A learning portfolio can be a powerful tool for evaluating resident knowledge and the general competencies. Maintaining portfolios on your residents is an ACGME program requirement and will be an important part of meeting the general competencies.

What is a Learning Portfolio?
A learning portfolio is a collection of materials that represents the learner’s efforts, progress and achievements in multiple areas of the curriculum throughout their training. The purpose of a learning portfolio is to facilitate improvement in abilities and contribute to the life long learning process. A portfolio is a method to encourage residents to reflect on their experiences and learn from them. A portfolio is a place to store and keep work products of the residency and would include: (a) Collection of personal work, i.e. PowerPoint slides, handouts, exhibits, effort, progress, achievement; (b) Serves as an ongoing diary of their learning experiences. A portfolio will help mentors and coaches use the system to help residents gain insight into their education. By creating a portfolio the resident takes an active role in his/her achievements during training.

A portfolio is a record of growth, achievement and professional attributes that illustrate progression toward competence over time and to self-directed, life long learning. During the four years of training the resident will construct a portfolio with evidence of growing competency as a radiologist. Upon graduation the portfolio should be given to the trainee and will give them documentation that will enhance their marketability and serve as proof to others as well as the trainee that they are a competent physician. A portfolio provides the opportunity for residents to learn and demonstrate skills needed to develop an approach to self-directed, lifelong learning because the resident is responsible for its creation.

Key Elements of a Portfolio
- Self assessment
- Goal setting
- Mentored observation/feedback
- Works in progress
- It should coincide with the resident’s training plan and objectives
- Should be linked with which competencies a particular portion of the portfolio is meeting

Why a Portfolio
- The resident takes an active role in his/her achievements because the trainee selects the content of the portfolio. However, any documents that might be helpful at a later date can also be added.
- A portfolio is a method to evaluate, acquire feedback, self reflection and achieve growth and development
- A portfolio serves as a method of comparisons; such as comparing grades on in-training exams and mock boards during the residency training period to make sure the resident is attaining adequate progress in their training
- A portfolio is a way to self-reflect on learning experiences during training.
- A portfolio can be used for credentialing purposes post-residency training because it will contain much of the information necessary for credentialing completion.
Benefits of Keeping a Portfolio

- The resident is accountable for most of what is included in the portfolio and therefore, involved in their own assessment by having a portfolio
- A portfolio contains samples of the resident’s work and what the outcomes are, i.e. publications, presentations, and other projects done during residency training and whether they were presented at a national, state, or local meeting or appeared in print in a refereed journal
- The portfolio aids in the final evaluation because you have a report of everything the resident has accomplished during their residency training therefore making it simpler to put the final evaluation together

The portfolio is the property of the resident
- The portfolio should be kept as a part of the residents file
- Upon completion of residency training the resident will take the portfolio portion of their file with them. Before giving the portfolio to the resident make a copy for the resident’s permanent record. Much of the information in the portfolio is helpful when completing the PIF. The ACGME will most likely request a copy of the resident portfolio at the time of their site visit

Pros of Keeping a Portfolio - Resident: Some of the pros of the resident keeping a portfolio are:
- Aids the resident in documenting “self-directed” learning behaviors such as a compilation of what has been read, what conferences and journal clubs have been attended, etc.
- It helps the resident create a habit of inquiry and practice of evidence based medicine
- It aids the resident in keeping a list for examination preparation and credentialing. Enables the resident to check to see what has been covered and what may still need to be covered.
- It gives the resident a chance to address individual deficiencies with the program director

Pros of Keeping a Portfolio - Program Director: Some of the pros of a portfolio from the program director’s perspective are:
- It is a real-time assessment of resident clinical activities
- It serves as a vehicle of immediate feedback to the resident
- It is an assessment of resident self-directed learning activities and their use of medical literature
- It serves as a database of resident and program learning needs
- It includes medical education research done by the resident and is on hand for PIF completion
- It promotes faculty development
- Portfolio entries can be linked to a competency (i.e. if a resident identifies a problem and works the problem toward a solution, this is an example of what can meet portfolio requirements for Practice Based Learning, or if a problem is identified at a resident meeting, bring a solution to the next meeting)

The portfolio is a self reflection on how the resident achieves the objectives of the program and the program rotations. The resident requires the program director’s input on how to achieve
their goals and this should be discussed during their semi-annual review with the program
director. Definition of the competencies should be discussed as well as the goals the resident
has set for themselves, along with expectations as to how to achieve these goals. If the goals
are not achieved, new goals need to be set and re-evaluated.

**Portfolio Content**
The portfolio should be a part of the resident’s permanent file and should include:
- Personal goals and statements about what has been learned and what is wished to learn
during their training
- Self Reflection – reflect on learning experiences and what future goals for learning are
- Daily Learning Plan
  - Books read, i.e. chapter numbers, number of pages
  - Literature reviewed, i.e. journals, on-line articles
  - CD’s reviewed
  - Educational web-sites visited
  - Quality Improvement Plan and report of results
- Case Log Summary
  - Case Log information and case summaries should be included. This information is
    helpful when requesting privileges, especially in nuclear medicine where numbers
    of cases are necessary for a radiologist to be added to an institution’s NRC
    license.
- Conference Attendance
  - Noon Conference
  - Journal Clubs
  - Grand Rounds
  - Intra- and Inter-departmental conferences
- Work Products/Scholarly Activity
  - Research
  - Publications
  - Presentations
  - Slides/Handouts used when presenting at conferences, grand rounds, M&M
    conferences
  - Summary of research literature reviewed in preparation for articles to be
    submitted for publication or for a conference presentation.
- Teaching
  - Noon Conference Presentations
  - Quiz Conference Presentations
  - Medical Student teaching
- Meetings with Program Director
  - Should also have a record of meetings with program director or mentor including
    signed documentation of the meeting.
- Examinations
  - ACR In-Training Exam
  - RAPHEX
  - Mock Boards
- Dictation Review, Feedback
- Critical Incidents
- Professional Meetings Attended
  o List of professional meetings attended and whether or not a presentation or poster was done
- Certificates, Records, Awards
- Personal Experiences
  o Duty Hours
  o Rotations
  o Conferences Given
  o Leave (vacation/sick)
- Copies of Evaluations and Ratings
  o 360 evaluations - nurses, technologists, patients, peers, self
    ▪ Evaluations should be printed if they are done in an electronic format and placed in the resident’s permanent file. The reviewer wants to see them in print at the time of the site visit and they will be available in the portfolio for review.
  o Patient feedback
    ▪ Letters of appreciation from patient or patient’s family or, on the downside, letters of non-appreciation
  o Monthly faculty evaluations
  o Summary evaluations
  o Final evaluations
Example
The following is an example of a portfolio table of contents. The portfolio is kept in a separate folder in the resident’s permanent file and divided into 15 sections.

Portfolio Contents

1. Personal Goals
2. Self Reflection and assessment, yearly
3. Daily Learning Plan
   - Books read
   - Literature reviewed
   - CD’s reviewed
   - Education web-sites
4. Case Log Summary
5. Conference Attendance
   - Noon Conference and participation
   - Journal Clubs
6. Work Products/Scholarly Activity – Quality Improvement Project
   - Research
   - Publications
   - Presentations
   - Slides/Handouts
7. Teaching
   - Noon conference
   - Quiz conference
   - Medical student teaching
8. Meetings with Program Director
9. Exams: In-Training/Mock Boards
10. Dictation Review, Feedback
11. Critical Incidents
12. Professional Meetings Attended
13. Certificates, Records
14. Personal Experiences
   - Leave (vacation/sick)
   - Duty Hours
   - Rotations
   - Conferences Given
15. Evaluations
   - Monthly/semi-annual
   - 360
   - Summary