

NOTE: This information is accurate as of **April 22, 2020**. The ACGME continues to evaluate the COVID-19 pandemic situation on an ongoing basis, and updates will be issued as the situation changes and more information emerges. Please review the latest updates on the ACGME website at www.acgme.org and www.acgme.org/COVID-19.

From the Review Committee for Osteopathic Neuromusculoskeletal Medicine

The members of the Review Committee for Osteopathic Neuromusculoskeletal Medicine understand the challenges and risks that you have encountered, as well as those of your colleagues, your residents, and your patients. We are very empathetic to the specific impact of COVID-19 upon your programs and appreciate your efforts in mitigating the COVID-19 pandemic while continuing your commitment to graduate medical education. We want to thank you for supporting your residents and faculty members in a safe and effective learning environment while caring for your patients.

The ACGME, along with the Review Committee, acknowledges that the impact of this pandemic on graduate medical education is evolving. The ACGME will continue to monitor the needs of the GME community and provide appropriate guidance, clarification, and resources. The ACGME's current COVID-19 resources, including Pandemic Emergency Status information for Sponsoring Institutions, guidance statements, frequently asked questions, and more, are available on the ACGME website at <https://acgme.org/covid-19>.

The Review Committee understands that programs have concerns regarding their ability to satisfy specialty-specific requirements (e.g., NMM patient encounter minimums, minimum number of rotations), however the Committee does not plan to place a broad moratorium on the requirements. The ACGME and the Review Committee have entrusted program directors with the responsibility to implement reasonable solutions for unprecedented circumstances, such as those we are experiencing with COVID-19.

We encourage programs to report on the impact and the changes necessitated by the pandemic in the Major Changes and Other Updates section in the Accreditation Data System (ADS) during the next ADS Annual Update. Programs are also encouraged to report on the following:

- Changes to participating sites utilized for rotations
- Changes to the availability of required and elective experiences (e.g., rotations)
- Impact on the continuity of care clinic hours and/or sites
- How achievement of competence was determined for residents who graduated but did not achieve the minimums established in the Program Requirements

Case Logs and Patient Encounter Minimums

The Review Committee recognizes that program directors are concerned that residents in their final year of the program may not meet established patient encounter minimums prior to their anticipated graduation date. It is important to remember that the ACGME Case Log System and patient encounter minimums were established primarily for program accreditation and are used

by the Review Committee to determine whether a program offers a volume and variety of patients and diagnoses sufficient for education of the complement of residents for which the program is accredited. This was not designed to be a surrogate for determination of procedural competence and preparedness to enter autonomous practice, of an individual program graduate.

Impact on Resident Progression and Graduation

ACGME-accredited programs are obligated to graduate only those residents who have demonstrated the ability to perform all medical and diagnostic procedures considered essential for the specialty. It is the responsibility of the program director, with consideration of recommendations from the program's Clinical Competence Committee (CCC), to assess the procedural competence of an individual resident. This is one part of the determination of whether that resident is prepared to enter autonomous practice. A given individual who has not met all patient encounter minimums may be deemed by the program director/CCC to be competent and allowed to complete the program, as scheduled. Another individual who has exceeded all patient encounter minimums may not be deemed by the program director/CCC to be competent and will be required to extend the educational program until competence can be demonstrated. These considerations always apply.

It may be necessary for some programs to extend the period of residency for some residents. It is likely, the longer the pandemic impacts the specialty, the more residents will require an extension of the educational period. Extension of the educational program as a result of the current circumstances must not be viewed as reflecting poorly on the affected residents. Rather, it reflects the program's obligation to the public, the ACGME, and the residents themselves, in response to circumstances beyond the program's control.

Impact on Accreditation of Programs

The ACGME and its Review Committees use the standard of substantial compliance, rather than absolute compliance, in making accreditation decisions. Accreditation decisions include the accreditation status of the program as well as the issuance of citations and areas for improvement. In making accreditation decisions, the Review Committee thoughtfully considers all available information from and about a program (e.g., Case Logs, Resident and Faculty Survey results, and the program Annual Update). The expectation to log patient encounters and meet established minimums has not been waived by the Review Committee. **The Case Logs of residents who were on duty during the pandemic will be judiciously considered in light of the specific impact of the pandemic on that program.** The Review Committee will use the information provided in the Major Changes and Other Updates section of ADS during the next Annual Update to understand how the program was impacted, if applicable. **Programs must bear in mind that they have an obligation, not just to the ACGME, but to the public and to their residents, to graduate only those residents they believe are able to autonomously perform all medical and diagnostic procedures considered essential for the specialty.** A program that graduates a resident who has multiple substantial deficiencies in the graduate Case Logs may be viewed by the Review Committee as not having met that obligation.