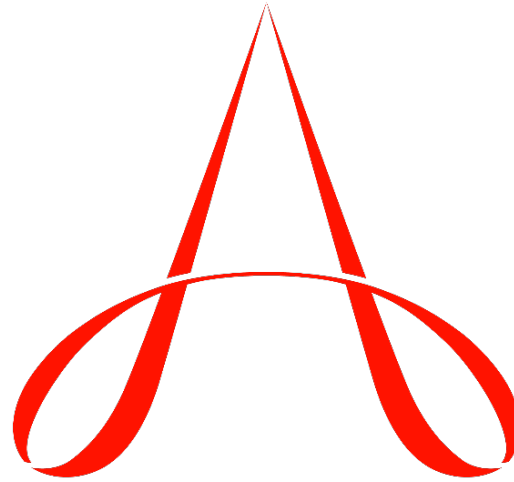




# Supplemental Guide: Osteopathic Recognition



A C G M E

August 2021

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## Milestones Supplemental Guide

This document provides additional guidance and examples for the Osteopathic Recognition Milestones. This is not designed to indicate any specific requirements for each level, but to provide insight into the thinking of the Milestone Work Group. Included in this document is the intent of each Milestone and examples of what a Clinical Competency Committee (CCC) might expect to be observed/assessed at each level. Also included are suggested assessment models and tools for each subcompetency, references, and other useful information.

Review this guide with the CCC and faculty members. As the program develops a shared mental model of the Milestones, consider creating an individualized guide (Supplemental Guide Template available) with institution/program-specific examples, assessment tools used by the program, and curricular components.

Additional tools and references, including the Milestones Guidebook, Clinical Competency Committee Guidebook, and Milestones Guidebook for Residents and Fellows, are available on the [Resources](#) page of the Milestones section of the ACGME website.

### Osteopathic Philosophy

This is a concept of health care supported by expanding scientific knowledge that embraces the concept of the unity of the living organism's structure (anatomy) and function (physiology). It emphasizes the following principles (*also known as the osteopathic tenets or the four tenets*):

- (1) The human being is a dynamic unit of function,
- (2) The body possesses self-regulatory mechanisms that are self-healing in nature,
- (3) Structure and function are interrelated at all levels, and
- (4) Rational treatment is based on these principles.

(Source: [Glossary of Osteopathic Terminology](#))

### Osteopathic Manipulative Treatment (OMT)

The therapeutic application of manually guided forces by an osteopathic physician (US usage) to improve physiologic function and/or support homeostasis that has been altered by somatic dysfunction.

(Source: [Glossary of Osteopathic Terminology](#))

**Osteopathic Principles and Practice (OPP)**

The application of the osteopathic philosophy in the care of patients, which may include the use of OMT.

**Somatic Dysfunction**

Impaired or altered function of related components of the body framework system: skeletal, arthroal, and myofascial structures, and their related vascular, lymphatic, and neural elements. It is characterized by positional asymmetry, restricted range of motion, tissue texture abnormalities, and/or tenderness. The positional and motion aspects of somatic dysfunction are generally described by:

- 1) The position of a body part as determined by palpation and referenced to its defined adjacent structure,
- 2) the directions in which motion is freer, and
- 3) the directions in which motion is restricted.

Somatic dysfunction is treatable using osteopathic manipulative treatment.

(Source: [Glossary of Osteopathic Terminology](#))

Inpatient is abbreviated as (I) in the examples below. Outpatient is abbreviated as (O) in the examples below.

<b>Patient Care 1: Osteopathic Principles and Practice (OPP) for Patient Care</b> <b>Overall Intent:</b> To use OPP to promote health and well-being	
Milestones	Examples
	Each of these examples incorporate the osteopathic philosophic approach to the whole patient through addressing mind, body, and spirit
<b>Level 1</b> <i>Describes the inclusion of OPP to promote health and wellness when caring for patients</i>	<ul style="list-style-type: none"> <li>● (I) Identifies the need to ask a surgical patient about current living situation, emotional health, spiritual needs, and caregivers to ensure appropriate aftercare</li> <li>● (O) Identifies the need to ask a patient if there are enough food available or access to the Women Infant Children (WIC) program to support the patient’s recovery needs, including emotional and spiritual resources</li> </ul>
<b>Level 2</b> <i>Incorporates OPP to promote health and wellness in patients with common conditions</i>	<ul style="list-style-type: none"> <li>● (I) Incorporates lymphatic drainage in the treatment of upper-respiratory infection</li> <li>● (O) Incorporates smoking cessation into treatment plans explaining how cessation will allow the body’s ability to heal restore normal function and decrease progression of cardiopulmonary disease with patients</li> </ul>
<b>Level 3</b> <i>Effectively manages patients with common conditions using OPP to promote health and wellness</i>	<ul style="list-style-type: none"> <li>● (I) Prepares asthma action plan and discusses elimination of household triggers on hospital discharge disposition planning</li> <li>● (O) Demonstrates shared decision making while explaining the American Society for Colposcopy and Cervical Pathology (ASCCP) guidelines on cervical cancer screening</li> </ul>
<b>Level 4</b> <i>Effectively manages patients with complex or chronic conditions using OPP to promote health and wellness</i>	<ul style="list-style-type: none"> <li>● (I) Effectively manages and prevents delirium in the geriatric patient while attempting to limit use of chemical and physical restraints</li> <li>● (O) Counsels patient on optimizing nutrition and exercise to support the body’s function during chemotherapy</li> </ul>
<b>Level 5</b> <i>Role models the incorporation of OPP to optimize patient and community health and wellness</i>	<ul style="list-style-type: none"> <li>● (I) Role models the incorporation of mental health, sleep hygiene, and osteopathic manipulative treatment (OMT) protocols in the medical system approach to alcohol withdrawal treatment</li> <li>● (O) Facilitates group visits on managing diabetes through nutrition, exercise, and meal planning</li> </ul>
Assessment Models or Tools	<ul style="list-style-type: none"> <li>● Chart review</li> <li>● Direct observation</li> <li>● Multisource feedback</li> <li>● Patient satisfaction scores</li> <li>● Simulation</li> </ul>
Curriculum Mapping	<ul style="list-style-type: none"> <li>●</li> </ul>
Notes or Resources	<ul style="list-style-type: none"> <li>● American Association of Colleges of Osteopathic Medicine (AACOM). Glossary of Osteopathic Terminology. <a href="https://www.aacom.org/docs/default-source/insideome/got2011ed.pdf">https://www.aacom.org/docs/default-source/insideome/got2011ed.pdf</a>. 2021.</li> </ul>

- American College of Physicians (ACP). Caring with Compassion. <https://www.acponline.org/cme-moc/online-learning-center/caring-with-compassion>. 2021.
- Chila AG, American Osteopathic Association. *Foundations of Osteopathic Medicine*. 3rd ed. Baltimore, MD: Lippincott Williams & Wilkins; 2010. ISBN:978-0781766715.
- Nelson KE, Glonek T. *Somatic Dysfunction in Osteopathic Family Medicine*. 2nd ed. Philadelphia, PA: Wolters Kluwer; 2014. ISBN:978-1451103052.
- Peer Reviewed Journals (Journal of Osteopathic Medicine, Osteopathic Family Physician Journal)

Patient Care 2: Osteopathic Evaluation and Treatment	
Overall Intent: To use the osteopathic structural exam and osteopathic treatment measures to better patient health	
Milestones	Examples
<p><b>Level 1</b> <i>Obtains a history and performs an osteopathic examination with direct supervision</i></p> <p><i>Diagnoses and treats somatic dysfunction with direct supervision</i></p>	<ul style="list-style-type: none"> <li>● (I) Identifies the appropriate somatic dysfunctions for a pediatric patient with asthma exacerbation, such as inhalation rib dysfunction, with hands-on assistance from the attending physician</li> <li>● (O) Identifies tissue texture change in a patient with upper-respiratory infection, with hands-on assistance from the attending physician</li> <li>● (I) Appropriately executes a rib-raising maneuver to treat a pediatric patient with asthma exacerbation with assistance from the attending physician</li> <li>● (O) Appropriately treats the head somatic dysfunctions for a patient with upper-respiratory infection, with assistance from the attending physician</li> </ul>
<p><b>Level 2</b> <i>Obtains a history and performs an osteopathic examination with limited supervision</i></p> <p><i>Diagnoses and treats somatic dysfunction with limited supervision</i></p>	<ul style="list-style-type: none"> <li>● (I) Identifies the appropriate somatic dysfunctions for a patient with acute stroke, such as asymmetry with left-sided weakness, with indirect participation from the attending physician</li> <li>● (O) Identifies short-leg syndrome in a patient with chronic lower back pain with indirect participation from the attending physician</li> <li>● (I) Appropriately executes a muscle energy maneuver to treat a patient with an acute stroke while the attending physician observes</li> <li>● (O) Appropriately treats the pelvic somatic dysfunctions for a patient with short-leg syndrome while the attending physician observes</li> </ul>
<p><b>Level 3</b> <i>Independently obtains a history and performs an osteopathic examination for patients with common conditions</i></p> <p><i>Independently diagnoses and treats somatic dysfunction in patients with common conditions</i></p>	<ul style="list-style-type: none"> <li>● (I) Correctly identifies the appropriate somatic dysfunctions and contributing factors for a post-operative patient with ileus, without attending observation</li> <li>● (O) Correctly identifies nursemaid's elbow in a pediatric patient, without attending observation</li> <li>● (I) Appropriately executes an indirect treatment while avoiding the surgical site to treat the post-operative ileus and reports the diagnosis and treatment to the attending physician</li> <li>● (O) Appropriately executes the direct articulation technique to treat nursemaid's elbow in a pediatric patient and reports the diagnosis and treatment to the attending physician</li> </ul>
<p><b>Level 4</b> <i>Independently obtains a history and performs an osteopathic examination for patients with complex conditions</i></p>	<ul style="list-style-type: none"> <li>● (I) Correctly identifies the appropriate somatic dysfunctions for a patient with pulmonary failure</li> <li>● (O) Correctly identifies the appropriate somatic dysfunctions for a patient with complex migraine headaches</li> </ul>

<p><i>Independently diagnoses and treats somatic dysfunction in patients with complex conditions</i></p>	<ul style="list-style-type: none"> <li>● (I) Correctly identifies and treats the appropriate somatic dysfunctions for a patient with pulmonary failure</li> <li>● (O) Appropriately treats the pelvic somatic dysfunctions for a patient with sacral shear and reports the diagnosis and treatment to the attending physician</li> </ul>
<p><b>Level 5</b> <i>Role models the complete integration of an osteopathic history and examination</i></p> <p><i>Role models diagnosis and treatment of somatic dysfunction in all patient populations</i></p>	<ul style="list-style-type: none"> <li>● (I) Correctly identifies the appropriate somatic dysfunctions for a patient with pulmonary failure and efficiently integrates into overall care and applies innovative treatment approaches</li> <li>● (O) Correctly identifies the appropriate somatic dysfunction for a patient with complex migraines and efficiently integrate into overall care approaches and applies innovative treatment approaches</li> <li>● (I) Correctly identifies and treats the appropriate somatic dysfunctions for a patient with pulmonary failure and efficiently applies and integrates innovative treatment approaches into overall care</li> <li>● (O) Appropriately treats the pelvic somatic dysfunctions for a patient with sacral shear and efficiently applies and integrates innovative treatment approaches into overall care</li> </ul>
<p>Assessment Models or Tools</p>	<ul style="list-style-type: none"> <li>● Chart review</li> <li>● Direct supervision</li> <li>● Simulation</li> </ul>
<p>Curriculum Mapping</p>	<ul style="list-style-type: none"> <li>●</li> </ul>
<p>Notes or Resources</p>	<ul style="list-style-type: none"> <li>● Treatments can be performed at any level – the intent is the amount of supervision required to perform it correctly and ultimately independently</li> <li>● Channell MK, Mason DC. <i>The 5 Minute Osteopathic Manipulative Medicine Consult</i>. 2nd ed. Philadelphia, PA: Wolters Kluwer; 2019. ISBN:978-1496396501.</li> <li>● Chila AG, American Osteopathic Association. <i>Foundations of Osteopathic Medicine</i>. 3rd ed. Baltimore, MD: Lippincott Williams &amp; Wilkins; 2010. ISBN:978-0781766715.</li> </ul>



<b>Medical Knowledge: Osteopathic Medical Knowledge (Philosophy and Clinical Anatomic Considerations)</b> <b>Overall Intent:</b> To develop an acumen of knowledge in OPP	
Milestones	Examples
<p><b>Level 1</b> <i>Describes the osteopathic philosophy and clinical anatomic considerations</i></p> <p><i>Describes techniques of osteopathic manipulative treatment (OMT), including contraindications</i></p>	<ul style="list-style-type: none"> <li>● (I) Discusses anatomic considerations for treatment in the immediate postpartum phase</li> <li>● (O) Discusses the location of paraspinal muscles to determine best treatment plan for OMT with attending</li>   <li>● (I) Recognizes the need to adapt positioning for treatment when using OMT as an adjunctive treatment for an infant admitted with bronchiolitis on high-flow nasal cannula</li> <li>● (O) Understands contraindications of using the high-velocity low-amplitude (HVLA) technique in a patient with ongoing spinal cord injury</li> </ul>
<p><b>Level 2</b> <i>Demonstrates knowledge of osteopathic philosophy and clinical anatomic considerations</i></p> <p><i>Demonstrates knowledge of OMT techniques for common patient presentations, including risks and benefits</i></p>	<ul style="list-style-type: none"> <li>● (I) Recognizes that when in the intensive care unit (ICU), an intubated patient may need modifications to OMT techniques</li> <li>● (O) Recognizes the role of the quadratus lumborum in acute and chronic back pain</li>   <li>● (I) Discusses other rib techniques when a patient presents with asthma exacerbation and cannot lay flat</li> <li>● (O) For an infant with torticollis, discusses how treatment may impact feedings and latch</li> </ul>
<p><b>Level 3</b> <i>Integrates knowledge of osteopathic philosophy and clinical anatomic considerations for patients with common conditions</i></p> <p><i>Integrates knowledge of OMT techniques to formulate a plan for patients with common conditions</i></p>	<ul style="list-style-type: none"> <li>● (I) For a patient with chest pain, integrates chest OMT, but also recognizes other causes for chest pain</li> <li>● (O) For a patient with knee pain, includes fibular head assessment and determines best treatment for the entire knee</li>   <li>● (I) For a patient with decompensated heart failure, understands how to integrate OMT into the treatment plan</li> <li>● (O) For a patient with back pain, develops a treatment plan taking the patient's body habitus into account and modifies techniques for best positioning</li> </ul>
<p><b>Level 4</b> <i>Integrates knowledge of osteopathic philosophy and clinical anatomic considerations for patients with complex conditions</i></p> <p><i>Integrates knowledge of OMT techniques to formulate a plan for patients with complex conditions</i></p>	<ul style="list-style-type: none"> <li>● (I) For a patient with acute head trauma, considers the trauma and does not include cranial techniques in treatment planning</li> <li>● (O) Develops treatment plan to address muscle spasticity along with standard treatments when seeing a patient with cerebral palsy</li>   <li>● (I) After seeing a patient in the neonatal intensive care unit (NICU), develops OMT plan to address infant feeding difficulties by considering patient positioning</li> <li>● (O) For a patient with metastatic cancer in hospice, builds OMT into comprehensive end-of-life care goals of the patient and family</li> </ul>

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<p><b>Level 5</b> <i>Role models osteopathic philosophy and clinical anatomic considerations in all aspects of patient care</i></p> <p><i>Role models knowledge of OMT techniques to formulate a plan for patients with complex conditions</i></p>	<ul style="list-style-type: none"> <li>● (I) identifies rib angles for rib raising and teaches learners proper placement by monitoring learner hand positioning during post-operative care</li> <li>● (O) Teaches other learners relevant anatomy and somatic dysfunctions for OMT in pregnant patients</li> <li>● (I) Leads the OMT consult service and directs other team members in developing treatment plans</li> <li>● (O) Leads treatment team to integrate chest OMT such as rib raising in the comprehensive care of patient with chronic obstructive pulmonary disease (COPD)</li> </ul>
<p>Assessment Models or Tools</p>	<ul style="list-style-type: none"> <li>● Case presentations for group learning</li> <li>● Direct observations of patient encounters</li> <li>● Observed skills clinical exam (OSCE) skills checks</li> <li>● Resident skills checks</li> <li>● Simulation learning</li> </ul>
<p>Curriculum Mapping</p>	<ul style="list-style-type: none"> <li>●</li> </ul>
<p>Notes or Resources</p>	<ul style="list-style-type: none"> <li>● Seffinger MA, King HH, Ward RC, et al. Osteopathic philosophy. In: Chila AG, American Osteopathic Association. <i>Foundations of Osteopathic Medicine</i>. 3rd ed. Baltimore, MD: Lippincott Williams &amp; Wilkins; 2010. ISBN:978-0781766715.</li> </ul>

<b>Osteopathic Principles and Practice for Systems-Based Practice</b> <b>Overall Intent:</b> To implement OPP in the health care system	
Milestones	Examples
<p><b>Level 1</b> <i>Demonstrates knowledge of cost-effective osteopathic patient care in the health care delivery system, including appropriate documentation of somatic dysfunction</i></p> <p><i>Recognizes barriers to quality osteopathic patient care, including the impact of social determinants of health</i></p>	<ul style="list-style-type: none"> <li>● (I) Recommends rib raising for pneumonia patient and discusses cost of OMT care with medical team</li> <li>● (O) Recommends muscle energy for treatment of torticollis and discusses cost of OMT care incorporation with family members and the supervising physician</li> <li>● (I) Brings up use of OMT as adjunctive treatment for neck pain at rounds</li> <li>● (O) Identifies transportation issues as a barrier to care; teaches patient and family members OMT for home use</li> </ul>
<p><b>Level 2</b> <i>Provides cost-effective osteopathic patient care within a health care delivery system, including accurate documentation, billing, and coding of osteopathic somatic dysfunction, with limited supervision</i></p> <p><i>Assists patients in obtaining quality osteopathic patient care and contributes to a culture of safety with limited supervision</i></p>	<ul style="list-style-type: none"> <li>● (I) Performs OMT consultations that are mindful of cost; performs mesenteric release on a post-operative patient for constipation and documents accurately, but the supervising physician may need to make minor edits to the resident's documentation</li> <li>● (O) Performs soft tissue techniques for a patient with back pain and documents accurately; the supervising physician may need to make minor edits to the resident's documentation, billing, and coding</li> <li>● (I) Sets up appointment for outpatient OMT for continued surgical recovery</li> <li>● (O) Recommends patient schedule OMT visit for back pain</li> </ul>
<p><b>Level 3</b> <i>Provides cost-effective osteopathic patient care within a health care delivery system, including accurate documentation, billing, and coding of osteopathic somatic dysfunction</i></p> <p><i>Assists patients in obtaining quality osteopathic patient care and contributes to a culture of safety</i></p>	<ul style="list-style-type: none"> <li>● (I) Performs cranial treatment in NICU and accurately documents, bills, and codes as part of comprehensive care delivery</li> <li>● (O) Performs Galbreath technique for recurrent otitis media and accurately documents, bills, and codes as part of comprehensive care delivery</li> <li>● (I) Knows not to perform OMT over an acute fracture site</li> <li>● (O) Correctly identifies red flags for non-musculoskeletal back pain and correctly orders imaging; delays OMT until diagnosis is made</li> </ul>
<p><b>Level 4</b> <i>Provides cost-effective osteopathic patient care with all interprofessional team members within the health care delivery system</i></p>	<ul style="list-style-type: none"> <li>● (I) Discusses incorporating rib raising post-operation to decrease length of stay with the surgical interprofessional team</li> <li>● (O) Discusses incorporating OMT with hospice interprofessional team as an adjunct to alleviate pain</li> </ul>

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<p><i>Identifies and remedies system deficiencies related to osteopathic patient care and patient safety</i></p>	<ul style="list-style-type: none"> <li>● (I) Analyzes billing system to ensure procedural codes for OMT are embedded</li> <li>● (O) Develops a superbill with OMT codes in the outpatient setting</li> <li>● (O) Streamlines access to OMT consultative services</li> </ul>
<p><b>Level 5</b> <i>Develops optimal interprofessional team based, cost-effective osteopathic patient care within the health care delivery system</i></p>	<ul style="list-style-type: none"> <li>● (I) Advocates for incorporating OMT into routine post-operative care</li> <li>● (O) Advocates for incorporating OMT into an interprofessional pain management clinic</li> </ul>
<p><i>Demonstrates leadership in organizing quality improvement and patient safety efforts for the osteopathic profession</i></p>	<ul style="list-style-type: none"> <li>● (I) Advocates to incorporate OMT billing and coding into hospital system</li> <li>● (O) Advocates for the development of OMT credentialing process to assure quality patient care</li> </ul>
<p>Assessment Models or Tools</p>	<ul style="list-style-type: none"> <li>● Audit of documentation, billing, and coding practices</li> <li>● Patient safety committee</li> <li>● Presentation on contraindications to OMT</li> <li>● Presentation on billing and coding practice</li> <li>● Quality improvement committee</li> </ul>
<p>Curriculum Mapping</p>	<ul style="list-style-type: none"> <li>●</li> </ul>
<p>Notes or Resources</p>	<ul style="list-style-type: none"> <li>● Chila AG, American Osteopathic Association. <i>Foundations of Osteopathic Medicine</i>. 3rd ed. Baltimore, MD: Lippincott Williams &amp; Wilkins; 2010. ISBN:978-0781766715.</li> <li>● Journal of Osteopathic Medicine. <a href="https://jom.osteopathic.org/">https://jom.osteopathic.org/</a>. 2021.</li> </ul>

<b>Osteopathic Principles of Practice-Based Learning and Improvement</b> <b>Overall Intent:</b> To integrate OPP into everyday care and organize and relate OPP to health care professionals	
Milestones	Examples
<p><b>Level 1</b> <i>Performs osteopathic literature review</i></p> <p><i>Describes evidence-based medicine principles and how they relate to osteopathic patient care</i></p>	<ul style="list-style-type: none"> <li>● (I) As an internal medicine resident, performs a literature review for osteopathic approaches to abdominal pain to incorporate the knowledge into a morning grand rounds discussion</li> <li>● (O) As a family medicine resident, locates several osteopathic articles on knee examination while preparing a case study for a poster presentation</li> <li>● (I) As a surgical resident, describes an article during grand rounds discussing the use of OMT during the early post-operative recovery period</li> <li>● (O) Discusses a with a faculty member a new technique for OMT learned from a recent peer-reviewed journal article</li> </ul>
<p><b>Level 2</b> <i>Incorporates osteopathic literature into rounds, case presentations, or didactic sessions</i></p> <p><i>Performs self-evaluation of osteopathic practice patterns and identifies practice gaps</i></p>	<ul style="list-style-type: none"> <li>● (I) As an emergency medicine resident, discusses a review article on respiratory OMT during regularly scheduled didactics</li> <li>● (O) As a gynecology and obstetrics resident seeing a patient in the clinic, reviews an article with medical students about changes in the pelvis that occur during pregnancy and how these impact OMT</li> <li>● (I) Notes they have not performed any OMT procedures on patients admitted with gastrointestinal complaints</li> <li>● (O) During an evaluation meeting with the program director, sets a personal goal to perform two OMT procedures during their regularly schedule clinic days</li> </ul>
<p><b>Level 3</b> <i>Prepares and presents scholarly activity or didactic session that incorporates OPP</i></p> <p><i>Independently creates a learning plan to improve osteopathic practice based on identified gaps</i></p>	<ul style="list-style-type: none"> <li>● (I) Presents a session to program didactics regarding how to use the inpatient equipment to facilitate delivery of OMT to admitted patients</li> <li>● (O) Leads a discussion group on appropriate billing and documentation for a didactics session</li> <li>● (I) Establishes a monthly journal club to review articles for areas of weakness previously identified at an OMT session</li> <li>● (O) Creates a reading list of articles to review before each clinic day that focuses on the most commonly missed OMT opportunities identified from a comprehensive review</li> </ul>
<p><b>Level 4</b> <i>Prepares and presents scholarly activity that incorporates OPP at local, regional, or national meetings</i></p>	<ul style="list-style-type: none"> <li>● (I) Presents a session on OMT of the head and neck at a meeting of state residency programs</li> <li>● (O) Presents initial findings from research evaluating patient satisfaction effects of OMT to a local research contest</li> </ul>

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<p><i>Re-evaluates learning plan to identify additional opportunities for improvement in osteopathic practice</i></p>	<ul style="list-style-type: none"> <li>● (I) Sends a survey to the resident body seeking feedback for osteopathic topics in the current didactics year and modifies the upcoming session based on that feedback</li> <li>● (O) Completes a test bank of questions directed at OMT-specific content based on topics they identified in a learning plan; based on questions being missed, restructures the plan emphasizing these topics</li> </ul>
<p><b>Level 5</b> <i>Performs and publishes peer-reviewed research that integrates OPP</i></p> <p><i>Teaches osteopathic principles or OMT techniques at regional or national meetings</i></p>	<ul style="list-style-type: none"> <li>● (I) Publishes an article on bedside OMT techniques in a peer-reviewed education journal</li> <li>● (O) Publishes a case series in a peer-reviewed journal exploring the benefits of a yearlong OMM intervention for children with asthma</li> <li>● (I) Teaches OPP or OMT techniques at local meetings</li> <li>● (O) Teaches a session on modified myofascial techniques at a national OMT seminar</li> </ul>
<p>Assessment Models or Tools</p>	<ul style="list-style-type: none"> <li>● Journal club</li> <li>● Morning reports</li> <li>● National or regional conferences</li> <li>● Peer-reviewed journal</li> </ul>
<p>Curriculum Mapping</p>	<ul style="list-style-type: none"> <li>●</li> </ul>
<p>Notes or Resources</p>	<ul style="list-style-type: none"> <li>● Chila AG, American Osteopathic Association. <i>Foundations of Osteopathic Medicine</i>. 3rd ed. Baltimore, MD: Lippincott Williams &amp; Wilkins; 2010. ISBN:978-0781766715.</li> <li>● Journal of Osteopathic Medicine. <a href="https://jom.osteopathic.org/">https://jom.osteopathic.org/</a>. 2021.</li> </ul>

<b>Osteopathic Principles for Professionalism</b>	
<b>Overall Intent:</b> To develop professional behavior built on the osteopathic foundations of treating the mind, body, and spirit as an interconnected unit	
<b>Milestones</b>	<b>Examples</b>
<p><b>Level 1</b> <i>Recognizes one's own bias in issues of culture, religion, age, gender, sexual orientation, and mental and physical disabilities as relates to the application of OPP</i></p> <p><i>Recognizes and honors a patient's decision about the treatment plan</i></p>	<ul style="list-style-type: none"> <li>● (I) Recognizes health care disparities surrounding pain management</li> <li>● (O) Understands how cerebral palsy impacts the method in which care can be delivered</li>   <li>● (I) Respects and honors a patient's decision to decline specific types of treatment in the inpatient setting, such as intubation for acute respiratory failure</li> <li>● (O) Respects and honors a patient's decision to decline specific types of osteopathic treatment such as HVLA</li> </ul>
<p><b>Level 2</b> <i>Respects patients' unique boundaries, including touch, and incorporates this into osteopathic patient care</i></p> <p><i>Respects patient dignity during diagnosis and treatment of somatic dysfunction utilizing OPP</i></p>	<ul style="list-style-type: none"> <li>● (I) Understands that in certain cultures male physicians cannot touch female patients and asks for permission to touch the patient</li> <li>● (O) Understands the impact of touch on a sexual assault patient</li>   <li>● (I) Ensures the patient is properly draped during the osteopathic exam</li> <li>● (O) Asks permission prior to and explains pelvic and sacral maneuvers</li> </ul>
<p><b>Level 3</b> <i>Incorporates patients' mind, body, and spiritual characteristics in the management of common osteopathic patient care situations</i></p> <p><i>Applies an osteopathic treatment approach to suit patient preferences while ensuring patient care needs are met</i></p>	<ul style="list-style-type: none"> <li>● (I) Respects a Jehovah's Witness's choice to decline blood products and offers reasonable alternatives</li> <li>● (O) Asks the patient about motivations to be healthy and achieve health goals</li>   <li>● (I) Provides adjunctive therapy for conditions like pneumonia such as rib raising or spiritual care consult</li> <li>● (O) Uses cervical myofascial release and achieved therapeutic goal while explaining why HVLA was not necessary, though HVLA was requested by the patient</li> </ul>
<p><b>Level 4</b> <i>Incorporates patients' mind, body, and spiritual characteristics into complex osteopathic patient care situations</i></p> <p><i>Develops leadership skills in the advancement of patient-centered osteopathic health care</i></p>	<ul style="list-style-type: none"> <li>● (I) Understands the need for timely completion of documentation of a recently deceased patient to allow for Jewish cultural burial traditions</li> <li>● (O) Addresses patient and family needs to introduce palliative care for a patient with multiple comorbidities and limited life expectancy</li>   <li>● (I) Works with a local osteopathic organization to improve access to osteopathic health care</li> <li>● (O) Works with state osteopathic organizations to improve patient-centered care in relation to bias in issues of sexual orientation</li> </ul>

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<p><b>Level 5</b> <i>Role models the integration of patients' mind, body, and spiritual characteristics, including use of touch, in all aspects of patient care</i></p> <p><i>Demonstrates leadership within and external to the institution in the advancement of patient-centered osteopathic health care</i></p>	<ul style="list-style-type: none"> <li>● (I) Showcases team-based care approaches for a patient with dementia who develops delirium while hospitalized</li> <li>● (O) Teaches medical students the importance of screening for social determinants of health and identifying care management resources</li> <li>● (I) Serves as a member of the hospital's Institutional Review Board (IRB) to ensure patient safety at a community level</li> <li>● (O) Holds a leadership position in a national osteopathic committee</li> </ul>
<p>Assessment Models or Tools</p>	<ul style="list-style-type: none"> <li>● Clinic rotation evaluations</li> <li>● Formal faculty direct observation evaluations</li> <li>● Internal clinic feedback</li> <li>● Morbidity and mortality conferences</li> <li>● Multisource feedback</li> <li>● Participation in intensive analysis</li> <li>● Patient satisfaction scores</li> <li>● Self-assessment</li> </ul>
<p>Curriculum Mapping</p>	<ul style="list-style-type: none"> <li>●</li> </ul>
<p>Notes or Resources</p>	<ul style="list-style-type: none"> <li>● Chila AG, American Osteopathic Association. <i>Foundations of Osteopathic Medicine</i>. 3rd ed. Baltimore, MD: Lippincott Williams &amp; Wilkins; 2010. ISBN:978-0781766715.</li> </ul>



<b>Osteopathic Principles for Interpersonal and Communication Skills</b>	
<b>Overall Intent:</b> To effectively describe, discuss, and encourage OPP to the interprofessional team and throughout the patientcare continuum	
<b>Milestones</b>	<b>Examples</b>
<p><b>Level 1</b> <i>Describes the osteopathic philosophy and unique practice of the osteopathic physician to patients, patients' families, and the interprofessional team</i></p> <p><i>Displays comfort when communicating with patients and their families, including attending to medical, psychosocial, and spiritual needs</i></p>	<ul style="list-style-type: none"> <li>● (I) Explains how a lymphatic technique can help fluid overload while updating the family on a patient's heart failure</li> <li>● (O) Uses patient-centered language to educate patients about the osteopathic philosophy in health care</li> <li>● (I) Takes steps to ensure that difficult conversations are conducted in private spaces with appropriate family and personnel present</li> <li>● (O) Takes a sexual history in a patient who identifies as LGBTQ+; clarifies the patient's preferred pronouns</li> </ul>
<p><b>Level 2</b> <i>Integrates and communicates the osteopathic philosophy and its unique practice habits, including the importance of touch, into patient care</i></p> <p><i>Engages in shared decision making in developing patient care, while addressing medical, psychosocial, and spiritual needs</i></p>	<ul style="list-style-type: none"> <li>● (I) Describes the benefits and the steps of an osteopathic manual adjustment of the sacrum during labor</li> <li>● (O) Communicates rationale for self-regulation and self-health and the added benefits of OMT for acute sinusitis</li> <li>● (I) Discusses religious beliefs about code status with the patient and family members</li> <li>● (O) Collaborates with patient to focus on lifestyle modification in the treatment of elevated blood pressure</li> </ul>
<p><b>Level 3</b> <i>Encourages others to describe the osteopathic philosophy and demonstrates appropriate role of touch in communication</i></p> <p><i>Encourages others to engage in shared decision making with patients, patients' families, and professional associates, while addressing medical, psychosocial, and spiritual needs</i></p>	<ul style="list-style-type: none"> <li>● (I) Suggests OMT as treatment option for a post-operative patient</li> <li>● (O) Explains to medical students the psychological impact of appropriate touch in the patient-physician interaction</li> <li>● (I) Encourages more junior residents to discuss patient spiritual needs and provide pastoral care as necessary</li> <li>● (O) Has the medical student call the pharmacy for prescription pricing and/or alternative medications to discuss with the patient</li> </ul>
<p><b>Level 4</b> <i>Self-evaluates the efficacy of one's patient-centered communication of osteopathic philosophy</i></p> <p><i>Creates communication across the local continuum of care to improve shared decision</i></p>	<ul style="list-style-type: none"> <li>● (I) Critiques one's own video of a presentation of an osteopathic treatment plan to a patient and recognizes omissions of information</li> <li>● (O) Reflects with preceptor about OPP in a treatment plan with a patient</li> <li>● (I) Communicates to outpatient care team to ensure optimal function for a patient with an extremity somatic dysfunction who is not approved for skilled nursing facility placement</li> </ul>

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<p><i>making in addressing medical, psychosocial, and spiritual needs</i></p>	<ul style="list-style-type: none"> <li>● (O) Discusses with a gastroenterology nurse practitioner how to address patient care needs and the patient’s understanding of a procedure in preparation for a colonoscopy for an adult autistic patient</li> </ul>
<p><b>Level 5</b> <i>Role models patient-centered communication of osteopathic philosophy</i></p> <p><i>Advocates nationally for shared decision making in addressing medical, psychosocial, and spiritual needs</i></p>	<ul style="list-style-type: none"> <li>● (I) Role models communication on inpatient OMT service to residents and medical students</li> <li>● (O) Role models development of outpatient plans for OMT patients across clinical services</li> <li>● (I) Recognizes deficiency in standards of advance care plans across the health care system</li> <li>● (O) Is an active member of a national committee against cyber bullying</li> </ul>
<p>Assessment Models or Tools</p>	<ul style="list-style-type: none"> <li>● Formal faculty direct observation and self illicit feedback</li> <li>● Internal clinic feedback</li> <li>● Multisource feedback</li> <li>● Patient satisfaction scores</li> <li>● Review of data from Press Ganey</li> <li>● Self-assessment</li> <li>● Video assessment/feedback</li> </ul>
<p>Curriculum Mapping</p>	<ul style="list-style-type: none"> <li>●</li> </ul>
<p>Notes or Resources</p>	<ul style="list-style-type: none"> <li>● AAACOM. Glossary of Osteopathic Terminology. <a href="https://www.aacom.org/docs/default-source/insideome/got2011ed.pdf">https://www.aacom.org/docs/default-source/insideome/got2011ed.pdf</a>. 2021.</li> <li>● Chila AG, American Osteopathic Association. <i>Foundations of Osteopathic Medicine</i>. 3rd ed. Baltimore, MD: Lippincott Williams &amp; Wilkins; 2010. ISBN:978-0781766715.</li> </ul>

### Available Milestones Resources

*Milestones 2.0: Assessment, Implementation, and Clinical Competency Committees Supplement*, new 2021 - <https://meridian.allenpress.com/jgme/issue/13/2s>

*Clinical Competency Committee Guidebook*, updated 2020 - <https://www.acgme.org/Portals/0/ACGMEClinicalCompetencyCommitteeGuidebook.pdf?ver=2020-04-16-121941-380>

*Clinical Competency Committee Guidebook Executive Summaries*, new 2020 - <https://www.acgme.org/What-We-Do/Accreditation/Milestones/Resources> - Guidebooks - Clinical Competency Committee Guidebook Executive Summaries

*Milestones Guidebook*, updated 2020 - <https://www.acgme.org/Portals/0/MilestonesGuidebook.pdf?ver=2020-06-11-100958-330>

*Milestones Guidebook for Residents and Fellows*, updated 2020 - <https://www.acgme.org/Portals/0/PDFs/Milestones/MilestonesGuidebookforResidentsFellows.pdf?ver=2020-05-08-150234-750>

Milestones for Residents and Fellows PowerPoint, new 2020 - <https://www.acgme.org/Residents-and-Fellows/The-ACGME-for-Residents-and-Fellows>

Milestones for Residents and Fellows Flyer, new 2020  
<https://www.acgme.org/Portals/0/PDFs/Milestones/ResidentFlyer.pdf>

*Implementation Guidebook*, new 2020 - <https://www.acgme.org/Portals/0/Milestones%20Implementation%202020.pdf?ver=2020-05-20-152402-013>

*Assessment Guidebook*, new 2020 - <https://www.acgme.org/Portals/0/PDFs/Milestones/Guidebooks/AssessmentGuidebook.pdf?ver=2020-11-18-155141-527>

*Milestones National Report*, updated each Fall - <https://www.acgme.org/Portals/0/PDFs/Milestones/2019MilestonesNationalReportFinal.pdf?ver=2019-09-30-110837-587> (2019)

*Milestones Bibliography*, updated twice each year - <https://www.acgme.org/Portals/0/PDFs/Milestones/MilestonesBibliography.pdf?ver=2020-08-19-153536-447>

*Developing Faculty Competencies in Assessment courses* - <https://www.acgme.org/Meetings-and-Educational-Activities/Other-Educational-Activities/Courses-and-Workshops/Developing-Faculty-Competencies-in-Assessment>

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Assessment Tool: Direct Observation of Clinical Care (DOCC) - <https://dl.acgme.org/pages/assessment>

Assessment Tool: [Teamwork Effectiveness Assessment Module \(TEAM\)](https://dl.acgme.org/pages/assessment) - <https://dl.acgme.org/pages/assessment>

Learn at ACGME has several courses on Assessment and Milestones - <https://dl.acgme.org/>