

This document is to be used in conjunction with the *Pathway to Competence User Guide*, which is available on the Royal College's website.

Effective for residents who enter training on or after July 1, 2026.

MEDICAL EXPERT MILESTONES: RESIDENCY				
	Transition to discipline	Foundations of discipline	Core of discipline	Transition to practice
1. Practise medicine within their defined scope of practice and expertise				
1.1. Demonstrate a commitment to high-quality care for their patients		Demonstrate compassion for patients	Under supervision, demonstrate commitment and accountability for patients in their care Demonstrate responsibility and accountability for decisions regarding patient care _{C3}	Demonstrate a commitment to high-quality care of their patients Demonstrate an awareness of what is required to practice safely and effectively in the setting of future practice _{TTP4} Demonstrate responsibility and accountability for decisions regarding patient care when on-call, acting in the role of junior attending _{TTP3}
1.2. Integrate the CanMEDS Intrinsic Roles into their practice of Plastic Surgery	Explain how the Intrinsic Roles need to be integrated into the practice of Plastic Surgery to deliver optimal patient care			Integrate the CanMEDS Intrinsic Roles into their practice of Plastic Surgery

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1.3. Apply the competencies of Surgical Foundations		Apply the competencies of surgical foundations		
1.4. Apply knowledge of the clinical and biomedical sciences relevant to Plastic Surgery	Apply knowledge of anatomy ^{TTD1}	Apply clinical and biomedical sciences to manage core patient presentations in Plastic Surgery Apply knowledge of anatomy, key landmarks, and the surgical procedure ^{F2, F7, C2, C5, C6, C7, C8, C10, C12, C14, C16, C18, C19, C20, C22, C25, C28, C29, C32, C33, C34, C36, C37, C40, C41} Apply knowledge of the indications for breast cancer treatment options, including surgical interventions and adjuvant therapy ^{F8} Apply knowledge of the surgical techniques used in the management of breast cancer ^{F8}	Apply knowledge of facial anatomy with respect to safety and injection danger zones ^{C31}	Apply a broad base and depth of knowledge in clinical and biomedical sciences to manage the breadth of patient presentations in Plastic Surgery

1.5. Perform appropriately timed clinical assessments with recommendations that are presented in an organized manner		Perform focused clinical assessments with recommendations that are well-documented Perform a clinical assessment that addresses all relevant issues F1, C9, C11, C15, C17, C23, C24, C26, C30, C35 Recognize urgent problems that may need the involvement of more experienced colleagues and seek their assistance immediately Recognize urgent problems and seek assistance F1, F2, F3	Perform clinical assessments that address the breadth of issues in each case Recognize an adverse event arising from patient care and develop a plan for appropriate follow-up and care C4	Perform appropriately timed clinical assessments addressing the breadth of Plastic Surgery with recommendations that are well-organized and properly documented in written and/or oral form
1.6. Carry out professional duties in the face of multiple competing demands		On the basis of patient-centred priorities, seek assistance to prioritize multiple competing tasks that need to be addressed	Maintain a duty of care and patient safety while balancing multiple responsibilities Prioritize patients on the basis of clinical presentations Carry out professional duties in the face of multiple, competing demands C44	
1.7. Recognize and respond to the complexity, uncertainty, and ambiguity inherent in Plastic Surgery practice	Identify clinical situations in which complexity, uncertainty, and ambiguity may play a role in decision-making	Develop a plan that considers the current complexity, uncertainty, and ambiguity in a clinical situation	Adapt care as the complexity, uncertainty, and ambiguity of the patient's clinical situation evolves	Recognize and respond to the complexity, uncertainty, and ambiguity inherent in Plastic Surgery practice

			Seek assistance in situations that are complex or new	
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MEDICAL EXPERT MILESTONES: RESIDENCY

	Transition to discipline	Foundations of discipline	Core of discipline	Transition to practice
2. Perform a patient-centred clinical assessment and establish a management plan				
2.1. Prioritize issues to be addressed in a patient encounter	Determine the acuity of the condition and the priorities for patient care TTD1, F4, C11, C17, C35	Iteratively establish priorities, considering the perspective of the patient and family (including values and preferences) as the patient's situation evolves	Prioritize patients based on the acuity of the clinical presentation C1 Recognize the need to escalate care, including airway compromise, c-spine injury and/or compartment syndrome C27 Consider clinical urgency, feasibility, availability of resources, and comorbidities in determining priorities to be addressed during the current encounter or during future visits or with other health care practitioners	Prioritize which issues need to be addressed during future visits or with other health care practitioners Prioritize referrals on the basis of clinical acuity TTP3
2.2. Elicit a history, perform a physical exam, select appropriate investigations, and interpret their results for the purpose of diagnosis and management, disease prevention, and health promotion	Gather a relevant clinical history TTD1, F2, F3, F8, C38, C39 Perform a physical examination and interpret the clinical significance TTD1, F2, F3, F8, C38, C39 Select appropriate labs, imaging and testing TTD1 Synthesize information from the clinical	Develop a specific differential diagnosis relevant to the patient's presentation Assess burn wound extent and depth F4, C26 Select and interpret appropriate investigations F2, F3, C1, C9, C11, C13, C15, C17, C21, C30, C35 C38, C39 Interpret a pathology report F8	Select and interpret appropriate investigations based on a differential diagnosis Synthesize patient information to determine diagnosis Focus the clinical encounter, performing it in a time-effective manner, without excluding key elements C1	Elicit a history, perform a physical exam, select appropriate investigations, and interpret their results for the purpose of diagnosis and management, disease prevention, and health promotion Assess the suitability of requests for consultation TTP3

assessment for the purpose of written or verbal summary to a supervisor TTD1

Elicit information regarding the impact of the disorder on the patient's functional ability C21

Gather information about the injury and any past treatments C29

Ascertain and manage patient expectations C13, C30, C31

Assess functional and aesthetic concerns C29

Assess the psychological and social factors contributing to a request for aesthetic/cosmetic surgery C30

Assess the impact of the condition on the child and family C39

Assess social factors contributing to the risk of burn injury C26

Recognize findings suggestive of non-accidental injury C26, C38

Adapt the clinical assessment to the child's age and development stage C38, C39

Perform a primary and secondary survey, including estimate of TBSA and

			assessment of inhalation injury C27 Determine area of burn using age-appropriate clinical tools C26 Determine extent of injury C23 Perform a physical examination to define extent of injury/wound and potential donor sites C29 Assess the defect, including extent and tissue type C9, C13 Assess tissue perfusion and viability, including use of bedside ultrasound as appropriate C11, C13 Recognize risk factors for compartment syndrome C27 Perform sensory and motor examination relevant to peripheral nerve injury C21 Perform an assessment of facial aging, including soft tissue and bony deformities C31 Select investigations to complete staging evaluation C24 Interpret electrodiagnostic evaluations C21	
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			Interpret a synoptic pathology report ^{C24} Synthesize patient information to assess perioperative risk and/or determine suitability for surgical management ^{C35}	
2.3. Establish goals of care in collaboration with patients and their families*, which may include slowing disease progression, treating symptoms, achieving cure, improving function, and palliation		Work with the patient and their family to understand relevant options for care Address with the patient and family their ideas about the nature and cause of the health problem, fears and concerns, and expectations of health care professionals	Address the impact of the medical condition on the patient's ability to pursue life goals and purposes Share concerns, in a constructive and respectful manner, with patients and their families about goals of care that are not felt to be achievable Establish goals of care ^{C27}	Establish goals of care in collaboration with the patient and family, which may include slowing disease progression, achieving cure, improving function, and palliation
2.4. Establish a patient-centred management plan	Develop and implement a plan for initial management ^{TTD1, F1, F2}	Develop and implement initial management plans for common problems in Plastic Surgery Ensure that the patient and family are informed about the risks and benefits of each treatment option in the context of best evidence and guidelines Provide resuscitation, including fluid and electrolyte management ^{F4}	Develop and implement management plans that consider all of the patient's health problems and context in collaboration with patients and their families and, when appropriate, the interprofessional team Develop, in collaboration with a patient and their family, a plan to deal with clinical uncertainty Develop and implement a	Establish a patient-centred management plan

*Throughout this document, phrases such as "patients and their families" are intended to include all those who are personally significant to the patient and are concerned with their care, including, according to the patient's circumstances, family members, partners, caregivers, legal guardian, and substitute decision-makers.

Assess the need and timing of transfer to another level of care F4

Develop a plan for care prior to and during transfer F4, C23

Provide non-surgical management using topical antibacterials and all available techniques for topical wound care F4, C26

Provide wound care, including appropriate dressings, anti-bacterial and/or wound care systems as needed F1

Identify indications for adjuvant therapy F8, C24

Discuss with the patient and family the degree of uncertainty inherent in all clinical situations

plan for resuscitation, management of other injuries and/or pre-operative optimization C23

Estimate fluid requirements and provide resuscitation C27

Develop a plan for definitive management which may include observation, surgical intervention and/or non-operative intervention C1

Develop a management plan, including non-operative and surgical intervention as appropriate C11, C15, C17, C26, C29, C30, C35, C38, C39

Determine suitability for surgical management C13

Determine the need for, plan for, and timing of surgical intervention C21

Provide non-operative management options, when relevant C21

Formulate a plan for peri-operative management, including surgical approach, timing and need for coordination with other specialists C23, C24, C35

Develop and implement a plan for wound

			management including dressings, and timing and technique for debridement and grafting C27 Develop and implement plans for ongoing care, discharge and follow-up C3	
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MEDICAL EXPERT MILESTONES: RESIDENCY

Transition to discipline

Foundations of discipline

Core of discipline

Transition to practice

3. Plan and perform procedures and therapies for the purpose of assessment and/or management

3.1. Determine the most appropriate procedures or therapies

Describe the indications, contraindications, risks, and alternatives for a proposed procedure F8

Describe to patients common procedures or therapies for common conditions in Plastic Surgery

Integrate all sources of information to develop a procedural or therapeutic plan that is safe, patient-centred, and considers the risks and benefits of all approaches

Determine the most appropriate procedures or therapies for the purpose of assessment and/or management C3, TTP1

Integrate planned procedures or therapies into global assessment and management plans

Determine the appropriate non-surgical facial rejuvenation technique C31

Integrate the clinical information to determine the surgical approach C15

Determine appropriate margins for excision C24, C25

Formulate a plan for sentinel lymph node biopsy C24

			Describe options for each component of the reconstruction C9 Develop a plan for reconstruction, including preferred flap(s) and specifics of harvesting C9, C13 Select the appropriate dosing and volume for correction of the patient's deformities C31	
3.2. Obtain and document informed consent, explaining the risks and benefits of, and the rationale for, a proposed procedure or therapy		Demonstrate knowledge of the indications and contraindications for the procedure F2 Obtain informed consent for commonly performed procedures and therapies, under supervision Obtain informed consent for minor procedures F1, F2	Use shared decision-making in the consent process, taking risk and uncertainty into consideration Obtain informed consent, explaining the risks and benefits of, rationale for, and alternatives to a proposed procedure or therapy C11, C17, C35 Provide pre-operative counselling, including discussion of the risks and benefits of, and alternatives to, surgical intervention C30	
3.3. Prioritize procedures or therapies, taking into account clinical urgency and available resources	Recognize and discuss the importance of the triaging and timing of a procedure or therapy Recognize situations requiring emergency or	Consider urgency, and potential for deterioration, in advocating for the timely execution of a procedure or therapy	Triage a procedure or therapy, taking into account clinical urgency, potential for deterioration, and available resources Advocate for a patient's procedure or therapy on the	Prioritize a procedure or therapy, taking into account clinical urgency, potential for deterioration, and available resources

	urgent surgical intervention TTD1		basis of urgency and available resources Book the procedures with appropriate urgency C1	
3.4. Perform procedures in a skilful and safe manner, adapting to unanticipated findings or changing clinical circumstances	Demonstrate effective procedure preparation, including the use of a pre-procedure time-out or safety checklist as appropriate Prepare, position, and drape the patient for the procedure C2, C5, C6, C7, C8, C10, C12, C14, C16, C18, C19, C20, C22, C25, C28, C29, C32, C33, C34, C36, C37, C40, C41	Gather appropriate instruments and materials F1 Provide airway management and/or respiratory support F4, C27 Select and provide local analgesia F1, F2 Perform the procedure in a skilful, fluid and safe manner F1 Respect tissue vitality when handling tissue and instruments F7 Perform key technical skill(s): Demonstrate aseptic technique, maintain the sterile field, ensure the wound bed is healthy, and apply the appropriate dressing F1 Perform key technical skill(s): Demonstrate aseptic technique, maintain the sterile field, restore functional hand anatomy, and apply the appropriate dressing and splint F2	Competently perform discipline-specific procedures Select and provide analgesia and/or sedation C38 Use surgical instruments and equipment correctly and in a fluid manner C2, C5, C6, C7, C8, C10, C12, C14, C16, C18, C19, C20, C22, C25, C28, C29, C32, C33, C34, C36, C37, C40, C41 Demonstrate intraoperative judgement, fluidity of movement, and forward progression C2, C5, C6, C7, C8, C10, C12, C14, C16, C18, C19, C20, C22, C25, C28, C29, C32, C33, C34, C36, C37, C40, C41 Perform safe dissection of relevant structures and tissue layers with gentle tissue handling C2, C5, C6, C7, C8, C10, C12, C14, C16, C18, C19, C20, C22, C25, C28, C29, C32, C33, C34, C36, C37, C40, C41 Perform key technical skill(s): Draw surgical landmarks, elevate and inset the flap, restore	Perform procedures in a skilful and safe manner, including effective use of surgical assistants TTP2 Manage unexpected intraoperative findings and perioperative issues, adjusting the procedure as appropriate TTP2

Perform key technical skill(s): Restore the integrity of abdominal fascia, integrating mesh as needed, and close soft tissue without tension _{F7}

Seek assistance as needed when unanticipated findings or changing clinical circumstances are encountered

Develop and implement a plan for post-procedure care including splinting _{F2}

functional anatomy, and close the donor site _{C5, C6}

Perform key technical skill(s): Draw surgical landmarks, elevate the flap while protecting the vascular pedicle, separate the flap from the donor site, and close the donor site _{C7}

Perform key technical skill(s): Expose and dissect the recipient vessels, and prepare them for microvascular anastomosis _{C7}

Perform key technical skill(s): Prepare and use the microscope, prepare the flap vessels, perform the microvascular anastomosis, and verify patency _{C7}

Perform key technical skill(s): Expose the donor site tissue, harvest autogenous tissue, close the donor site, and inset the graft _{C8}

Perform key technical skill(s): Prepare the recipient site, elevate and inset the flap, restore functional anatomy, restore facial aesthetic subunits, and close the donor site _{C10}

			Perform key technical skill(s): Draw surgical landmarks, debride and prepare the recipient site, elevate and inset the flap, restore functional anatomy, obliterate dead space, and close the donor site C12 Perform key technical skill(s): Draw surgical landmarks, debride and prepare the recipient site, elevate and inset the flap, restore functional anatomy, and close the donor site C14 Perform key technical skill(s): Expose and reduce fractures, apply stable fixation, restore facial dimensions, re-establish occlusion, and close the soft tissue envelope C16 Perform key technical skill(s): Use intra-operative imaging, expose and reduce fractures, apply stable fixation, ensure alignment, restore functional anatomy, and close soft tissue C18 Perform key technical skill(s): Expose abnormal anatomy, restore functional anatomy, use implants appropriately, and close soft tissue C19	
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			Perform key technical skill(s): Expose the injured tendon, restore functional anatomy, ensure tendon gliding without gapping, restore stable pulleys, and close soft tissue C20 Perform key technical skill(s): Expose the injured nerve, perform an appropriate neural microdissection, repair or reconstruct the nerve, use a nerve graft or transfer as necessary, and close soft tissue C22 Perform key technical skill(s): Draw excision margins, resect the lesion, and reconstruct the defect with a local flap or skin graft C25 Perform key technical skill(s): Excise burn eschar (tangential or fascial), use blood loss mitigation techniques, ensure the wound bed is viable, and harvest and apply the skin graft C28 Perform key technical skill(s): Anticipate wound size and contour post-release, release contractures, harvest the skin graft or flap, inset the graft or flap, and apply the appropriate dressing or	
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			immobilization C29 Perform key technical skill(s): Identify superficial landmarks, demonstrate proper injection techniques including sterile technique, inject in the appropriate plane, and enhance facial aesthetics C31 Perform key technical skill(s): Draw surgical landmarks, elevate soft tissue, enhance aesthetic anatomy, protect adjacent structures, and close soft tissue C32 Perform key technical skill(s): Draw surgical landmarks, elevate soft tissue, enhance aesthetic anatomy, use liposuction tools appropriately, and close soft tissue without tension C33 Perform key technical skill(s): Draw surgical landmarks, create an appropriate breast pocket, handle implants safely, ensure symmetry, and close soft tissue C34 Perform key technical skill(s): Draw surgical landmarks, create an appropriate breast pocket, handle implants/ADM safely, inset autologous	
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			tissue, shape the reconstruction, and close soft tissue C36 Perform key technical skill(s): Draw breast reduction markings, design and develop the pedicle, resect excess breast tissue, reposition the nipple-areolar complex, shape the breast, and close soft tissue C37 Perform key technical skill(s): Draw cleft lip correction markings, perform complex layered lip closure with anatomical correction, and perform palatal intra-oral suturing C41 Anticipate, recognize, and respond to intraoperative challenges C2, C5, C6, C7, C8, C10, C12, C14, C16, C18, C19, C20, C22, C25, C28, C29, C32, C33, C34, C36, C37, C40, C41 Perform escharotomy/fasciotomy, when necessary C27 Perform closed reduction, including assessing and managing alignment C38 Document procedures accurately	
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			Establish and implement a plan for post-operative care and rehabilitation c2, c12, c18, c19, c20, c22, c28, c32, c33, c34, c36	
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MEDICAL EXPERT MILESTONES: RESIDENCY**Transition to discipline****Foundations of discipline****Core of discipline****Transition to practice****4. Establish plans for ongoing care and, when appropriate, timely consultation**

4.1. Implement a patient-centred care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation

Determine the need and timing of referral to another health professional or service

F3, C1, C3, C9, C24

Coordinate investigation, treatment, and follow-up plans when multiple physicians and health care professionals are involved

Ensure follow-up on results of investigation and response to treatment

Establish a plan for ongoing care and/or follow-up of results of investigations F1

Identify indications for pre-operative psychological assessment C30

Coordinate involvement of the multidisciplinary team in the patient's care C29

Develop plans for ongoing management, including titration of fluid management and changes in the patient's clinical status C27

Develop a plan for ongoing care and timing of follow-up C38

Establish plans for ongoing care, taking into consideration the patient's clinical state, circumstances, preferences, and actions, as well as available resources, best practices, and research evidence

Implement a patient-centred care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation

Establish plans for post-operative care TTP2

MEDICAL EXPERT MILESTONES: RESIDENCY

	Transition to discipline	Foundations of discipline	Core of discipline	Transition to practice
5. Actively contribute, as an individual and as a member of a team providing care, to the continuous improvement of health care quality and patient safety				
5.1. Recognize and respond to harm from health care delivery, including patient safety incidents	Recognize the occurrence of a patient safety incident Differentiate outcomes of medical conditions and diseases from complications related to the inherent risks of treatments and from patient safety incidents	Prioritize the initial medical response to adverse events to mitigate further injury Incorporate, as appropriate, into a differential diagnosis, harm from health care delivery	Report patient safety incidents to appropriate institutional representatives Recognize near-misses in real time and respond to correct them, preventing them from reaching the patient Identify potential improvement opportunities arising from harmful patient safety incidents and near misses Participate in an analysis of patient safety incidents	Recognize and respond to harm from health care delivery, including patient safety incidents
5.2. Adopt strategies that promote patient safety and address human and system factors	Describe common types of cognitive and affective bias Describe the principles of situational awareness and their implications for medical practice	Use cognitive aids such as procedural checklists, structured communication tools, or care paths, to enhance patient safety Describe strategies to address human and system factors on clinical practice	Apply the principles of situational awareness to clinical practice Participate in the surgical safety checklist or equivalent C2, C5, C6, C7, C8, C10, C12, C14, C16, C18, C19, C20, C22, C25, C28, C29, C32, C33, C34, C36, C37, C40, C41	Adopt strategies that promote patient safety and address human and system factors Lead the team in the use of the surgical safety checklist TTP2

COMMUNICATOR MILESTONES: RESIDENCY

	Transition to discipline	Foundations of discipline	Core of discipline	Transition to practice
1. Establish professional therapeutic relationships with patients and their families				
1.1. Communicate using a patient-centred approach that encourages patient and family trust and autonomy and is characterized by empathy, respect, and compassion	Communicate using a patient-centred approach that facilitates patient trust and autonomy and is characterized by empathy, respect, and compassion Establish rapport and explain the purpose of the visit TTD1	Recognize and respect the patient's psychological and emotional needs F8, C30	Demonstrate empathy, respect, and compassion C42	
1.2. Optimize the physical environment for patient comfort, dignity, privacy, engagement, and safety	Mitigate physical barriers to communication to optimize patient comfort, dignity, privacy, engagement, and safety Optimize the physical environment for patient comfort and privacy TTD1			
1.3. Recognize when the perspectives, values, or biases of patients, patients' families, physicians, or other health care professionals may have an impact on the quality of care, and modify the approach to the patient accordingly			Recognize when the values, biases, or perspectives of patients, physicians, or other health care professionals may have an impact on the quality of care, and modify the approach to the patient accordingly	

1.4. Respond to a patient's non-verbal behaviours to enhance communication	Identify, verify, and validate non-verbal cues on the part of patients and their families Use appropriate non-verbal communication to demonstrate attentiveness, interest, and responsiveness C42		Respond to patients' non-verbal communication and use appropriate non-verbal behaviours to enhance communication with patients	
1.5. Manage disagreements and emotionally charged conversations		Recognize when personal feelings in an encounter are valuable clues to the patient's emotional state	Recognize when strong emotions (such as anger, fear, anxiety, or sadness) are impacting an interaction and respond appropriately Manage disagreements and emotionally charged conversations with patients and/or families C3 Establish boundaries as needed in emotional situations Support patients/families in discussions and decision-making regarding poor prognosis C27	
1.6. Adapt to the unique needs and preferences of each patient and each patient's clinical condition and circumstances		Assess a patient's decision-making capacity	Tailor approaches to decision-making to patient capacity, values, and preferences Adapt to the unique needs and preferences of each patient/family C42	Adapt to the unique needs and preferences of each patient and to their clinical condition and circumstances

2. Elicit and synthesize accurate and relevant information, incorporating the perspectives of patients and their families

2.1. Use patient-centred interviewing skills to effectively gather relevant biomedical and psychosocial information		Conduct a patient-centred interview, gathering all relevant biomedical and psychosocial information for any clinical presentation Integrate and synthesize information about the patient's beliefs, values, preferences, context, and expectations with biomedical and psychosocial information	Actively listen and respond to patient cues ^{C42} Integrate, summarize, and present the biopsychosocial information obtained from a patient-centred interview	Use patient-centred interviewing skills to effectively gather relevant biomedical and psychosocial information
2.2. Provide a clear structure for and manage the flow of an entire patient encounter		Conduct a focused and efficient patient interview, managing the flow of the encounter while being attentive to the patient's cues and responses	Manage the flow of challenging patient encounters, including those with angry, distressed, or excessively talkative individuals	Provide a clear structure for and manage the flow of an entire patient encounter
2.3. Seek and synthesize relevant information from other sources, including the patient's family, with the patient's consent	Identify other sources of information (e.g., family, medical record) that may assist in a patient's care ^{TTD1}	Seek and synthesize relevant information from other sources, including the patient's family, with the patient's consent	Gather and synthesize pertinent patient information from a referring physician ^{C23}	

3. Share health care information and plans with patients and their families

3.1. Share information and explanations that are clear, accurate, and timely while assessing for patient and family understanding	Communicate the diagnosis, prognosis and plan of care in a clear, compassionate, respectful, and accurate manner to the patient and family	Use strategies to verify and validate the understanding of the patient and family with regard to the diagnosis, prognosis, and management plan	Use appropriate language and terminology to optimize patient understanding ^{C30} Use clear and concise language; avoid or adequately explain	Communicate clearly with patients and others in the setting of ethical dilemmas Convey information about the procedure, operative findings and patient status to the family
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	Share information and explanations with the patient/family TTD1, F2, F3, F4, C38, C39 Recognize when to seek help in providing clear explanations to the patient and family	Communicate effectively with the patient during the procedure F1	medical jargon C42 Convey information related to the patient's health status, care, and needs in a timely, honest, and transparent manner Convey information about diagnosis/prognosis clearly and compassionately C27 Provide information about the diagnosis, convey treatment options, and discuss the plan of care with the patient/family clearly and compassionately C11, C13, C15, C17, C21, C23	clearly and compassionately TTP2
3.2. Disclose harmful patient safety incidents to patients and their families accurately and appropriately	Describe the steps in providing disclosure after a patient safety incident		Communicate the reasons for unanticipated clinical outcomes and disclose adverse events C4 Apologize appropriately for a harmful patient safety incident	Disclose patient safety incidents to the patient and family accurately and appropriately Plan and document follow-up to harmful patient safety incident

4. Engage patients and their families in developing plans that reflect the patient's health care needs and goals

4.1. Facilitate discussions with patients and their families in a way that is respectful, non-judgmental, and culturally safe	Conduct an interview, demonstrating cultural awareness	Explore the perspectives of the patient and others when developing care plans Communicate with cultural awareness and sensitivity	Facilitate the discussion in a way that is respectful and non-judgmental ^{C30}	Facilitate discussions with the patient and family in a way that is respectful, non-judgmental, and culturally safe
4.2. Assist patients and their families to identify, access, and make use of information and communication technologies to support their care and manage their health				Assist the patient and family to identify, access, and make use of information and communication technologies to support care and manage health
4.3. Use communication skills and strategies that help patients and their families make informed decisions regarding their health	Demonstrate steps to obtaining informed consent	Answer questions from the patient and/or family ^{C4, C42}		Use communication skills and strategies that help the patient and family make informed decisions regarding their health

5. Document and share written and electronic information about the medical encounter to optimize clinical decision-making, patient safety, confidentiality, and privacy

5.1. Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements	Organize information in appropriate sections within an electronic or written medical record Maintain accurate and up-to-date problem lists and medication lists	Document information about patients and their medical conditions in a manner that enhances intra- and interprofessional care Document clinical encounters to convey the clinical assessment and rationale for decisions/recommendations C11, C17, C35, TTP1 Convey clinical reasoning F6 Document the procedure F2 Document all relevant findings F6 Organize information in appropriate sections F6 Complete clinical documentation in a timely manner F6	Adapt record keeping to the specific guidelines of Plastic Surgery and the clinical context Identify and correct vague or ambiguous documentation Document discussions regarding informed consent in an accurate and complete manner C30, C31 Document the surgical procedure in a complete and timely manner C2, C5, C6, C7, C8, C10, C12, C14, C16, C18, C19, C20, C22, C25, C28, C29, C32, C33, C34, C36, C37, C40, C41, TTP2 Document a clinical encounter to adequately convey a procedure, its outcome and the rationale for decisions C4	Document clinical encounters in an accurate, complete, timely and accessible manner, and in compliance with legal and privacy requirements
5.2. Communicate effectively using a written health record, electronic medical record, or other digital technology		Demonstrate reflective listening, open-ended inquiry, empathy, and effective eye contact while using a written or electronic medical record	Adapt use of the health record to the patient's health literacy and the clinical context	Communicate effectively using a written health record, electronic medical record, or other digital technology

5.3. Share information with patients and others in a manner that enhances understanding and that respects patient privacy and confidentiality	Assess patients' needs and preferences with respect to methods of information sharing		Adapt written and electronic communication to the specificity of the discipline and to the expectations of patients	Share information with patients and others in a manner that respects patient privacy and confidentiality and enhances understanding
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COLLABORATOR MILESTONES: RESIDENCY

	Transition to discipline	Foundations of discipline	Core of discipline	Transition to practice
1. Work effectively with physicians and other colleagues in the health care professions				
1.1. Establish and maintain positive relationships with physicians and other colleagues in the health care professions to support relationship-centred collaborative care	Compare and contrast enablers of and barriers to collaboration in health care	Respect established rules of their team Receive and appropriately respond to input from other health care professionals Differentiate between task and relationship issues among health care professionals	Anticipate, identify, and respond to patient safety issues related to the function of a team	Establish and maintain healthy relationships with physicians and other colleagues in the health care professions to support relationship-centred collaborative care
1.2. Negotiate overlapping and shared responsibilities with physicians and other colleagues in the health care professions in episodic and ongoing care	Discuss the role and responsibilities of a specialist in Plastic Surgery	Describe the roles and scopes of practice of other health care providers related to Plastic Surgery Work effectively with nurses and/or other assistants F2 Work effectively with the OR team F7 , C2 , C5 , C6 , C7 , C8 , C10 , C12 , C14 , C16 , C18 , C19 , C20 , C22 , C25 , C28 , C29 , C32 , C33 , C34 , C36 , C37 , C40 , C41 , TTP2	Consult as needed with other health care professionals, including other physicians Make effective use of the scope and expertise of other health care professionals C3 Make effective use of operative assistants C2 , C5 , C6 , C7 , C8 , C10 , C12 , C14 , C16 , C18 , C19 , C20 , C22 , C25 , C28 , C29 , C32 , C33 , C34 , C36 , C37 , C40 , C41 Consult, as needed, with the wound care team C11	Negotiate overlapping and shared care responsibilities with physicians and other colleagues in the health care professions in episodic and ongoing care
1.3. Engage in respectful shared decision-making with physicians and	Discuss with the patient and family any plan for involving other health care professionals, including	Integrate the patient's perspective and context into the collaborative care plan	Consult and work effectively with other physicians to provide all	Engage in respectful shared decision-making with physician and other

other colleagues in the health care professions	other physicians, in the patient's care		needed aspects of care C13, C15, C23, C27 Provide timely and necessary written information to colleagues to enable effective relationship-centred care	colleagues in the health care professions Use referral and consultation as opportunities to improve quality of care and patient safety by sharing expertise
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2. Work with physicians and other colleagues in the health care professions to promote understanding, manage differences, and resolve conflicts

2.1. Show respect toward collaborators	Convey information thoughtfully Respond to requests and feedback in a respectful and timely manner	Actively listen to and engage in interactions with collaborators	Delegate tasks and responsibilities in an appropriate and respectful manner C3	Show respect toward collaborators
2.2. Implement strategies to promote understanding, manage differences, and resolve conflict in a manner that supports a collaborative culture		Identify communication barriers between health care professionals Communicate clearly and directly to promote understanding, manage differences, and resolve conflicts Listen to understand and find common ground with collaborators	Gather the information and resources needed to manage differences and resolve conflicts among collaborators Analyze team dynamics Gain consensus among colleagues in resolving conflicts	Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports a collaborative culture

3. Hand over the care of a patient to another health care professional to ensure continuity of safe patient care

3.1. Determine when care should be transferred to another physician or health care professional		Identify patients requiring handover to other physicians or health care professionals		Determine when care should be transferred to another physician or health care professional
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3.2. Demonstrate safe handover of care, using both oral and written communication, during a patient transition to a different health care professional, setting, or stage of care	Describe specific information required for safe and effective handover during transitions in care	Communicate with the receiving physicians or health care professionals during transitions in care, clarifying issues after transfer as needed Communicate with the patient's primary health care professional about the patient's care Summarize the patient's issues in the transfer summary, including plans to deal with the ongoing issues	Organize the handover of care to the most appropriate physician or health care professional Provide safe handover of care ^{C1} Analyze gaps in communication between health care professionals during transitions in care Recognize and act on patient safety issues in the transfer of care	Demonstrate safe transfer of care, both verbal and written, during patient transitions to a different healthcare professional, setting, or stage in care
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LEADER MILESTONES: RESIDENCY

	Transition to discipline	Foundations of discipline	Core of discipline	Transition to practice
1. Contribute to the improvement of health care delivery in teams, organizations, and systems				
1.1. Apply the science of quality improvement to systems of patient care	Describe quality improvement methodologies	Compare and contrast the traditional methods of research design with those of improvement science Compare and contrast systems of theory with traditional approaches to quality improvement Seek data to inform practice and engage in an iterative process of improvement	Analyze and provide feedback on processes seen in one's own practice, team, organization, or system Identify potential improvement opportunities C46 Gather information for the purposes of quality assurance or improvement C46 Participate in a patient safety and/or quality improvement initiative Identify the impact of human and system factors on health care delivery C46 Integrate existing standards for health care delivery with findings of data collection C46	Apply the science of quality improvement to contribute to improving systems of patient care
1.2. Contribute to a culture that promotes patient safety			Actively encourage all involved in health care, regardless of their role, to report and respond to unsafe situations	Contribute to a culture that promotes patient safety

			Engage patients and their families in the continuous improvement of patient safety Model a just culture to promote openness and increased reporting	
1.3. Analyze patient safety incidents to enhance systems of care	Describe the available supports for patients and health care professionals when patient safety incidents occur			Analyze harmful patient safety incidents and near misses to enhance systems of care
1.4. Use health informatics to improve the quality of patient care and optimize patient safety	Describe the data available from health information systems in Plastic Surgery to optimize patient care		Map the flow of information in the care of their patients and suggest changes for quality improvement and patient safety Use data on measures of clinical performance during team discussions and to support team decision-making	Use health informatics to improve the quality of patient care and optimize patient safety

2. Engage in the stewardship of health care resources

2.1. Allocate health care resources for optimal patient care	Describe the costs of common diagnostic and therapeutic interventions relevant to Plastic Surgery	Describe models for resource stewardship in health care used at the institutional level Consider costs when choosing care options	Use clinical judgment to minimize wasteful practices Develop practice-based and system-based rules for resource allocation	
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			Allocate health care resources for optimal patient care _{C3}	
2.2. Apply evidence and management processes to achieve cost-appropriate care		Apply evidence and guidelines with respect to resource utilization in common clinical scenarios	Determine cost discrepancies between best practice and their current practice Optimize practice patterns for cost-effectiveness and cost control	Apply evidence and management processes to achieve cost-appropriate care

3. Demonstrate leadership in health care systems

3.1. Demonstrate leadership skills to enhance health care	Analyze their own leadership styles, including strengths, weaknesses, and biases		Plan work schedules for the service team _{C3} Contribute to a health care change initiative	Demonstrate leadership skills to enhance health care
3.2. Facilitate change in health care to enhance services and outcomes		Analyze patient feedback to help improve patient experiences and clinical outcomes Describe key health policy and organizational issues in Plastic Surgery	Develop a strategy for implementing change in health care with patients, physicians, and other health care professionals Analyze ongoing changes occurring in health care delivery	Facilitate change in health care to enhance services and outcomes

4. Manage career planning, finances, and health human resources in personal practice(s)

4.1. Set priorities and manage time to integrate practice and personal life	Align priorities with expectations for professional practice	Build relationships with mentors Organize work using	Manage time and prioritize tasks _{C3}	Set priorities and manage time to integrate practice and personal life
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		strategies that address strengths and identify areas to improve in personal effectiveness		Manage time effectively in the ambulatory clinic TTP1 Review and act on test results (including imaging) in a timely manner TTP1 Manage required time for entire surgical list in efficient and effective manner TTP2 Integrate supervisory and teaching responsibilities into the overall management of the outpatient clinic TTP1
4.2. Manage a personal professional practice(s) and career	Review opportunities for practice preparation, including choices available for further training Maintain a portfolio and reflect professional development	Examine personal interests and seek career mentorship and counselling	Manage the service efficiently, safely and effectively c3 Reconcile expectations for practice with job opportunities and workforce needs Adjust educational experiences to gain competencies necessary for future practice TTP4 Describe remuneration models as they pertain to Plastic Surgery Plan practice finances, considering short- and long-term goals	Manage bookings to optimize clinic scheduling TTP1 Book operative cases with appropriate urgency, duration, and including requests for specialized equipment TTP1 Demonstrate leadership skills in the operating room TTP2 Apply knowledge of billing practices TTP3 Examine personal interests and career goals TTP4 Manage a career and a practice

4.3. Implement processes to ensure personal practice improvement	Describe how practice standardization can improve quality of health care		Improve personal practice by evaluating a problem, setting priorities, executing a plan, and analyzing the results	Implement processes to ensure personal practice improvement
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HEALTH ADVOCATE MILESTONES: RESIDENCY

	Transition to discipline	Foundations of discipline	Core of discipline	Transition to practice
1. Respond to an individual patient's health needs by advocating with the patient within and beyond the clinical environment				
1.1. Work with patients to address determinants of health that affect them and their access to needed health services or resources	Analyze a given patient's needs for health services or resources related to the scope of Plastic Surgery	Demonstrate an approach to working with patients to advocate for health services or resources	Facilitate timely patient access to services and resources ^{C3} Assess and facilitate the patient's access to health services, financial resources and psychological support ^{C29}	Work with patients to address the determinants of health that affect them and their access to needed health services or resources
1.2. Work with patients and their families to increase opportunities to adopt healthy behaviours	Identify resources or agencies that address the health needs of patients	Select patient education resources related to Plastic Surgery Educate the patient and family about information and communication technologies to improve health	Apply the principles of behaviour change during conversations with patients about adopting healthy behaviours Counsel patients regarding strategies for injury prevention ^{C26}	Work with the patient and family to increase opportunities to adopt healthy behaviours
1.3. Incorporate disease prevention, health promotion, and health surveillance into interactions with individual patients		Work with the patient and family to identify opportunities for disease prevention, health promotion, and health protection	Evaluate with the patient the potential benefits and harms of health screening Counsel patients regarding the adverse effects of sun exposure ^{C24}	Incorporate disease prevention, health promotion, and health surveillance activities into interactions with individual patients

2. Respond to the needs of communities or populations they serve by advocating with them for system-level change in a socially accountable manner

2.1. Work with a community or population to identify the determinants of health that affect them		Identify communities or populations they serve who are experiencing health inequities	Analyze current policy or policy developments that affect the communities or populations they serve	Work with a community or population to identify the determinants of health that affect them
2.2. Improve clinical practice by applying a process of continuous quality improvement to disease prevention, health promotion, and health surveillance activities	Participate in health promotion and disease prevention programs relevant to their practice	Identify patients or populations that are not being served optimally in their clinical practice	Report epidemics or clusters of unusual cases seen in practice, balancing patient confidentiality with the duty to protect the public's health	Improve clinical practice by applying a process of continuous quality improvement to disease prevention, health promotion, and health surveillance activities
2.3. Contribute to a process to improve health in the community or population they serve		Partner with others to identify the health needs of a community or population they serve	Appraise available resources to support the health needs of communities or populations they serve Distinguish between potentially competing health interests of the individuals, communities, and populations they serve	Contribute to a process to improve health in the communities or populations they serve

SCHOLAR MILESTONES: RESIDENCY

	Transition to discipline	Foundations of discipline	Core of discipline	Transition to practice
1. Engage in the continuous enhancement of their professional activities through ongoing learning				
1.1. Develop, implement, monitor, and revise a personal learning plan to enhance professional practice	Describe physicians' obligations for lifelong learning and ongoing enhancement of competence	Create a learning plan in collaboration with a designated supervisor identifying learning needs related to Plastic Surgery and career goals Use technology to develop, record, monitor, revise, and report on learning in medicine Demonstrate a structured approach to monitoring progress of learning in the clinical setting	Review and update earlier learning plan(s) with input from others, identifying learning needs related to all CanMEDS Roles to generate immediate and longer-term career goals	Develop, implement, monitor, and revise a personal learning plan to enhance professional practice Define learning needs related to personal practice and/or career goals TTP4 Create a learning plan that is feasible, includes clear deliverables and a plan for monitoring ongoing achievement TTP4 Identify resources required to implement a personal learning plan TTP4
1.2. Identify opportunities for learning and improvement by regularly reflecting on and assessing their performance using various internal and external data sources		Identify, record, prioritize and answer learning needs that arise in daily work, scanning the literature or attending formal or informal education sessions	Seek and interpret multiple sources of performance data and feedback, with guidance, to continually improve performance	Identify opportunities for learning and improvement by regularly reflecting on and assessing their performance using various internal and external data sources Interpret data on personal performance to identify opportunities for

				learning and improvement TTP4
1.3. Engage in collaborative learning to continuously improve personal practice and contribute to collective improvements in practice		Identify the learning needs of a health care team		Engage in collaborative learning to continuously improve personal practice and contribute to collective improvements in practice

2. Teach students, residents, the public, and other health care professionals

2.1. Recognize the influence of role-modelling and the impact of the formal, informal, and hidden curriculum on learners		Identify behaviours associated with positive and negative role-modelling	Use strategies for deliberate, positive role-modelling Recognize the influence of role-modelling and the impact of the formal, informal, and hidden curriculum on learners C44	
2.2. Promote a safe and respectful learning environment		Explain how power differentials between learners and teachers can affect the learning environment		Ensure a safe learning environment for all members of the team
2.3. Ensure patient safety is maintained when learners are involved		Identify unsafe clinical situations involving learners and manage them appropriately	Supervise learners to ensure they work within limitations, seeking guidance and supervision when needed Supervise junior learners to ensure they work within their knowledge level C3 Provide appropriate supervision of the learner, balancing	Ensure patient safety is maintained when learners are involved Provide junior learners with opportunities for appropriate clinical responsibility TTP2

			patient safety, dignity, confidentiality and care with educational needs ^{C44} Balance clinical supervision and graduated responsibility, ensuring the safety of patients and learners	
2.4. Plan and deliver learning activities		Demonstrate basic skills in teaching others, including peers Present information in an organized manner to facilitate understanding ^{F5}	Describe how to formally plan a medical education session Describe sources of information used to assess learning needs Define specific learning objectives for a teaching activity Choose appropriate content, teaching format, and strategies tailored to both the learner and Plastic Surgery setting ^{C44} Describe clinical teaching strategies relevant to Plastic Surgery Provide formal and informal teaching for junior learners ^{C3} Provide bedside teaching, including teaching procedural skills ^{C44}	Plan and deliver a learning activity

2.5. Provide feedback to enhance learning performance		Provide written or verbal feedback to other learners, faculty and other members of the team	Provide junior learners with useful timely feedback ^{C3, C44}	Provide feedback to learners to enhance learning and performance ^{TTP2} Role-model regular self-assessment and feedback-seeking behaviour
2.6. Assess and evaluate learners, teachers, and programs in an educationally appropriate manner			Appropriately assess junior learners	Assess and evaluate learners, teachers, and programs in an educationally appropriate manner

3. Integrate best available evidence into practice

3.1. Recognize practice uncertainty and knowledge gaps in clinical and other professional encounters and generate focused questions that can address them		Recognize uncertainty and knowledge gaps in clinical and other professional encounters relevant to Plastic Surgery Generate focused questions that address practice uncertainty and knowledge gaps ^{F5, TTP4}		
3.2. Identify, select, and navigate pre-appraised resources		Contrast the various study designs used in medicine and the quality of various pre-appraised resources Identify, select, and navigate pre-appraised resources ^{F5}		
3.3. Critically evaluate the integrity, reliability, and applicability of health-		Identify relevant material via a search of the medical literature ^{F5}	Identify sources of information relevant to a question arising in practice ^{C43}	

related research and literature		Interpret study findings, including a critique of their relevance to practice F5 Determine the validity and risk of bias in a source of evidence F5	Evaluate the applicability (external validity or generalizability) of evidence from a resource Describe study results in both quantitative and qualitative terms Critically evaluate the integrity, reliability, and applicability of health-related research and literature C45	
3.4. Integrate evidence into decision-making in their practice		Discuss the barriers to and facilitators of applying evidence into practice Describe how various sources of information, including studies, expert opinion, and practice audits, contribute to the evidence base of medical practice Integrate best evidence and clinical expertise into decision-making F5, C3, C46	Identify new evidence appropriate to their scope of professional practice through quality-appraised evidence-alerting services Teach learners to effectively find, appraise and integrate evidence into decision making in their practice C44	

4. Contribute to the creation and dissemination of knowledge and practices applicable to health

4.1. Demonstrate an understanding of the scientific principles of research and scholarly inquiry and the role of research evidence in health care			Contribute to a scholarly investigation or the dissemination of research findings in Plastic Surgery	Demonstrate an understanding of the scientific principles of research and scholarly inquiry and the role of research evidence in health care
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4.2. Identify ethical principles for research and incorporate them into obtaining informed consent, considering potential harms and benefits, and considering vulnerable populations		Discuss and provide examples of the ethical principles applicable to research and scholarly inquiry relevant to Plastic Surgery		Identify ethical principles for research and incorporate them into obtaining informed consent, considering harm and benefits, and considering vulnerable populations
4.3. Contribute to the work of a research program		Compare and contrast the roles and responsibilities of members of a research team and describe how they differ from clinical and other practice roles and responsibilities	Actively participate as a research team member, balancing the roles and responsibilities of a researcher with the clinical roles and responsibilities of a physician	Contribute to the work of a research program
4.4. Pose questions amenable to scholarly investigation and select appropriate methods to address them		Describe and compare the common methodologies used for scholarly inquiry in Plastic Surgery	Select appropriate methods of addressing a given scholarly question C45 Generate focused questions for scholarly investigation C45 Design and execute a research plan including securing ethics approval where required C45 Collect and analyze data using appropriate statistical methods C45, C46	Pose medically and scientifically relevant and appropriately constructed questions amenable to scholarly investigation
4.5. Summarize and communicate to		Summarize and communicate to peers the	Summarize and communicate the findings	Summarize and communicate to professional

professional and lay audiences, including patients and their families, the findings of relevant research and scholarly inquiry		findings of applicable research and scholarship	of research and scholarly inquiry ^{C45} Summarize the findings of a literature review ^{C45}	and lay audiences, including patients and their families, the findings of applicable research and scholarly inquiry Prepare a manuscript suitable for publication in a peer-reviewed journal
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PROFESSIONAL MILESTONES: RESIDENCY

	Transition to discipline	Foundations of discipline	Core of discipline	Transition to practice
1. Demonstrate a commitment to patients by applying best practices and adhering to high ethical standards				
1.1. Exhibit appropriate professional behaviours and relationships in all aspects of practice, demonstrating honesty, integrity, humility, commitment, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality	Consistently prioritize the needs of patients and others to ensure a patient's legitimate needs are met Demonstrate punctuality Complete assigned responsibilities	Independently manage specialty-specific issues surrounding confidentiality, intervening when confidentiality is breached Work within personal limits, asking for help as needed F7, C2, C5, C6, C7, C8, C10, C12, C14, C16, C18, C19, C20, C22, C25, C28, C29, C32, C33, C34, C36, C37, C40, C41	Exhibit appropriate professional behaviours C3, C42, TTP2 Manage complex issues while preserving confidentiality Intervene when behaviours toward colleagues and learners undermine a respectful environment TTP2 Respond punctually to requests from patients or other health care professionals C3	Exhibit appropriate professional behaviours and relationships in all aspects of practice, reflecting honesty, integrity, humility, dedication, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality Communicate in an efficient and respectful manner with patients and other health care providers TTP1
1.2. Demonstrate a commitment to excellence in all aspects of practice			Analyze how the system of care supports or jeopardizes excellence Prepare for the procedure, reviewing relevant investigations and pre-operative assessments/consults C2, C5, C6, C7, C8, C10, C12, C14, C16, C18, C19, C20, C22, C25, C28, C29, C32, C33, C34, C36, C37, C40, C41, TTP2	Demonstrate a commitment to excellence in all aspects of practice
1.3. Recognize and respond to ethical issues encountered in practice			Manage ethical issues encountered in the clinical and academic setting	

			Apply the principles of ethics to address clinical issues C43 Recognize and respond to ethical issues encountered in practice C43	
1.4. Recognize and manage conflicts of interest			Proactively resolve real, potential, or perceived conflicts of interest transparently and in accordance with ethical, legal, and moral obligations	Recognize and manage conflicts of interest in independent practice
1.5. Exhibit professional behaviours in the use of technology-enabled communication			Intervene when aware of breaches of professionalism involving technology-enabled communication	Exhibit professional behaviours in the use of technology-enabled communication

2. Demonstrate a commitment to society by recognizing and responding to societal expectations in health care

2.1. Demonstrate accountability to patients, society, and the profession by responding to societal expectations of physicians		Manage tensions between societal and physician's expectations Describe the tension between the physician's role as advocate for individual patients and the need to manage scarce resources Demonstrate a commitment to maintaining and enhancing competence F5, TTP4	Demonstrate a commitment to the promotion of the public good in health care, including stewardship of resources	Demonstrate accountability to patients, society, and the profession by recognizing and responding to societal expectations of the profession
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2.2. Demonstrate a commitment to patient safety and quality improvement		Demonstrate a commitment to patient safety and quality improvement through adherence to institutional policies and procedures Monitor institutional and clinical environments and respond to issues that can harm patients or the delivery of health care	Demonstrate a commitment to patient safety and quality improvement initiatives within their own practice environment ^{C46}	
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3. Demonstrate a commitment to the profession by adhering to standards and participating in physician-led regulation

3.1. Fulfil and adhere to professional and ethical codes, standards of practice, and laws governing practice			Describe how to respond to, manage, and constructively learn from a complaint or legal action ^{C4} Demonstrate accountability to the profession and society with regard to the impact of decisions that are made Describe the relevant codes, policies, standards, and laws governing physicians and the profession including standard setting and disciplinary and credentialing procedures Access support for a medico-legal issue, such as via a medical protective association ^{C4}	Fulfill and adhere to the professional and ethical codes, standards of practice, and laws governing practice
3.2. Recognize and respond to unprofessional and unethical behaviours in	Respond to peer-group lapses in professional conduct		Describe and identify regulatory codes and procedures relevant to	Recognize and respond to unprofessional and unethical behaviours in physicians and

physicians and other colleagues in the health care professions			involving a regulatory body in a case of serious unprofessional behaviour or practice	other colleagues in the health care professions
3.3. Participate in peer assessment and standard setting			Participate in the review of practice, standard setting, and quality improvement activities Participate in the assessment of junior learners Prepare a morbidity and mortality report or chart review	Participate in peer assessment and standard setting

4. Demonstrate a commitment to physician health and well-being to foster optimal patient care

4.1. Exhibit self-awareness and effectively manage influences on personal well-being and professional performance		Manage the impact of physical and environmental factors on performance Demonstrate an ability to regulate attention, emotions, thoughts, and behaviours while maintaining capacity to perform professional tasks	Integrate skills that support adaption and recovery in challenging situations	Exhibit self-awareness and effectively manage influences on personal well-being and professional performance Maintain professional clinical performance in demanding or stressful clinical settings TTP2
4.2. Manage personal and professional demands for a sustainable practice throughout the physician life cycle	Recognize evolving professional identity transitions and manage inherent stresses	Describe the influence of personal and environmental factors on the development of a career plan	Manage competing personal and professional priorities	Manage personal and professional demands for a sustainable practice throughout the physician life cycle
4.3. Promote a culture that recognizes, supports, and responds effectively to colleagues in need		Use strategies to mitigate the impact of patient safety incidents	Use strategies to mitigate the personal impact of a patient adverse event c4	Promote a culture that recognizes, supports, and responds effectively to colleagues in need

			Support others in their professional transitions	Provide mentorship to colleagues
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