

Altruism & Professionalism

A1. Practice with accountability, quality, and reliability in work with patients, families, communities, and other interprofessional healthcare providers.

A1A. Demonstrate understanding of and adhere to the highest standard of ethics, pertaining to the provision or withholding of care, confidentiality, informed consent, and the prevention and handling of medical errors.

A1B. Demonstrate understanding of and adhere to professional and institutional standards and business practices, including compliance with relevant laws, policies, and regulations for personal, patient, and public safety.

A1C. Demonstrate understanding of and adhere to principles pertaining to ethical research and conflicts of interest.

A1D. Apply social-behavioral principles to the provision of patient care including care compliance, access to care, patient advocacy, and psychosocial, spiritual, attitudinal, and cultural influences on health.

A2. Humanism - Practice with respect for human dignity and integrity in work with patients, families, communities, and other interprofessional health care providers.

A2A. Demonstrate understanding of and ability to develop doctor-patient, doctorteam, and doctor-community relationships that evidence sensitivity and responsiveness to culture, age, race/ethnicity, gender, socioeconomic status, sexual orientation, spirituality, disabilities, military service, and other dimensions of identity and diversity.

A3. Patient-Centered Care - Practice compassionate patient-centered care.

A3A. Demonstrate an ability to apply medical knowledge, skills, and clinical evidence with attention to individual patients' perspectives, needs, values, and comfort.

A3B. Recognize the medical, economic, and socio-economic, psycho-social, cultural, spiritual, and religious determinants of health, and the need for interpretive or adaptive services, seek conceptual context of illness, approach the patient holistically and demonstrate active listening skills. Apply this knowledge and these skills to advocate for patients and communities.

A3C. Counsel, educate and empower patients, families and communities to model self-care, reduction of health disparities, and improvement of health through disease prevention.

A3D. Coordinate follow-up care and transitions of care with attention to the patient's safety, health literacy, support system, and financial circumstances.

A4. Community Factors and Population Health - Demonstrate knowledge of regional and global community factors and population health that influence individual, community, and public health. Progressively increase perspective and experience through technology and service-learning activities. Special attention should be paid to bi-national border care and culture.

EDUCATIONAL PROGRAM OBJECTIVES

A4A. Apply knowledge about behavioral, socioeconomic, and cultural dynamics and the principles of evidence-based practice to quality improvement, transitions of care, patient advocacy, and interprofessional team-based patient care on an individual, community, population, and global scale.

A4B. Assess challenges to providing high quality healthcare for members of vulnerable groups and articulate the role of physicians and others, including promotoras, in working to eliminate barriers.

A4C. Advocate for individual patients and communities that have limited or no access to quality healthcare.

A4D. Collaborate with community leaders to promote the health and welfare of a community group by identifying needs and assets relevant to the delivery of quality, sustainable health service.

A4E. Articulate the cultural and ethical implications of research and knowledge generation.

Knowledge

K1. Core Medical Knowledge - Demonstrate developing mastery of clinically relevant scientific knowledge of the structure and function of the body, mechanisms of disease, therapeutic interventions, disease prevention, health promotion, health disparities and cultural issues.

K1A. Demonstrate clinically relevant knowledge of the structure and function of the body at the molecular, cellular, organ, and system levels.

K1B. Demonstrate knowledge of the mechanisms that maintain and disrupt homeostasis.

K1C. Explain the mechanisms (genetic, developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) of mental and physical illness.

K1D. Demonstrate knowledge of how illness and injury affect function and quality of-life.

K1E. Recognize the clinical and laboratory manifestations of illness.

K1F. Demonstrate knowledge of pharmacology and other therapeutic modalities.

K1G. Demonstrate knowledge of how epidemiology and biostatistics can be utilized in primary, secondary, and tertiary prevention of illness for individuals, communities, and populations.

K2. Applied Knowledge - Demonstrate developing ability to support clinical reasoning with scientific knowledge in order to solve problems and prevent/diagnose/manage illness according to evidence-based principles and apply these to populations.

K2A. Apply knowledge of indications, cost, contraindications, and complications to select, justify and interpret diagnostic clinical tests and imaging.

K2B. Apply knowledge to diagnose and explain clinical problems.

K2C. Apply knowledge to select preventive, curative, and/or palliative therapeutic strategies for the management of clinical conditions.

EDUCATIONAL PROGRAM OBJECTIVES

K2D. Apply knowledge of health disparities as well as principles of disease prevention and intervention to identify culturally appropriate strategies to improve the health of individuals, communities, and populations.

K3. Evaluation and Production - Demonstrate ability to identify knowledge gaps, efficiently acquire and utilize appropriate information sources to answer questions/resolve problems, and critically evaluate information and data.

K3A. Identify clinical questions as they emerge in patient or community care activities and identify and apply relevant evidence to answer those questions.

K3B. Critically reflect on one's own or one's team's performance to identify strengths and challenges, set learning and improvement goals, and engage in appropriate research and/or learning activities to meet those goals.

K3C. Use information technology to access digital/online medical information, manage information and assimilate evidence from scientific studies in culturally appropriate patient care.

K3D. Appraise and assimilate scientific evidence from the literature and apply it to clinical decision making for individual patients.

K3E. Contribute to the development, application, and translation of new medical knowledge through scholarly inquiry, research, discovery, and dissemination. Understand that all physicians can contribute to new medical knowledge.

K3F. Articulate the implications of health disparities and culture in public health and disease diagnosis.

Skills

S1. Patient Care - Demonstrate ability to draw upon essential information from the records, history, physical exam, and initial diagnostic evaluations to construct a plan of care or action for common conditions and disorders.

S1A. Communicate effectively with patients, families, communities, and members of the interprofessional health care team, as appropriate, across a broad range of socioeconomic and cultural backgrounds.

S1B. Utilize appropriate and effective evidence-based techniques to perform purposeful comprehensive and problem-focused patient-centered physical exams integrating abnormal physical exam findings with relevant information from previous records, the history, and initial diagnostic evaluations.

S1C. Utilize appropriate techniques to prepare for and perform basic clinical procedures, knowing the indications, contraindications, costs and potential adverse outcomes and complications for each of the identified procedures.

S1D. Demonstrate an understanding of the safe, effective evidence-based use of the top 100 most frequently prescribed medications in the management of a common condition or disorder.

S1E. Recommend, provide rationale for and interpret the results of first line diagnostic tests to diagnose and manage common disorders or as a part of routine health maintenance. Understand the implications and urgency of an abnormal result and seek assistance for interpretation as needed.

S1F. Utilize appropriate information and critical decision-making skills to identify and continually update a differential diagnosis, knowing when an immediate clinical response is required.

S1G. Explain and document the clinical reasoning that led to the working diagnosis and clearly communicate it to all members of the interprofessional health care team.

S1H. Manage ambiguity in a differential diagnosis for self and patient and respond openly to questions and challenges from patients and other members of the interprofessional health care team.

S1I. Construct a plan of care or action for common conditions and disorders based on essential information from the records, history, physical exam, and initial diagnostic evaluations.

S1J. Demonstrate an understanding of indications requiring hospital management and ensure adequate attention to transitions of care.

S1K. Provide appropriate guidance for interprofessional home management of conditions or disorders.

S1L. Utilize interprofessional teams and evidence-based information to provide appropriate referrals and counseling on therapeutic lifestyle changes.

S1M. Demonstrate awareness of commonly used integrative medicine (complementary and alternative) modalities.

S1N. Recognize the various manifestations of pain and applies the principles of managing total pain (physical, psychological, spiritual, and social) taking a patient-centered and interprofessional approach that considers personal and cultural variation.

S2. Communication - Demonstrate progressive mastery of the ability to communicate respectfully, effectively, at the appropriate level of health literacy, and in a timely manner with patients, families, community members and other health professionals.

S2A. Communicate effectively with patients, families, communities, and members of the interprofessional health care team, as appropriate, across a broad range of socioeconomic and cultural backgrounds.

S2B. Demonstrate ability to write safe and appropriate orders and prescriptions in a variety of modes, settings, and systems (e.g., inpatient, ambulatory, urgent, or emergent care).

S2C. Maintain comprehensive, timely and legible records.

S2D. Summarize a clinical encounter to one or more members of the health care team

(including patients and families) in order to achieve shared understanding of the patient's current condition.

S2E. Demonstrate ability to ensure continuity of care throughout transitions between providers or settings including referral, following up on patient progress, and outcomes assessment.

S2F. Demonstrate sensitivity, honesty, and compassion in difficult conversations (e.g., about issues such as death, end-of-life, adverse events, bad news, disclosure of errors, sexual health, and other issues.)

EDUCATIONAL PROGRAM OBJECTIVES

S2G. Demonstrate commitment to shared decision-making and empowerment of patients and their families via team-based collaborative care and patient-centered counseling and education.

S2H. Appropriately utilize social media and other forms of technology so as to maintain boundaries and professionalism, in both personal and professional life.

S2I. Engage interprofessional health services and understand the role they might play in the management of common conditions or disorders.

S3. Interprofessional and Systems-Based Medicine - Prioritize the practice of team-based interprofessional medicine so as to provide safe, timely, effective, efficient, equitable, patient-centered, population-based care.

S3A. Establish and maintain a climate of mutual respect, dignity, integrity, inclusiveness, and trust with all team members.

S3B. Use knowledge of one's own roles and personal limits as an individual provider and engage with the other members of the team to optimize culturally appropriate health care delivery and advocate for patients.

S4. Systems-Based - Incorporate contextual awareness of the larger health care systems, settings, and resources to provide optimal health care and advocate for patients.

S4A. Incorporate principles of cost-effectiveness and pre- test/post-test probability in patient and population-based care.

S4B. Participate in the identification of system errors and the implementation of potential solutions.

S4C. Apply principles of quality and safety to the management and care of patients, communities, and populations, utilizing quality and safety measures to assess outcomes.

S5. Quality Improvement & Evidence-Based Medicine - Demonstrate a progressive ability to use evidence-based approaches to determine the best mode of treatment for a patient.

S5A. Develop well-formed, focused, pertinent clinical questions based on clinical scenarios or real-time patient care.

S5B. Identify and appraise the sources and content of medical information using accepted criteria.

S5C. Apply the primary findings of the learner's information search to an individual patient, population, community, or panel of patients.

S5D. Communicate one's findings to the health care team (including the patient/family).

S5E. Effectively reflect on the process of healthcare, decision making, and critical thinking, and make a lifelong commitment to quality improvement in healthcare.