CURRICULUM & ASSESSMENT MAP	Program: Physical Medicine and Rehabilitation PGY Level: 1													
	1	2	3	4	5		PGY Level: 1	8	9	10	11	12	13	
Block Competency Stage	l l		3	4	5	6	7	0] 9	10		12	13	
Competency Stage	Transition t	o Discipline		Foundations of Discipline										
Calendar points (e.g. vacation, CaRMS)	Orientation (Program, CBD, DOM)			MRCE				CaRMS		Research Day	Quality Day	CAPM&R Annual Scientific Meeting	Division Retreat	
Rotation(s)	MSK x 1+	Rotation Neuro x 1 SCI/ABI)	GIM x 3 +	Subspecialty Sele Endocrinology, O		logy, Clinical Immu Psychiatry, Sports				ion x2 (Plastics, r, Urology)	Geri	atric Rehab	Rheumatology	
Educational Activities (e.g. Academic Half-Day)		ation (Program, CBD, DOM) Academic Half Day, Grand Rounds, Journal Club, Research Day, Quality Day												
Assessments			l .			Entrustable P	rofessional Ac	tivities (EPAs)					
• EPAs	D1 (2*) xx D2 (2*) xx D3 (1) xx D4 (2*) xx D5 (1) xx *1 observation per block	for each EPA	F1 (10) x F2 (10) xx F3 (6) x C3 (8) x						F1 (10) xx F2 (10) xx F3 (6) x C3 (8)x C5 (20) xx		F1 (10) xx F2 (10) xx C1 (25) x C3 (8) x C5 (20) x C7 (10) x		F1 (10) x F3 (6) xx C3 (8) x C5 (20) xx	
• ITARs	ITAR	ITAR	ITAR	ITAR	ITAR	ITAR	ITAR	ITAR	ITAR	ITAR		ITAR	ITAR	
Other														
Training Experiences (TE)	emergencies, such a dysreflexia, baclofen agitation	atry clinic ons to the university and procedures, fety ons to the residency fructure of training, ign, electronic professional requirements, ee structure and faculty advisor/coach ac Life Support in in: of a physiatry ig the ICF framework to physiatry-specific s autonomic withdrawal, and receiving feedback to transfer of care	1.1.1.Internal Me 1.1.2.Geriatric M 1.1.2.1. Inpati 1.1.2.2. Day h 1.1.2.3. Inpati 1.1.2.4. Outpa 1.1.3.3. Voutpa 1.1.3.3. Consi 1.1.4. Rheumi 1.1.4.1. Outpa 1.1.4.2. Consi 1.2. Surgical services 1.2.1. Orthopedic 1.2.2.4. Iteast one 1.2.2.1. Urolo, 1.2.2.2. Plasti 1.2.2.3. Vascu 1.3. After-hours cove 2.1 Formal instructio 2.1.1. Communic 2.1.2. Fami dyna 2.1.3. Principles of 2.1.4. Patient saf 2.1.5. Presentatic 2.1.6. Critical app 2.1.7. Options for 2.1.8. Research i 2.1.9. Wellness 2.2. Journal club or of 2.3. Grand rounds in	ospital ent geriatric rehabilitat titent geriatric medicini gy ent unit titent clinic ultation service atology titent clinic ultation service titent clinic ultation service to, including any combin surgery of the following: gy c surgery ular surgery lar surgery surgery rage for medical and s n in: ation skills, including e timics of handover ety and quality improv on skills raisal scholarly activity methodology and clinic ther critical appraisal a	e or clinics vo of the following: ion unit e or geriatric rehabilit nation of inpatient sur surgical services explanation and plann ement cal trial design activity	gical unit, outpatient s	surgical clinic, consulta	ation service or opera	ating room experience					

Legend
D - Transition to Discipline
F - Foundations of Discipline
C - Core of Discipline
P - Transition to Practice

(#) - Target # of entrustments for a given EPA
xx - High yield to achieve this EPA
x - Low to moderate yield to achieve this EPA

CURRICULUM &]				Prog	gram: Physic	al Medicine a	and Rehabili	tation					
ASSESSMENT MAP							PGY Level: 2	2						
Block	1	2	3	4	5	6	7	8	9	10	11	12	13	
Competency Stage			Foundations	oundations of Discipline Core of Discipline										
Calendar points (e.g. vacation, CaRMS)	Orientation (Program, CBD, DOM)			MRCE				CaRMS		Research Day	Quality Day	CAPM&R Annual Scientific Meeting	Division Retreat	
Rotation(s)		Neurology	•		Orthopedics		Cardiac Rehab	b 3 block PMR Rotations x 2 (SCI, Stroke, Amps)						
Educational Activities (e.g. Academic Half-Day)		Program, CBD, DM)		Academic Half Day, Grand Rounds, Journal Club, Research Day, Quality Day										
Assessments						Entrustable F	rofessional Ac)					
• EPAs	F1 (10) x F2 (10) xx C3 (8) x			F1 (10) x F2 (10) x F3 (6) xx C5 (20) xx			C1 (25) x							
• ITARs		,	ITAR	ITAR	ITAR	R ITAR	ITAR			ITAR			ITAR	
• Other										End of Ro	tation Exam			
Training Experiences (TE)	1.1 Medical specially and subspecially services: 1.1.1 Internal Medicine inpatient service or clinics 1.1.2 Center Medicine, with a least two of the following: 1.1.2 In patient unit 1.1.2 In patient unit 1.1.2 In patient medicine consultation unit 1.1.2 Authorities medicine consultation clinic 1.1.3 Neurology 1.1.3 In patient unit 1.1.4 Outpatent griefatire rehabilitation unit 1.1.5 Physiatry consultation service 1.1.5 Physiatry consultation service 1.1.6 After-hours coverage of the physiatry service 2.1 Family meetings 1.1.6 After-hours coverage of the physiatry service 2.1 Formal instruction in: 2.1.1 Clinical and biomedical sciences of Physiatry 2.1.2 Communication skills, including challenging situations 2.1.3 Physiatry consultation service 2.1.4 Patient safety 2.1.5 Presents one of the following: 1.2.1 Unitogy 1.2.2 Nestical surprise 1.2.2 Unitogy 1.2.2 Nestical surprise 2.1.3 Physiatry consultation service or operating room experience 2.1.4 Patient safety 2.1.5 Present metical and surpical services 2.1.6 Research methodology and clinical trial design 2.1.7 Critical appraisal 2.2 Journal club or other critical appraisal activity, relevant to Physiatry 2.3 Grand rounds in Physiatry 2.4 Attendance at quality assurance and improvement activities, including morbidity and mortality ro 2.5 Practice examinations in preparation for the Royal College examination 2.5 Practice examinations in preparation for the Royal College examination 2.6 Participation in residency program administration, such as scheduling and organizing activities (roster, grand rounds, or formal learning activities) 2.7 Options for scholarly advily 2.8 Grand rounds in Physiatry 2.9 Journal club or other critical appraisal activity 2.9 Grand rounds in Physiatry 2.10 Continuation in Physiatry 2.11 Critical appraisal activity 2.12 Continuation in Physiatry 2.23 Journal club or other critical appraisal activity 2.3 Grand rounds in Physiatry 2.4 Attendance at quality improvement 2.5 Practice examinations in preparation for the Royal College examinat								·					

Legend
D - Transition to Discipline
F - Foundations of Discipline
C - Core of Discipline
P - Transition to Practice
(#) - Target # of entrustments for
xx - High yield to achieve this EP
x - Low to moderate yield to achie

CURRICULUM &	1				P	rogram: Phys	sical Medicine a	and Rehabili	tation				
ASSESSMENT MAP							PGY Level:	3					
Block	1	2	3	4	5	6	7	8	9	10	11	12	13
Competency Stage							Core of Discipli	ine					
Calendar points (e.g. vacation, CaRMS)	Orientation (Program, CBD, DOM)			MRCE				CaRMS		Research Day	Quality Day	CAPM&R Annual Scientific Meeting	Division Retreat
Rotation(s)		•		Rotations x 2 e, Amps, ABI)			Chronic Pain	MSK Inpa	tient (Senior)	MSK	Outpatient	Research	Peds
Educational Activities (e.g. Academic Half-Day)		Program, CBD, OM)			Acaden	nic Half Day, Gra	and Rounds, Journ	nal Club, Resea	arch Day, Qual	lity Day, Quality I	mprovement	1	
Assessments						Entrustable	e Professional Ac		5)		1		
• EPAs	C1 (25) xx								C2 (25) xx				
• ITARs			ITAR			ITAF	l ITAR	l.		ITAF	R ITAF	R ITAR	ITAR
• Other			End of Rot	ation Exam									
Training Experiences (TE)	1.1.1. Inpation 1.1.2. Outpation 1.1.2. Outpation 1.1.3. Physical 1.1.4. Team 1.1.5. Family 1.1.6. After-1.1. Clinical 1.1. Clinical 1.1. Clinical 1.1. Clinical 1.1. Compation 1.1. Clinical 1.1. Clinical 1.1. Clinical 1.1. Compation 1.1. Clinical 1.1. Clinical 1.1. Compation 1.1. Clinical 1.1. C	End of Rotation Exam 1.1. Physiatry, across the breadth of physiatry patient populations 1.1.1. Inpatient rehabilitation unit 1.1.2. Outpatient physiatry clinic 1.1.3. Physiatry consultation service 1.1.4. Team meetings 1.1.5. Family meetings 1.1.6. After-hours coverage of the physiatry service 1.1.1.7. Illinical and biomedical sciences of Physiatry 2.1.1. Clinical and biomedical sciences of Physiatry 2.1.2. Communications skills, including challenging situations 2.1.3. Conflict management 2.1.4. Patient safety 2.1.5. Quality assurance and improvement 2.1.6. Research methodology and clinical trial design 2.1.7. Critical appraisal 2.2 Journal club or other critical appraisal 2.3 Journal club or other critical appraisal 2.4 Attendance at quality assurance and improvement activities, including morbidity and mortality rounds 3. Grand rounds in Physiatry 4. Attendance at quality assurance and improvement activities, including morbidity and mortality rounds 5. Participation in residency program administration, such as scheduling and organizing activities (e.g., on-call roster, grand rounds, or formal learning activities) 3. Recommended TE: 3.1, 3.2, 4.1, 4.2											

Legend
D - Transition to Discipline
F - Foundations of Discipline
C - Core of Discipline
P - Transition to Practice
(#) - Target # of entrustments for
xx - High yield to achieve this EP
x - Low to moderate yield to achie

CURRICULUM & ASSESSMENT MAP	Program: Physical Medicine and Rehabilitation PGY Level: 4													
Block	1	2	3	4	5	6	7	8	9	10	11	12	13	
Competency Stage						c	ore of Discipli	ine						
Calendar points (e.g. vacation, CaRMS)	Orientation (Program, CBD, DOM)			MRCE				CaRMS		Research Day	Quality Day	CAPM&R Annual Scientific Meeting	Division Retreat	
Rotation(s)		EMG & Ne	uromuscular		Peds	Elective	Spasticity	Cancer Rehab	Consult Service	Elective	Elective	Elective	Elective	
Educational Activities (e.g. Academic Half-Day)	Orientation (Program, CBD, DOM) Academic Half Day, Grand Rounds, Journal Club, Research Day, Quality Day													
Assessments			1			Entrustable P	rofessional A	ctivities (EPAs)					
• EPAs	C1 (25) xx C2 (25) xx C3 (8) x C5 (20) xx C6B (6) x C7 (10) xx C8A (2) xx TTP SA 2A (2) TTP SA 2B (1)		C1 (25) xx C2 (25) xx C3 (8) x C5 (20) xx C6B (6) x C8A (2) xx TTP SA 2A (2 TTP SA 2B (1) ×	C1 (25) xx C2 (25) xx	C1 (25) xx C2 (25) xx C3 (8) x C5 (20) xx C6A (15) x C6B (6) x	C1 (25) xx C2 (25) xx C3 (8) x C5 (20) xx C6B (6) x	C1 (25) xx C2 (25) xx C3 (8) x C5 (20) x C6B (6) x	C2 (25) xx C3 (8) x	C1 (25) xx C2 (25) xx C3 (8) x C5 (20) xx C6A (15) x C6B (6) x	C1 (25) xx C2 (25) xx C3 (8) x C5 (20) xx C6A (15) x C6B (6) x	C1 (25) xx C2 (25) xx C3 (8) x C5 (20) xx C6A (15) x C6B (6) x	C1 (25) xx C2 (25) xx C3 (8) x C5 (20) xx C6A (15) x C6B (6) x	
• ITARs		ITAR		ITAR	ITAR	ITAR	ITAR	R ITAR	ITAR	ITAF	R ITAF	R ITAF	R ITAR	
• Other		End of Ro	tation Exam											
Training Experiences (TE)	1.1.1. Inpatie 1.1.2. Outpa 1.1.3. Physia 1.1.4. Team 1.1.5. Family 1.1.6. After-I 2.1 Formal instr 2.1.1. Clinica 2.1.2. Comm 2.1.3. Confli 2.1.4. Patier 2.1.5. Qualit 2.1.6. Resea 2.1.7. Critica 2.2 Journal club 2.3 Grand round 2.4 Attendance 2.5 In-training e	ent rehabilitation tient physiatry clatry consultation meetings y meetings hours coverage ruction in: all and biomedicanunications skills of management at safety y assurance and appraisal or or other critical dis in Physiatry at quality assurates and in residency principles.	n unit linic I service of the physiatry al sciences of F s, including cha d improvement by and clinical tr I appraisal activ ance and impro	Physiatry llenging situations	s ysiatry including morbi			roster, grand rou	nds, or formal le	arning activities)			

	Legend
Ī	D - Transition to Discipline
	F - Foundations of Discipline
	C - Core of Discipline
	P - Transition to Practice
	(#) - Target # of entrustments for
	xx - High yield to achieve this EP
	x - Low to moderate yield to achie

CURRICULUM &]					Program: Phy	sical Medicine	e and Rehabilit	ation				
ASSESSMENT MAP							PGY Level	: 5					
Block	1	2	3	4	5	6	7	8	9	10	11	12	13
Competency Stage	Core of	Discipline	Transition to Practice										
Calendar points (e.g. vacation, CaRMS)	Orientation (Program, CBD, DOM)			MRCE				CaRMS		Research Day	Quality Day	CAPM&R Annual Scientific Meeting	Division Retreat
Rotation(s)	S	Senior Resident Cli Junior Attending		Senior Resident Clinic Elective	Senior Resident Clinic Elective	Senior Resident Clinic Elective	Senior Resident Clinic Elective	Senior Resident Clinic Elective	Senior Resident Clinic Elective	Senior Resident Clinic Elective	Senior Resident Clinic Elective	Senior Resident Clinic Elective	Senior Resident Clinic Elective
Educational Activities (e.g. Academic Half-Day)		ientation (Program, CBD, DOM) Academic Half Day, Grand Rounds, Journal Club, Research Day, Quality Day											,
Assessments			l			Entrustal	ole Professional	Activities (EPAs)					
• EPAs	C2 (25) xx C3 (8) x C5 (20) xx	C1 (25) xx C2 (25) xx C3 (8) x C5 (20) xx C6A (15) x C6B (6) x	TTP SA3 (1)x2	TTP SA 1 (1) xx TTP SA2A (2) x	TTP 1 (5) xx TTP SA 1 (1) xx TTP SA2A (2) x TTP SA 2B (1) x	TTP SA 1 (1) xx TTP SA2A (2) x	TTP SA 1 (1) xx TTP SA2A (2) x	TTP SA2A (2) x	TTP SA2A (2) x	TTP SA2A (2) x	TTP SA2A (2) x	TTP SA2A (2) x	TTP SA2A (2) x
• ITARs	ITAR	R ITAR	ITAR	ITAR	ITAR	ITAR	ITAR	ITAR	ITAF	R ITAR	R ITAF	R ITAF	R ITAR
Training Experiences (TE)	See Cell AR11 Experiences (*	•	1.1.1. Inpatient in 1.1.2. Senior trial 1.1.3. Consultation 1.1.3. Consultation 1.1.4. After-hour 2.1 Journal club or consultation 1.1.4. After-hour 2.2 Grand rounds in 2.3 Participation in consultation 1.2.5.1. Mentorship 2.5.2. Teaching j. 2.5.4. Facilitation 2.6.1. Difficult patricipation in 2.6.1. Difficult patricipation in 1.2.9 Participation in 1.2.9 Participation in 1.2.1 Identification of 1.12 Canadian Med 2.13 Instruction in ficultation 1.12.1. Incorpore 2.13.3. Health be 2.13.4. Loan repgion 2.13.5. Overhead 2.14 Formal instruction 2.15. Tormal instruction 1.15 canadian Med 2.13 Instruction in ficultation 2.13.1. The compore 2.13.3. Health be 2.13.4. Loan repgion 2.13.5. Overhead 2.14 Formal instruction 1.15 canadian Med 2.13 instruction in ficultation 2.13.4. Loan repgion 2.13.5. Overhead 2.14 Formal instruction instruction in the consumption of	s coverage, in the role of other critical appraisal act . Physiatry . Physiatry uality assurance and imp scholarly research, educibility assurance and imp scholarly research, educibility assurance and imp scholarly research, educibility as on a dacademic half-day send for: o a facademic half-day send for: o a facademic half-day send for: titent-clinician clinical scent the unusual complications third party requests and rakeholders and communities that the unusual complications shadow billing gs with mentor about tranfirmentor aligned with indical Association practice in anancial planning insurance tition as a medical professionelits.	ole of junior attending tudinal care junior attending vity, relevant to Physiatry provement activities, includation or quality assurance relearners ins, other health professions harrios nedical legal reports ty partners and agencies, judical interest and career nanagement e-modules p	fing morbidity and mortali activity hals, and/or the public such as advocacy group cluding licensing requirer	s, patient groups, hospit			ists			

Legend
D - Transition to Discipline
F - Foundations of Discipline
C - Core of Discipline
P - Transition to Practice
(#) - Target # of entrustments for
xx - High yield to achieve this EP
x - Low to moderate yield to achie