

Guide for Construction of a Block Diagram for Internal Medicine-Pediatrics Residency Programs Review Committees for Internal Medicine and Pediatrics

A block diagram outlines the rotation schedule for residents during each post-graduate year, detailing the type, site, duration, and variety of rotations. It should show all rotations within that year without indicating their specific order and must not include resident names. Only one block diagram should be created per year of the educational program.

To construct the block diagram:

- Include the participating site where each rotation takes place and the rotation name (with clarification if the name is not descriptive).
- Group rotations by site, listing Site 1 first, then Site 2, etc., following the site numbers in the Accreditation Data System.
- Provide the number of weeks in each block.
- Include the percentage of inpatient, outpatient, and research time for each rotation.
- Explicitly allocate vacation time.
- Use the “Clarifying Notes” section to provide details as needed.

When building the block diagram:

- Utilize a key of abbreviations when identifying the rotation name and provide a legend for all other abbreviations used within the block diagram. For pediatrics rotations, use the key provided; for internal medicine rotations, the key may be customized, however, rotations should be clearly identified.
- Indicate in bold type any experiences that differ from the educational program in the internal medicine or pediatrics residencies and experiences that are unique to the internal medicine-pediatrics program.
- For elective time, list available elective choices beneath the block diagram; electives do not require a participating site.
- Outpatient experiences can include continuity clinics, subspecialty clinics, non-medicine clinics, home visits, urgent care, ambulatory blocks, telemedicine clinics, and similar settings (except emergency medicine).
- If the block diagram does not clearly identify at least eight months of outpatient experience in internal medicine, include an explanation in the “Clarifying Notes” section below the block diagram.
- The longitudinal continuity experience may count toward the required eight months of foundational outpatient experience (1 month = 4 weeks, 20 days, or 40 half days) in internal medicine. Continuity clinic time counts toward this minimum but should not be the only outpatient component. When rotations integrate inpatient and outpatient experiences, estimate and indicate what portion is outpatient.
- Subspecialty, continuity, or non-continuity clinic activities in internal medicine conducted via telemedicine are also eligible to count toward outpatient requirements.
- In X+Y scheduling models, all outpatient-related Y weeks (“ambulatory block rotations”), encompassing both patient care and associated didactics, fully satisfy the minimum internal medicine outpatient requirement.
- If structured research experiences are integrated with clinical rotations, provide the corresponding percentage of time devoted to each on the block diagram. Any blocks exclusively dedicated to research must be labeled appropriately and must not be affiliated with a participating site.

Sample Block Diagram by Weeks																	
Block (Weeks)	1-4	5-6	7-10	11-12	13-16	17-18	19-22	23-24	25-28	29-30	31-34	35-36	37-40	41-42	43-46	47-48	49-52
Site	Site 1	Site 1	Site 1	Site 1	Site 1	Site 2	Site 2	Site 2	Site 2	Site 3	Site 3	Site 3	Site 3	Site 4	Site 4	Site 4	N/A
Rotation Name	Inpt GP	MH	RS Outpt	PEM	Amb GP	DBP	NICU	IC Sub	PICU	IC Sub	Amb GP*	Adol	Inpt GP	Adol	NN	AI	VAC
Service (IM, Peds, Combined)																	
% Outpatient	0	90	100	100	100	100	0	variable	0	variable	100	80	0	80	90	100	N/A
% Inpatient	100	10	0	0	0	0	100	variable	100	variable	0	20	100	20	10	0	N/A
# Half-day sessions in longitudinal outpatient clinic	0	6	4	0	4	6	0	6	0	6	4	4	0	4	0	0	N/A

Key of Abbreviations for Pediatrics Rotations (add additional abbreviations as needed). Indicate with an asterisk (*) which rotations incorporate elements of community pediatrics and child advocacy.			
ADOL	Adolescent Medicine (4 weeks)	NICU	Neonatal Intensive Care Unit (4-8 weeks)
AI	Acute Illness (0-4 weeks)	NN	Newborn Nursery (4 weeks)
Amb GP	General Ambulatory Pediatrics Clinic (4 weeks)	PEM	Pediatric Emergency Medicine (ED) (8 weeks)
DBP	Developmental-Behavioral Pediatrics (4 weeks)	PICU	Pediatric Intensive Care Unit (4-8 weeks)
IC Elec	Electives (clinical, scholarly and/or other experiences chosen by the residents over and above their required experiences)	RS Inpt	Required Inpatient Subspecialty Experience (if part of 24 weeks of inpatient medicine) (0-8 weeks)
IC Sub	Pediatrics Individualized Curriculum/Subspecialty Experience (20 weeks)	RS Outpt	Required Pediatric Subspecialty Outpatient Experience (4 weeks)
Inpt GP/PHM	Inpatient General Pediatrics/Pediatric Hospital Medicine Service (16 weeks)	VAC	Vacation
MH	Mental Health (4 weeks)		

Key of Abbreviations for Internal Medicine Rotations. Use table below to clearly identify internal medicine rotations. For internal medicine Individualized Educational Experiences, label the block(s) "IM IEE."			

Clarifying Notes: