

Competency	Milestone Recommended Supervision Levels	Critical Deficiency Needs Remediation	Level 1 Direct Supervision (I)	Level 2	Level 3 Indirect Supervision (II/III)	Level 4	Level 5 Independent Practice (IV)
Patient Care	Initial Evaluation of a severely ill emergency general surgery patient	Fellow has demonstrable gaps in knowledge regarding common general surgical conditions or in the techniques for the initial evaluation of patients with these disease processes	Fellow has basic understanding of common emergency general surgical conditions and the techniques for the initial evaluation of patients with these disease processes		Fellow demonstrates proficiency in the initial evaluation of patients with emergent general surgery conditions		Fellow is able to competently perform the initial evaluation of patients with common and complex emergent general surgery conditions
Patient Care	Initial Evaluation of a severely injured blunt trauma patient	Fellow has demonstrable gaps in knowledge regarding common injuries sustained after significant blunt trauma or in the techniques for the initial evaluation of patients with these disease processes	Fellow has basic understanding of common injuries sustained after significant blunt trauma and the techniques for the initial evaluation of patients with these injury mechanisms		Fellow demonstrates proficiency in the initial evaluation of patients who have sustained significant injuries from blunt trauma mechanisms		Fellow is able to competently perform the initial evaluation of patients who have sustained common and complex injuries from blunt trauma mechanisms
Patient Care	Initial Evaluation of a severely injured penetrating trauma patient	Fellow has demonstrable gaps in knowledge regarding common injuries sustained after significant penetrating trauma or in the techniques for the initial evaluation of patients with these disease processes	Fellow has basic understanding of common injuries sustained after significant penetrating trauma and the techniques for the initial evaluation of patients with these injury mechanisms		Fellow demonstrates proficiency in the initial evaluation of patients who have sustained significant injuries from penetrating trauma mechanisms		Fellow is able to competently perform the initial evaluation of patients who have sustained common and complex injuries from penetrating trauma mechanisms
Patient Care	Technical Skills – Head and Neck Operations (Trauma)	Fellow has demonstrable gaps in their understanding of operative indications and techniques for injuries in this region	Fellow has basic understanding of operative indications and techniques for injuries in this region		Fellow demonstrates proficiency in the performance of common and straightforward operative interventions in this region		Fellow is able to competently perform both straightforward and complex operative interventions for patients with injuries in this region
Patient Care	Technical Skills – Abdominal Operations (Trauma)	Fellow has demonstrable gaps in their understanding of operative indications and techniques for injuries in this region	Fellow has basic understanding of operative indications and techniques for injuries in this region		Fellow demonstrates proficiency in the performance of common and straightforward operative interventions in this region		Fellow is able to competently perform both straightforward and complex operative interventions for patients with injuries in this region
Patient Care	Technical Skills – Thoracic Operations (Trauma)	Fellow has basic understanding of operative indications and techniques for injuries in this region	Fellow has basic understanding of operative indications and techniques for injuries in this region		Fellow demonstrates proficiency in the performance of common and straightforward operative interventions in this region		Fellow is able to competently perform both straightforward and complex operative interventions for patients with injuries in this region
Patient Care	Technical Skills – Vascular Operations (Trauma)	Fellow has demonstrable gaps in their understanding of operative indications and techniques for injuries in this region	Fellow has basic understanding of operative indications and techniques for injuries in this region		Fellow demonstrates proficiency in the performance of common and straightforward operative interventions in this region		Fellow is able to competently perform both straightforward and complex operative interventions for patients with injuries in this region
Patient Care	Technical Skills – Ultrasound Evaluations	Fellow has demonstrable gaps in their understanding of operative indications and techniques for injuries in this region	Fellow has basic understanding of operative indications and techniques for injuries in this region		Fellow demonstrates proficiency in the performance of common and straightforward operative interventions in this region		Fellow is able to perform straightforward and complex operative interventions for patients with injuries in this region
Patient Care	Technical Skills – EGS	Fellow has demonstrable gaps in their understanding of operative indications and techniques for patients with common emergency general surgery conditions	Fellow has basic understanding of operative indications and techniques for patients with common emergency general surgery conditions		Fellow demonstrates proficiency in the performance of common and straightforward operative interventions for patients with common emergency general surgery conditions		Fellow is able to competently perform both straightforward and complex operative interventions for patients with common emergency general surgery conditions
Patient Care	Technical Skills – Complex Laparoscopy/Robotics	Fellow has demonstrable gaps in their understanding of operative indications and techniques for patients requiring complex laparoscopic/robotic interventions	Fellow has basic understanding of operative indications and techniques for patients requiring complex laparoscopic/robotic interventions		Fellow demonstrates proficiency in the performance of common and straightforward operative interventions for patients requiring complex laparoscopic/robotic interventions		Fellow is able to competently perform both straightforward and complex operative interventions for patients requiring complex laparoscopic/robotic interventions
Patient Care	Post-Operative Patient Care - EGS	Fellow has demonstrable gaps in their understanding of the expected post operative course and common complications after emergency general surgery procedures	Fellow has basic understanding of the expected post operative course and common complications after emergency general surgery procedures		Fellow demonstrates proficiency in managing the expected post operative course and common complications after emergency general surgery procedures		Fellow is able to competently manage expected post operative course as well as common and complex complications in patients sustaining injuries after blunt or penetrating trauma
Patient Care	Post-Operative Patient Care - Trauma	Fellow has demonstrable gaps in their understanding of the expected post injury course and common complications after significant blunt or penetrating injury	Fellow has basic understanding of the expected post injury course and common complications after significant blunt or penetrating injury		Fellow demonstrates proficiency in managing the expected post injury course and common complications after significant blunt or penetrating injury		Fellow is able to competently manage expected post operative course as well as common and complex complications in patients sustaining injuries after blunt or penetrating trauma
Medical Knowledge	Knowledge of the workup and management of emergency general surgical disease	Fellow is unable to demonstrate knowledge of pathophysiology and treatment of patients with emergency general surgical disease	Fellow demonstrates knowledge of pathophysiology and treatment of patients with complex emergency general surgical disease		Fellow demonstrates comprehensive knowledge of varying patterns of disease presentation and alternative treatments of patients with emergency general surgical disease		Fellow demonstrates the knowledge required to care for any patient with emergency general surgical disease
Medical Knowledge	Knowledge of the workup and management of injuries caused by blunt trauma	Fellow is unable to demonstrate knowledge of pathophysiology and treatment of patients with common injuries from blunt trauma	Fellow demonstrates knowledge of pathophysiology and treatment of patients with complex injuries from blunt trauma		Fellow demonstrates comprehensive knowledge of varying patterns of disease presentation and alternative treatments of patients with injuries from blunt trauma		Fellow demonstrates the knowledge required to care for any patient with injuries from blunt trauma
Medical Knowledge	Knowledge of the workup and management of injuries caused by penetrating trauma	Fellow is unable to demonstrate knowledge of pathophysiology and treatment of patients with common injuries from penetrating trauma	Fellow demonstrates knowledge of pathophysiology and treatment of patients with common injuries from penetrating trauma		Fellow demonstrates comprehensive knowledge of varying patterns of disease presentation and alternative treatments of patients with injuries from penetrating trauma		Fellow demonstrates the knowledge required to care for any patient with injuries from penetrating trauma
Professionalism	Ethical Considerations in Trauma and EGS	Fellow is unable to follow ethical principles; unable to run family meetings, and/or does not understand medical decision maker process	Fellow understands ethical principles but needs supervision when applying them. Fellow needs assistance running family meetings, making end of life care plans, and/or determining patient's medical decision maker		Fellow understands ethical principles and is making strides to run family meetings, making end of life care plans, and determining medical decision makers		Fellow understands ethical principles and can run family meetings, make end of life care plans, and determine medical decision makers independently. Fellow publishes and performs research on medical ethics. Fellow is able to teach ethical principles to learners.
Professionalism	Personal behavior	Fellow is fundamentally unable to complete administrative tasks without prompting; has trouble behaving in an professional manner; and/or is unable to lead small teams	Fellow recognizes lapses in behavior with prompting. Fellow maintains standards of professionalism with colleagues and staff and can competently run small teams		Fellow completes administrative tasks thoroughly and maintains standards of professionalism with colleagues and staff. Fellow demonstrates ability to lead and manage a service. Fellow recognizes occasional lapses in behavior and takes steps to correct without prompting. Fellow ensures they and their team complete administrative tasks. Fellow maintains standards of professionalism with colleagues and staff and is an example of proper standards		Fellow takes a leadership role in the Acute Care Surgery division and/or completes research on medical professionalism. Fellow can teach principles of professionalism to learners.
Practice-Based Learning and Improvement	Teaching	Fellow does not demonstrate organization in presentations, is inattentive, and/or communicates poorly the high-yield information. Fellow requires prompting in order to be engaged during academic conferences.	Fellow demonstrates effective teaching style when giving a presentation and facilitates case discussions with colleagues. Fellow contributes meaningfully to discussions during rounds with students and resident. Fellow participated in the education of patients and families.		Fellow communicates educational material effectively at the appropriate level for a variety of learners. Fellow understands and communicates trauma guideline and protocols successfully to the team. Fellow respectfully engages students and residents in the operating room and develops or implements educational curriculum including journal clubs, tele-grand rounds, etc.		Fellow provides an effective teaching style in the operating room, trauma bay, and wards to the students, residents, and hospital staff. Fellow presents or publishes educational/scientific research related to education. Fellow routinely provides constructive educational dialogue with other learners.
Practice-Based Learning and Improvement	Self-directed Learning	Fellow does not participate in self-directed learning. Fellow does not complete AAST-ACS in-service exams or AAST-ACS fellowship study modules in a timely manner.	Fellow recognizes limits of knowledge, experiences and technical skills. Fellow attends ACS conferences and completes educational modules in a timely manner. Fellow recognizes multiple resources exist to enhance learning and patient care.		Fellow regularly uses simulation (e.g. ATLS, ATOM, ASSET) to enhance patient care and improve surgical skills. Fellow independently prepares for academic lectures in advance and identifies resources to answer patient care questions. Fellow is able to integrate literature as recommended to enhance learning. Fellow continually assesses performance by evaluating personal feedback.		Fellow contributes to ACS peer-reviewed literature and is able to routinely develop hypothesis-driven studies. Fellow analyzes own outcomes as compared to national standards. Fellow presents at local, regional, national conferences. Fellow demonstrates ability to utilize evidence-based data to provide excellent patient care.
Systems-Based Practice	Coordination & Improvement of Patient Care	Fellow does not have the knowledge or ability to demonstrate basic principles of coordinating patient care. Fellow fails to recognize specific system failures that impinge patient care.	Fellow applies appropriate forms of communication (e.g. person to person, telephone, electronic) to ensure accurate transitions of care. Fellow properly engages specialty consults to optimize patient care. Fellow reports problems with hospital and trauma systems. Fellow is aware of common socioeconomic barriers that impact patient care.		Fellow coordinates discharge planning with case management and provides post-discharge clinic needs for ACS patients. Fellow recommends strategies by which patients' access to care can be improved and coordinates care independently (e.g. OR scheduling, CT/MRI, and interventional radiology). Fellow appropriately designates roles in the trauma bay during trauma assessment.		Leads a performance improvement team or project to enhance patient care & comply with departmental benchmarks. Develops an efficient clinical pathway which reduces patient care costs Advocates on a national or regional level for health care and trauma policy Participates in logistics to improve patient work flow (e.g. triage, radiographic imaging, OR turnover)
Systems-Based Practice	Practice Management	Fellow does not understand or adhere to hospital policy and fails to complete medical records in a timely manner. Fellow is unable to document trauma diagnoses and surgical procedures accurately and completely.	Fellow has basic knowledge of how healthcare and trauma systems operate and is able to use the hospital EMR appropriately. Fellow promptly documents the daily patient care findings and is able to document inpatient/clinic encounters and trauma diagnoses accurately.		Fellow understands the documentation and image retention/storage of the facility's FAST exams. Fellow accurately codes routine ACS surgical procedures and recognizes key clinical elements needed for ACS clinic encounters and transition to practice.		Fellow participates in advocacy activities for healthcare policy, injury prevention, and trauma systems. Fellow recognizes the key elements and resources for coding complex trauma surgical procedures. Fellow works with facility's medical records team to solve EMR system problems. Fellow is able to compare and contrast different practice models and trauma systems.
Interpersonal and Communication Skills	Patient and Family-Centered Communication	Fellow is unable to participate significantly in communications with patients and families for bad news or conflict. Fellow is unwilling to consider and incorporate patient and family concerns or values into the care plan.	Fellow demonstrates basic ability to listen and communicate with patients and families to elicit patient preferences and expectations but occasionally misses complex points.		Fellow is able to consistently and accurately deliver complex and difficult information to patients and families and is able to use shared decision making in crafting a personalized care plan.		Fellow effectively coaches others in the facilitation of crucial conversations. Fellow demonstrates ability to effectively negotiate conflict amongst patients, families, and the health care team. Fellow coaches others in conflict resolution in complex scenarios.
Interpersonal and Communication Skills	Interprofessional and Team Communication	Fellow is unwilling or unable to communicate with members of one's team for adequate communication and/or to receive communication of opportunities for self-improvement.	Fellow communicates information with all members of own team but may avoid or have ineffective communication with outside teams. Fellow solicits feedback on own performance as a member of the health care team but not able or consistently providing feedback.		Fellow consistently verifies understanding of vital recommendations when providing or receiving a consultation. Fellow routinely uses active listening to adapt communication style to fit team needs. Fellow communicates concerns appropriately and provides feedback to peers and learners.		Fellow coordinates and coaches communication from different members of the team to optimize patient care, resolving conflict when needed. Fellow develops protocols for facilitation of difficult communication between teams. Fellow facilitates regular health care team-based feedback in complex situations and effectively communicates constructive feedback to superiors.
Medical Interpersonal and Communication Skills	Communication within Healthcare Systems	Fellow is unable to perform accurate fundamental documentation of assessments and plan for patient evaluations or to communicate crucial findings and concerns.	Fellow utilizes some communication of the electronic medical record and other methods for communication across teams and facilities but still has some gaps in communication outside of the team.		Fellow integrates and synthesizes all relevant data from outside systems and prior encounters into the health record.		Fellow leads improvements in departmental or institutional communication policies and procedures for communication across teams, departments, or institutions.