Basic Standards for “Plus One” Residency Training in Neuromusculoskeletal Medicine and Osteopathic Manipulative Medicine

American Osteopathic Association
and the
American Academy of Osteopathy

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BASIC STANDARDS FOR “PLUS-ONE” RESIDENCY TRAINING IN NEUROMUSCULOSKELETAL MEDICINE AND OSTEOPATHIC MANIPULATIVE MEDICINE

SECTION I – INTRODUCTION

These are the basic standards for “Plus-One” residency training in Neuromusculoskeletal Medicine and Osteopathic Manipulative Medicine (NMM/OMM) as approved by the American Osteopathic Association (AOA) and the American Academy of Osteopathy (AAO). This program is a variant of the two year NMM/OMM residency training program which allows the resident to take only the final year of training in this specialty following the completion of another AOA approved residency training program. These standards are designed to provide the qualified resident with advanced and concentrated training in Neuromusculoskeletal Medicine and Osteopathic Manipulative Medicine and to prepare the resident for examination for certification by the American Osteopathic Board of Neuromusculoskeletal Medicine (AOBNMM). The program must meet all the requirements as defined in the AOA Basic Documents for Postdoctoral Training as well as the AOA Basic Standards for Residency Training in NMM/OMM. This standard addresses only those elements which are specific to the “Plus-One” NMM/OMM residency program.

SECTION II – MISSION

The mission is to provide the physician graduate of a previous AOA residency program with the patient population, diversity, and pathology in the ambulatory and acute care settings needed to develop knowledge, diagnostic and management skills in a structured, educational program to demonstrate expertise, proficiency, and technical skills to successfully complete the requirements leading to certification by the AOBNMM and to develop physicians qualified to teach basic osteopathic principles and integrate them into undergraduate and postgraduate clinical programs.

SECTION III – EDUCATIONAL PROGRAM GOALS

To educate residents in the philosophy, principles and practice of osteopathic manipulative medicine including osteopathic manipulative treatment. A core exposure to and preparation in the various models of osteopathic manipulative medicine is central to this education process. Upon completion of this residency training program, the graduate has been prepared to undertake the distinctive practice of neuromusculoskeletal medicine and osteopathic manipulative medicine.

SECTION IV- INSTITUTIONAL REQUIREMENTS

To be approved by the AOA for a residency in Neuromusculoskeletal Medicine and Osteopathic Manipulative Medicine, an institution must meet all the requirements as formulated in the AOA Basic Documents for Postdoctoral Training and the Basic Standards for Residency Training in NMM/OMM.

SECTION V – PROGRAM REQUIREMENTS/CONTENT

A. The residency training program shall commence only after it has received the recommendation of the AOA Council on Postdoctoral Training and the approval of the AOA Board of Trustees.
B. The “plus-one” residency training program in Neuromusculoskeletal Medicine and Osteopathic Manipulative Medicine shall be one (1) year in duration following completion of an AOA approved residency.

C. The resident’s training program shall commence following a review of the previously completed AOA approved residency training program.

D. The training program shall provide an organized formal training program as outlined in the Basic Standards for Residency Training in NMM/OMM.

E. The program may offer quality outside rotations that meet standards formulated in the AOA Basic Documents for Postdoctoral Training.

5.1 Such rotations shall be arranged as needed to meet the other goals and requirements of the residency program and/or to provide the breadth of patient exposure required in this program.

5.2 Up to four (4) months of the program may be spent in outside rotations, but the continuity of outpatient clinic experience shall be maintained.

5.3 The NMM/OMM Plus 1 residency program recognizes that our residents matriculate from a diversity of educational and specialty backgrounds. Each resident has their own education needs to fulfill. The mission of this residency program is to complete a full spectrum of NMM training. NMM/OMM Plus 1 residents will not be required to meet the rotational requirements of the Basic Standards for Residency Training in NMM/OMM. However, to ensure quality and depth of NMM/OMM education, each program must demonstrate that the program director has met with each resident individually to outline past rotations, identify strengths and weaknesses and choose future rotations and experiences that would best improve each resident’s training. This standard supersedes the rotation requirements in the Basic Standards for Residency Training in NMM/OMM.

F. OMM Core Curriculum

5.1 Continuity of Care Clinics

a. Continuity of care clinics shall constitute the majority of out-patient training.

b. The patient base shall provide a population with diversity of age and pathology.

c. The longitudinal care provided shall address the physiological, emotional, cultural, economic, psychological, and environmental factors as they relate to the disease process.

d. Each resident shall have a dedicated panel of patients for whom, with supervision, they are the principal care provider.

e. The scope and variety of patients shall support the educational objectives of the Neuromusculoskeletal and Osteopathic Manipulative Medicine residency program.

f. The resident shall spend an average of three half-days per week in the continuity clinic setting over the course of the training period.

g. It is required that the resident provide care for at least 120 individual patients and see a minimum of 360 patient visits in the continuity clinic through the course of his or her training.

h. Educational objectives and plan shall be developed as outlined in the Basic Standards
5.2 Hospital Care

a. Educational objectives and plan for hospital training shall be developed as outlined in the Basic Standards for Residency Training in NMM/OMM.

5.3 Internal Medicine

a. Over the course of the training, the resident shall evaluate and treat a minimum of 50 patients with a broad variety of diagnoses. This requirement must be met through both the continuity clinic and hospital care portions of the program.

5.4 Surgery

a. Over the course of the training, the resident shall evaluate and treat a minimum of 50 patients with a broad variety of diagnoses. This requirement must be met through both the continuity clinic and hospital care portions of the program.

b. If insufficient volume is produced through these avenues, a minimum of one month of intensive rotation on surgical services must be done.

c. The rotation may be in general surgery or one or more sub-specialties, however the minimum osteopathic manipulative treatment requirement still exists.

5.5 Pediatrics

a. Over the course of the training, the resident shall evaluate and treat a minimum of 50 patients with a broad variety of diagnoses. This requirement must be met through both the continuity clinic and hospital care portions of the program.

b. If insufficient volume is produced through these avenues, a minimum of one month of intensive rotation in pediatrics must be done.

5.6 Obstetrics/Gynecology

a. Over the course of the training, the resident shall evaluate and treat a minimum of 50 patients with a broad variety of diagnoses. This requirement must be met through both the continuity clinic and hospital care portions of the program.

b. If insufficient volume or depth is produced through these avenues, a minimum of one month of intensive rotation in OB/GYN must be done.

c. The minimum osteopathic treatment requirement persists in this situation.

5.7 Neuromusculoskeletal Medicine

a. Over the course of the training, the resident shall evaluate and treat a minimum of 100 patients with a broad variety of diagnoses. This requirement must be met through both the continuity clinic and hospital care portions of the program.

b. If insufficient volume is met through these avenues, a minimum of two (2) months of intensive rotations must be done in areas appropriate to meet the educational goals of the program as defined in the Basic Standards for Residency Training in NMM/OMM.
SECTION VI – PROGRAM DIRECTOR/FACULTY

Qualifications and responsibilities of the program director and faculty members for the “Plus-One” residency program in NMM/OMM shall be consistent with the requirements in the AOA Basic Documents for Postdoctoral Training as well as the Basic Standards for Residency Training in NMM/OMM.

SECTION VII- RESIDENT REQUIREMENTS

A. To be eligible for residency training in “Plus-One” Neuromusculoskeletal Medicine and Osteopathic Manipulative Medicine, the applicant shall meet the appropriate following minimum criteria. The candidate will:
   7.1 Successfully complete an AOA approved residency program in another specialty.
   7.2 Be and remain a member in good standing of the AAO.

B. During the residency training program, the resident must meet the requirements as outlined in the Basic Standards for Residency Training in NMM/OMM.

SECTION VIII- EVALUATION

Evaluation of the resident and program in NMM/OMM Plus-One shall be consistent with requirements in the AOA Basic Standards for Residency Training in NMM/OMM.
APPENDIX A: ADVANCED STANDING

A. If a resident is accepted from another NMM/OMM “Plus-One” residency program, the program director of the accepting program has the authority to determine which, if any, rotations from the previous program will qualify for a request for advanced standings.

B. The accepting program director has the authority to approve up to three (3) months training from another Plus-One program. Requests for advanced placement beyond three months must be reviewed by the AAO Postdoctoral Standards and Evaluations Committee on an individual basis.

C. No advanced standing will be accepted from any other program except another Plus-One program.
APPENDIX B: PART-TIME RESIDENCY REQUIREMENTS

A. A physician may participate in an NMM/OMM Plus-One training program on a part-time basis; however, the program must be completed within a two (2) year period.

B. For the allotment of residency slots, the program will provide slots according to the time spent in the residency by the physician. For example, a full-time program will constitute one residency slot and a half-time program will constitute a half residency slot.

C. The program must take place in an already approved and fully accredited NMM/OMM Plus-One residency program and must be equivalent to residency training as stated in these Basic Standards and the continuity of care portion of the training is required.

D. The program may not be completed as a weekend-only rotation and must be done in a continuous period.