

Frequently Asked Questions: Osteopathic Recognition
Osteopathic Principles Committee
ACGME

Question	Answer
Osteopathic Principles and Practice	
<p>What types of learning environments are suitable for providing osteopathic-focused education?</p> <p><i>[Recognition Requirement: I.A.]</i></p>	<p>Historically, graduates of osteopathic programs produced physicians who were comfortable practicing in multiple settings by providing educational experiences in tertiary care centers and small, rural hospitals. When possible, it is recommended that experiences be provided in rural and/or underserved settings; however, the Osteopathic Principles Committee recognizes that osteopathic-focused education may be offered in a variety of settings, including federally qualified health centers, health departments, critical access hospitals, and more.</p>
<p>Must a program identify in its application whether it is seeking Osteopathic Recognition for the whole program or only for a track within it?</p> <p><i>[Recognition Requirement: I.B.]</i></p>	<p>Programs do not need to identify in the application whether they plan to have a track within the program. An Osteopathic Recognition application is submitted for a program, and the Osteopathic Principles Committee confers Osteopathic Recognition on a program. It will be up to the program to determine if all residents in the program will receive osteopathic-focused education or only a subset of the residents in the program, which may be referred to as a track.</p>
<p>What are the expected elements of an osteopathic learning environment for a program with Osteopathic Recognition?</p> <p><i>[Recognition Requirements: III.-III.B. 12.]</i></p>	<p>The Osteopathic Principles Committee expects that every program with Osteopathic Recognition create an osteopathic-focused learning environment that spans the length of the educational program. The Committee acknowledges that each program will have varying resources and missions based on geographic location, backgrounds of faculty members, and the needs of the patient populations served. The avenues to attain an osteopathic learning environment are equally varying to allow individual programs to successfully meet the Osteopathic Recognition Requirements.</p> <p>Post-graduate training occurs with both longitudinal and focused educational experiences. In this spirit, an osteopathic learning environment provides experiences to support the developmental process for each program and its learners. The Milestones guide this developmental growth throughout the educational program.</p> <p>There are several elements a program can utilize to establish an osteopathic learning environment, which may include focused rotations, integrated rotations, osteopathic rounds, clinic rotations, and osteopathic patient care conferences. A more robust</p>

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	<p>description of each of these is available on the Osteopathic Recognition section of the ACGME website.</p>
<p>Does a program need to receive approval from the Osteopathic Principles Committee to change its complement of designated osteopathic-focused residents?</p> <p><i>[Recognition Requirement: III.A.]</i></p>	<p>No. The Osteopathic Principles Committee will monitor the number of residents receiving osteopathic-focused education, but will not need to approve changes in a program's number of designated osteopathic-focused residents. The applicable Review Committee approves changes that affect a program's overall resident (fellow) complement.</p>
<p>Should there be one resident per program year or one resident at each level of education, averaged over a period of three years?</p> <p><i>[Recognition Requirement: III.A.]</i></p>	<p>The Osteopathic Principles Committee expects that there will be at least one resident per year of the program, averaged over a period of three years, in a program with Osteopathic Recognition. In order to deliver a consistent experience for all learners, it is desirable to have two or more residents enrolled in osteopathic-focused education. The presence of multiple learners at each year of the program will facilitate peer and near-peer learning. A fragmented enrollment may negatively impact learning. The Committee will continue to monitor this in order to best support programs.</p>
<p>Can a program request a waiver of the minimum required number of designated osteopathic-focused residents?</p> <p><i>[Recognition Requirement: III.A.]</i></p>	<p>Yes, programs may request a waiver. Programs requesting a waiver must send a formal letter outlining the request and an explanation of why it will be unable to meet the requirement. The letter should be addressed to the Osteopathic Principles Committee and signed by the designated institutional official, program director, and osteopathic-focused track director (if applicable). The letter should be sent via e-mail to the Executive Director of the Osteopathic Principles Committee (tross@acgme.org). The program will be notified in writing of the Committee's decision regarding whether or not a waiver is granted.</p>
<p>How does the Osteopathic Principles Committee define a "sufficient" number of faculty members?</p> <p><i>[Recognition Requirement: III.B.6.]</i></p>	<p>The Committee expects all programs with Osteopathic Recognition to have at least two faculty members able to develop and deliver a curriculum intended to promote Osteopathic Principles and Practice and use of osteopathic manipulative treatment consistent with the osteopathic competencies. A program may use external resources to support this effort, such as those provided through a relationship with an educational consortium (e.g., an OPTI) or a college of osteopathic medicine.</p>
<p>What are some examples of learning resources the Osteopathic Principles Committee recommends to support osteopathic medical education?</p>	<p>The following are some suggested learning resources that may be utilized to support osteopathic medical education:</p> <ul style="list-style-type: none"> • Live or video conferencing of the presentation of Osteopathic Principles and Practice that may include the application of osteopathic manipulative treatment in clinical situations relevant to each specialty group

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<i>[Recognition Requirement: III.B.7.]</i>	<ul style="list-style-type: none"> • Access to references that enhance the understanding of Osteopathic Principles and Practice • Role modeling of osteopathic manipulative treatment in the patient care setting • Online training modules to enhance learners' understanding of Osteopathic Principles and Practice and/or the application of osteopathic manipulative treatment in a clinical setting
<p>What are the Osteopathic Principles Committee's expectations regarding facilities for osteopathic clinical and didactic activities?</p> <p><i>[Recognition Requirement: III.B.7.b)]</i></p>	<p>The Committee expects programs to have facilities suitable for providing osteopathic clinical and didactic teaching activities. This includes appropriate space in the clinical and didactic setting for examination tables suitable for osteopathic manipulative treatment and education, and appropriate conference room space, and equipment necessary for the didactic modalities utilized.</p>
<p>Do the Osteopathic Recognition requirements for scholarly activity replace the specialty requirements for scholarly activity? What qualifies as scholarly activity in Osteopathic Principles and Practice?</p> <p><i>[Recognition Requirement: III.B.9.]</i></p>	<p>The pursuit of scholarly activity in Osteopathic Principles and Practice does not replace the scholarly activity as articulated in the applicable specialty Program Requirements. Residents and faculty members must meet the specialty requirements as outlined by the Review Committee. The Osteopathic Principles Committee encourages the incorporation of Osteopathic Principles and Practice into the scholarly activity that is used to meet the specialty-specific requirements. If it is not appropriate to incorporate Osteopathic Principles and Practice into the specialty-specific scholarly activity, additional scholarly activity will need to be completed to meet Osteopathic Recognition requirements.</p> <p>Faculty Scholarly Activity: The Osteopathic Principles Committee encourages each osteopathic-focused faculty member, including the program director/co-program director/osteopathic-focused track director, to participate in scholarly activity. Osteopathic-focused faculty members must produce a combined total of at least two scholarly pieces annually, averaged over a five-year period. If it includes osteopathic content, the following may qualify as faculty scholarly activity:</p> <ul style="list-style-type: none"> • Topic presentation at a regional, state, or national meeting • Presentation at a grand rounds • Web conference presentation to a regional, state, or national audience • Publication of articles, book chapters, abstracts, or case reports in peer-reviewed journals • Publication of peer-reviewed performance improvement or education research

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	<ul style="list-style-type: none"> • Peer-reviewed funding • Peer-reviewed abstracts presented at a regional, state, or national specialty meeting • Leadership position in a regional, state, or national osteopathic-related organization <p>Resident Scholarly Activity: It is the expectation of the Osteopathic Principles Committee that all residents designated as receiving osteopathic-focused education will integrate Osteopathic Principles and Practice into their scholarly activity. Osteopathic-focused residents must produce at least one piece of scholarly activity prior to graduating from the program. Resident scholarly activity may include:</p> <ul style="list-style-type: none"> • Items in faculty scholarly activity list above • Resident-led didactic with integration of Osteopathic Principles and Practice • Resident-led workshop with integration of Osteopathic Principles and Practice • Resident-led journal club with osteopathic content
<p>What topics are appropriate for osteopathic-focused scholarly activity?</p> <p><i>[Recognition Requirement: III.B.9.]</i></p>	<p>Osteopathic-focused scholarly activity includes educational presentations or research that focus on specific osteopathic principles or practices, or that address the integration of Osteopathic Principles and Practice into clinical care. Examples of the latter would be any scholarly activities that include the integration of one or more of the osteopathic principles: 1) mind-body-spirit interactions; 2) structure-function relationships; 3) self-regulatory and self-healing physiological mechanisms; and 4) osteopathic manipulative medicine into patient care.</p> <p>The following are examples of acceptable scholarly activities and topics:</p> <ul style="list-style-type: none"> • Educational presentation on the effect of mind-body-spirit interactions on health • Educational presentation that includes integration of osteopathic manipulative treatment into treatment options • Presentation of a case report that includes the documentation of osteopathic structural examination findings at local, regional, or national conferences • Submission of manuscripts to peer-reviewed journals or book chapters that discuss the integration of Osteopathic Principles and Practice into patient care activities • Participation in clinical or basic science research focusing on structure-function

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	<p>relationships</p> <ul style="list-style-type: none"> • Participation in educational research focusing the training of the integration of mind-body-spirit interactions, structure-function relationships, self-regulatory and self-healing physiological mechanisms, or osteopathic manipulative medicine into patient care • Educational presentation on Osteopathic Principles and Practice to interprofessional groups
<p>How does the Osteopathic Principles Committee view collaboration between residents and faculty members with regard to authorship of osteopathic-focused scholarly work?</p> <p><i>[Recognition Requirement: III.B.9.]</i></p>	<p>The Osteopathic Principles Committee applies the International Committee of Medical Journal Editors (ICMJE) criteria to authorship of scholarly work. The ICMJE recommends that authorship be based on the following criteria:</p> <ul style="list-style-type: none"> • Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND • Drafting the work or revising it critically for important intellectual content; AND • Final approval of the version to be published; AND • Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.
<p>How does the Osteopathic Principles Committee define an interprofessional collaborative team?</p> <p><i>[Recognition Requirement: III.B.12.]</i></p>	<p>The interprofessional collaborative team includes all physicians, nurses, pharmacists, physical therapists, social workers, and any other health/social care providers participating in the care of patients. These teams meet regularly to coordinate patient care plans.</p>
<p>Must all physicians holding the titles of program director, co-program director, and osteopathic-focused track director required to meet the requirements outlined in section III.C.1.?</p> <p><i>[Recognition Requirements: III.C.1.-III.C.1.d).(9)]</i></p>	<p>The intent is that the program designate a leader of osteopathic-focused education. That leader may be the program director, a co-program director, or another member of the program's faculty, referred to as an osteopathic-focused track director. It is the designated leader of osteopathic-focused education in the program who must meet the requirements outlined in Section III.C.1., and who is referred to as a "program director, co-program director, or osteopathic-focused track director" in the Requirements. If the program director is not this designated leader and an osteopathic-focused track director has been identified, the program director will not be expected to also meet these requirements.</p>
<p>Is every program with Osteopathic Recognition required to have an osteopathic-focused track director?</p>	<p>No. The Osteopathic Principles Committee requires that every program with Osteopathic Recognition designate a physician with the authority and accountability for resident education and training in the conceptual understanding and practical</p>

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<p><i>[Recognition Requirements: III.C.1.a)-III.C.1.a).(1)]</i></p>	<p>application of the distinct behavioral, philosophical, and procedural aspects of clinical practice related to the four tenets of osteopathic medicine. This physician must have documented training in hands-on courses in osteopathic manipulative medicine or have certification requiring hands-on training, such as a doctorate in osteopathic medicine with board certification through the American Osteopathic Association (AOA). This physician may be the program director (or co-program director) if this individual is board-certified in the program specialty. This physician may also be the osteopathic-focused track director if he/she is a member of the program's faculty and is either board-certified in the specialty of the program, or that of another specialty.</p>
<p>Are there other qualifications the Committee is willing to consider if the leader of osteopathic-focused education for a program (i.e. program director, co-program director, or osteopathic-focused track director) or another osteopathic-focused faculty member does not possess AOA board certification?</p> <p><i>[Recognition Requirements: III.C.1.a).(2) and III.C.2.c).(1)]</i></p>	<p>Yes, the Osteopathic Principles Committee will consider other qualifications in lieu of AOA board certification. Examples include the following:</p> <ul style="list-style-type: none"> • A physician holding a Doctor of Osteopathic Medicine degree with active board certification through an ABMS member board • A physician holding a medical degree other than a Doctor of Osteopathic Medicine degree who has active board certification through an ABMS member board and has completed an ACGME-accredited program with Osteopathic Recognition in a designated osteopathic position <p>Physicians with the above qualifications must be able to teach and assess Osteopathic Principles and Practice. They must also demonstrate, through scholarly activity, CME courses, faculty appointments, etc., that they are currently a provider of osteopathic medicine or have been in the recent past.</p>
<p>Can programs share an osteopathic-focused track director?</p> <p><i>[Program Requirement: III.C.1.b)]</i></p>	<p>Yes, programs may share osteopathic-focused faculty members, as well as osteopathic-focused track directors. Programs that share osteopathic-focused track directors should have a plan in place that demonstrates how the osteopathic-focused track director is able to oversee, assess, and ensure the quality of osteopathic-focused didactic and clinical education for each program and each program's participating sites.</p>

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Resident Eligibility	
<p>What is considered sufficient background and/or instruction in osteopathic philosophy and techniques in manipulative medicine as required for MD applicants prior to matriculation into a program with Osteopathic Recognition?</p> <p><i>[Recognition Requirements: IV.B.-IV.B.4.]</i></p>	<p>The Committee expects that MD applicants, or any other applicants who are physicians but not DOs, will demonstrate some level of preparation for entry into an osteopathic-focused position in a program with Osteopathic Recognition. Such preparation may be demonstrated by:</p> <ul style="list-style-type: none"> • Structured basic Osteopathic Principles and Practice training prior to beginning residency • Prior completion of elective Osteopathic Principles and Practice rotations • Prior completion of Osteopathic Principles and Practice courses at an osteopathic medical school • Other experiences and training to enable the matriculated resident to demonstrate entry-level competency for participation in the program <p>The Committee allows program directors to determine eligibility for non-DO applicants, which may exceed the established Osteopathic Recognition Requirements. The Committee also allows program directors the flexibility to “catch up” a resident’s education over the course of the program.</p>
<p>Must candidates applying for an osteopathic-focused position within a residency program with Osteopathic Recognition have completed all prerequisite post-graduate clinical education? Ex. A physical medicine and rehabilitation program that requires successful completion of 12 months of fundamental clinical skills.</p> <p><i>[Program Requirements: IV.A.-IV.B.4.]</i></p>	<p>No. Residency programs with Osteopathic Recognition may accept candidates into osteopathic-focused positions that have not completed all prerequisite post-graduate clinical education in an AOA-approved program or an ACGME-accredited program with Osteopathic Recognition in an osteopathic-focused position. Programs may choose, however, to establish more stringent eligibility criteria, such as the completion of all prerequisite post-graduate clinical education required for initial entry in an AOA-approved program or ACGME-accredited program with Osteopathic Recognition in an osteopathic-focused position, but this is not required.</p>
<p>Must candidates applying for an osteopathic-focused position within a fellowship program with Osteopathic Recognition have completed all prerequisite post-graduate clinical education?</p>	<p>No. Fellowship programs may apply the same eligibility requirements as core residency programs. Fellowships can establish eligibility criteria based on the resident eligibility requirements outlined in IV.A.-IV.B.4., and may include more stringent criteria, such as the completion of all prerequisite post-graduate clinical education required for initial entry in an AOA-approved program or ACGME-accredited program with Osteopathic Recognition in an osteopathic-focused position, but this is not required.</p>

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<i>[Program Requirement: IV.C.]</i>	
Must all candidates applying to a fellowship program with Osteopathic Recognition be in osteopathic-focused positions?	No. Not all fellows in a fellowship with Osteopathic Recognition need to be in osteopathic-focused positions. It will be up to the program to determine if all fellows in the program will receive osteopathic education or only a subset. Only the residents applying to enter an osteopathic-focused position within that program would therefore need to meet the Osteopathic Recognition eligibility requirements.
<i>[Program Requirement: IV.C.]</i>	
Evaluation	
Will a program lose its Osteopathic Recognition if it is unable to achieve the 80 percent take rate on the applicable AOA Board exam?	No. The Osteopathic Principles Committee will not enforce the 80 percent take rate requirement. The Committee will seek to formally remove this requirement during the next focused revision of the Osteopathic Recognition Requirements. The Board pass rate will still be enforced and will be based on those eligible graduates of the program that choose to take the applicable AOA Board exam.
<i>[Recognition Requirement: V.A.2.a)]</i>	
How will the Osteopathic Principles Committee determine whether a significant number of residents who have entered a program's osteopathic-focused track have completed it?	The Committee expects that those who enter a program with Osteopathic Recognition in an osteopathic-focused position will complete the program in an osteopathic-focused position. The Committee will monitor resident attrition from osteopathic-focused positions.
<i>[Recognition Requirement: V.A.2.c)]</i>	
Does the program need a separate summative evaluation specifically for Osteopathic Recognition, or can the program's overall summative evaluations incorporate an assessment of Osteopathic Principles and Practice for its osteopathic-focused residents?	The program may choose either to incorporate the performance of the osteopathic-focused resident related to Osteopathic Recognition into the program's existing summative evaluation, or to include an addendum to the program's overall summative evaluation, as long as the evaluation is completed by the identified leader of osteopathic-focused education in the program (i.e., the program director, co-program director, or osteopathic-focused track director, as applicable).
<i>[Recognition Requirements: V.B.3.- V.B.3.b)]</i>	
Do osteopathic-focused faculty members need to be evaluated individually by the osteopathic-focused residents?	Yes, osteopathic-focused residents must have the opportunity to individually evaluate osteopathic-focused faculty members at least annually. This does not preclude an overall evaluation of the osteopathic-focused faculty, but an overall evaluation should not take the place of individual evaluations completed at least annually.

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<i>[Recognition Requirement: V.C.2.]</i>	
Other	
<p>Are the references to “residents” meant to also include fellows?</p> <p><i>[Recognition Requirements: II.A-V.C.2.]</i></p>	<p>Yes. The term “resident” refers to any intern, resident, or fellow in an osteopathic-focused position within a program with Osteopathic Recognition. The use of the term “resident” in the Osteopathic Recognition Requirements is consistent with the ACGME’s definition of a resident as defined in the ACGME Glossary of Terms.</p>