

Dually Accredited Residency Programs

Michael D. Adelman, DO

VP Academic Affairs & Dean

West Virginia School of Osteopathic Medicine

Program Choices

- Separate M.D. and D.O. Programs
- Parallel track programs
 - Run under one “roof”
 - Separate-but-equal programs
 - Some shared programming and lectures
 - Each take only their own certification boards.

Program Choices

- M.D. programs which preserve a specified number of slots for D.O.s
 - D.O.s in ACGME accredited programs may take M.D. Boards
 - In some instances may obtain a waiver for internship approval and board eligibility on A.O.A. side.

Program Choices

- Dually Accredited Residency Programs
 - Doesn't matter which program comes first
 - MD or DO
 - Some or All slots are accredited by both ACGME and A.O.A.
 - D.O. Residents may sit for both boards
 - Curriculum is the same and meets both standards

Dual Accreditation: West Virginia's Experience

“Experience is the name everyone gives to their mistakes.”

Oscar Wilde (1854 - 1900), *Lady Windermere's Fan*, 1892, Act III

How this will work

***“If you don’t know
where you are
going any road
will do”***



...Cheshire Cat

Current Status

- We currently have 42 dually accredited family practice residency slots in place
- We will have another FP program, an internal medicine program, and a pediatric program accounting for an additional 30 slots up and running in July.

Current Status

- We are projecting the addition of more than 50 additional dually accredited slots in FP, IM, EM, Pediatrics and potentially Surgery and OB by 2006.

“Bumps” in applying

- Matching RRC requirements to AOA requirements
- USMLE vs COMLEX
- Buy-in from facility
 - Administration
 - Clinicians
 - Faculty
- Matches do not come out at same time

“Bumps” in applying

■ Specialty College “concerns”

- Family Medicine –OK
- Internal Medicine – OK
- Pediatrics – OK
- ER –works with some “hoops”
- Orthopedics – Problems matching first year programs to allow for required Intern rotations on D.O. side.
- Surgery & Ob/gyn --??

- **“The whole problem with the world is that fools and fanatics are always so certain of themselves, but wiser people so full of doubts.”**

Bertrand Russell (1872 – 1970)

Advantages

- Larger applicant pool
- Can help fill programs
- More of a chance of getting better residents (both MD & DO)
- Can offer dual board certification
- AOA OPTI structure provides more support to programs
 - Faculty development
 - Helps develop and maintain enhanced academic programming
 - Additional support to the program director

Advantages

- Meets CMS requirements for # of years in a program depending on MD/DO.
 - Therefore: Hospital will get paid for all years of resident training
- More opportunity to recruit into your community
- Opportunity to share faculty

“The art of medicine consists in amusing the patient while nature cures the disease.”

Voltaire (1694 - 1778)

Disadvantages

- Two application processes
- Two inspection processes
 - ACGME
 - AOA
- Must meet ALL basic standards of both programs
- Duplicate fees
- Need dual program directors
 - More \$\$

Disadvantages

- Need a Director of Medical Education on D.O. side
- OPTI (Osteopathic Post Graduate Training Institute) costs
- More faculty
 - Must have some faculty who are board certified for MD and DO.
- Must participate in two matches and two scrambles

Disadvantages

- DO residents must meet dual requirements (ACGME and AOA), MD residents need only meet ACGME requirements
- CORE Competencies
 - 6-allopathic
 - 7-Osteopathic
 - Each with different “tool boxes” and assessments
- Providing required Osteopathic Principles & Practice curricular needs

Conclusions

- The Advantages to the hospitals and the programs far outweigh the disadvantages
- The dually accredited programs are stronger academically than prior to dual accreditation
- All of our dually accredited programs fill
- All have their choice of the best candidates

Conclusions

- The hospitals have benefited economically
- More of these residents have been recruited to stay in the community

“Wisdom doesn't automatically come with old age. Nothing does - except wrinkles. It's true, some wines improve with age. But only if the grapes were good in the first place.”

Abigail Van Buren (1918 -), 1978

