NMM Program Director Workshop

Specialty Update: Osteopathic Neuromusculoskeletal Medicine
No financial conflicts of interest to report.
OBJECTIVES

• Identify where ONMM resources can be located.
• Review recent requirement revisions and FAQ updates.
ONMM Resources
Pursuing Excellence in Clinical Learning Environments

The ACGME recognizes that the best solutions often come from shared learning. With the support of partnering organizations in health care quality and education, the ACGME is launching a new initiative to
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# ACGME WEBPAGE

## Accreditation Council for Graduate Medical Education

### Program and Institutional Accreditation
- Hospital-Based Specialties
  - Anesthesiology
  - Diagnostic Radiology
  - Emergency Medicine
  - Medical Genetics and Genomics
  - Nuclear Medicine
  - Pathology
  - Preventive Medicine
  - Radiation Oncology
  - Transitional Year

### Medical Specialties
- Allergy and Immunology
- Dermatology
- Family Medicine
- Internal Medicine
- Neurology
- Pediatrics
- Physical Medicine and Rehabilitation
- Psychiatry

### Surgical Specialties
- Colon and Rectal Surgery
- Neurological Surgery
- Obstetrics and Gynecology
- Ophthalmology
- Orthopaedic Surgery
- Otolaryngology
- Plastic Surgery
- Surgery
- Thoracic Surgery
- Urology

### Self-Study
- Osteopathic Principles Committee
- Osteopathic Neuromusculoskeletal Medicine

### Institutions
- Institutional Review
- Review and Comment
- Archive Index

### Common Program Requirements
- Milestones
- Webinars

### Next Accreditation System
Osteopathic Neuromusculoskeletal Medicine

Program Requirements Currently in Effect
- Osteopathic Neuromusculoskeletal Medicine 2/8/2016

Milestones
- Osteopathic Neuromusculoskeletal Medicine

New Applications
New program applications must use the online application process within ADS. For further information, review the "Application Instructions" located under Common Resources.
- Osteopathic Neuromusculoskeletal Medicine

Common Resources
- ACGME Glossary of Terms
- Appointment Process for ACGME Review Committee Members
- Application Instructions
- CLER
Osteopathic Neuromusculoskeletal Medicine

Program Requirements Currently in Effect
- Osteopathic Neuromusculoskeletal Medicine 2/8/2016

Milestones
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Common Resources
- ACGME Glossary of Terms
- Appointment Process for ACGME Review Committee Members
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Scroll down to locate the FAQs
Osteopathic Neuromusculoskeletal Medicine

Program and Institutional Accreditation

Osteopathic Neuromusculoskeletal Medicine

Guide to Construction of an Osteopathic Neuromusculoskeletal Medicine Program Block Diagram

Program Requirements Currently in Effect

Osteopathic Neuromusculoskeletal Medicine 2/8/2016

Common Resources

ACGME Glossary of Terms
Appointment Process for ACGME Review Committee Members
Application Instructions
CLER

#ACGME2016
Requirement
Revisions
REQUIREMENT REVISIONS

• Revisions approved by the ACGME Board of Directors on February 8, 2016.
• Revisions effective February 8, 2016.
• Posted on the ONMM webpage February 23, 2016.
OVERVIEW OF REQUIREMENT REVISIONS

• Addition of a 2\textsuperscript{nd} pathway for completion of an ONMM program.
• Changes to the required rotations.
• Changes in the required number of faculty members.
• Addition of case log requirements.
### PATHWAYS TO COMPLETION

<table>
<thead>
<tr>
<th>Pathway</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Length of training</td>
<td>24 months</td>
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</tr>
<tr>
<td>Entry point</td>
<td>ONMM1 level</td>
<td>ONMM2 level</td>
</tr>
<tr>
<td>Training prior to entry</td>
<td>Transitional year, 1&lt;sup&gt;st&lt;/sup&gt; yr of Family Medicine, 1&lt;sup&gt;st&lt;/sup&gt; yr of another residency program&lt;sup&gt;^ *^&lt;/sup&gt;</td>
<td>Residency program&lt;sup&gt;** ^^&lt;/sup&gt;</td>
</tr>
<tr>
<td>AOA program comparison</td>
<td>NMM/OMM (2 yr)</td>
<td>NMM/OMM Plus One (1 yr)</td>
</tr>
</tbody>
</table>

<sup>^ Must be able to complete outlined rotations during the first year.</sup>

<sup>^^ Must complete a minimum of 12 months of NMM rotations.</sup>

<sup>** Must have been in an osteopathic-focused position in a program with Osteopathic Recognition or have been in an AOA-approved program.</sup>
PATHWAY 1
ONMM LEVEL 1 ENTRY
## PATHWAYS TO COMPLETION

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<td>Training prior to entry</td>
<td>Transitional year, 1(^{st}) yr of Family Medicine, 1(^{st}) yr of another residency program(^^)**</td>
<td>Residency program(^**^)(^^)</td>
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^Must be able to complete outlined rotations during the first year.
^^Must complete a minimum of 12 months of NMM rotations.
**Must have been in an osteopathic-focused position in a program with Osteopathic Recognition or have been in an AOA-approved program.
Eligibility Exception:

If a resident has completed a ACGME-accredited program, but **not in an osteopathic-focused position** of an ACGME-accredited program with Osteopathic Recognition, the program director **may allow** the resident to enter the program if he/she meets the following criteria: (Core)
Graduates of a medical school not accredited by COCA, prior to matriculation, must have sufficient background and/or instruction in osteopathic philosophy and techniques in manipulative medicine to prepare them to engage in the curriculum of the program including:

- osteopathic philosophy, history, terminology, and code of ethics;
- anatomy and physiology related to osteopathic medicine;
- indications, contraindications, and safety issues associated with the use of osteopathic manipulative treatment; and,
- palpatory diagnosis, osteopathic structural examination, and osteopathic manipulative treatment.
PATHWAY 1 – ONMM1 LEVEL OF ENTRY

<table>
<thead>
<tr>
<th>No. of Rotations (1 month each)</th>
<th>Rotations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimum 8</td>
<td>ONMM - Outpatient</td>
</tr>
<tr>
<td>Minimum 4</td>
<td>ONMM - Inpatient</td>
</tr>
<tr>
<td>Pick 2</td>
<td>Neurological surgery, <em>occupational medicine</em>, orthopaedics, <em>podiatric medicine</em>, sports medicine</td>
</tr>
<tr>
<td>Pick 2</td>
<td>Neurology, physical medicine and rehabilitation, rheumatology</td>
</tr>
<tr>
<td>Pick 1</td>
<td><em>Diagnostic radiology</em>, musculoskeletal radiology, pain management</td>
</tr>
<tr>
<td>Remaining</td>
<td>Electives</td>
</tr>
</tbody>
</table>
Residents:
**Must evaluate and provide osteopathic manipulative treatment.
**Must be responsible for osteopathic evaluation and treatment.
**Must be supervised by a specialist in ONMM.

### PATHWAY 1 – ONMM1 LEVEL OF ENTRY

<table>
<thead>
<tr>
<th>No. of Patient Encounters</th>
<th>Patient Type**</th>
</tr>
</thead>
<tbody>
<tr>
<td>50</td>
<td>Surgical Diagnosis</td>
</tr>
<tr>
<td>50</td>
<td>Pediatric Diagnosis</td>
</tr>
<tr>
<td>50</td>
<td>Obstetrical and gynecological Diagnosis</td>
</tr>
<tr>
<td>50</td>
<td>Hospital Consultation</td>
</tr>
</tbody>
</table>
Continuity of Care Clinic:

• 3 half-days per week
• Minimum of 250 designated (panel) patients
• 1,000 patient care encounters
PATHWAY 2
ONMM LEVEL 2 ENTRY
# PATHWAYS TO COMPLETION

<table>
<thead>
<tr>
<th>Pathway</th>
<th>1</th>
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<tbody>
<tr>
<td>Length of training</td>
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</table>

\^Must be able to complete outlined rotations during the first year.

\^{**}Must complete a minimum of 12 months of NMM rotations.

\^{**}Must have been in an osteopathic-focused position in a program with Osteopathic Recognition or have been in an AOA-approved program.
Eligibility:

ACGME-accredited residency program with Osteopathic Recognition (in an osteopathic-focused position). **

And

Completion during that residency of a minimum of 12 months of rotations required for the ONMM program.

** Completion of a AOA-approved residency program is also acceptable.
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the Review Committee recommend that residents have exposure to an</td>
<td>Yes, the Review Committee does recommend, though does not require, that a resident have exposure to an osteopathic neuromusculoskeletal medicine clinic, supervised by a neuromusculoskeletal specialist, in his/her primary residency. The Review Committee would recommend the following patient encounters to help prepare a resident for entry into the ONMM2 level of the program:</td>
</tr>
<tr>
<td>osteopathic neuromusculoskeletal medicine clinic during their primary</td>
<td>- a minimum of 300 clinic patient encounters</td>
</tr>
<tr>
<td>residency to prepare them for entry into the ONMM2 level?</td>
<td>- a minimum of 75 designated continuity of care clinic panel patient encounters</td>
</tr>
<tr>
<td>(Program Requirement: III.A.1.a).(2).(a).(i)]</td>
<td>- a minimum of 15 documented patient contacts with a variety of surgical diagnoses, where an evaluation was completed and osteopathic manipulative treatment was provided</td>
</tr>
<tr>
<td></td>
<td>- a minimum of 15 documented patient contacts with a variety of pediatric diagnoses, where an evaluation was completed and osteopathic manipulative treatment was provided</td>
</tr>
<tr>
<td></td>
<td>- a minimum of 15 documented patient contacts with a variety of obstetrical and gynecology diagnoses, where an evaluation was completed and osteopathic manipulative treatment was provided</td>
</tr>
</tbody>
</table>
Responsibilities of Program Director & Resident Selection Committee:

• The program director and resident selection committee must complete an assessment of each applicant’s suitability to enter the program based on prior training and review of the summative evaluation of training in the primary residency. (Core)

• Within six weeks of matriculation, the program director must complete a Milestones evaluation of each resident for the purposes of establishing baseline performance by the Clinical Competency Committee. (Core)
Eligibility Exception:

- Program Directors may grant an eligibility exception based on the assessment completed by the program director and the resident selection committee.
- Training must be extended beyond 12 months, not to exceed 24 months, for completion of any rotations that are required for entry into the ONMM2 level but that were not completed prior to entry.
- If the resident does not meet the expected level of Milestones competency following entry into the program, the resident must undergo a period of remediation, which must not count toward time in residency training.
### PATHWAY 2 – ONMM2 LEVEL OF ENTRY

<table>
<thead>
<tr>
<th>No. of Rotations (1 month each)</th>
<th>Rotations</th>
</tr>
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<tbody>
<tr>
<td>Minimum 4</td>
<td>ONMM - Outpatient</td>
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<tr>
<td>Minimum 2</td>
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<td>Minimum of 6</td>
<td>Neurological surgery, <strong>occupational medicine</strong>, orthopaedics, <strong>podiatric medicine</strong>, sports medicine</td>
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<td>Electives</td>
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Rotations should be chosen based on rotations completed in the primary residency.
Residents:
**Must evaluate and provide osteopathic manipulative treatment.**
**Must be responsible for osteopathic evaluation and treatment.**
**Must be supervised by a specialist in ONMM.**

### PATHWAY 2 – ONMM2 LEVEL OF ENTRY

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<thead>
<tr>
<th>No. of Patient Encounters</th>
<th>Patient Type**</th>
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<tr>
<td>35</td>
<td>Surgical Diagnosis</td>
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### PATIENT ENCOUNTERS

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<tbody>
<tr>
<td>ONMM1 50</td>
<td>Surgical Diagnosis</td>
</tr>
<tr>
<td>ONMM2 35</td>
<td></td>
</tr>
<tr>
<td>ONMM1 50</td>
<td>Pediatric Diagnosis</td>
</tr>
<tr>
<td>ONMM2 35</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>ONMM1 50</td>
<td>Hospital Consultation</td>
</tr>
<tr>
<td>ONMM2 35</td>
<td></td>
</tr>
</tbody>
</table>
Continuity of Care Clinic:

- 3 half-days per week
- Minimum of 175 designated (panel) patients
- 700 patient care encounters
## CONTINUITY CLINIC REQUIREMENTS

<table>
<thead>
<tr>
<th>Pathway 1 – ONMM1 Level</th>
<th>Pathway 2 – ONMM2 Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 half-days per week in clinic</td>
<td>3 half-days per week in clinic</td>
</tr>
<tr>
<td>Min. 250 clinic (panel) patients</td>
<td>Min. 175 clinic (panel) patients</td>
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<td>1,000 patient care encounters</td>
<td>700 patient care encounters</td>
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FACULTY REQUIREMENT CHANGES
II.B.6.
There must be at least one faculty member for every six residents a minimum of two AOBNMM-certified, AOBSPOMM-certified, or board-eligible faculty members, including the program director. (Core)

IV.A.6.g).(4).(c)
The resident-to-faculty ratio at the continuity clinic must should not exceed 4 6-to-1. (Core Detail)
The program director must:

I.A.1.a) ensure that all residents achieve the required competencies and outcomes by completion of the program; and, (Core)

I.A.1.b) ensure that residents regularly log cases in the ACGME Case Log System. (Core)

I.A.1.b).(1) The logs must be submitted annually to the Review Committee in accordance with the specified format and due date. (Core)

I.A.1.b).(2) The record must be reviewed by the program director at least semi-annually. (Core)
• ACGME Case Log system is under development.
• Scheduled availability for logging on July 1, 2016.
• RC will communicate logging expectations and availability in the coming months.
| How do residents access the ACGME Case Log System? Is there a fee to use the system? How do residents know what to log? [Program Requirement: II.A.4.s)] | Program directors and residents will receive login information for the ACGME Case Log System, which is accessible through a link on the ACGME website. The Case Log System is a web-based system. There is no additional fee to programs or residents to use the system. The osteopathic neuromusculoskeletal medicine portion of the Case Log System is still under development, and more information, including what residents are expected to log, will be provided once it is finalized. |
QUESTIONS?