

PGY1 Period

PGY2 Period

1 - Interviewing & Communication Skills

Including: Patient Education, Supportive Counselling & Psychotherapy

CanMEDS-FM roles:
Communicator, Health Advocate

A. Uses patient centered interviewing principles to obtain / demonstrate understanding of the context of the “whole person” & find common ground in management. (e.g. Feelings, Ideas, effect on Function, Expectations to understand both the patient’s illness & illness experience; develops contextual appreciation of the patient’s family, education, employment, finances, religion & supports.)



A. Uses patient centered interviewing principles routinely & with mastery to obtain / demonstrate understanding of the context of the “whole person” & find common ground in management.

B. Demonstrates adaptable & flexible communication style to meet the needs of a wide variety of patients (e.g. different ages & cultures, vulnerable or special needs patients involving cognitive deficits, developmental or other disabilities.)



B. Manages sensitive, complex &/or challenging patient issues effectively (e.g. sexuality and risk behaviour discussions; placement; Power of Attorney; Substitute Decision Making; Advance Directives; informed consent; confidentiality; Children’s Aid mandatory reporting; driving ability)

C. Demonstrates a well-developed approach to geriatric cognitive & functional assessment (incl. performing Mini-Mental Status Examination & Montreal Cognitive Assessment - MoCA).

D. Provides effective education counselling & guidance routinely for common conditions & life cycle events in primary care (e.g. contraception, parenting advice, diabetes, hypertension, menopause and grief reactions.)



C. Supports patients in crisis or emotional distress appropriately using effective counselling skills / techniques (e.g. cognitive therapies, brief interventional supportive counselling, BATHE).

E. Promotes patient health behaviour change opportunistically using interviewing / counselling skills (e.g. smoking cessation counselling, cardiovascular risk factor modification).



D. Promotes patient health behaviour change consistently & effectively using interviewing / counselling skills (e.g. smoking cessation counselling, cardiovascular risk factor modification).

E. Obtains / utilizes multi-source information by opportunistically interviewing families or caregivers.

2 - Problem Formulation & Synthesis, Knowledge-base & Prescribing skills

Including: use of Evidence-Based approach to manage clinical problems

CanMEDS-FM roles:
FM Expert, Manager,
Health Advocate, Scholar

A. Recognizes & appropriately initiates management of common urgent / emergent conditions (e.g. shortness of breath, chest pain, loss of consciousness, anaphylaxis).



A. Anticipates, recognizes & appropriately manages common urgent / emergent conditions (e.g. shortness of breath, chest pain, loss of consciousness, anaphylaxis).

B. Demonstrates comfort with diagnostic uncertainty inherent to family medicine, such that clinical assessment is appropriately selective.



B. Demonstrates efficiency & selectivity in performing clinical assessment (e.g. focussed history, physical exam and investigation).

C. Recognizes limitations, seeking appropriate support & assistance.

D. Demonstrates appropriate clinical reasoning (e.g. providing clear & salient case presentations (oral & written) with relevant supportable differential diagnoses, & organized management strategy.)

E. Performs age / gender-specific periodic health exams including relevant screening / health promotion for uncomplicated patients.



C. Performs adapted age / gender-specific periodic health exams including relevant screening / health promotion for complicated patients (e.g. patients with disabilities including developmental disabilities, cognitive deficits, multiple co-morbidities)

F. Manages care of uncomplicated children, adolescents, adults & antepartum women with episodic and/or chronic conditions.



D. Manages care of children, adolescents and adults with multiple and complex medical and social problems (e.g. patients with disabilities including developmental disabilities, cognitive deficits, multiple co-morbidities, socially complex antenatal care).

G. Demonstrates effective strategy to manage common clinical presentations - specific conditions (e.g. CAD, DM, sinusitis, MSK injury) & undifferentiated symptoms (e.g. fatigue, dizziness, cough, weight loss, abdominal pain & chest pain).



E. Recognizes & manages conditions common in vulnerable patient groups (e.g. patients with significant disabilities, aboriginal patients, homeless patients, migrant populations)

F. Recognizes & values the FM role in community-based care, adapting & providing this care when required (e.g. Long Term Care or home visits).

G. Provides end of life care, demonstrating an understanding of family dynamics in this situation.

H. Prescribes appropriately for management of common conditions guided by evidence-based resources to develop solid, principled understanding & rationale for pharmacotherapy.



H. Demonstrates awareness of advanced prescribing principles (e.g. cost implications, adverse effects, interactions, contraindications, impact of age, renal & hepatic function).

I. Prescribes medications requiring special consideration correctly & consistently (e.g. Limited Use codes, controlled substances)

I. Accesses & evaluates medical literature, interpreting articles using principles of evidence-based medicine.



J. Evaluates medical literature critically (incl. clinical practice guidelines) & uses evidence-based-medicine terms & principles to justify clinical decisions.

K. Recognizes and resolves ethical / legal issues in day to day practice using a formal approach (e.g. an ethical framework or knowledge of legislation).

L. Employs appropriate chronic disease management strategies (e.g. diabetic flow sheets).

3 - Team Participant

CanMEDS-FM role:
Collaborator, Scholar

A. Displays awareness of scope of practice & communicates well with other members of the health care team (e.g. other physicians, allied health, staff & nurses.)

A. Suggests or leads educational, administrative or quality improvement changes (in the team or family medicine clinical setting).

B. Coordinates care of patient by assisting other health professionals effectively. (e.g. Participates actively in case conferences or informal discussions)

B. Performs an active role in the health care team.

C. Coordinates care of patient with other health professionals effectively. (e.g. Arranges & leads case conferences or informal discussions)

C. Develops an approach to educating others formally & informally (incl. students, patients, colleagues, & others.)

D. Educates others formally & informally (incl. students, patients, colleagues, & others.)

4 - Clinical and Technical skills

CanMEDS-FM role:
FM expert, Communicator, Health Advocate

A. Performs procedures expected of a PGY1 resident effectively (e.g. suturing, injections & pap tests (See procedure benchmarks list)

A. Performs procedures expected of a PGY2 resident effectively (e.g. endometrial biopsy, IUD insertion, joint injection, excisional biopsy, low risk obstetrical delivery). (See procedure benchmarks list)

B. Demonstrates understanding & procedure of immunization (e.g. utilizing the schedule, appreciating risks & benefits, addressing parental concerns & counselling patients appropriately.)

5 - Organizational Abilities

CanMEDS-FM role:
Manager, Communicator

A. Demonstrates attention to & concern for time management (attempting to handle multiple responsibilities, seeking personal efficiencies.)

A. Demonstrates effective strategies for time management (efficiently handling multiple responsibilities).

B. Communicates & documents appropriately (e.g. timely, clear, & organized). (incl. medical record, consultation requests, hospital admission & discharges)

B. Communicates & documents appropriately (e.g. timely, clear, efficient, selective & organized).

C. Recognizes & appropriately allocates finite local resources (e.g. allied health services, investigations, follow-up appointment frequency).

D. Bills appropriately.

6 - Self-Direction, Motivation, Responsibility, Professionalism, Self-care

CanMEDS-FM role:
Professional, Scholar

A. Demonstrates commitment to the holistic role of the FM, beginning to develop the longitudinal doctor-patient relationship.

A. Practices patient-centred, continuous and comprehensive care, developing longitudinal doctor-patient relationships.

B. Demonstrates a recognition of the importance of professional responsibility for & continuity of care of patients over time & in multiple domains while maintaining appropriate boundaries (incl. maximizing opportunities for follow-up & manage results).

B. Attends actively to professional, educational & patient obligations (incl. consistent teaching session attendance / participation, managing lab results without prompting).

C. Demonstrates dependability, timeliness & focus on clinical responsibilities with awareness of appropriate patient scheduling (e.g. vacations, call etc.).

D. Coordinates effective "hand over" (transfer of patient care responsibilities) to other doctors when appropriate.

E. Seeks, accepts & responds to feedback from team (incl. supervisors, colleagues, patients.)

C. Supports the clinical team proactively (e.g. completion of unsolicited tasks or responsibilities).

F. Develops an approach to reflection & awareness of gaps in medical knowledge & professional practice (revealed in active multi-sourced feedback), engaging in remedial strategies. (e.g. Searches for answers to patient care questions, strives to adapt & increase knowledge / skills to meet patient needs.)

D. Reflects routinely on gaps in medical knowledge & professional practice (revealed in active multi-sourced feedback), engaging in remedial strategies.

G. Begins to engage in scholarly activity (e.g. creation, dissemination, application & translation of knowledge by completing a scholarly project / practice audit / quality improvement process).

E. Engages in scholarly activity (e.g. creation, dissemination, application & translation of knowledge by completing a scholarly project / practice audit / quality improvement process).

H. Demonstrates attention to work-life balance & personal care.

F. Maintains work-life balance & personal care, promoting care of colleagues.