Specific Basic Standards for
Osteopathic Fellowship Training in
Rheumatology

American Osteopathic Association
and
American College of Osteopathic Internists

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These specific basic standards are part of the Common Basic Standards for Fellowship Training in Internal Medicine Subspecialties, which govern and define training in all medical subspecialties. These requirements are in addition to all requirements in the Common Basic Standards.

INSTITUTIONAL REQUIREMENTS

4.1 The base institution or an affiliate must have laboratories or access to reference laboratories for serologic and immunologic testing providing routine and specialized tests for patient care.

4.2 The base institution or an affiliate must have facilities for inpatient or outpatient dialysis.

4.3 The base institution or an affiliate must have facilities for inpatient rehabilitation or have these facilities available via an affiliation agreement.

4.4 The base institution or an affiliate must have facilities to perform pulmonary function testing.

4.5 The base institution or an affiliate must have facilities to perform electromyographic testing.

4.6 The base institution or an affiliate must have radiology facilities and services that can provide rheumatology-related procedures including, at minimum: myelograms, angiography, computed tomography, magnetic resonance imaging, and bone densitometry.

4.7 The base institution or an affiliate must have availability and evidence of interaction with specialists in, at minimum:
   a Surgery;
   b Orthopedic surgery;
   c Pediatrics; and
   d Psychiatry.

4.8 The base institution or an affiliate must have laboratory space and assistance for the fellows to conduct research.

4.9 The base institution or an affiliate must provide a supervised ambulatory site for continuity of care training. Institutional clinics or rheumatologists’ offices may be used.

V PROGRAM REQUIREMENTS AND CONTENT

A Program duration

5.1 The fellowship training program is a full-time training program of a minimum of 24 months in duration.

B Medical Knowledge

5.2 Clinical teaching conferences must be conducted at least once weekly.

5.3 The fellow must present a minimum of four clinical lecture conferences under the guidance of a faculty member each year.

5.4 The fellow must have learning activities in use of non-steroidal anti-inflammatory drugs, disease-modifying drugs, biologic response modifiers, glucocorticoids, cytotoxic drugs, antihyperuricemic drugs, and antibiotic therapy for septic joints.

5.5 The fellow must have learning activities in examination of patients with particular skill in the examination of all joints.
5.6 The fellow must have learning activities in construction of differential diagnoses related to the signs and symptoms of rheumatologic diseases.

5.7 The fellow must have learning activities in diffuse connective tissue disease.

5.8 The fellow must have learning activities in rheumatoid arthritis.

5.9 The fellow must have learning activities in systemic lupus erythematosis.

5.10 The fellow must have learning activities in scleroderma.

5.11 The fellow must have learning activities in polymyositis.

5.12 The fellow must have learning activities in spondyloarthropathies.

5.13 The fellow must have learning activities in vasculitis.

5.14 The fellow must have learning activities in crystal-induced synovitis.

5.15 The fellow must have learning activities in osteoarthritis.

5.16 The fellow must have learning activities in musculoskeletal pain syndromes including fibromyalgia.

5.17 The fellow must have learning activities in sports injuries.

5.18 The fellow must have learning activities in systemic diseases with rheumatic manifestations.

5.19 The fellow must have learning activities in metabolic diseases of bone.

5.20 The fellow must have learning activities in osteoporosis.

5.21 The fellow must have learning activities in joint infections.

5.22 The fellow must have learning activities in indications and complications of joint surgery.

C. Patient Care

5.23 The fellow must have training and experience in trigger point injections, joint aspiration and joint injections to include, at minimum: indications, contraindications, complications, limitations, interpretation and evidence of competent performance.

5.24 The fellow must have training and experience in the interpretation of arthrography, ultrasonography, bone densitometry, musculoskeletal radiographs, computed tomography and magnetic resonance imaging of bones, joints and periarticular structures.

D. Ambulatory Clinic

5.25 The fellow must participate in ambulatory clinic at least four-half days per week in the first year and two-half days per week during the second year.