Pathology - Anatomic Pathology (AP) and Clinical Pathology (CP) - Resident

	Levels of			Milestone	
Procedure	Care	Supervision	Milestone	Level	Competency
Prepares full consultative report	2	Direct/Indirect	PC1: Consultation (AP/CP)	3	PC, ICS
Answers routine pathology questions	2	Indirect	PC1: Consultation (AP/CP)	3	PC, ICS
Effectively communicates preliminary results	2	Indirect	PC1: Consultation (AP/CP)	3	PC, ICS
Provides consultation to clinicians re:					
utilization and interpreation of advanced	2	Direct/Indirect	PC1: Consultation (AP and CP)	4	PC, ICS
Accurately interprets and reports test results	2	Direct	PC2: Interpretation and Reporting (CP)	2	PC, ICS
Interfaces with clinical team to recommend test	2	Indirect	PC2: Interpretation and Reporting (CP)	4	PC, ICS
Analyzes complex cases and prepares					
comprehensive reports	2	Direct/Indirect	PC3: Interpretation and Diagnosis (AP)	4	PC, MK
Makes accurate diagnoses	2	Direct/Indirect	PC3: Interpretation and Diagnosis (AP)	4	PC, MK
Generates preliminary report and/or					
preliminary Autopsy Diagnosis (PAD)	2	Direct/Indirect	PC4: Reporting (AP)	2	PC, ICS
Composes a complete and accurate report on					
common and uncommon specimens, including					
autopsies	2	Direct/Indirect	PC4: Reporting (AP)	4	PC, ICS
Communicates effectively with family members	2	Indirect	PC4: Reporting (AP)	4	PC, ICS
Correctly describes and appropriately samples					
all specimen types	2	Indirect	PC5: Procedure: Surgical Pathology grossing (AP	4	PC, ICS, MK
Discusses with pathology staff any requests			PC6: Procedure: Intraoperative consultation		
that are contraindicated	2	Indirect	(IOC)/frozen sections (FS)	3	PC, ICS, MK
			PC6: Procedure: Intraoperative consultation		
Correctly selects tissues for frozen section diagr	2	Indirect	(IOC)/frozen sections (FS)	3	PC, MK
Able to perform high quality IOC/FS on					
technically difficult and multiple specimens;			PC6: Procedure: Intraoperative consultation		
performs IOC/FS within turnaround time	2	Direct/Indirect	(IOC)/frozen sections (FS)	3	PC, MK
			PC6: Procedure: Intraoperative consultation		
Effectively communicates the diagnosis	2	Indirect	(IOC)/frozen sections (FS)	3	PC, ICS, MK
Discusses with requesting provider any IOC/FS	_		PC6: Procedure: Intraoperative consultation		
that is contraindicated	2	Direct/Indirect	(IOC)/frozen sections (FS)	4	PC, ICS, MK

Discusses with pathology staff any requests					
that are contraindicated, obtains informed			PC7: Procedures: AP and CP (bone marrow		
consent, and is able to assess specimen and	2	Direct/Indirect	aspiration)	3	PC, ICS, MK, SBP
Performs a "time-out"; performs the		·	PC7: Procedures: AP and CP (bone marrow		
procedure x3	2	Direct/Indirect	aspiration)	3	PC, MK, SBP
Provides an accurate adequacy assessment and		-	PC7: Procedures: AP and CP (bone marrow		
triages specimens for appropriate ancillary	2	Direct/Indirect	aspiration)	3	PC, MK
		·	PC7: Procedures: AP and CP (bone marrow		
Obtains informed consent	2	Direct/Indirect	aspiration)	3	PC, ICS
Recognizes and understands the management			PC7: Procedures: AP and CP (bone marrow		
of procedure complications	2	Indirect	aspiration)	3	PC, MK
Discusses with pathology staff any requests					
that are contraindicated, obtains informed	2	Direct/Indirect	PC7: Procedures: AP and CP (apheresis)	3	PC, ICS, MK, SBP
Performs a "time-out"; performs the					
procedure x3	2	Direct/Indirect	PC7: Procedures: AP and CP (apheresis)	3	PC, MK, SBP
Obtains informed consent	2	Direct/Indirect	PC7: Procedures: AP and CP (apheresis)	3	PC, ICS
Recognizes and understands the management					
of procedure complications	2	Indirect	PC7: Procedures: AP and CP (apheresis)	3	PC, MK
Discusses with pathology staff any requests			PC7: Procedures: AP and CP (fine needle		
that are contraindicated, obtains informed	2	Direct/Indirect	aspiration biopsy) (FNAB)	3	PC, ICS, MK, SBP
Performs a "time-out"; performs the					
procedure x3	2	Direct/Indirect	PC7: Procedures: AP and CP (FNAB)	3	PC, MK, SBP
Provides an accurate adequacy assessment and					
triages specimens for appropriate ancillary	2	Direct/Indirect	PC7: Procedures: AP and CP (FNAB)	3	PC, MK
Obtains informed consent	2	Direct/Indirect	PC7: Procedures: AP and CP (FNAB)	3	PC, ICS
Recognizes and understands the management					
of procedure complications	2	Indirect	PC7: Procedures: AP and CP (FNAB)	3	PC, MK
Discusses with pathology staff any requests					
that are contraindicated, obtains informed	2	Direct/Indirect	PC7: Procedures: AP and CP (FNAB)	3	PC, ICS, MK, SBP
Performs a "time-out"; performs the			PC7: Procedures: AP and CP (ultrasound guided		
procedure x3	2	Direct/Indirect	FNA)	3	PC, MK, SBP
Provides an accurate adequacy assessment and			PC7: Procedures: AP and CP (ultrasound guided		
triages specimens for appropriate ancillary	2	Direct/Indirect	FNA)	3	PC, MK
			PC7: Procedures: AP and CP (ultrasound guided		
Obtains informed consent	2	Direct/Indirect	FNA)	3	PC, ICS

Recognizes and understands the management			PC7: Procedures: AP and CP (ultrasound guided		
of procedure complications	2	Direct/Indirect	FNA)	3	PC, MK
Discusses with pathology staff any requests			PC7: Procedures: AP and CP (ultrasound guided		
that are contraindicated, obtains informed	2	Direct/Indirect	FNA)	3	PC, ICS, MK, SBP
Properly identifies the decedent and verifies					
consent and limitations to extent of autopsy	2	Indirect	MK:3 Procedure: Autopsy (AP)	2	MK, ICS
Performs all seven aspects of routine autopsy	2	Indirect	MK:3 Procedure: Autopsy (AP)	2	MK
Concisely reviews and presents clinical					
records/history; contacts clinical team in					
advance of the case and summarizes questions					
posed by clinical team	2	Indirect	MK:3 Procedure: Autopsy (AP)	2	MK; ICS
Able to plan and perform complex/difficult					
cases	2	Direct/Indirect	MK:3 Procedure: Autopsy (AP)	3	MK
Performs uncomplicated gross dissection					
within four hours	2	Direct/Indirect	MK:3 Procedure: Autopsy (AP)	4	MK
Assess and applies chain of custody, interprets					
the elements of scene investigation, trace					
evidence, and court testimony	2	Direct/Indirect	MK:3 Procedure: Autopsy (AP)	4	MK, SBP
Consistently checks specimen identity and					
integrity	2	Indirect	SBP1: Patient Safety (AP/CP)	2	SBP, P
Handles deviations from policies (waivers)	2	Indirect	SBP1: Patient Safety (AP/CP)	2	SBP
Performs hand-overs in appropriate manner					
according to guidelines	2	Indirect	SBP1: Patient Safety (AP/CP)	2	SBP, P
Asses, analyzes, and interprets pathology					
reports and is able to discuss findings in			ICS2: Inter-departental and Health care Clinical		
consultation with clinical colleagues	2	Indirect	Team Interactions (AP/CP)	3	ICS, MK
Responds to inquiries from clinical team to			ICS2: Inter-departental and Health care Clinical		
contribute to patient care	2	Indirect	Team Interactions (AP/CP)	3	ICS, PC
Effectively communicates clinically significant			ICS2: Inter-departental and Health care Clinical		
or unexpected values, including critical values	2	Indirect	Team Interactions (AP/CP)	3	ICS
Routinely interfaces with clinical colleagues to					
formulate a narrow differential diagnosis and			ICS2: Inter-departental and Health care Clinical		
arrive at a final diagnosis	າ	Direct/Indirect	Team Interactions (AP/CP)	1	ICS
arrive at a final diagnosis		Directy man ect	reall interactions (Ai / Ci /		103
Determine and document relevant physical find	5	Direct/Indirect	PC2: Procedure- Fine Needle Aspiration Biopsy	3	PC

Obtains informed consent	5 Direct/Indirect	PC2: Procedure- FNAB	3 PC, ICS
Performance of time-out	5 Direct/Indirect	PC2: Procedure- FNAB	3 PC, ICS
Perform Fine Needle Aspiration Biopsy (FNAB)	5 Direct/Indirect	PC2: Procedure- FNAB	3 PC
Provide adequacy assessment	5 Direct/Indirect	PC2: Procedure- FNAB	3 PC, MK, SBP
Triage for ancillary studies	5 Direct/Indirect	PC2: Procedure- FNAB	3 PC, MK, SBP
Provides provisional assessments	5 Direct/Indirect	PC2: Procedure- FNAB	4 PC, MK, ICS
Manages FNAB complications	5 Direct/Indirect	PC2: Procedure- FNAB	3 PC, MK
Order and interpret diagnostic test	5 Direct/Indirect	MK1: Interpretation and Diagnostic	4 MK
Renders a final diagnosis	5 Direct	MK1: Interpretation and Diagnostic	4 MK, SBP, ICS

Direct Supervision - DS Indirect Supervision - IS Oversight - O

IS: After fellow has demonstrated proficiency