**Continued Accreditation Application: Family Medicine**

401 North Michigan Avenue · Chicago, Illinois 60611 · United States · +1.312.755.7042 www.acgme-i.org

**Submission for continued accreditation:** This Advanced Specialty application is for programs applying for **Continued Accreditation Only** and is used in conjunction with the Accreditation Data System (ADS).

All sections of the form applicable to the program must be completed to be accepted for review. The information provided should describe the existing program. For items that do not apply, indicate “N/A” in the space provided. Where patient numbers are requested, provide exact numbers as requested and indicate exact dates for the data entered. If any requested information is unavailable, an explanation must be given and it should also be so indicated as unavailable in the appropriate place on the form. Once the forms are complete, number the pages sequentially in the bottom center.

The program director is responsible for the accuracy of the information supplied in this form, and must sign it. It must also be signed by the designated institutional official of the sponsoring institution, who will submit the application electronically in ADS.

Review the International Foundational Program Requirements for Graduate Medical Education and Advanced Specialty Program Requirements for Graduate Medical Education in Family Medicine. The International Foundational, Advanced Specialty, and Institutional Requirements may be downloaded from the ACGME International website: [www.acgme-i.org](http://www.acgme-i.org).

Email questions regarding the form’s content to acgme-i@acgme-i.org.

Email questions regarding ADS to ADS@acgme.org (type the program number in the subject line).

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| Program Name: Click here to enter text. |

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**Introduction**

**Duration and Scope of Education**

|  |
| --- |
| 1. What is the length, in months, of the educational program?

Choose a length |

**Institutions**

**Sponsoring Institution**

* + - 1. Has the Sponsoring Institution documented that other specialties are able and committed to take part in the education of family medicine residents? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 200 words)

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| Click here to enter text. |

**Participating Sites**

1. How does the program ensure that assignments away from the primary clinical site do not require excessive travel or otherwise fragment the educational experiences for residents. (Limit 200 words)

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| Click here to enter text. |

**Program Personnel and Resources**

**Program Director**

1. Does the program director:
	* + - 1. have at least five years of clinical experience in family medicine? [ ] YES [ ] NO
				2. have at least two years as a core faculty member in an ACGME-I-accredited family medicine program (if the program has been accredited for at least two years)? [ ] YES [ ] NO
				3. maintain clinical skills by providing direct patient care? [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 200 words)

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**Faculty**

Do all physician faculty members have a specific time commitment to patient care? [ ] YES [ ] NO

1. Do some physician faculty members see patients in each of the Family Medicine Practice (FMP) sites used by the program? [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 200 words)

|  |
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| Click here to enter text. |

1. Are physician faculty members providing teaching care for the following?
2. Inpatient adults [ ] YES [ ] NO
3. Inpatient children [ ] YES [ ] NO
4. Maternity care [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 200 words)

|  |
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| Click here to enter text. |

1. Is instruction in other specialties conducted by physician faculty members with appropriate expertise?

 [ ] YES [ ] NO

1. Are there faculty members dedicated to integration of behavioral health into the educational program? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 200 words)

|  |
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| Click here to enter text. |

1. Is there a structured program of faculty development? [ ] YES [ ] NO

If ‘YES,’ describe the regularly scheduled activities. (Limit 300 words)

Explain if ‘NO.’ (Limit 200 words)

|  |
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| Click here to enter text. |

**Other Program Personnel**

Is there a program coordinator? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 200 words)

|  |
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| Click here to enter text. |

**Resources**

* + - 1. Does the program have at least one FMP site that serves as the foundation for educating residents?

 [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 200 words)

|  |
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| Click here to enter text. |

* + - 1. Does this FMP site:
1. support continuous, comprehensive, convenient, accessible, and coordinated care to a panel of patients? [ ] YES [ ] NO
2. have a mission statement describing dedication to education and the care of patients?

 [ ] YES [ ] NO

1. provide contiguous space for residents’ clinical work and education? [ ] YES [ ] NO
2. provide computer access to electronic resources? [ ] YES [ ] NO
3. provide space for private resident precepting, meetings, group visits, and small-group counselling? [ ] YES [ ] NO
4. have faculty member offices that are either in the FMP site or immediately adjacent to it?

 [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 300 words)

|  |
| --- |
| Click here to enter text. |

1. Is there an agreement with specialists in other areas or services that family medicine residents maintain concurrent commitment to patients in the FMP site during their rotations? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 200 words)

|  |
| --- |
| Click here to enter text. |

1. Using the number as assigned in ADS, check the appropriate box in the table below to indicate the staffing provided during required rotations at each participating site. *Note that Site #1 is the primary clinical site.*

|  |  |  |
| --- | --- | --- |
| **Participating Site Number from ADS** | **Resident to Faculty Member Ratio** | **Staffing at Each Participating Site** |
|  |  | **Nurses** | **Technicians** | **Administrative****Personnel** | **Other Health Professions** |
|  |  | **Yes** | **No** | **Yes** | **No** | **Yes** | **No** | **Yes** | **No** |
| Site #1 *primary clinical site* | # |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Site #2 | # |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Site #3 | # |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Site #4 | # |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Site #5 | # |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Site #6 | # |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Site #7 | # |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Site #8 | # |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

If additional sites are used, describe the resources available at each of these in the space below. (Limit 300 words)

|  |
| --- |
| Click here to enter text. |

1. Describe how the program ensures other physician specialists will not see patients in each FMP site unless their presence enhances the resident experience. (Limit 300 words)

|  |
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| Click here to enter text. |

1. Describe how the program ensures each FMP site involves all members of the practice in ongoing performance improvement, demonstrating use of outcomes to improve clinical quality, patient satisfaction, patient safety, and financial performance. (Limit 300 words)

|  |
| --- |
| Click here to enter text. |

1. Using the site numbers as assigned in ADS, check the box in the table below to indicate if the required area is present in each of the FMP sites used by the program. *Note that Site #1 is the primary clinical site.*

|  |  |
| --- | --- |
| **Required Area** | **Participating Site Number from ADS –***select the box if the area is present* |
|  | Site #1 (*primary clinical site)* | Site #2 | Site #3  | Site #4 | Site #5 | Site #6 | Site #7 | Site #8 |
| Reception area |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Waiting room |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Business office |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Private area for resident precepting |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Resident work space |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Computer access |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Two examining rooms for each faculty member  |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Space for individual and small group counseling |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Faculty offices accessible to FMP site |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
| Conference room accessible to FMP site |[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

If additional sites are used, describe the resources available at each of these in the space below. (Limit 300 words)

|  |
| --- |
| Click here to enter text. |

1. Are the FMP sites available for patient services at times commensurate with community medical standards? [ ] YES [ ] NO
2. When an FMP site is not open, is there a plan that ensures continuing access for each patient to that patient’s physician? [ ] YES [ ] NO
3. Do patients in each FMP site receive education and direction on how to obtain access to their physician when that FMP site is closed? [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 200 words)

|  |
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| Click here to enter text. |

1. Do inpatient facilities have occupied teaching beds? [ ] YES [ ] NO
	* + - 1. Is the number of occupied teaching beds sufficient to ensure the patient numbers and the variety of problems to support the education of residents? [ ] YES [ ] NO
				2. Do the inpatient facilities provide physical, human, and educational resources necessary for family medicine residents? [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 200 words)

|  |
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| Click here to enter text. |

**Resident Appointment**

**Number of Residents**

* + - 1. Describe how the program ensures there are at least four residents at each educational level, or at least 12 on-duty residents. (Limit 300 words)

|  |
| --- |
| Click here to enter text. |

**Specialty-Specific Educational Program**

**ACGME-I Competencies**

**Professionalism**

1. How do graduating residents demonstrate a commitment to fulfilling their professional responsibilities and their adherence to ethical principles?

Describe how these are evaluated. (Limit 300 words)

|  |
| --- |
| Click here to enter text. |

1. How do graduating residents demonstrate the following?
	1. Compassion, integrity, and respect for others
	2. Responsiveness to patient needs that supersedes self-interest
	3. Respect for patient privacy and autonomy
	4. Accountability to patients, society, and the profession
	5. Sensitivity and responsiveness to a diverse patient population, including to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation
	6. Adherence to the Sponsoring Institution’s professionalism standards and code of conduct, and to citizenship and other responsibilities

Provide an example of how ability is assessed in four of the six areas. (Limit 400 words)

|  |
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| Click here to enter text. |

**Patient Care and Procedural Skills**

1. How do graduating residents demonstrate the ability to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health?

Describe how this is evaluated. (Limit 300 words)

|  |
| --- |
| Click here to enter text. |

1. How do graduating residents demonstrate competence in the essential skills of both productivity and efficiency necessary to meet the expectation of independent clinical practice, including the following?
	* + 1. Ability to collect a complete initial data base and examination
			2. Ability to define and expand the differential diagnoses list
			3. Identification of the most likely diagnoses and establishment of a plan for diagnostic and treatment modalities
			4. Ability to educate the patient and patient’s family about the diagnosis, evaluation, and treatment of the disease, to obtain informed consent, and to perform appropriate procedures
			5. Ability to practice in a team and with a systems-based approach
			6. Ability to present data to other members of the team and consultants
			7. Construction of a medical record summary with accuracy and in compliance with both the expected format and the hospital's medical records policies
			8. Cost-conscious ordering of diagnostic tests and therapeutics
			9. Formulation of short- and long-term goals
			10. Provision of guidance to patients regarding advanced directives, end-of-life issues, and unexpected diagnoses/outcomes

Provide an example of how competence is evaluated in six of the 10 areas listed. (Limit 600 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate competence in the following?
2. Cultural competence in caring for patients from varied ethnic and cultural backgrounds
3. Preventive health care
4. Promotion of independent living and maximizing function and quality of life in the elder patient

Provide an example of how competence is evaluated in two of the three areas listed. (Limit 200 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate competence in the following?
2. Assisting families in coping with serious illness and loss
3. Promoting family mechanisms to maintain the wellness of its members
4. Provision of longitudinal health care to families

Provide an example of how competence is evaluated in two of the three areas listed above.

(Limit 200 words)

|  |
| --- |
| Click here to enter text. |

1. How do graduating residents demonstrate competence in the following?
	1. Assessing and meeting the health care needs of declining elders
	2. Delivery of care in the FMP sites, hospital, and long-term facility
	3. Delivery of health care in the home
	4. End-of-life care
	5. Episodic, illness-related care

Provide an example of how competence is evaluated in three of the five areas listed.

(Limit 300 words)

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| Click here to enter text. |

1. How do graduating residents demonstrate competence in the following?
2. Managing a normal pregnancy and delivery
3. Performance of appropriate gynecological procedures
4. Treating the common problems of prenatal and post-partum care

Provide an example of how competence is evaluated in two of the three areas listed. (Limit 200 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate competence in the following?
2. Diagnosis of a wide variety of common general surgical problems typically cared for by family physicians
3. Giving proper advice, explanation, and emotional support during surgical care to patients and their families
4. Management of a wide variety of common general surgical problems typically cared for by family physicians
5. Recognizing surgical conditions that are preferably managed on an elective basis

Provide an example of how competence is evaluated in three of the four areas listed. (Limit 300 words)

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| Click here to enter text. |

1. How do graduating residents demonstrate competence to care for hospitalized patients having various levels of severity of illness, including the ability to:
2. admit patients to the hospital;
3. conduct an initial patient evaluation;
4. conduct discharge planning and continuing care
5. consult with other specialists;
6. diagnose a wide variety of common inpatient problems of adults and children as seen by family physicians;
7. develop a plan of care;
8. manage a wide variety of common inpatient problems of adults and children as seen by family physicians;
9. perform basic procedures of medicine;
10. provide ongoing management; and,
11. provide supervision to others?

Provide an example of how competence is evaluated in six of the 10 areas listed. (Limit 600 words)

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| Click here to enter text. |

**Medical Knowledge**

* + - 1. How do graduating residents demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care?

Describe how knowledge is evaluated. (Limit 400 words)

|  |
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| Click here to enter text. |

* + - 1. How do graduating residents demonstrate knowledge of the broad spectrum of clinical disorders seen in the practice of family medicine?

Describe how knowledge is evaluated. (Limit 300 words)

|  |
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| Click here to enter text. |

* + - 1. How do graduating residents demonstrate knowledge of evolving new knowledge and incorporating it into meaningful clinical practice?

Describe how this is evaluated. (Limit 300 words)

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| Click here to enter text. |

**Practice-based Learning and Improvement**

1. How do graduating residents demonstrate their ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning?

Describe how these skills are evaluated. (Limit 300 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate they have developed the skills and habits to be able to meet the following goals?
2. Identify strengths, deficiencies, and limits in one’s knowledge and expertise
3. Identify and perform appropriate learning activities
4. Incorporate formative evaluation feedback into daily practice
5. Locate, appraise, and assimilate evidence from scientific studies related to their patients’ health problems
6. Participate in the education of patients, patients’ families, students, other residents, and other health professionals
7. Set learning and improvement goals
8. Systematically analyze clinical practice using quality improvement methods, and implement changes with the goal of practice improvement
9. Use information technology to optimize learning

Provide an example of how skills are assessed in five of the eight areas listed above. (Limit 600 words)

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| Click here to enter text. |

**Interpersonal and Communication Skills**

1. How do graduating residents demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and other health professionals?

Describe how these skills are evaluated. (Limit 300 words)

|  |
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| Click here to enter text. |

How do graduating residents demonstrate their ability to:

communicate effectively with patients, patients’ families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds;

communicate effectively with physicians, other health professionals, and health-related agencies;

work effectively as a member or leader of a health care team or other professional group;

act in a consultative role to other physicians and health professionals; and,

maintain comprehensive, timely, and legible medical records, if applicable?

Provide an example of how ability is assessed in three of the five areas listed. (Limit 500 words)

|  |
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| Click here to enter text. |

**Systems-based Practice**

1. How do graduating residents demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care?

Describe how these skills are evaluated. (Limit 300 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate their ability to:
	1. work effectively in various health care delivery settings and systems relevant to their clinical specialty;
	2. coordinate patient care within the health care system relevant to their clinical specialty;
	3. incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population based care as appropriate;
	4. advocate for quality patient care and optimal patient care systems;
	5. work in inter-professional teams to enhance patient safety and improve patient care quality; and,
	6. participate in identifying system errors and implementing potential systems solutions?

Provide an example of how ability is assessed in four of the six areas listed. (Limit 500 words)

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| Click here to enter text. |

**Regularly Scheduled Educational Activities**

1. Using the format provided, complete Appendix A., Formal Didactic Sessions by Academic Year, and attach to submission.
2. Does the program provide a regularly scheduled forum for residents to explore and analyze evidence pertinent to family practice? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 300 words)

|  |
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| Click here to enter text. |

**Clinical Experiences**

At each FMP site, do residents:

1. receive regular reports of individual and practice productivity? [ ] YES [ ] NO
2. receive regular reports of individual and practice quality? [ ] YES [ ] NO
3. receive instruction on how to analyze productivity and quality reports? [ ] YES [ ] NO
4. attend regular FMP business meetings with staff and faculty members? [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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| Click here to enter text. |

1. How does the program ensure that residents’ other assignments do not interrupt continuity experiences in the FMP sites for more than eight weeks at any given time or in any one year? (Limit 300 words)

|  |
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| Click here to enter text. |

1. How does the program ensure that the period between interruptions in continuity experiences are at least four weeks in length? (Limit 300 words)

|  |
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| Click here to enter text. |

1. Do experiences in the FMP include the following?
2. Acute care [ ] YES [ ] NO
3. Care for patients of all ages [ ] YES [ ] NO
4. Chronic care [ ] YES [ ] NO
5. Wellness care [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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| Click here to enter text. |

1. How does the program ensure that residents are responsible for a panel of continuity patients, including how integrating each patient’s care across all settings, such as home, long-term care, the FMP site, specialty care, and inpatient care facilities. (Limit 400 words)

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| Click here to enter text. |

1. Describe how the program ensures residents participate in and assume progressive leadership of care teams to coordinate care for their panel of patients. (Limit 300 words)

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| Click here to enter text. |

1. Using site numbers as assigned in in ADS, indicate the annual number of patient encounters for each category in each of the FMP sites the used by the program. *Note that Site #1 is the primary clinical site.* Add rows as needed

|  |  |  |  |
| --- | --- | --- | --- |
| Participating Site Number from ADS. | Number of Total In-Person Patient Encounters | Number of Patient Encounters with Children Younger than 10 Years of Age | Number of Patient Encounters with Patients Older than 60 Years of Age |
| Site #1 (*primary clinical site)* |  |  |  |
| Site #2 |  |  |  |
| Site #3 |  |  |  |
| Site #4 |  |  |  |
| Site #5 |  |  |  |
| Site #6 |  |  |  |
| Site #7 |  |  |  |
| Site #8 |  |  |  |

1. For each of the following, indicate the average number of hours (or average number of patient encounters where indicated) that each resident has upon graduation from the program:
2. Care of children and adolescents in an ambulatory setting: # hours
3. Care of critically-ill patients: # hours *or* # number of patient encounters
4. Care of hospitalized adult patients: # hours
5. Care of ill children in the hospital or emergency setting: # hours
6. Care of the older patient: # hours *or* # number of patient encounters
7. Care of patients with a breadth of musculoskeletal problems: # hours
8. Care of surgical patients: # hours
9. Care of women with gynecologic issues: # hours *or* # patient encounters
10. Elective experiences: # hours
11. Emergency Department: # hours *or* # number of patient encounters
12. In-person patient encounters at the FMP site: # number of patient encounters
13. In-person encounters at the FMP site with patients younger than 10 years of age: # number of patient encounters
14. In-person patient encounters at the FMP site with patients 60 years of age or older: # number of patient encounters
15. Participating in deliveries and providing prenatal and post-partum care: # hours
16. Participating in health system management experiences: # hours
17. What is the average number of inpatient encounters that each resident has during the first year of the program? (Limit 250 words)

|  |
| --- |
| Click here to enter text. |

1. Does each resident’s experience in the care of the older patient include the following?
2. Care of older patients across a continuum of sites [ ] YES [ ] NO
3. Disease prevention and health promotion [ ] YES [ ] NO
4. Functional assessment [ ] YES [ ] NO
5. Management pf patients with multiple chronic diseases [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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| Click here to enter text. |

1. Does each resident’s experience in the care of adolescents and children in an ambulatory setting include the following?
2. Acute care [ ] YES [ ] NO
3. Chronic care [ ] YES [ ] NO
4. Newborn patient encounters, including well and ill newborns [ ] YES [ ] NO
5. Well-child care [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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| Click here to enter text. |

1. Does each resident’s experience in the care of musculoskeletal problems include a structured sports medicine experience? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

|  |
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| Click here to enter text. |

1. Does each resident’s experience in the care of women with gynecologic issues include the following?
2. Contraception [ ] YES [ ] NO
3. Family planning [ ] YES [ ] NO
4. Options counseling for unintended pregnancy [ ] YES [ ] NO
5. Well-woman care [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words).

|  |
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| Click here to enter text. |

1. How does the program ensure residents have an experience in prenatal care, labor management, and delivery management? (Limit 400 words)

|  |
| --- |
| Click here to enter text. |

1. Does each resident have:
2. experience in diagnosing common dermatologic conditions? [ ] YES [ ] NO
3. experience in managing common dermatologic conditions? [ ] YES [ ] NO
4. exposure to a variety of medical subspecialties? [ ] YES [ ] NO
5. exposure to a variety of surgical subspecialties? [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

|  |
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| Click here to enter text. |

1. Is behavioral health integrated into the residents’ total educational experience? [ ] YES [ ] NO

Explain if ‘NO.’ (Limit 250 words)

|  |
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| Click here to enter text. |

1. Is there a structured curriculum that addresses the following?
	* + - 1. Diagnosis of common mental illness [ ] YES [ ] NO
				2. Diagnostic imaging interpretation pertinent to family practice [ ] YES [ ] NO
				3. Management of common mental illness [ ] YES [ ] NO
				4. Nuclear medicine therapy pertinent to family practice [ ] YES [ ] NO
				5. Population health [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

|  |
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| Click here to enter text. |

1. How has the list of procedural competencies that all residents are required to attain prior to graduation been developed? Include how faculty members considered current practices, national data regarding procedural care in family medicine, and the needs of the community when developing the list. (Limit 400 words)

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| Click here to enter text. |

1. How does the program ensure that residents receive training on the clinical procedures listed in response to Question 17? (Limit 400 words)

|  |
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| Click here to enter text. |

1. Describe resident experiences in health system management. (Limit 250 words)

|  |
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| Click here to enter text. |

1. How does the program ensure the curriculum prepares residents to be active participants and leaders in their practices, communities, and the profession of medicine? (Limit 300 words)

|  |
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| Click here to enter text. |

**Scholarly Activity**

1. How does the program ensure all residents complete two scholarly activities, at least one of which is a quality improvement project? (Limit 300 words)

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| Click here to enter text. |

Appendix A. Formal Didactic Sessions by Academic Year

For each year of the residency, attach (Label: Appendix A.) a list of all scheduled didactic courses (including discussion groups, seminars and conferences, grand rounds, basic science, skills labs, and journal club) at all participating sites to which residents rotate, using the format below. If attended by residents from multiple years, list in each year but provide a full description *only the first time a site is listed*.

Number sessions **consecutively** from the first year through the final year so that the scheduled didactic sessions can be easily referenced throughout the application. **Be brief and use the outline that follows.**

Year in the program:

Number: Title:

a) Type of Format (e.g., seminar, conference, discussion groups)

b) Required or elective

c) Brief description (three or four sentences)

d) Frequency, length of session, and total number of sessions

**Example:**

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| Y-101. Introduction to Family Medicinea) Seminarb) Required Y-1c) Survey of contemporary methods and styles of family medicine, including approaches to clinical work with minority populations.d) Weekly, for 8 sessions02. Departmental Grand Roundsa) Discussion groupsb) Required, Y-1, Y-2, Y-3; Elective Y-4c) Clinical case presentations, sponsored by each departmental division, followed by discussion and review of contemporary state of knowledge. Format includes resident presentations and discussions with additional faculty discussant.d) Twice monthly, 24 sessions |

If resident attendance is monitored, explain how this is accomplished and how feedback is given regarding non-attendance. (Limit 250 words)

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