



AMERICAN OSTEOPATHIC ASSOCIATION

**Basic Standards for Residency Training in Internal Medicine and Neuromusculoskeletal
Medicine**

**American Osteopathic Association,
American Academy of Osteopathy
and the
American College of Osteopathic Internists**

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STANDARD I - INTRODUCTION

- A. These are the Basic Standards for residency training in integrated internal medicine/ neuromusculoskeletal medicine as approved by the American Osteopathic Association (AOA), the American College of Osteopathic Internists (ACOI) and the American Academy of Osteopathy (AAO). These standards are designed to provide the osteopathic resident with advanced and concentrated training in both internal medicine and neuromusculoskeletal medicine (NMM) and to prepare the resident for certification examination in both disciplines.
- B. The integrated program must meet all the requirements for each discipline as defined in the AOA *Basic Standards for Residency Training in Internal Medicine* and in the *Basic Standards for "Plus One" Residency Training in Neuromusculoskeletal Medicine and Osteopathic Manipulative Medicine*.
- C. This integrated standard addresses only those elements that must be modified in order to make the internal medicine/Neuromusculoskeletal medicine program an integrated, overlapping experience in both disciplines.

STANDARD II - MISSION

The mission of the osteopathic integrated internal medicine/neuromusculoskeletal medicine program is to provide residents with comprehensive structured cognitive and procedural clinical education in both inpatient and outpatient settings that will enable them to become competent, proficient and professional osteopathic internists and physicians skilled in neuromusculoskeletal medicine.

STANDARD III - EDUCATIONAL PROGRAM GOALS

All osteopathic internal medicine/neuromusculoskeletal medicine programs must formulate goals that will allow the resident to master the following core competencies as specified in the basic standards of both disciplines:

- A. Osteopathic Philosophy and Osteopathic Manipulative Medicine
- B. Medical Knowledge
- C. Patient Care
- D. Interpersonal and Communication Skills
- E. Professionalism
- F. Practice-Based Learning and Improvement
- G. Systems-Based Practice

STANDARD IV - INSTITUTIONAL REQUIREMENTS

- A. The institution must have both functioning internal medicine and neuromusculoskeletal medicine residency programs.
- B. The institution must provide a patient load to train a minimum of two (2) residents in internal medicine/neuromusculoskeletal medicine as defined in the individual specialty basic standards.
- C. The institution must maintain a program description that describes all the elements of the integrated program.
- D. This program description must be updated and reviewed annually.

STANDARD V - PROGRAM REQUIREMENTS AND CONTENT

- A. The integrated residency program in internal medicine/neuromusculoskeletal medicine is four years in duration, the first year of which must be structured as the first year of internal medicine residency training as specified in the *Basic Standards for Residency Training in Internal Medicine*.
- B. One of the selective months during the first year must be in NMM.
- C. A minimum of four months of NMM rotations must occur during each of the subsequent three years.
- D. All rotation requirements as specified in the basic standards for both internal medicine and neuromusculoskeletal medicine must be met by the completion of training in the integrated program.
- E. Residents must have a continuity internal medicine ambulatory clinic experience that meets all the requirements of the *AOA Basic Standards for Residency Training in Internal Medicine*.
- F. In addition, integration of the osteopathic structural examination and treatment must be considered with every patient encounter.

STANDARD VI - FACULTY AND ADMINISTRATION

- A. Program Director
 - 6.1 The program must have a program director who is AOA-certified in both neuromusculoskeletal medicine and internal medicine.
 - 6.2 If there is no dually-certified director available, then there must be a co-director certified by the AOA in internal medicine and a co-director certified by the AOA in neuromusculoskeletal medicine and osteopathic manipulative medicine or who has obtained a certificate of special proficiency in osteopathic manipulative medicine.
 - 6.3 The program directors must meet all other requirements that are specified in the basic standards for each of the two specialties.
 - 6.4 The program co-directors must work jointly in supervising and directing the training program.
 - 6.5 The program co-directors may be the program directors of existing programs in their respective disciplines.
 - 6.6 The program co-directors must meet on a quarterly basis to evaluate the program, residents and teaching faculty.

STANDARD VII - RESIDENT REQUIREMENTS

- A. Residents in the combined program must attend the educational portions required by the basic standards of each discipline.
- B. Since there may be conflicts in attending concurrent meetings, however, of the internal medicine and neuromusculoskeletal medicine programs, the resident must be a full participant in the education programs provided by the department in which the resident is rotating at that particular time.
- C. Residents in the combined program must otherwise meet all the requirements as specified in the basic standards of each discipline.

STANDARD VIII - EVALUATION

The program must meet all of the evaluation requirements of the primary specialties as defined in the *AOA Basic Standards for Residency Training in Internal Medicine* and in the *Basic Standards for "Plus One" Residency Training in Neuromusculoskeletal Medicine and Osteopathic Manipulative Medicine*.