ACGME Common Program Application
List of Attachment Documents

1. Attachment: Specialty-Specific Application Questions

Complete the Specialty-Specific Application and upload it here.

2. Attachment: Block Diagram

Common Instructions: Provide a block diagram for each year of the educational program. The number of block rotation months should align with the list of participating sites in the ACGME’s Accreditation Data System (ADS). Specialty-specific instructions may also be available.

Osteopathic Recognition Instructions (if applicable): Update the block diagram to include where education in osteopathic principles and practice (OPP) is integrated into the curriculum. The block diagram should specifically identify where and when the following experiences are integrated, if applicable: osteopathic education/experience in the clinical setting; osteopathic clinic (either applicable: osteopathic education/experience in the clinical setting; osteopathic clinic (either applicable: osteopathic manipulative treatment (OMT) clinic or integrated specialty clinic); and osteopathic didactics/labs. It may be best to indicate osteopathic experiences on the block diagram using symbols and an associated legend. This will become the new block diagram for the program, so ensure that it continues to reflect the experience of all residents/fellows in the program, not just designated osteopathic residents/fellows.

3. Attachment: Program Letters of Agreement

All program letters of agreement (PLAs) for participating sites with required rotations.

4. Attachment: Policy for Clinical and Educational Work Hours

Program policies and procedures for resident/fellow clinical and educational work hours, including policies on moonlighting.

5. Attachment: Policy for Supervision of Residents/Fellows

Policy for supervision of residents/fellows (addresses responsibilities for patient care and progressive responsibility for patient management and faculty member responsibilities for supervision).

6. Attachment: Policy for Resident/Fellow and Faculty Member Well-being

Policies that encourage optimal resident/fellow and faculty member well-being.

[VI.C.1.d),(1)]

7. Attachment: Goals and Objectives

A sample of the competency-based goals and objectives for one educational experience at each educational level.
8. **Attachment: Forms Used for Resident/Fellow Evaluation of Program**
   A sample of the form that a resident/fellows will use to evaluate the program.

9. **Attachment: Forms Used for Faculty Member Evaluation of Program**
   A sample of the form that a faculty member will use to evaluate the program.

10. **Attachment: Forms Used for Evaluation of Faculty Member**
    A sample of the form that residents/fellows will use to evaluate an individual faculty member.

11. **Attachment: Evaluation of Resident/Fellow by Faculty Member**
    A sample of the form used for evaluation of a resident/fellow by a faculty member.

12. **Attachment: Multi-source Evaluation of Resident/Fellow**
    A sample of the form used for evaluation of a resident/fellow by evaluators other than faculty members (e.g., peers, patients, self, and other professional staff members).

13. **Attachment: Semiannual and Final Evaluations**
    A blank copy of the form that will be used to document the semiannual evaluation of a resident/fellow with feedback, and a blank copy of the final evaluation of a resident/fellow upon completion of the program verifying that the resident/fellow has demonstrated the knowledge, skills, and behaviors to enter autonomous practice.