

Issues After the First Official Submission of Trainee Milestones

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What issues are you having?

Survey post CCC meetings

– Participants

Active Traditional	Active Integrated	Total Program Directors
65	26	67



– Respondents

	Program Directors	Program Coordinators
# Surveyed	67	67
# Responded	9	12
% Responded	13%	18%

What issues are you having?

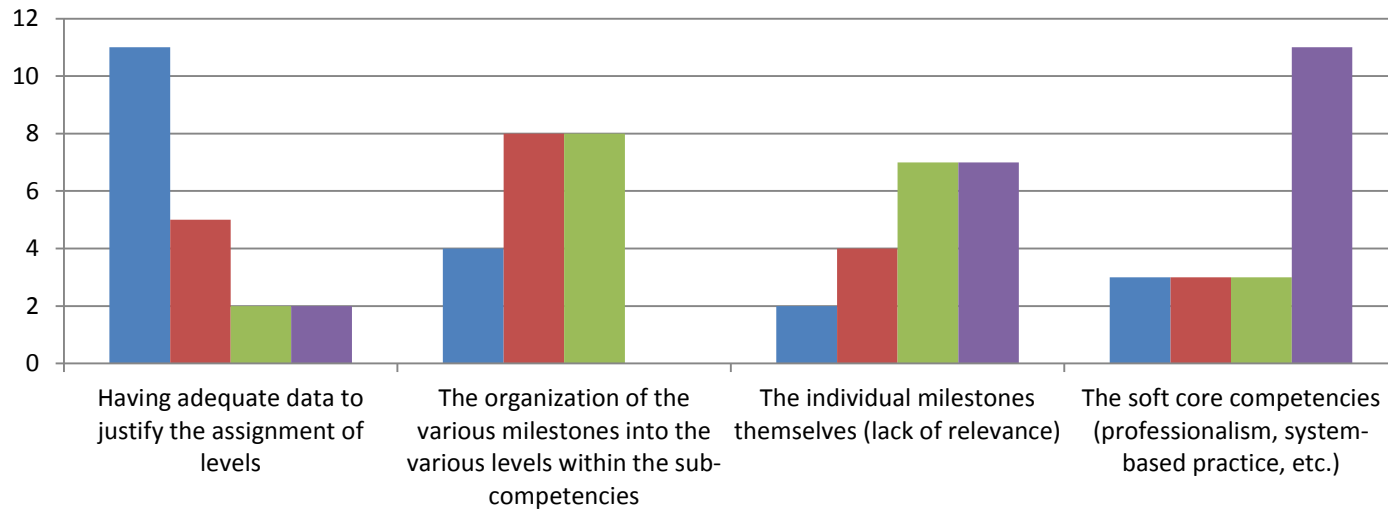
How difficult do you think it was to allocate the level (1-5) your trainees had attained in each of the sub-competencies?

Answer	Response	%
Very Difficult	0	0%
Difficult	5	24%
Easy	15	71%
Very Easy	1	5%
Total	21	100%

Ischemic Heart Disease — Patient Care and Technical Skills				
Level 1	Level 2	Level 3	Level 4	Level 5
<ul style="list-style-type: none"> Orders basic diagnostic and pre-operative assessment tests for ischemic heart disease (e.g., cardiac cath, stress test) Lists basic treatment options for routine ischemic heart disease (e.g., medical management, PCI vs. CABG) Demonstrates basic surgical skills (simulation vs. operation room [OR]) 	<ul style="list-style-type: none"> Interprets and prioritizes diagnostic and physiologic assessment tests for routine patient with ischemic heart disease Recognizes routine post-operative complications (e.g., cerebral vascular accident [CVA], shock, tamponade, interprets abnormal EKG) Suggests treatment plan for patient with routine ischemic heart disease Assesses and harvests conduits (e.g., vein mapping) Performs surgical opening and closing Provides basic intra-operative assisting Performs proximal coronary anastomosis 	<ul style="list-style-type: none"> Establishes a diagnostic and assessment plan for patients with routine ischemic heart disease (e.g., role of functional testing in ischemic heart disease) Manages routine post-operative complications (e.g., return to the OR vs. return to cath lab) Selects ideal treatment option for patient with routine ischemic heart disease (e.g., institutes treatment per ACC/STS/AATS guidelines) Institutes and weans patient from cardiopulmonary bypass Performs routine CABG 	<ul style="list-style-type: none"> Establishes a diagnostic and assessment plan for complex patients with ischemic heart disease Manages complex post-operative complications (e.g., need for ventricular assist) Selects ideal treatment option for patient with complex ischemic heart disease (e.g., combined coronary and carotid disease) Manages complex coronary disease (e.g., redo CABG, VSD, ischemic mitral regurgitation [MR], off pump) 	<ul style="list-style-type: none"> Independently performs reoperative coronary bypass grafting Independently performs coronary endarterectomy
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				Not yet rotated <input type="checkbox"/>

What issues are you having?

Rank in order what you believe was the most to least challenging aspect of completing the assignment of levels for each sub-competency?



Not for a Lack of Effort

During your CCC meeting, estimate how long it took to review all the available data, discuss the data and assign a level (1-5) for all the sub-competencies for a single trainee.

Answer	Response	%
<30 minutes	6	29%
30-45 minutes	4	19%
45-60 minutes	6	29%
>60 minutes	5	24%
Total	21	100%

**How do we measure
whether our trainees are learning
what we feel they must know?**

DOs and DON'Ts for the Milestones

1. Don't simply assign a score to "get it done"
2. Don't feel they must be a "4" in all sub competencies to graduate.
3. If the trainee has not been observed then use the "Not yet rotated" box
4. Experiment with novel ways to assess different areas
5. Look for gaps in your teaching
6. Look for gaps in your assessment