



**BASIC STANDARDS
FOR
RESIDENCY TRAINING
IN
COMBINED PRIMARY AND SPECIALTY
ANATOMIC AND FORENSIC PATHOLOGY**

**American Osteopathic Association
and
American Osteopathic College of Pathologists**

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ARTICLE I - INTRODUCTION

These are the Basic Standards for Residency Training in Combined Primary and Specialty Anatomic and Forensic Pathology as approved by the American Osteopathic Association (AOA) and the American Osteopathic College of Pathologists (AOCP). These standards are designed to provide the qualified osteopathic resident a structured educational experience in anatomic pathology and forensic pathology and to prepare the resident for examination and certification in anatomic pathology and forensic pathology by the AOA through the American Osteopathic Board of Pathology.

ARTICLE II - DEFINITION AND PURPOSE

The specialty of anatomic pathology involves the study of the nature and cause of disease relative to alteration of structure and function. Forensic pathology is the subspecialty of pathology that involves the medicolegal investigation of death.

The purpose of the anatomic pathology and forensic pathology program is to:

- A. Prepare the osteopathic physician for extensive training in the etiology and nature of disease and disease processes.
- B. Provide residents the opportunity to acquire a broad understanding of anatomic and forensic pathology including the techniques and methods of those disciplines.
- C. Provide training and experience that will lead to the consultative role of a pathologist in patient care decision making, in context with osteopathic principles and practices.
- D. Provide the opportunity for management of business aspects and personnel in the anatomic and forensic pathology laboratory.
- E. Provide extensive training in the investigation and identification of natural and unnatural causes of death in which there may be medicolegal aspects and ramifications.
- F. Provide the opportunity for experience and development of expertise in all aspects of the medicolegal investigation of death including: clinical and scientific crime laboratories, medicolegal postmortem examinations, scene investigations, legal and court room proceedings, operation and management of a medical examiner's office.

ARTICLE III - INSTITUTIONAL REQUIREMENTS

- A. To be approved by the AOA for residency training in anatomic and forensic pathology, an institution must meet the requirements as formulated by the AOA in its document, **Basic Documents for Postdoctoral Training**.

ARTICLE III - INSTITUTIONAL REQUIREMENTS (cont'd)

- B. The institution should demonstrate commitment to graduate medical education and offer sufficient case volume in order to provide wide experience and appropriate training of the resident in anatomic and forensic pathology.
- C. The institution shall maintain an adequate medical library containing carefully selected texts, latest editions of medical journals and other appropriate publications pertaining to training in anatomic and forensic pathology. The library shall be under the supervision of a qualified person who will act as custodian of its contents and arrange for proper cataloging and indexing that will facilitate investigative work by the resident.
- D. The institution shall provide an appropriate work/study area for the resident and such instruments and equipment that are essential to the conduct and learning of the specialty of anatomic and forensic pathology.
- E. The institution shall provide the physical facilities and teaching faculty required to meet the objectives of an anatomic and forensic pathology training program.
- F. When resources of two or more institutions are utilized in a program, letters of agreement from the appropriate institutional representatives detailing the educational role of each institution must be kept on file by the program director.
- G. The institution shall provide an annual self-evaluation mechanism to assure sufficient appraisal of scope and volume, the educational curriculum, the faculty, the residents and quality of education.
- H. The institution must provide a written policy and procedure for selection of a resident.
- I. The institution shall execute a contract with each resident in accordance with the *Basic Documents for Postdoctoral Training* of the AOA.
- J. Upon satisfactory completion of the program, the institution shall award the resident an appropriate certificate or equivalent document. The certificate shall confirm the fulfillment of the program requirements, starting and completion dates of the program and names of the training institutions and program directors.

ARTICLE IV - PROGRAM REQUIREMENTS AND DESCRIPTION

- A. The residency training program shall only commence after it has received the approval of the Executive Committee of the AOA's Council on Postdoctoral Training (COPT). For D.O.s in non-AOA-approval training programs, the resident must register with the AOA before the training may be approved.

ARTICLE IV - PROGRAM REQUIREMENTS AND DESCRIPTION (cont'd)

- B. The residency program in anatomic and forensic pathology shall be for a minimum duration of four years, consisting of two years in anatomic pathology and two years in forensic pathology.

NOTE: One year of approved training in a specialty area of pathology such as neuropathology, toxicology, or chemical pathology may be substituted for one year in forensic pathology).
The general educational content of the program shall include:

1. Basic and allied sciences required to establish the resident's interest and expertise in anatomic pathology;
 2. Clinical lectures, demonstrations and resident participation in diagnosis and therapy of specific cases;
 3. Observation and correlation of neuromusculoskeletal abnormalities as they apply to the diagnosis of disease in context with osteopathic principles and concepts;
 4. Resident participation in diagnosis and management of cases under their individual auspices, in the educational programs at the institution, in investigative endeavors at the institution, under the supervision of the director of medical education and/or program director;
 5. The opportunity for the resident to have on the average, at least one 24-hour day per week free from duties and should be on call no more than every third night. Additional backup staff should be provided whenever responsibilities are particularly difficult or prolonged.
- C. The residency program shall provide the resident with opportunities for laboratory and departmental administrative activities in order to experience that responsibility.
- D. The residency program should allow the resident to perform and/or observe all pathological procedures.
- E. The residency program shall provide continuing medical education in osteopathic principles and practice throughout the training program.
- F. The residency program shall allow the resident to attend all professional activities related to the specialty of anatomic and forensic pathology.
- G. The residency program in combined anatomic and forensic pathology shall be for a minimum of four years duration.
- H. 500 medicolegal autopsies should be conducted in an approved forensic program per year.
- I. The program shall provide for a structured work week. Except under extenuating circumstances, the work week shall not exceed 80 hours and shall allow one 24-hour day free from routine duties every week.

ARTICLE IV - PROGRAM REQUIREMENTS AND DESCRIPTION (cont'd)

- J. Each resident should perform 250 autopsies in a given year of approved forensic training and should have experience in scene investigations, including examination of the body before it has been moved or disturbed.
- K. Residents should have the responsibility for performance of autopsies in cases likely to result in criminal investigation or civil litigation.
- L. Residents should have the opportunity to participate in legal follow-up of cases in which they have participated.
- M. Residents should have the opportunity to accompany staff pathologists when they give depositions or testify in court.
- N. Residents shall integrate osteopathic principles and practice wherever applicable and appropriate in the study of forensic pathology.
- O. Specific blocks of time should be allocated for the conduct of bacteriologic, biochemical and toxicologic studies, firearms, trace evidence, physical anthropology, dentology, and other areas necessary to ensure complete knowledge of postmortem investigation.
- P. Those areas of forensic pathology not available in the primary training institution should be made available and accessible to the resident in other suitable laboratories or institutions. Such training must be adequately supervised by qualified personnel.
- Q. A program statement should be available to the resident and include the following:
 - 1. Description of the program's educational goals and philosophies;
 - 2. List and description of all required rotations and their duration;
 - 3. List and description of all elective rotations and their duration;
 - 4. Description of resident opportunities for teaching and research;
 - 5. Description of the manner in which residents and programs are evaluated and how such evaluations are used;
 - 6. Description of the manner in which residents are supervised;
 - 7. Duties and responsibilities of residents at each year of training;
 - 8. Teaching staff responsibilities for supervision and instruction of residents during their experiences.

ARTICLE V - CURRICULUM

- A. Education in anatomic pathology shall include autopsies, surgical pathology, cytology, pediatric pathology, dermatopathology, forensic pathology, immunopathology, histochemistry, ultrastructure pathology, cytogenetics, molecular biology, and other advanced diagnostic techniques as they become available.
- B. Education in forensic pathology shall include, but not be limited to, the following: scene investigation; medicolegal autopsy; estimation of time of death; examination of skeletal remains; death from blunt force; death from stabbing or cutting; gunshot wounds; asphyxial deaths; diagnosis of drowning; death from burns; electrocution, lightning; death from heat stroke and hypothermia; sudden, unexpected natural death; transportation fatalities; death from therapeutic mishaps; stillborn and infant death; artifacts in forensic pathology; negative autopsy; death from poisoning; artifacts in forensic toxicology; and analytical procedures.
- C. The program shall provide instruction and experience in the major aspects of the administration of anatomic and forensic pathology laboratory including resident participation and interpretation of data as part of patient care decision-making, conferences, rounds, patient care consultation, management and direction of the laboratory, quality assessment, data processing, teaching, and professional activities.
- D. The resident training program shall provide sufficient case load for wide experience and appropriate training of the resident and in addition, the following list is considered a minimum of procedures for anatomic pathology:
 - 1. Material available in the program for anatomic pathology must be sufficient in volume and variety to ensure that the residents have broad exposure to common and more unusual entities, develop diagnostic and problem-solving proficiency, and evolve the necessary technical abilities to perform functions of an anatomic pathologist.
 - 2. The major components of the anatomic pathology program incorporate performance and responsibility for autopsies including forensic and stillborn cases. Surgical pathology specimens including operating room consultations must be adequate in number and variety to ensure proficiency in routine diagnostic cases as well as frozen section specimens. Examination of adequate and varied cytologic specimens must include exfoliated and aspiration specimens.

ARTICLE VI - QUALIFICATIONS AND RESPONSIBILITIES OF THE PROGRAM DIRECTOR

- A. Qualifications
 - 1. The program director must be certified in anatomic and forensic pathology by the AOA through the American Osteopathic Board of Pathology or by the American Board of Pathology.

**ARTICLE VI - QUALIFICATIONS AND RESPONSIBILITIES OF THE PROGRAM
DIRECTOR (cont'd)**

2. The program director should meet and follow criteria incorporated in the AOA's *Basic Documents for Postdoctoral Training*.
 3. The program director must be qualified by nature and temperament to be a teacher and possess the ability to offer a quality anatomic and forensic pathology residency program in both its scientific and clinical aspects.
- B. Responsibilities
1. The program director's authority in directing the residency program must be defined in the program documents of the institution.
 2. The program director must work with other departments of the institution to assure cooperation in training of the residents in pathology.
 3. The program director shall arrange affiliations and/or outside rotations necessary to meet the program objectives.
 4. The program director shall, in cooperation with the AOA Division of Postdoctoral Training, prepare required materials for inspection of the program.
 5. The program director shall provide the resident with all documents pertaining to the training program as well as the requirements for satisfactory completion of the program.
 6. A Program Director's Report shall be submitted to the AOCP for each resident, within thirty (30) days of the completion of the resident's training year.
 7. The program director, at the direction of the American Osteopathic College of Pathologists, shall administer a written examination to each resident at the conclusion of each training year.

ARTICLE VII - RESIDENT REQUIREMENTS

- A. Applicants for residency training in anatomic and forensic pathology must:
1. Be a graduate from an AOA-accredited college of osteopathic medicine.
 2. Have completed an AOA-approved internship.
 3. Be and remain a member of the AOA during the training program.
 4. Be appropriately licensed in the state in which training is conducted.

ARTICLE VII - RESIDENT REQUIREMENTS (cont'd)

- B. During the training program, the resident must:
1. Maintain a daily log of activities in anatomic and forensic pathology with a monthly summary of this log used in the compilation of an annual report.
 2. Submit an annual report to the AOCP within thirty (30) days of the completion of each training year.
 3. Submit one (1) original scientific paper and/or research project suitable for publication and pertaining to forensic pathology. Established guidelines shall be used in preparation of the paper.
 4. Participate in professional activities relating to the specialty of anatomic and forensic pathology, as approved by the program director.

ARTICLE VIII - CERTIFICATION/ELIGIBILITY IN ANATOMIC AND FORENSIC PATHOLOGY

- A. Satisfactory completion of the combined anatomic and forensic pathology program shall lead to eligibility for examination by the American Osteopathic Board of Pathology and/or American Board of Pathology.
- B. Candidates must follow the criteria for applications established by the individual certification boards.

APPENDIX - I

MODEL HOSPITAL POLICY ON ACADEMIC AND DISCIPLINARY DISMISSALS

In July, 1993, the Board of Trustees of the American Osteopathic Association adopted the following policy:

The hospital and department have clearly defined procedures for academic and disciplinary action. Academic dismissals result from a failure to attain a proper level of scholarship or non-cognitive skills, including clinical abilities, interpersonal relations, and/or personal and professional characteristics. Institutional standards of conduct include such issues as cheating, plagiarism, falsifying records, stealing, alcohol and/or substance abuse, or any other inappropriate actions or activities.

In cases of academic dismissal, the hospital and department will inform trainees, orally and in writing, of inadequacies and their effects on academic standing. The trainee will be provided a specified period in which to implement specified actions required to resolve academic deficiencies. Following this period, if academic deficiencies persist, the trainee may be placed on probation for a period of three (3) to six (6) months. The trainee may be dismissed following this period, if deficiencies remain and are judged to be unremediable. In accordance with institutional policy, the trainee will be provided an opportunity to meet with evaluators to appeal decisions regarding probation or dismissal. Legal counsel at hearings concerning academic issues will not be allowed.

In cases of disciplinary infractions that are judged unremediable, the hospital and department will provide the trainee with adequate notice, in writing, of specific ground(s) and the nature of the evidence on which the disciplinary action is based. The trainee will be given an opportunity for a hearing in which the disciplinary authority will provide a fair opportunity for the trainee's position, explanations and evidence. Finally, no disciplinary action will be taken on grounds which are not supported by substantial evidence. The department and/or hospital intern training committee, or house staff education committee, or other appropriate committees will act as the disciplinary authority. Trainees may be allowed counsel at hearings concerning disciplinary issues. Pending proceedings on such disciplinary action, the hospital in its sole discretion may suspend the trainee, when it is believed that such suspension is in the best interests of the hospital or of patient care.