurologic disorders	Individualizes management plan, ensuring the appropriate level of care throughout hospitalization and upon discharge	Adapts management plan based upon treatment response, disease progression, and complications of therapy	Leads the management of patients with complex and uncommon neurologic conditions

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Comments:

Not Yet Completed Level 1 ☐
Not Yet Assessable ☐

Patient Care 6: Diagnosis and Management of Neurologic Emergencies

Level 1	Level 2	Level 3	Level 4	Level 5
Describes the typical presentation of neurologic emergencies	Recognizes when a patient's presentation is a neurologic emergency	Diagnoses neurologic emergencies, using appropriate diagnostic testing	Re-appraises diagnostic considerations based on treatment response, disease progression, and complications of therapy	Serves as a role model for management of neurologic emergencies
Seeks assistance and conveys pertinent details during a neurologic emergency	Initiates management for a neurologic emergency	Manages patients with common neurologic emergencies	Manages complex neurologic emergencies	

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Comments:

Not Yet Completed Level 1   ☐

Not Yet Assessable   ☐

Patient Care 7: Determination of Death by Neurologic Criteria				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of medical and legal significance of death by neurologic criteria	Lists the components for determining death by neurologic criteria	Describes supplemental testing used to determine death by neurologic criteria	Accurately performs determination of death by neurologic criteria	Educates others in the determination of death by neurologic criteria, including appropriate use of supplemental testing, as well as controversies

Comments:

Not Yet Completed Level 1 ☐

Not Yet Assessable ☐

Patient Care 8: Interpretation of Neuroimaging

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies basic neuroanatomy on brain and vascular anatomy of the head and neck magnetic resonance (MR) and computed tomography (CT)	Identifies major abnormalities of the brain and cerebrovascular system on MR and CT	Interprets typical abnormalities of the brain and cerebrovascular system on MR and CT	Interprets subtle abnormalities of brain and cerebrovascular system on MR and CT	Interprets advanced neuroimaging
	Identifies basic anatomy of the spine and spinal cord on MR and CT	Identifies abnormalities of the spine and spinal cord on MR and CT	Interprets MR and CT of the spine	

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Comments:	
	Not Yet Completed Level 1 ☐
	Not Yet Assessable ☐

Patient Care 9: Electroencephalogram (EEG)				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies patients for whom EEG is appropriate	Recognizes normal EEG features, including common artifacts, in children and adults	Recognizes patterns of status epilepticus, normal EEG variants, and common abnormalities in children and adults	Interprets common EEG abnormalities and patterns that could represent status epilepticus	Interprets uncommon EEG abnormalities and creates a report
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Comments:

Not Yet Completed Level 1 ☐

Not Yet Assessable ☐

Patient Care 10: Nerve Conduction Study/Electromyogram (NCS/EMG)

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies patients for whom NCS/EMG is appropriate	Identifies NCS/EMG findings for common disorders	Correlates NCS/EMG results to patient presentation, including identification of potential study limitations	Formulates basic NCS/EMG plan and interprets data for common clinical presentations	Performs, interprets, and creates a report for NCS/EMG
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Comments:

Not Yet Completed Level 1 ☐

Not Yet Assessable ☐

Patient Care 11: Lumbar Puncture

Level 1	Level 2	Level 3	Level 4	Level 5
Lists the indications, contraindications, and complications for lumbar puncture	Performs lumbar puncture under direct supervision	Performs lumbar puncture without direct supervision and manages complications	Performs lumbar puncture on patients with challenging anatomy	Performs lumbar puncture using image guidance
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Comments:

Not Yet Completed Level 1 ☐
Not Yet Assessable ☐

Patient Care 12: Psychiatric and Functional Aspects of Neurology

Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes contributions of common psychiatric disorders and their treatment to neurologic diseases	Develops a treatment plan that considers psychiatric comorbidities and side effects of psychiatric medications	Accurately differentiates psychiatric or functional contributions to neurologic symptoms	Leads a discussion with a patient and/or caregiver that explains the psychiatric or functional contribution to the patient's neurologic symptoms	Develops a shared management plan that addresses the psychiatric or functional contribution to neurologic symptoms
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Comments:

Not Yet Completed Level 1   ☐
Not Yet Assessable   ☐

Medical Knowledge 1: Localization				
Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes the role of localization in neurologic diagnosis	Localizes lesions to general regions of the nervous system	Localizes lesions to specific regions of the nervous system	Localizes lesions to discrete structures of the nervous system	Consistently demonstrates sophisticated and detailed knowledge of neuroanatomy in localizing lesions
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Comments:			Not Yet Completed Level 1 　☐ Not Yet Assessable 　☐	

Medical Knowledge 2: Diagnostic Investigation				
Level 1	Level 2	Level 3	Level 4	Level 5
Discusses a general diagnostic approach appropriate to clinical presentation	Lists indications, contraindications, risks, and benefits of diagnostic testing	Prioritizes and interprets diagnostic tests appropriate to clinical urgency and complexity	Uses complex diagnostic approaches in uncommon situations	Demonstrates sophisticated knowledge of diagnostic testing and controversies
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Comments:

Not Yet Completed Level 1   ☐
Not Yet Assessable   ☐

Systems-Based Practice 1: Patient Safety and Quality Improvement

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of common patient safety events	Identifies system factors that lead to patient safety events	Participates in analysis of patient safety events (simulated or actual)	Conducts analysis of patient safety events and offers error prevention strategies (simulated or actual)	Actively engages teams and processes to modify systems to prevent patient safety events
Demonstrates knowledge of how to report patient safety events	Reports patient safety events through institutional reporting systems (simulated or actual)	Participates in disclosure of patient safety events to patients and their families (simulated or actual)	Discloses patient safety events to patients and their families (simulated or actual)	Role models or mentors others in the disclosure of patient safety events
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Comments:

Not Yet Completed Level 1   ☐

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 in routine clinical situations, effectively utilizing the roles of the interprofessional teams	Coordinates care of patients in complex clinical situations, effectively utilizing the roles of the interprofessional teams	Role 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
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	Role 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

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Comments:

Not Yet Completed Level 1   ☐

Systems-Based Practice 3: Physician Role in Health Care Systems

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies key components of the complex health care system (e.g., hospital, skilled nursing facility, finance, personnel, technology)	Describes how components of a complex health care system are interrelated, and how this impacts patient care	Discusses how individual practice affects the broader system (e.g., length of stay, readmission rates, clinical efficiency)	Manages various components of the complex health care system to provide efficient and effective patient care and transition of care	Advocates for or leads systems change that enhances high value, efficient, and effective patient care and transition of care
Describes the principles of cost-effective care	Delivers care with consideration of each patient's payment model	Engages with patients in shared decision making, informed by cost-effective care principles	Advocates for patient care needs (e.g., community resources, patient assistance resources) regardless of ability to pay	Participates in health policy advocacy activities

Comments:

Not Yet Completed Level 1 ☐

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 and use available evidence, and incorporate patient preferences and values in order to take care of a routine patient	Articulates clinical questions and elicits patient preferences and values in order to guide evidence-based care	Locates and applies the best available evidence, integrated with patient preference, to the care of complex patients	Critically appraises and 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 for complex patients, and/or participates in the development of guidelines
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Comments:

Not Yet Completed Level 1   ☐

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) in order to inform goals	Seeks performance data episodically, with adaptability and humility	Intentionally seeks performance data consistently, with adaptability and humility	Role models consistently seeking performance data with adaptability and humility
Identifies the factors which contribute to gap(s) between expectations and actual performance	Analyzes and reflects on the factors which contribute to gap(s) between expectations and actual performance	Analyzes, reflects on, and institutes behavioral change(s) to narrow the gap(s) between expectations and actual performance	Challenges assumptions and considers alternatives in narrowing the gap(s) between expectations and actual performance	Coaches others on reflective practice
Actively seeks opportunities to improve	Designs and implements a learning plan, with prompting	Independently creates and implements a learning plan	Uses performance data to measure the effectiveness of the learning plan and, when necessary, improves it	Facilitates the design and implementation of learning plans for others

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Comments:

Not Yet Completed Level 1　☐

Professionalism 1: Professional Behavior and Ethical Principles

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies and describes potential triggers for professionalism lapses	Demonstrates insight into professional behavior in routine situations	Demonstrates professional behavior in complex or stressful situations	Recognizes situations that may trigger professionalism lapses and intervenes to prevent lapses in self and others	Coaches others when their behavior fails to meet professional expectations
Describes when and how to appropriately report professionalism lapses, including strategies for addressing common barriers	Takes responsibility for own professionalism lapses	Recognizes need to seek help in managing and resolving complex ethical situations	Recognizes and utilizes appropriate resources for managing and resolving ethical dilemmas as needed (e.g., ethics consultations, literature review, risk management/legal consultation)	Identifies and seeks to address system-level factors that induce or exacerbate ethical problems or impede their resolution
Demonstrates knowledge of the ethical principles underlying informed consent, surrogate decision making, advance directives, confidentiality, error disclosure, stewardship of limited resources, and related topics	Analyzes straightforward situations using ethical principles	Analyzes complex situations using ethical principles		

Comments:

Not Yet Completed Level 1   ☐

Professionalism 2: Accountability/Conscientiousness				
Level 1	Level 2	Level 3	Level 4	Level 5
Takes responsibility for failure to complete tasks and responsibilities, identifies potential contributing factors, and describes strategies for ensuring timely task completion in the future	Performs tasks and responsibilities in a timely manner with appropriate attention to detail in routine situations	Performs tasks and responsibilities in a timely manner with appropriate attention to detail in complex or stressful situations	Recognizes situations that may impact others' ability to complete tasks and responsibilities in a timely manner	Takes ownership of system outcomes
Responds promptly to requests or reminders to complete tasks and responsibilities	Recognizes situations that may impact own ability to complete tasks and responsibilities in a timely manner	Proactively implements strategies to ensure that the needs of patients, teams, and systems are met		

Comments:

Not Yet Completed Level 1 ☐

Professionalism 3: Self-Awareness and Help-Seeking				
Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes status of personal and professional well-being, with assistance	Independently recognizes status of personal and professional well-being	With assistance, proposes a plan to optimize personal and professional well-being	Independently develops a plan to optimize personal and professional well-being	Coaches others when emotional responses or limitations in knowledge/ skills do not meet professional expectations
Recognizes limits in the knowledge/skills of self or team, with assistance	Independently recognizes limits in the knowledge/ skills of self or team and demonstrates appropriate help-seeking behaviors	With assistance, proposes a plan to remediate or improve limits in the knowledge/skills of self or team	Independently develops a plan to remediate or improve limits in the knowledge/skills of self or team	
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Comments:
Not Yet Completed Level 1 ☐

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 a therapeutic relationship in straightforward encounters using active listening and clear language	Establishes a therapeutic relationship in challenging patient encounters	Easily establishes therapeutic relationships, with attention to patient/ family concerns and context, regardless of complexity	Mentors others in situational awareness and critical self-reflection to consistently develop positive therapeutic relationships
Identifies common barriers to effective communication (e.g., language, disability) while accurately communicating own role within the health care system	Identifies complex barriers to effective communication (e.g., health literacy, cultural)	When prompted, reflects on personal biases while attempting to minimize communication barriers	Independently recognizes personal biases while attempting to proactively minimize communication barriers	Role models self-awareness while identifying a contextual approach to minimize communication barriers
Identifies the need to adjust communication strategies based on assessment of patient/ family expectations and understanding of their health status and treatment options	Organizes and initiates communication with patient/family by introducing stakeholders, setting the agenda, clarifying expectations, and verifying understanding of the clinical situation	With guidance, sensitively and compassionately delivers medical information, elicits patient/ family values, goals, and preferences, and acknowledges uncertainty and conflict	Independently, uses shared decision making to align patient/family values, goals, and preferences with treatment options to make a personalized care plan	Role models shared decision making in patient/family communication, including those with a high degree of uncertainty/conflict
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Comments:

Not Yet Completed Level 1   ☐

Interpersonal and Communication Skills 2: Interprofessional and Team Communication				
Level 1	Level 2	Level 3	Level 4	Level 5
Respectfully requests a consultation	Clearly and concisely requests a consultation	Checks own understanding of consultant recommendations	Coordinates recommendations from different members of the health care team to optimize patient care	Role models flexible communication strategies that value input from all health care team members, resolving conflict when needed
Respectfully receives a consultation request	Clearly and concisely responds to a consultation request	Checks understanding of recommendations when providing consultation		
Uses language that values all members of the health care team	Communicates information effectively with all health care team members	Uses active listening to adapt communication style to fit team needs		
	Solicits feedback on performance as a member of the health care team	Communicates concerns and provides feedback to peers and learners	Communicates feedback and constructive criticism to superiors	Facilitates regular health care team-based feedback in complex situations

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Comments:

Not Yet Completed Level 1   ☐

Interpersonal and Communication Skills 3: Communication within Health Care Systems				
Level 1	Level 2	Level 3	Level 4	Level 5
Accurately records information in the patient record	Demonstrates organized diagnostic and therapeutic reasoning through notes in the patient record	Concisely reports diagnostic and therapeutic reasoning in the patient record	Communicates clearly, concisely, timely, and in an organized written form, including anticipatory guidance	Models feedback to improve others' written communication
Safeguards patient personal health information	Demonstrates accurate, timely, and appropriate use of documentation shortcuts Documents required data in formats specified by institutional policy	Appropriately selects direct (e.g., telephone, in-person) and indirect (e.g., progress notes, text messages) forms of communication based on context	Achieves written or verbal communication (e.g., patient notes, email) that serves as an example for others to follow	Guides departmental or institutional communication around policies and procedures
Communicates through appropriate channels as required by institutional policy (e.g., patient safety reports, cell phone/pager usage)	Respectfully communicates concerns about the system	Uses appropriate channels to offer clear and constructive suggestions to improve the system	Initiates difficult conversations with appropriate stakeholders to improve the system	Facilitates dialogue regarding systems issues among larger community stakeholders (institution, health care system, field)
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Comments:

Not Yet Completed Level 1   ☐