**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 indicated as unavailable in the appropriate place on the form. Once the form is 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 can 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](mailto:acgme-i@acgme-i.org).

Email questions regarding ADS to [ADS@acgme.org](mailto: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 experience for residents? (Limit 200 words)

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**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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| Click here to enter text. |

**Faculty**

Do all physician faculty members provide direct 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 there 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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1. Is instruction in other specialties conducted by physician faculty members with appropriate expertise? YES NO
2. Are there faculty members dedicated to integration of behavioral health into the educational program? YES NO

Explain if ‘NO’ to questions 4 and 5 above(Limit 200 words)

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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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**Other Program Personnel**

Is there a program coordinator? YES NO

Explain if ‘NO.’ (Limit 200 words)

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**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:
2. support continuous, comprehensive, convenient, accessible, and coordinated care to a panel of patients? YES NO
3. 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 either in the FMP site or immediately adjacent to it? YES NO

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

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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)

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| Click here to enter text. |

1. Using site numbers as assigned in ADS, check the appropriate box in the table below to indicate the staffing provided during required rotations at each of the planned participating sites. *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 Professionals** | |
| **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 the program uses any additional sites, describe the resources that will be available at each of these. (Limit 250 words)

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1. How does the program ensure that each FMP site used for resident education has a mission statement describing its dedication to education and to the care of patients? (Limit 300 words)

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1. How does the program ensure that other physician specialists and health care practitioners who provide care within the setting contribute to the educational experiences of the residents? (Limit 300 words)

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1. How does the program ensure that each FMP site uses outcome data to improve clinical quality, patient satisfaction, patient safety, and financial performance? (Limit 300 words)

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| Click here to enter text. |

1. Using 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.*

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Required Area** | **Participating Site Number from ADS –** *mark 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 |
| Contiguous space for residents’ clinical work and education |  |  |  |  |  |  |  |  |
| Computer access |  |  |  |  |  |  |  |  |
| Faculty member offices in the FMP site or adjacent to the FMP site office |  |  |  |  |  |  |  |  |
| Private area for resident precepting |  |  |  |  |  |  |  |  |
| Space for individual and small group counseling |  |  |  |  |  |  |  |  |
| Faculty offices accessible to the FMP site |  |  |  |  |  |  |  |  |
| Space for teaching conferences and and group meetings |  |  |  |  |  |  |  |  |

If the program uses additional sites, describe the resources that will be available at each site in the space below. (Limit 250 words)

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| Click here to enter text. |

1. Do the FMP sites receive advice from individuals outside the program on the health needs of the community? YES NO
2. If ‘YES’ to Question 9 above, are those advising the program demographically diverse and do they have experiences that are representative of the community? YES NO

Explain any ‘NO’ responses to Questions 9 and 10. (Limit 200 words)

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**Resident Appointment**

**Number of Residents**

* + - 1. How does the program ensure there are at least four residents at each educational level, or at least 12 on-duty residents? (Limit 300 words)

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| 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)

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| 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 examples of how ability is assessed in four of the six areas listed. (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)

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| 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 ability to:
   * + 1. address suffering in all its dimensions for patients and patients’ families;
       2. collect a complete initial data base and examination;
       3. define and expand the differential diagnoses list;
       4. formulate short- and long-term goals;
       5. identify the most likely diagnoses and establishment of a plan for diagnostic and treatment modalities;
       6. perform appropriate procedures; and,
       7. provide guidance to patients regarding advanced directives, end-of-life issues, and unexpected diagnoses/outcomes?

Provide examples of how competence is evaluated in four of the seven areas listed. (Limit 400 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate competence in providing care to geriatric patients, including the following?
   1. Assessing the health care needs of declining geriatric patients
   2. Delivering care in a long-term care facility, if available in the country or jurisdiction
   3. Delivering care in the home, FMP site, and hospital
   4. Delivering end-of-life care
   5. Providing preventive health care to promote independent living and maximizing function and quality of life

Provide examples of how competence is evaluated in all areas listed above. (Limit 300 words)

|  |
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| Click here to enter text. |

1. How do graduating residents demonstrate competence in providing care to patients who may become pregnant, including:
   1. diagnosing pregnancy;
   2. demonstrating basic skill in managing obstetrical emergencies;
   3. managing early pregnancy complications;
   4. performing an uncomplicated spontaneous vaginal delivery;
   5. providing care for common medical problems arising from pregnancy;
   6. providing low-risk prenatal care;
   7. providing options for education for unintended pregnancy, as permitted in the country or jurisdiction; and,
   8. providing postpartum care, to include screening and treatment for postpartum depression, breastfeeding support, and family planning?

Provide examples of how competence is evaluated in all areas listed above. (Limit 400 words)

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| Click here to enter text. |

1. How do graduating residents demonstrate competence in performing gynecological procedures? (Limit 250 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

Provide examples of how competence is evaluated in both areas listed. (Limit 300 words)

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1. How do graduating residents demonstrate competence in caring for children, including providing the following?
2. Care to ill children, to include recognition, triage, and stabilization for common illnesses and injuries
3. Preventive health care to children, to include for development, nutrition, exercise, and immunization that addresses the social determinants of health
4. Routine newborn care, to include neonatal care following birth

Provide examples 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 their ability to:
2. care for hospitalized patients having various levels of severity of illness;
3. diagnose and manage common dermatological conditions;
4. diagnose and manage common inpatient problems of adults and children as seen by family physicians; and,
5. provide supervision to others?

Provide examples of how competence is evaluated in three of the four areas listed. (Limit 300 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 will be 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 knowedge will be evaluated. (Limit 300 words)

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

Describe how this will be evaluated. (Limit 300 words)

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**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 life-long 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 that 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. Set learning and improvement goals
7. Systematically analyze clinical practice using quality improvement methods, and implement changes with the goal of practice improvement
8. Use information technology to optimize learning

Provide examples of how skills are assessed in four of the seven areas listed. (Limit 400 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, patients’ 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:

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

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, including presenting data to other members of the team and consultants;

educate patients and patients’ families about the diagnoses, evaluation, and treatment of disease, including obtaining informed consent when needed;

maintain comprehensive, timely, and legible medical records and construct a medical record summary with accuracy and in compliance with expected format;

participate in the education of students, residents, and other health professionals; and,

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

Provide examples of how ability is assessed in four of the seven areas listed. (Limit 400 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. advocate for quality patient care and optimal patient care systems;
   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. order diagnostic tests and therapeutics using a cost-conscious approach;
   5. participate in identifying system errors and implementing potential systems solutions;
   6. work effectively in various health care delivery settings and systems relevant to their clinical specialty; and,
   7. work in interprofessional teams using a systems-based approach to enhance patient safety and improve patient care quality?

Provide examples of how ability is assessed in four of the seven areas listed. (Limit 400 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**

1. How does the program ensure that assignment of rotations are structured to minimize the frequency of rotational transitions, and are of sufficient length to provide a quality educational experience that allows for continuity of patient care, ongoing supervision, and longitudinal relationships with faculty members? (Limit 250 words)

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| Click here to enter text. |

1. Is each resident assigned to a primary FMP site? YES NO

Explain if ‘NO.’ (Limit 250 words)

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| Click here to enter text. |

1. How does the program ensure residents’ other assignments do not interrupt continuity experiences in the FMP site 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 the period between interruptions in continuity experiences is at least four weeks in length? (Limit 300 words)

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| Click here to enter text. |

1. Do experiences in the FMP sites 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 residents are responsible for a panel of continuity patients, including 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. How does the program ensure that residents’ panel of patients is of sufficient size and diversity to ensure adequate education? (Limit 300 words)

|  |
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| Click here to enter text. |

1. Is the resident’s panel size and composition regularly assessed and rebalanced as needed? YES NO

Explain if ‘NO.’ (Limit 250 words)

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

1. Indicate the number of hours (or number of patient encounters where indicated) that residents have in each of the following clinical experiences.
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 an FMP site: # number of patient encounters
13. Participating in labor management and delivery management, and providing prenatal and postpartum care: # hours
14. Do residents have the following clinical experiences?
    1. Diagnosing and managing common dermatologic conditions YES NO
    2. Diagnosis and management of common mental illness, including psychopharmacology YES NO
    3. Interprofessional education in cognitive behavioral therapy and motivational interviewing YES NO
    4. Identification and treatment of substance use disorders YES NO
15. Diagnostic imaging pertinent to family medicine YES NO
16. Population health YES NO

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

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| Click here to enter text. |

1. How does the program ensure each resident has at least 150 patient encounters during the first year of the educational program? (Limit 250 words)

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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, as permitted in the country or jurisdiction YES NO
5. Well-woman care YES NO

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

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1. Does each resident’s experience in prenatal care, labor management, and delivery management include the following?
   1. Caring for pregnant patients in the outpatient setting YES NO
   2. Caring for postpartum patients, including care for parental-baby pairs YES NO
   3. Providing prenatal, intrapartum, and postpartum care of the same patient in a continuity care relationship 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. How is the list of procedural competencies that all residents are required to attain prior to graduation developed? Include how faculty members consider current practices, national data regarding procedural care in family medicine, and the needs of the community when the list was developed. (Limit 400 words)

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| Click here to enter text. |

1. How does the program ensure residents receive education and training in the clinical procedures listed in the response to Question 19? (Limit 400 words)

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

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| Click here to enter text. |

1. Describe how the program ensures that the curriculum is structured to facilitate learning that allows residents to function as part of an effective interprofessional team. (Limit 300 words)

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**Scholarly Activity**

1. How does the program ensure all residents complete two scholarly activities, at least one of which is a quality improvement project? Include how the program encourages dissemination of the residents’ scholarly projects through presentation or publication. (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 the 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:**

|  |
| --- |
| Y-1  01. Introduction to Family Medicine  a) Seminar  b) Required Y-1  c) Survey of contemporary methods and styles of family medicine, including approaches to clinical work with minority populations.  d) Weekly, for 8 sessions  02. Departmental Grand Rounds  a) Discussion groups  b) Required, Y-1, Y-2, Y-3; Elective Y-4  c) 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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| Click here to enter text. |