



AMERICAN OSTEOPATHIC ASSOCIATION

Summary of Common Institutional and Program Requirements

The following Common Institutional and Program requirements represents only a brief excerpt of the base requirements applicable to all specialties and programs as noted in the *AOA Basic Documents for Postdoctoral Training*. These are essential requirements and it is strongly recommended that any institution considering an AOA training program reviews the entire requirements in the AOA Basic Documents for Postdoctoral Training. The entire document presents additional requirements and significantly more necessary detail on all of them.

IV. INSTITUTIONAL REQUIREMENTS

- IV A 4.1 An AOA approved OGME program must be sponsored by an AOA (HFAP) accredited hospital or a COCA accredited COM which shall monitor the program and be responsible for compliance with requirements.
- IV A 4.2 An AOA program not conducted in an AOA accredited hospital, must be sponsored by an AOA accredited hospital/COM through a sponsorship agreement, separate from an OPTI affiliation agreement.
- IV A 4.3 All OGME programs must partner with an AOA accredited OPTI.
- IV A 4.8 All base institutions must have at least four organized clinical departments and
& 4.9 full time radiology and pathology services.
- IV A 4.10 A representative of a sponsor institution must be present at a base institution at least quarterly to review programs and meet with trainees.
- IV B 4.2 All AOA approved programs must:
- Complete and submit annual TIVRA information.
 - Annually update AOA Opportunities data.
 - Pay annual AOA fees.
 - Participate in OERAS.
 - Participate in AOA Match.
- IV C Selected portions of OGME programs may be conducted at an affiliate institution with a written affiliation agreement available and updated every 5 years.
- IV E All base institutions shall conduct Internal Reviews of program compliance with requirements, in accordance with Section IV E, of the *AOA Basic Documents for Postdoctoral Training*.
- IV F The program shall enroll only graduates of COCA accredited COMs.
- IV G-H The training institution shall provide:
- An on-call room with telephone, toilet, shower facilities, computer and nourishment.
 - Appropriate security.

- c) Accessible medical record system.
 - d) Conference rooms.
 - e) Teaching and learning resources.
 - f) Library resources and appropriate library staff.
- IV I An Osteopathic Core Competency Program shall be integrated into all OGME programs and shall include an Institutional Core Competency Plan, Program Directors Annual Summary and Final resident Assessment as noted in *AOA Basic Documents* IV-I.
- IV J The base institution shall publish a house staff manual which includes operational policies and guidelines that govern rules and conduct for all trainees. The manual shall be available for all site reviews and be regularly updated.

V. PROGRAM REQUIREMENTS

- V A 5.1 A program description including the following elements must be present:
- a) Mission statement
 - b) Description of facilities
 - c) Program goals
 - d) Rotation goals and objectives
 - e) Training curriculum
 - f) Teaching roster with certification status
 - g) Core Competency Plan
 - h) Trainee evaluation forms and description
 - i) Work hours and leave policy
 - j) Remediation policy
- V A 5.7 AOA programs require incorporation of osteopathic principles and practice only in the evaluation and care of patients of osteopathic attending physicians.
- V F 5.1 Option 2 or 3 specialty residencies must have present in the same institution an OGME I Preliminary or Traditional internship.
- V F 5.2 Residents must have passed COMLEX USA-3 prior to entry into the OGME 3 year.
- V F 5.3 Any combined specialty residencies must have in the same institution an AOA residency in the same base specialties.
- V F 5.6 The required minimum number of AOA approved and funded residency positions is three (3). Fewer than three may be approved if the program is integrated with an ACGME program with at least 3 years accreditation and as long as the combined program has at least 6 total DO and MD trainees. The new program may have up to 3 years to fill to the minimum required number.
- V F 5.6 Any post residency fellowship may maintain fewer than three trainees.
- V F 5.6 A residency in a combined specialty (e.g. IM/Peds) can meet the minimum requirement between both the base and the combined specialty, in each specialty, counting each trainee in a combined program as 0.5 position.

VI. POSTDOCTORAL LEADERSHIP REQUIREMENTS

- VI A & B Each institution with a base AOA training program must have a DO Director of Medical Education (DME) and an Institutional Educational Officer (IEO) who may be the same or separate individuals
- VI C 6.1 There shall be an osteopathic program director for each OGME program with AOA certification and a written job description.
- VI E 6.1 Each base institution must have a fully functioning Medical Education Committee.

VII. TRAINEE REQUIREMENTS

- VII B 7.1 A trainee shall not self fund his/her own training position.
- VII G Trainee duty hours in all programs and institutional duty hour policies must conform completely with policies presented in *AOA Basic Documents for Postdoctoral Training*, VII G.
- VII H Any moonlighting activity will only be conducted with permission of the program administration.
- VII J 7.1 All trainees must have an appropriate license consistent with state and local requirements.
- VII L 7.1 Upon completion of an OGME program the institution and OPTI shall jointly award the certificate.

VIII. EVALUATION

- VIII C 8.2 A training institution shall perform a self study for the program in advance of each on-site review in preparation for and as the process of completion of the Inspection Crosswalk.
- VIII F 8.5 All corrective action plans in response to PTRC requests, must be first reviewed and signed off by the respective OPTI.
- VIII G 8.1 All components of a trainees program must be evaluated.
- VIII G 8.2 At completion of each rotation, the faculty shall evaluate the trainee and document with faculty and trainee signature.
- VIII G 8.3 The DME and MEC shall evaluate all trainees quarterly.
- VIII H 8.2 At completion of each rotation, the trainee shall evaluate the educational experience and the faculty.
- VIII H 8.3 The program director must review each rotation evaluation monthly.
- VIII H 8.4 The program director shall review the trainee performance quarterly and document in writing and acknowledge by director and trainee signatures.