Term	Proposed Definition
The following group of te or equivalent, program.	rms pertains to the various stages of formal medical education after successful completion of a M.D.,
Graduate Medical Education (GME)	A period of formal structured education physicians receive after finishing medical school in preparation for practice and leading to certification or attestation of higher clinical competence (a.k.a. Residency education).
Postgraduate Medical Education (PGME)	Formal structured training following graduate medical education (e.g. Areas of Focused Competence/Diploma programs)
Prevocational Training	A term used to refer to the first years of training after medical graduation which are focused on the acquisition of core or foundational competencies; the term is primarily used in Australia, New Zealand and the United Kingdom (adapted from CPMEC 2008).
Continuing Professional Development (CPD)*	Phase of lifelong learning and practice enhancement, post-certification.*  Respondents are not being asked to provide input on this term as it is being explored through a separate project tasked with developing an infrastructure of common nomenclature, theories and frameworks within the field of continuing medical education.

The following group of terms relate to policy issues related to the structure, organization or delivery of medical education.	
Duty Hours	Applied to medical residents, this term refers to all time spent in clinical and academic activities related to the program, that is: patient care (both inpatient and outpatient), administrative duties relative to patient care, provision for transfer of patient care, time spent in-house during call activities, and scheduled activities, such as conferences. Duty hours do not include reading and preparation time spent away from the duty site (IOM 2009).
Distributed Medical Education	Curriculum activities involving learners and teachers who are at locations outside of the usual classroom or clinical site, such as geographically distinct regional campuses (Adapted from AFMC 2012 & Wong et al., 2012).

Term	Proposed Definition
The following group of te education.	rms describes the various terminology used for physicians-in-training across the continuum of medical
Chief Resident	A senior resident who is assigned specific administrative responsibilities relating to the Department's academic and service activities, in addition to those expected as a normal part of his/her program. The chief resident's responsibilities may include preparing rotas, scheduling teaching rounds, organizing the education program, organizing resident meetings, acting as resident advocate, liaising with faculty and orienting new residents.
Resident	A physician in an accredited training program following undergraduate training leading to certification or attestation in a recognized specialty or subspecialty; a GME trainee.
R(n)	A resident in the (n) academic year of an accredited training program (e.g., R2).
Y(n)	The number of years an $R(n)$ has been in residency, which may differ from $R(n)$ due to academic difficulty, part-time training, parental leave, health issues, transfers, etc. (e.g., Y 3).
Housestaff	A broad term for all physicians-in-training who are involved in patient care under the supervision of an attending physician.
Learner	Any individual undertaking an educational activity.
Trainee	An individual in a period of formal structured professional clinical education.

The following group of terms refers to learning or training periods that some physicians, or physicians-in-training, may pursue throughout their careers to enhance specific skills.

Traineeship	A period of formal structured professional clinical education.
Observership	A temporary clinical learning experience which does not involve patient care responsibility. Typically, observerships are not accredited and observers do not receive educational credit or certification for the time spent observing.
Preceptorship	A defined period of clinical training organized around focused immersion in a single preceptor's practice.

Term	Proposed Definition
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The following group of to	erms refers to those who supervise and assess physicians-in-training.
Preceptor	A physician who provides supervised practice-based training in which the learner is immersed in the practitioner's practice for a defined period of time.
Clinical Supervisor	A clinician who oversees and is the most responsible physician for the clinical work of one or more trainees.
Clinician Teacher	A physician or senior resident who acts as a part-time teacher, tasked with supervision, transmitting knowledge, giving feedback, and role modeling values, competence, professionalism, and enthusiasm related to medicine.
Clinician Educator	A physician with formal expertise in medical education (e.g., graduate degree, diploma or other program) who is able to provide consultative advice for educational issues or endeavours undertaken by faculty in the health professions. (cf Sherbino et al. 2010)
Medical Faculty	An individual or individuals with an academic appointment in a university Faculty of Medicine, typically with roles in teaching, research, administration and clinical care.
Role Model	Someone who inspires a learner and teaches by example in the course of professional work. Could be a teacher, supervisor or peer.
Mentor	A trusted individual or group that provides wisdom or guidance with personal or professional issues. Mentors facilitate the development of personal learning networks and transfer important physician competencies that they have developed over their careers to their mentees. A mentor affects a positive outcome in a learner, and should respect an individual's goals and circumstances, as well as their uniqueness, ideas, work and contributions. Mentoring involves a transfer of knowledge, of patterns of behaviours, of skills and of an approach to an accumulated body of information.

Term Proposed Definition
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The following group of terms considers the concept of the achievement of competencies as a gradation of abilities acquired throughout defined stages (from novice to expert); where the learner moves from a complete lack of required abilities to successfully achieving an array of abilities across multiple domains in preparation for practice.

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Competence	The array of abilities across multiple domains or aspects of physician performance in a certain context. Statements about competence require descriptive qualifiers to define the relevant abilities, context, and stage of training or practice. Competence is multi-dimensional and dynamic. It changes with time, experience, and setting (Frank et al. 2010).	
Competency	An observable ability of a health professional related to a specific activity that integrates knowledge, skills, values and attitudes. Since competencies are observable, they can be measured and assessed to ensure their acquisition. Competencies can be assembled like building blocks to facilitate progressive development (Frank et al. 2010).	
Competency-based Medical Education	An outcomes-based approach to the design, implementation, assessment and evaluation of medical education programs, using an organizing framework of competencies (Frank et al. 2010).	
Competency Framework	An organized and structured representation of a set of interrelated and purposeful competency objects (AAMC 2012)	
Domain of competence	Broad distinguishable areas of competence that together constitute a general descriptive framework for a profession(s) (AAMC 2012)	
Incompetent	Lacking the required abilities in a certain context at a predetermined performance level for a defined stage of medical education, training or practice (Frank et al. 2010).	
Competent	Possessing the required abilities in all domains in a certain context at a defined stage of medical education or practice (Frank et al. 2010).	
Dyscompetent	Possessing relatively less ability in one or more domains of physician competence in a certain context and at a defined stage of medical education or practice (Frank et al. 2010)	
Supracompetent	Possessing relatively higher ability in one or more domains of physician competence in a certain context and at a defined stage of medical education or practice.	
Milestone	A meaningful marker of progression of competence. An achievement point or threshold in medical education, training, or practice defined by reaching predetermined performance levels for a given competency or across an aggregate of competencies (AAMC 2012).	
Progression of Competence	For each aspect or domain of competence, the spectrum of ability from novice to mastery. The goal of medical education is to facilitate the development of a physician to the level of ability required for optimal practice in each domain. At any given point in time, and in a given context, an individual physician will reflect greater or lesser ability in each domain (AAMC 2012).	

Term Proposed Definition
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The following group of terms describes the types of environments encountered by physicians and other healthcare professionals working in a clinical or academic setting.

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Interprofessional	Individuals from two or more professions (i.e., medicine and nursing) working collaboratively with shared objectives, decision-making, responsibility and power, to develop care plans and make decisions about patient care (CanMEDS).
Intraprofessional	Two or more individuals from within the same profession (i.e. medicine), working together interdependently to develop care plans and make decisions about patient care (CanMEDS).
Multiprofessional	Individuals from two or more professions (i.e., medicine and nursing) working independently to provide care to the same patient, developing individual treatment plans and retaining respective decision-making authority (CanMEDS).
Interdisciplinary	Individuals from two or more disciplines (i.e. Emergency Medicine and Critical Care Medicine) from within the same profession (i.e., medicine) working collaboratively with shared objectives, decision-making, responsibility and power, to develop care plans and make decisions about patient care (CanMEDS).
Intradisciplinary	Two or more individuals from within the same disciplines (i.e. Emergency Medicine) working together to develop care plans and make decisions about patient care (CanMEDS).
Multidisciplinary	Individuals from two or more disciplines (i.e. Emergency Medicine and Critical Care Medicine) from within the same profession (i.e., medicine) working independently to provide care to the same patient, developing individual treatment plans and retaining respective decision-making authority (CanMEDS).

Term	Proposed Definition
	ribes terminology for classifying a physician's status in reference to the completion of accredited e achievement of certification or a formal designation and any additional evaluation for licensure or
Fellow	Royal College: A member of the Royal College in good standing, certified in a recognized specialty or subspecialty (FRCPC/FRCSC), and participant in the maintenance of competence program.  CFPC: Certificant members (FCFP) in good standing who have maintained their certification for a minimum of ten (10) consecutive years and demonstrated their ongoing commitment to continuing professional development and lifelong learning (CFPC 2011a).
Diplomate	A physician who has successfully completed all of the requirements of a medical diploma program, such as a Royal College Area of Focused Competence (DRCPSC).
Certificant	<ul> <li>Royal College: Individual certified in a Royal College specialty or subspecialty.</li> <li>CFPC: Members who have: <ul> <li>Successfully completed residency training accredited by the CFPC and successfully completed the College's Certification Examination in Family Medicine or an approved equivalent; or,</li> <li>Met the College's criteria for practice eligible candidates as determined by the National Board and as set out in the Regulations; and/or,</li> <li>Successfully completed discipline specific training in family medicine in a jurisdiction other than Canada that has been approved as equivalent to accredited Canadian training in family medicine and who hold certification in family medicine or the equivalent qualification from a jurisdiction other than Canada and which is judged to be equivalent to Certification in the CFPC (CFPC 2011b).</li> </ul> </li> </ul>

	The following group of terms refers to the recognition of satisfactory completion of training and credentialing requirements.	
	Certification	Formal recognition of satisfactory completion of all necessary training, assessment, and credentialing requirements of a medical specialty or subspecialty, indicating competence to practice independently.
	Attestation	Verification of satisfactory completion of all necessary training, assessment, and credentialing requirements of an area of medical expertise. Does not confer certification in a discipline.

Term	Proposed Definition
The following group of te	rms describes processes for administering medical education standards.
Curriculum	A pathway of planned learning, designed to facilitate progressive development of specified competencies (AAMC 2012).
Accreditation	A form of program evaluation, whereby information on the structure, process and outcomes of an educational program and the educational environment at an institution is evaluated against defined educational standards by an independent organization.
Credentialing	Examination and review of the educational or occupational qualifications of physicians for the purposes of determining their eligibility for admission to the specialty examinations, certification and/or licensure to practice.
Performance Criteria	An explicit description of measurable behaviours that indicate an individual has achieved a certain performance level (AAMC 2012).
Evaluation	A process of employing a set of procedures and tools to provide useful information about medical education programs and their components to decision-makers (RIME Handbook). This term is often used interchangeably with <i>Assessment</i> (see below) when applied to individual physicians, but is not the preferred term.
Assessment	A process of gathering and analyzing information on competencies from multiple and diverse sources in order to measure a physician's competence or performance and compare it to defined criteria.

-	The following terms are used to describe a particular approach to a physician's practice.	
(	Generalism	An approach to care and a philosophy of medicine that values responsiveness to patient needs and a commitment to the breadth of practice within one's discipline (CCCG 2012).
(	Generalists	Specific set of physicians and surgeons with core abilities characterized by a broad-based practice. Generalists care for a diversity of clinical problems and have a role in coordinating patient care (CCCG 2012).

Term	Proposed Definition
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The following terms are used to classify the different types and levels of training experiences of physicians who cross jurisdictional borders in the context of the current global movement of trainees and physicians.

In the definitions below, "local jurisdiction" has been chosen to allow for the appropriate decision-makers to determine functional borders and boundaries which are not always defined by country or geographical domain.

International Medical Graduate (IMG)	An individual who graduated from an undergraduate MD program, or equivalent, outside of the local jurisdiction.
International Residency Graduate (IRG)	An individual who has completed their residency education outside the local jurisdiction.
International Medical Doctors (IMD)	An individual who is already certified and has been licensed or practicing as a physician in another jurisdiction.
Citizens Studying Abroad (CSA)	Citizens or permanent residents of the local jurisdiction studying medicine in another jurisdiction. Eg. Canadians studying abroad.
International Sponsored Trainee	A non-citizen enrolled in a local training program who is funded by their home country and who is required to return to their home country upon completion of training.

Term	Proposed Definition			
The following terms and o	definitions have been recommended for REMOVAL:			
Clinical Fellow	"Fellow" should no longer be used to refer to a subspecialty resident.  "Clinical Fellow" is no longer recommended for the Post-M.D. trainee registered with the PGME Office of a university faculty of medicine pursuing clinical or research training which will not be evaluated by supervising faculty for the purpose of Canadian licensure or certification by the CFPC, CMQ or RCPSC.  Following resolution of the PGME to GME debate, discussion on alternative terms for the phase of post-residency training should be revisited.			
Foreign Medical Graduate (FMG)	Obsolete term, replaced by IMG.			
House officer	Resident in UK and other commonwealth countries, used in diverse ways in many jurisdictions. Should not be used.			
Intern	A term used, historically, to describe an individual participating in a rotating internship prior to 1994 in Canada. Since then, the rotating internship has transitioned to the current postgraduate medical education system and the term has been replaced by PGY-1 Trainee or R1. Should not be used.			
PGY(n)	Postgraduate year (n); to be replaced by R(n)			
Postgraduate International Medical Graduate (PG-IMG)	Omit, replaced by IRG.			
Senior house officer	Senior PGME trainee in UK & other commonwealth countries, but not applicable universally. Should not be used.			
Undergraduate- International Medical Graduate (UG-IMG)	Omit, replaced by IMG.			
Undergraduate and Postgraduate International Medical Graduate (UGPG- IMG)	Omit, replaced by IMG and IRG respectively.			
Visa Trainee	Replaced by International Sponsored Trainee.			

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