

Health Supervision

Specific Skills	Achievement		
	Minimal Acceptable	Above Average	Mastery
Demonstrate an ability to provide age-appropriate anticipatory guidance about nutrition (CP), behavior (CP), immunizations (CP), injury prevention (CP), pubertal development (CP), sexuality (M), and substance use and abuse (M).	Infants - Student lists two benefits of breastfeeding; tells parents no solid foods before 4-6 months of age; recommends an appropriate first solid. Student addresses at least one principle of vitamin or mineral supplementation.		
	Toddler - Student addresses eliminating bottle feeding and limiting sugary beverage consumption		
	Preschooler - Student addresses at least one principle of a healthy diet, such as limiting sugary beverages and junk food and encouraging fruits and vegetables.		
	School age - Same as preschooler		
	All ages - Student asks about and/or looks at immunization record.		

Growth				
Domains	Specific Competencies	Achievement (to be evaluated as "yes" or "no")		
		Minimal Acceptable	Above Average	Mastery
Skills	1. Demonstrate ability to measure and assess growth including height/length, weight, and head circumference and body mass index in patient encounters using standard growth charts.	Plots growth data accurately; if abnormal, rechecks plot. Recognizes normal and abnormal growth patterns.	Recognizes extremes of abnormal (obesity, FTT).	Provides an appropriate differential diagnosis for specific growth patterns.

Development				
Domains	Specific Competencies	Achievement (to be evaluated as "yes" or "no")		
		Minimal Acceptable	Above Average	Mastery
Skills	1. Demonstrate an ability to assess the following in pediatric patients using appropriate resources:			
	Psychosocial development	Describes at least one aspect of psychosocial development in a specific patient.	Recognizes gross delay.	Uses screening tool appropriately.
	Language development	Describes at least one aspect of language development in a specific patient.	Recognizes gross delay.	Uses screening tool appropriately.
	Physical maturation	1. Describes at least one aspect of physical development in a specific patient. 2. Demonstrates an appropriate exam. 3. Recognizes at least one sign of puberty.	Recognizes early vs. late puberty.	Determines sexual maturity rating (SMR) (formerly "Tanner stage").
	Motor development	Describes at least one aspect of motor development in a specific patient.	Recognizes gross delay.	Uses screening tool appropriately.

Behavior			
Specific Skills	Achievement		
	Minimal Acceptable	Above Average	Mastery
Identify behavioral and psychosocial problems of childhood using the medical history and physical examination. (CP)	Asks about and reports behavior concerns identified in history or physical exam.		Assesses for family dysfunction when behavior problems occur in child.
	Asks about and reports psychosocial concerns identified in history or physical exam.		Identifies the impact of psychosocial problems on family functioning.
	Identifies common abnormal behaviors seen in either infancy, childhood or adolescence such as sleep issues, toilet		Recognizes behavior patterns concerning for autism spectrum disorders
	Identifies at least one common psychosocial problem in either infancy, childhood or adolescence such as limited family resources.		
Counsel parents and children about the management of common behavioral concerns such as discipline, toilet training, and eating disorders. (M)			

Nutrition				
Domains	Specific Competencies	Achievement (to be evaluated as "yes" or "no")		
		Minimal Acceptable	Above Average	Mastery
Skills	1. Obtain a dietary history in children of different ages that includes the following:			
	0-4 months	If breastfeeding, asks duration of nursing. If bottle-feeding, asks volume and type of formula.		
		Asks about frequency of feedings.		
		Asks about elimination (number of wet diapers, stools).		
		Asks if other foods or fluids are given, including water.		
		Plots on growth chart.		
	4-12 months	Asks about all of the items in 0-4 months, and also asks if child is on solids, how much, and what types. Asks about consumption of sugary beverages.		
	1-2 years	Asks what child is eating; asks about type and amount of milk or other fluids (e.g. sugary beverages).		
		Asks about elimination.		
		Plots on growth chart.		
	> 2 years	Asks what child is eating; asks about type and amount of milk or other fluids (e.g. sugary beverages).		
		Asks about elimination.		
Plots on growth chart and calculates BMI.				
Adolescent	Asks diet history (what, when, how much); plots on growth chart and calculates BMI.			

Prevention			
Specific Skills	Achievement		
	Minimal Acceptable	Above Average	Mastery
Provide age-appropriate anticipatory guidance for the following: motor vehicle safety, infant sleeping position, falls, burns, poisoning, fire safety, choking, water safety, bike safety, STI (formerly called STD), firearms and weapons. (CP)	Addresses at least three age-appropriate safety concerns		

Issues Unique to Adolescents

Specific Skills	Achievement		
	Minimal Acceptable	Above Average	Mastery
Interview an adolescent patient using the HEADSS method to ask sensitive questions about lifestyle choices that affect health and safety (e.g. sexuality, drug, tobacco and alcohol use) (CP) and give appropriate counseling (M).	Separates (attempts) patient from parent/guardian for part of the interview	Addresses confidentiality with parent/guardian	If patient engaged in risk-taking behavior, student asks appropriate defining questions and gives counseling
	Addresses confidentiality with patient	Attempts to establish a rapport with patient	
	Asks a psychosocial history (i.e. HEADS) that includes screening for at least two risk-taking behaviors		
Conduct a physical exam of an adolescent that demonstrates respect for privacy and modesty, employing a chaperone when appropriate. (CP)	Identifies the need for chaperone when appropriate.	Identifies acne in exam (if present).	Identifies the need to perform a pelvic exam when appropriate.
	Utilizes appropriate draping techniques	Palpates thyroid	
	Able to assess SMR (sexual maturity rating, formerly "Tanner stage") of breast, pubic hair, and genitalia. Performs testicular exam and checks for inguinal hernia under direct observation. Performs breast exam under direct observation.		
	Assesses for scoliosis		
Conduct a pre-participation sports exam and demonstrate the key components of that exam necessary to clear an individual for participation in strenuous exercise (special senses, cardiac, pulmonary, neurological, and musculoskeletal) (M).	Looks at vital signs		
	Listens to heart and lungs	Listens to heart and lungs with patient in two body positions (e.g. supine, sitting, standing).	Verbalizes why different body positions are important in cardiac exam
	Performs testicular exam under direct observation		
	Assesses range of motion		
Conduct a health supervision visit for a healthy adolescent, incorporating a psychosocial interview, developmental assessment and appropriate screening and preventive measures (M).	Achieves minimal competence for skills 1 & 2 above (Interview & PE)	Identifies if patient needs update on immunizations	Teaches SBE or STE
	Asks about or reviews immunization record		Recommends screening for anemia, lipids and STI (if appropriate)
	Gives basic preventive counseling for common adolescent issues (i.e., diet, exercise, sexuality, substance use, safety)		

Newborn Anticipatory Guidance

Domains	Specific Competencies	Achievement (to be evaluated as "Yes" or "No")			
		Minimal Acceptable	Above Average	Mastery	
Skills	Give anticipatory guidance to parents of a newborn for the following issues:				
	Feeding	Asks about plans for feeding.			
		Asks about frequency and volume of feeding.			
		Lists 2 benefits of breastfeeding/breast milk.			
		Displays nonjudgmental attitude.			
	Normal bowel and urinary elimination patterns	Asks about frequency of urine and stool output.	Discusses adequate urinary stream for male infants		
	Appropriate car seat use	Asks if parents have a car seat.			
		Asks parent/caregiver about seat positioning (e.g. rear-facing, front vs. back seat)			
	SIDS prevention	Inquires about sleep position.	Informs parents about Back to Sleep.		
		Asks about smoke exposure.			
	Prevention	Asks about plan for followup care.			
		Asks if newborn received Hepatitis B vaccine.			
		Verifies that hearing and newborn screening done before discharge.			
Identifying Illness	Gives 2 reasons to call health care provider.				

Newborn Physical Exam

Domains	Specific Competencies	Achievement (to be evaluated as "yes" or "no")		
		Minimal Acceptable	Above Average	Mastery
Skills	1. Performs a complete physical exam of the newborn infant.			
	General appearance	Assesses alertness.	Describes cry.	
		Recognizes normal general appearance.	Recognizes asymmetry and/or any dysmorphic features.	Distinguishes asymmetry due to intrauterine positioning vs. pathology, e.g. genetic syndrome, birth trauma, etc.
		Observes and describes skin color.	Recognizes variants in skin color.	Describes variants in color (e.g. pink with acrocyanosis; jaundice; mottling)
		Vital signs: counts apical pulse, counts RR for one minute.	Knows normal ranges for HR and RR in newborns and recognizes abnormal rates.	Identifies possible etiology for abnormal heart and respiratory rates.
	Head	Palpates and describes shape of head, sutures, scalp hair	Measures head circumference.	Differentiates between normal and abnormal variants, e.g. caput succudaneum, cephalohematoma.
		Identifies anterior and posterior fontanel.	Recognizes and interprets findings correctly and describes abnormal fontanel.	
	Eyes	Attempts to elicit red reflex.	Observes eye movements; identifies normal eye placement, size, symmetry; recognizes scleral hemorrhage.	Appropriately attempts fundoscopic exam.
	Ears	Recognizes normal placement and shape of normal external ear.	Identifies and describes pre-auricular tags and pits.	Elicits gross hearing (acoustic blink).
	Mouth	Inspects and palpates palate.	Interprets findings correctly.	
	Chest/Lungs	Inspects the chest for symmetry.	Recognizes the presence of retractions and grunting.	
		Recognizes increased work of breathing.		
		Auscultates the lungs with stethoscope.	Interprets lung sounds appropriately.	
	Heart	Auscultates the heart.		Interprets heart sounds as normal S1, S2.
		Counts HR accurately.	Locates and palpates femoral pulses.	Identifies presence of murmur and discusses etiologies for murmurs in newborns.
		Attempts to assess femoral pulses.		Assesses capillary refill.
	Abdomen	Inspects abdomen for shape.	Auscultates bowel sounds.	
		Palpates the abdomen.	Interprets findings correctly.	
	Genitourinary	Identifies anus and male/female external genitalia.	Interprets normal vs. abnormal.	
	Musculoskeletal	Inspects extremities for symmetry of form and movement.		
		Inspects lower spine.		
		Correctly places hands in position for hip exam.	Attempts to perform hip exam correctly.	Performs hip exam correctly and interprets findings.
	Neurologic	Assesses muscle tone.	Differentiates variations in tone, e.g. hypo-, hypertonic.	
		Assesses cry.	Describes quality of cry.	

Genetics and Dysmorphology

Specific Skills	Achievement		
	Minimal Acceptable	Above Average	Mastery
Use a family history to construct a pedigree (e.g. for the evaluation of a possible genetic disorder). (CP)	Obtains a family history that includes 3 generations on both sides of the family.		Analyzes a pedigree to assess modes of inheritance, e.g. autosomal recessive.
	Includes a pedigree in written records when a genetic disease is suspected.		

Therapeutics			
Specific Skills	Achievement		
	Minimal Acceptable	Above Average	Mastery
Calculate a drug dose for a child based on body weight. (CP)	Student records child's weight in kilograms		
	Student records medications as mg/kg per day or per dose		
	Student's dosing regimen in mg/kg does not exceed adult maximum dose		
Write a prescription, e.g. for a common medication such as an antibiotic. (U)	Given a medication formulation and patient weight, student writes a prescription including: name of medication, formulation, dose, dosing schedule, route, duration, amount and refills		
Negotiate a therapeutic plan with the patient and family to maximize adherence with the agreed-upon treatment regimens and assess the family's understanding of the plan. (MU)			

Fluid and Electrolyte Management

Specific Skills	Achievement		
	Minimal Acceptable	Above Average	Mastery
Obtain historical and physical finding information necessary to assess the hydration status of a child. (CP)	Asks intake and output		
	Assesses at least 2 physical exam and 1 vital sign relevant to hydration status		
Calculate and write orders for intravenous maintenance fluids for a child considering daily water and electrolyte requirements. (CP)	Chooses fluid with water, sodium and glucose		
	Calculates 1x maintenance correctly using weight or BSA		
Calculate and write orders for the fluid therapy for a child with severe dehydration caused by gastroenteritis to include "rescue" fluid to replenish circulating volume, deficit fluid, and ongoing maintenance. (CP)	Chooses isotonic fluid at 10-20 mL/kg for "rescue" bolus		Calculates fluid replacement given patient's weight and degree of dehydration.
	Reassesses patient after intervention		
Explain to parents how to use oral rehydration therapy for mild to moderate dehydration. (CP)	Chooses appropriate rehydration solution.		

Poisoning			
Specific Skills	Achievement		
	Minimal Acceptable	Above Average	Mastery
Provide anticipatory guidance regarding home safety and appropriate techniques to prevent accidental ingestions (see also Prevention). (CP)	1. Mentions to caregiver at least one age-relevant toxin that could be a potential risk for the child; e.g. medicines, cleaning supplies, household and gardening chemicals, lead		
	2. Counsels caregiver about the appropriate storage of potential toxins; e.g. cabinet locks, safety caps		
	3. Discusses with caregiver the appropriate intervention in the event of an exposure; this must include advise about calling poison control.		
Elicit a complete history when evaluating an unintentional ingestion or exposure to a toxic substance (including the substance, the route of exposure, the quantity, timing and general preventive measures in the household). (U)	1. Asks the patient or caregiver to identify/describe the substance ingested/exposed.		
	2. Asks the patient or caregiver to describe the patients symptoms since the ingestion/exposure		
	3. Asks at least one other pertinent historical element, e.g. timing of ingestion, quantity of substance ingested, measures taken at home, route of exposure etc.		
Elicit a complete history surrounding the intentional ingestion of a toxic substance (including the substance, route of exposure, amount, timing, antecedent events, and stressors). (M)	1. Asks the patient or caregiver to identify/describe the substance ingested/exposed.		
	2. Asks the patient or caregiver to describe the patients symptoms since the ingestion/exposure		
	3. Asks at least one other pertinent historical element, e.g. timing of ingestion, quantity of substance ingested, measures taken at home, route of exposure etc.		
	4. Asks the patient or caregiver about stressors that could put the patient at risk for suicidal ideation		

Pediatric Emergencies			
Specific Skills	Achievement		
	Minimal Acceptable	Above Average	Mastery
Demonstrate the appropriate anticipatory guidance to prevent life-threatening conditions (e.g. infant positioning for sudden infant death syndrome, locks to prevent poisoning, and the use of car seats and bicycle helmets (see also Prevention). (CP)	Counsels on at least one age appropriate intervention to prevent life-threatening injury.		
Demonstrate the "ABC" assessment as a means for identifying who requires immediate medical attention and intervention. (U)	1. Airway <ul style="list-style-type: none"> • Inspects airway by at least one of the following: <ul style="list-style-type: none"> <input type="checkbox"/> Look and listen <input type="checkbox"/> Auscultate lungs • Correctly articulates patency of airway 	Attempts repositioning of the airway	
	2. Breathing <ul style="list-style-type: none"> • Inspects for chest movement • Recognizes at least one of the following as a sign of respiratory distress: <ul style="list-style-type: none"> <input type="checkbox"/> Retractions <input type="checkbox"/> Cyanosis <input type="checkbox"/> Apnea <input type="checkbox"/> Tachypnea 	Correctly interprets respiratory rate based on patient's age	
	3. Circulation <ul style="list-style-type: none"> • Assesses circulation by at least one of the following <ul style="list-style-type: none"> <input type="checkbox"/> Feels for a pulse <input type="checkbox"/> Assesses capillary refill <input type="checkbox"/> Assesses heart rate • Recognizes at least one of the following as a sign of circulatory compromise <ul style="list-style-type: none"> <input type="checkbox"/> Tachycardia <input type="checkbox"/> Bradycardia <input type="checkbox"/> Weak pulse <input type="checkbox"/> Prolonged capillary refill 	Correctly interprets Blood pressure and pulse based on patient's age	