New Application: Osteopathic Recognition
Osteopathic Principles Committee
ACGME

ACOI CEE Osteopathic Recognition Application Guide

The goal is to describe the program as it WILL be, not necessarily as it is at this point in time.

This is a support tool designed to help you complete the application for Osteopathic Recognition (OR).

Specific questions are provided to help guide program directors and staff. The ACOI CEE cannot assure these recommendations will help your program to achieve osteopathic recognition. Your application must reflect local resources and capability. While similarities may exist between applications, no two learning environments are exactly alike.

OSTEOPATHIC PRINCIPLES AND PRACTICE

1. Will all residents in the program receive osteopathic-focused education? [Requirement I.B., III.A.]

   □ YES □ NO

   Yes-should be selected as the answer to this question when all positions will be osteopathic-focused. Keep in mind these positions will be available to interested MD trainees.

   No-should be selected as the answer to this question if you have chosen to have an osteopathic track. The number (% or absolute) is an estimate and can be changed by the program director as needed. Keep in mind these positions will be available to interested MD trainees.

   If no, approximately what portion of the residents will be in the osteopathic-focused track?

   Questions to help focus response:
   What is your programs rationale for building an osteopathic-focused track vs all positions?

   Guidance:
   - Report as % or #. Can be changed by PD
   - Open to MD and DO trainees

2. In what clinical settings will Osteopathic Principles and Practice, and specifically osteopathic manipulative treatment, be taught and practiced? This may include hospital inpatient settings, ambulatory clinics, etc. [Requirements II.A.1.-10.]

   Overview
   Describe in as much detail as possible the OPP/OMT learning environment.

   This may include rotations in the hospital, the office, or the clinic.

   An internist or internal medicine subspecialist role modeling OPP and using OMT is preferred, but electives with NMM specialists could be used if needed and available. According to the ACGME OR FAQs, physicians from other specialties can provide OPP/OMT training.

   Do not overlook the importance of team-based learning (inter-disciplinary team) inclusive of a physician comfortable teaching OPP/OMT and offering an opportunity to practice what is learned.
Intermittent, scheduled inter-disciplinary rounds could be used in the clinical setting to teach and practice OPP/OMT.

**Questions to help focus response:**
- What does OPP/OMT look like in your program?
- Who are the key faculty?
- How often and in what contexts are OPP/OMT taught and practiced?
- What shared faculty or institutional collaborations are/will be in place to support the teaching of OPP/OMT?

**Guidance:**
- Be specific and descriptive – where will learning take place (hospital, office, clinic, etc.)
- A DO internist role model is optimal
- Shared faculty from other subspecialties are acceptable
- NMM electives can augment
- Consider team-based learning where demonstration and practice are integrated; this can be expanded to interdisciplinary rounds where teaching and practicing can be implemented

**a) On what rotations will residents have these opportunities? [Requirements II.A.1.-10.]**

**Questions to help focus response:**
- Which rotations have OPP role models or have an OPP focus?
- Where and when will OMT be practiced?
- Will NMM electives be offered? If so where? How often? Who will be the faculty for this/these electives?

**Guidance:**
- Unless accurate, it may be best to avoid broad statements that such training will occur on every rotation.

**b) Will residents have these opportunities at all participating sites utilized for these rotations? [Requirements II.A.1.-10.] .............................................□ YES □ NO**

If no, please explain.

**Questions to help focus response:**
- Will training be focused at the primary site only? If not specify where trainees will have these opportunities?
- Will the clinical curriculum be designed for integration into specific experiences or at appropriate faculty practice sites?

**Guidance:**
- Unless accurate, it may be best to avoid broad statements suggesting such training occurs at all sites. No could be an acceptable answer if properly explained.

**COMPETENCIES**

1. Describe how the program will integrate Osteopathic Principles and Practice within the patient care domain of competence, demonstrating the application of Requirements II.A.1.-10. Include in the description the settings and activities in which residents will demonstrate competence and provide the methods used to assess competence.

<table>
<thead>
<tr>
<th>Competency Domain-Patient Care</th>
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<th>Activity</th>
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The application allows for broad statements as to how a program will integrate OPP into each competency domain.

While not required, each specific competency listed in the requirements (II.A.1. to II.A.10) could be entered into this column with specific descriptors about the associated setting, activity, and assessment method used to determine competence.

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<th>Competency Domain-Medical Knowledge</th>
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2. Describe how the program will integrate Osteopathic Principles and Practice within the medical knowledge domain of competence, demonstrating the application of Requirements II.B.1.-5. Include in the description the settings and activities in which residents will demonstrate competence and provide the methods used to assess competence.
The application allows for broad statements as to how a program will integrate OPP into each competency domain.

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### Competency Domain – Practice-based Learning and Improvement

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Competency listed in the requirements (II.A.1. to II.A.10) could be entered into this column with specific descriptors about the associated setting, activity, and assessment method used to determine competence.

Possible settings include:
- Hospital rounds
- Ambulatory clinic
- Morning report
- Classroom
- OMT skills lab
- Journal club

May occur as part of the didactic curriculum or OMT skills lab/lecture series intended to support integration into the clinical setting.

The focus could be activities associated with the most common conditions and presentations managed by the specialty.

Direct observation by two faculty members

Case/chart review

Checklist inclusive of major elements from the requirements in the section

Applicable in-training examinations

3. Describe how the program will integrate Osteopathic Principles and Practice within the practice-based learning and improvement domain of competence, demonstrating the application of Requirements II.C.1.-4. Include in the description the settings and activities in which residents will demonstrate competence and provide the methods used to assess competence.
Examples

Possible settings include:
- Journal club
- Hospital-based care
- Ambulatory-based care
- OMT skills lab

Leading or participating in an evidence-based journal club
- Evidence-based decision making in the clinical settings to improve care at point of service
- Resident practice patterns in the OMT skills lab and in the ambulatory clinic

Direct observation by two faculty members
- Case/chart review
- Checklist inclusive of major elements from the requirements in the section

Classroom
Decision making
In-service examination

4. Describe how the program will integrate Osteopathic Principles and Practice within the interpersonal and communications skills domain of competence, demonstrating the application of Requirements II.D.1.-2. Include in the description the settings and activities in which residents will demonstrate competence and provide the methods used to assess competence.

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<th>Competency Domain – Interpersonal and Communications Skills</th>
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### Competency Domain – Professionalism

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### Examples

The specific requirements in this section are patient-centered and can therefore only be accomplished in a setting where patient interactions occur.

Possible settings include:
- Hospital-based care
- Ambulatory-based care
- OMT skills lab

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<td>Resident interaction with IP team</td>
<td>Resident interaction with patient and patient family</td>
<td>Direct observation by two faculty members in noted settings</td>
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<td>OMT skills lab</td>
<td>Checklist inclusive of major elements from the requirements in the section.</td>
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6. Describe how the program will integrate Osteopathic Principles and Practice within the **systems-based practice** domain of competence, demonstrating the application of Requirements II.F.1.-2. Include in the description the settings and activities in which residents will demonstrate competence and provide the methods used to assess competence.

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<td><strong>Possible settings include:</strong> Morning report/transition of care meeting/huddles Journal club Resident professional presentations Hospital-based care Ambulatory-based care OMT skills lab</td>
<td>Discussion arising from resident assigned reading Point of service decision making associated with patient care in the hospital and ambulatory settings OMT skills lab/simulation</td>
<td>Direct observation by two faculty members in noted settings Checklist inclusive of major elements from the requirements in the section</td>
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**Osteopathic Focused Curriculum and Required Experiences**

1. Describe how the program will integrate Osteopathic Principles and Practice into the curriculum [Requirements III.B.1.-4.]:

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Consider the opportunities where OPP/OMT can be included with intention (able to be documented)
Remember to determine that incorporation occurred in the event evaluation process
OPP/OMT can be incorporated into lectures on common acute and chronic problems in the field
Focused OPP lectures can be offered; Guest lecturers (not necessarily NMM) might provide these
OMT skill labs/simulation can be offered and may be repeated on a scheduled basis
Journal club can incorporate OPP through the use of selected articles and required literature review
Morning report can incorporate OPP/OMT during case presentations
Resident can be assigned reading on specific topics or from specific text

2. How does the program plan to create an environment that supports scholarly activity that advances Osteopathic Principles and Practice? [Requirement III.B.3.]

Program leadership will set appropriate expectations and act as role models
Faculty can deliver a formal presentation each year that is based upon a review of the osteopathic literature in their field
Core faculty members can work alone, as groups, or with external support to develop a project that incorporates OPP into clinical practice
Faculty members can be taught a format for developing and using scholarly questions, and can encourage trainees to use such a format to seek answers that incorporate OPP
Journal club can be conducted using scholarly questions, including appropriate review of the literature
Supporting faculty can meet on a regular basis to raise questions that will support inquiry
The program can work with external groups, such as an OPTI or SPEC to encourage and otherwise support scholarly work

3. Describe the resources available to support osteopathic-focused education, including:
   a) reference material pertaining to osteopathic manipulative medicine and Osteopathic Principles and Practice integration into patient care; [Requirement III.B.7.]
Identify texts inclusive of content related to the practice of osteopathic medicine available in the local library (how many, what type, etc.)
Identify journals with osteopathic content (Including but not limited to: JAOA, and IJOM, etc.)
Identify other resources that trainees may have access to that include osteopathic content, such as Essential Evidence Plus (and Cochrane database including manual medicine evidence)
Identify other resources available through the COM or OPTI
b) the number of examination tables suitable for osteopathic manipulative treatment and education available to the program; and, [Requirement III.B.7.a)]

Note the number of available tables, whether fixed or portable, and their location

c) facilities for osteopathic clinical and didactic activities. [Requirement III.B.7.b)]

- Define whether a dedicated classroom exists for OMT training or if it is part of a shared location
- Stipulate whether simulation or standardized patient services are available (such as through an OPTI or COM)

4. Who will provide the formal didactic education in Osteopathic Principles and Practice, including osteopathic manipulative treatment? This may include education provided through an affiliation with an educational consortium (e.g., an OPTI), a college of osteopathic medicine, etc. [Requirement III.B.8.]

Describe which personnel will support the education program, including their role (OMT training, etc.)

Internal resources may include:
- Program director
- Associate program director
- Core faculty
- Osteopathic track director (serving as an osteopathic principles and practice coordinator)
- Other faculty

External resources may include:
- Osteopathic track director (serving as an osteopathic principles and practice coordinator)
- OPTI resources (NMM specialists, etc.)
- COM resources (NMM specialists, etc.)
- Other

5. Briefly describe the planned opportunities for residents to teach Osteopathic Principles and Practice. [Requirement III.B.11.]

Multiple opportunities exists including:
- Trainees presenting an annual lecture with evidence of OPP integration
- Trainees actively participating in a journal club (the resident could develop, present, contribute, or facilitate)
- Education of fellow trainees on rounds and as part of other learning activities
- Medical student education on rounds and as part of other learning activities
- Trainees are expected to contribute to the education of other inter-professional team members

Faculty

1. List the faculty member(s) who will work with the program director in the development of the Osteopathic Principles and Practice competency education and evaluation system, and to teach and advise residents. [Requirement III.C.2.c]
Enter the names of faculty members expected to contribute to the osteopathic learning environment

2. Briefly describe how these faculty members will:

a) be trained in the evaluation and assessment of the ACGME and osteopathic competencies;  
   [Requirement III.C.2.c).(2)]

Describe the professional development plan for your faculty. Be specific.

This may include program attendance (examples include ACOI Trainer’s Congress or the ACGME Annual Education Conference) that will include training in the ACGME competency domains inclusive of the osteopathic competencies

Other options include self-directed study, internal faculty programs, and/or OPTI-based faculty development (including development of a personal learning plan)

b) participate in a faculty development program that includes Osteopathic Principles and Practice;  
   and, [Requirement III.C.2.c).(3)]

As above

c) participate in organized clinical discussions, rounds, journal clubs, or conferences with specific integration of Osteopathic Principles and Practice or osteopathic manipulative treatment.  
   [Requirement III.C.2.c).(5)]

Multiple opportunities exists including:

Rounds—faculty may complete rounds alone or with another skilled physician present as an integrated part of the team
Journal club—faculty will facilitate/monitor journal clubs to assure OPP integration and assess for the presence of the same
Conferences—faculty will monitor for integration of OPP by residents and assure their own presentations are developed to include osteopathic content (OPP and/or the use of OMT)

RESIDENT ELIGIBILITY

Describe how the program will ensure that graduates of medical schools in the United States or Canada accredited by the LCME, or graduates of medical schools outside of the United States or Canada, have a sufficient background and/or instruction in osteopathic philosophy and techniques in manipulative medicine to prepare them to engage in the curriculum of the program? [Requirement IV.A.-IV.B.4.]

Program directors may look for any of the following:

Prior attendance at a COM-developed MD prep courses for osteopathic-focused training
Prior attendance at a SPEC-developed MD prep courses for osteopathic-focused training
Prior attendance at similar courses with both live and on-line components may be acceptable if a trainee cannot attend a COM or SPEC program based upon geography or cost
Audition rotations through the program of interest
ONMM rotations
Program-developed prep courses (‘boot camp’)
Individualized learning plans based upon early milestone evaluation
Self-directed reading and learning