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AMERICAN OSTEOPATHIC ASSOCIATION

# **Crosswalk Workbook**

**For**

**Fellowship Training**

**In**

**Medical Toxicology**

**American College of Osteopathic Emergency Physicians  
And the  
American Osteopathic Association**

Revised, BOT 2/2006  
Revised, COPT/11/2007  
ACOEP – 04/2011

## INSTRUCTIONS AND PURPOSE

This evaluative workbook is a companion document to the Basic Standards for Residency Training in Medical Toxicology. The purpose of this document is to assist evaluators and institutions that are either currently sponsoring fellowship training in medical toxicology, or to assist those seeking to sponsor a program, to determine if they meet the minimum standards for accreditation.

Programs shall be evaluated according to the scale at the end of this document based on the degree of compliance.

New programs shall submit information to substantiate how the standard shall be met by the time the fellows enters training and evidence of the mechanism by which the program is currently meeting the standard. All new programs are required to submit a completed “Crosswalk Evaluation” document with their completed application to illustrate that a self examination by the program was completed. New program applications may not be considered until a pre-inspection score meets the for minimal point value for 1 year approval. **Please do not submit extraneous information.**

Section One of this document provides an overall summary of the program, including statistical information and summaries of curriculum vitae of the program’s director, department chair, and core faculty.

Section Two shall provide programs with the current standards that shall be met to determine the approval or disapproval of the program. New programs meeting the standards on the approval scale shall be granted approval for one year with another evaluation visit scheduled within that time frame of the first fellow beginning training. The scale at the end of this document shall be used as a guideline by the Committee on Graduate Medical Education to determine the duration of approval.

## SECTION ONE

### 1. Basic Program Information

<b>Date:</b>		
<b>Title of Program:</b>		
<b>Number of Positions Approved:</b>	<b>Funded:</b>	<b>Filled:</b>
<b>Name and Address of Institution:</b>		
<b>Telephone Number of Institution:</b>		
<b>OPTI Sponsorship:</b>		
<b>Name and Address of OPTI Coordinator:</b>		
<b>Telephone Number of OPTI Coordinator:</b>		
<b>Name of Director of Osteopathic Medical Education:</b>		
<b>Name of Program Director:</b>		
<b>Mailing Address of Program Director:</b>		
<b>Telephone Number of Program Director</b>		
<b>Fax:</b>		
<b>E-Mail Address:</b>		

**Instructions:** Please complete the following for each institution utilized in the training of medical toxicology fellows. List the base institution first, followed by the institution at which medical toxicology rotations are performed, followed by institutions at which other rotations are performed. You may copy these pages as needed.

Base Institution		
Name and Address:		
Percent of time spent at this institution:		
Fellow Rotation (in months/blocks)	OGME5	OGME6
CEO / Director / President Name		
Accreditation:	HFAP (AOA)	JCAHO

**THE FOLLOWING INFORMATION CONCERNS INSTITUTIONS THAT ARE NOT THE BASE INSTITUTION.**

Participating Institution A		
Name and Address:		
Is this institution integrated or affiliated with the program?		
Rotation:		
Does this institution also sponsor its own (separate) program in this specialty area? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Does it participate in any other AOA/ACGME accredited programs? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Type of rotation: <input type="checkbox"/> <b>Elective</b> <input type="checkbox"/> <b>Required</b> <input type="checkbox"/> <b>Both</b>		
Fellow Rotation (in months/blocks)	OGME5	OGME6
CEO / Director / President Name		
Accreditation:	HFAP (AOA)	JCAHO



## 2. Program Changes

If applicable, describe changes, other than those included in the response to previous citations and/or concerns (above) that have been implemented since the last evaluation survey and review. Include changes in sponsoring institutions, organizations, hospitals, core faculty, required rotations, fellow complement, and the date that the ACOEP was notified of these changes.

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List any institutions that have been added or deleted from your previously accredited program.

<b>Added</b>	
<b>Deleted</b>	

3. **Fellows**

<b>Training Year</b>	<b>OGME-5</b>	<b>OGME-6</b>
<b>Positions Filled</b>		

If this is a new program, number of fellow positions applied for \_\_\_\_\_

A. List all fellows enrolled for the current academic year. Please copy if more space is needed.

<b>Name</b>	<b>Year in Program</b>	<b>Year of Med School Graduation</b>	<b>Program Start Date</b>	<b>Expected Completion Date</b>

#### 4. Program Director & Core Faculty

##### Summary of Curriculum Vitae

The following form should be attached to the front of the curriculum vita of each member of the medical toxicology core faculty, including the program director and submitted with the pre-evaluation information.

Name		Academic Rank		
Assigned Institution (Primary clinical responsibility)				
Check one: <input type="checkbox"/> Full time (more than 30 hours week) <input type="checkbox"/> Part time				
Certification		Year Issued		
Certificate Number		Year Recertified		
Medical School		Year of Graduation		
<b>POSTGRADUATE TRAINING</b>				
<u>Institution</u>		<u>Specialty</u>		<u>Dates</u>
<b>SCHOLARLY ACTIVITY</b>				
<u>Activity / Location</u>		<u>Major / Minor</u>		<u>Dates</u>
<b>HOURS PER WEEK SPENT IN:</b>				
Clinical Supervision				
Administration				
Research				
Didactics / Teaching				

Scholarly activities are described at length in the Basic Standards, VI, D, 6.3, 6.4 and 6.5



## 5. Patient Population

Please copy this page as needed for institutions sponsoring medical toxicology fellowships.

For the most recent 12-month period	From:	To:		
	<u>Base Institution</u> (Primary Teaching Site)	<u>Institution A</u>	<u>Institution B</u>	<u>Institution C</u>
Total Patients				
Percent of Pediatric patients*				
Percent of Adult patients				

\*Ages 0 – 18 years

TOTAL number of Patients by Clinical Conditions	<u>Base Institution</u> (Primary Teaching Site)	<u>Institution A</u>	<u>Institution B</u>	<u>Institution C</u>
Trauma				
Surgical (non-trauma)				
Medical				
Obstetrics/Gynecological				
Psychiatric				
Percentage of ED patients admitted				
Percentage of patients admitted to Critical Care units				
Percentage of patients referred from Poison Control Centers				

**ROTATION SCHEDULE:**

Complete the annual schedule for the fellows in each OGME year (either 13 blocks of using 4 weeks or 12 blocks per year if using monthly schedule). If this is a new program, please list a proposed schedule. Indicate the hospital that shall be hosting the rotation if other than base institution. The following minimum rotations are required:

<b>OGME 5</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>
<b>Base Institution</b>													
<b>Institution A</b>													
<b>Institution B</b>													
<b>Institution C</b>													

Comments:

<b>OGME 6</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>
<b>Base Institution</b>													
<b>Institution A</b>													
<b>Institution B</b>													
<b>Institution C</b>													

Comments:

1. **Standards for Curriculum, Instruction, and Evaluation**

Please list the last 12 months of your conference schedule, including presenting faculty. New programs should complete a proposed 12-month schedule, including proposed faculty.

Does the program offer its fellows an average of at least 4-hours each week of planned educational experiences developed by the program?	Yes	No
What percentage of formal didactic conferences are presented by the following individuals:		
Medical Toxicology Core Faculty		%
Emergency Medicine Faculty		%
Other Faculty		%
Toxicology Fellows		
Other (please specify)		%
<b>Total</b>		<b>100%</b>
What percent of planned conferences does the average fellow attend?		%
Does the base institution have separate and distinct office space for faculty, fellows/residents, and staff?		
		<input type="checkbox"/> Yes <input type="checkbox"/> No
Is each department where rotations occur for this program, staffed by physicians who fulfill the faculty requirements on duty 24 hours daily?		
		<input type="checkbox"/> Yes <input type="checkbox"/> No

## INSTRUCTIONS

The following section lists each standard found in the Basic Standards for Residency Training in Medical Toxicology. Each standard has been weighted on a scale of 1 to 3. Evaluators shall determine the severity of the deficiency and shall assign a value to the deficiency. No other fraction of points may be considered.

Deficiency scores shall be totaled at the end of the section individual deficiencies noted shall be addressed in the appropriate section, with evaluators explaining how the standard is not met.

Evaluators shall indicate if each standard is “met,” or “not met.”

The scale by which the approval period is determined is as follows:

- 5 year approval = 100 – 95% compliance (100 to 95 points)
- 4 year approval = 94 – 90% compliance (94 to 90 points)
- 3 year approval = 89 – 85% compliance (89 to 85 points)
- 2 year approval = 84 – 71% compliance (84 to 71 points)
- 1 year approval  $\geq$  70% compliance (probation without recruitment) (= / > 70 points)

Please note: the scoring system is used as a guideline and final recommendations fall to the discretion of the Committee on Graduate Medical Education (CGME) of the American College of Osteopathic Emergency Physicians (ACOEP).

Standard No.	Points	Standard	Suggested Documentation/ Interviews for Verifying Compliance	Pre-Site Visit (PD Self Study)		Current Review (Site Reviewer)		Prior Review
				Met	Not Met	Met	Not Met	Not Met
<b>4.</b>		<b>INSTITUTIONAL REQUIREMENTS</b>						
<b>A.</b>		<b>Department of Emergency Medicine</b>						
		The Department of Emergency Medicine at the base institution shall:						
<b>4.1</b>		Have a chairperson who is currently certified in emergency medicine by the AOA through the American Osteopathic Board of Emergency Medicine (AOBEM) or the American Board of Emergency Medicine (ABEM). He or she shall maintain continuous certification. Lifetime certificate holders are not exempt from this recertification requirement.	CV of Chair. Verification of certification and/or recertification in required time line with AOBEM/AOA or ABEM View actual certificate					
<b>4.1.1</b>	<b>1</b>	The Chair of the department may not be the program director of the fellowship.	Faculty roster					
<b>4.2</b>	<b>1</b>	Have a program director that fulfils the requirements for core faculty.	Department staffing records					
<b>4.2.1</b>	<b>1</b>	The institution must compensate the program director for at least 12 hours of non-clinical time per week.	Department staffing records Medical Staff Office					
<b>4.3</b>		Have faculty and core faculty to teach and supervise fellows.	Department staffing records					
<b>4.3.1</b>	<b>2</b>	The role and duties of the core faculty shall be clearly defined. This requires at least four (4) hours of compensated, non-clinical time per week.	Program description Departmental staffing records Medical Staff Office					
<b>4.4</b>	<b>2</b>	Ensure that all physicians that are clinically supervising medical toxicology fellows are certified by the appropriate AOA certifying board or the recognized certifying board recognized by the ABMS or in the process of being certified.	Physician CV; view certificate Verify certification and/or re-certification with AOBEM/AOA or ABEM					
<b>4.5</b>	<b>1</b>	Have a minimum of one (1) core faculty member for every four (4) fellows.	Department staffing roster Interview staff and fellows					
<b>4.6</b>	<b>1</b>	Have the scope, volume, and variety to support a fellowship with at least two (2) approved fellowship positions per year. A minimum volume of 30,000 Emergency Department visits annually at the base institution is required.	Annual departmental statistics Tour facilities					

Standard No.	Points	Standard	Suggested Documentation/ Interviews for Verifying Compliance	Pre-Site Visit (PD Self Study)		Current Review (Site Reviewer)		Prior Review
				Met	Not Met	Met	Not Met	Not Met
4.7		Maintain active affiliations with:						
4.7.1	1	Poison control center(s) serving large geographical area(s) and certified by the American Association of Poison Control Centers (AAPCC).	Program description Fellow schedules View affiliation agreements					
4.7.2	1	Schools of pharmacology with active programs in medical toxicology, clinical pharmacology and pharmacokinetics.	Program description Fellow schedules View affiliation agreements					
4.7.3	1	School(s) of public health with programs in epidemiology, biostatistics and occupational and environmental health.	Program description Fellow schedules View affiliation agreements					
4.8	1	Provide experience and training in the management of toxicology patients. This training should take place at the base hospital and its affiliated sites.	Program description Fellow schedules View affiliation agreements					
4.9	1	Adopt formal program and departmental policies that are shared with the fellow upon commencement of training and develop a fellow manual that includes the complete medical toxicology curriculum.	Program description Fellow manual Fellow interviews View affiliation agreements					
<b>Program Director Section Comments:</b>								
<b>Site Evaluator's Section Comments</b>								

Standard No.	Points	Standard	Suggested Documentation/ Interviews for Verifying Compliance	Pre-Site Visit (PD Self Study)		Current Review (Site Reviewer)		Prior Review
				Met	Not Met	Met	Not Met	Not Met
5		<b>PROGRAM REQUIREMENTS AND CONTENT</b>						
A.		<b>Curriculum</b>						
	3	The medical toxicology program shall create and adhere to a two-year curriculum (OGME-5 to OGME-6) that meets or exceeds the requirements listed within this document.	Program description Program goals & objectives					
5.1	1	Each program shall have a written, curriculum on file at its institution that is updated and distributed annually to all fellows.						
5.2		Progression through the fellowship program shall be based upon the following:						
5.2.1	1	Meeting stated goals and objectives of the program.						
5.2.2	1	Demonstrating increasing competence in skills and techniques.						
5.2.3	1	Proficiency in the use of diagnostic and therapeutic modalities.						
5.2.4	1	Ongoing demonstration of professional behaviors.						
5.3	1	The curriculum shall be evaluated and updated annually by faculty and fellows.						
B.		<b>Rotation Structure</b>						
5.1	3	Each fellow shall complete the following 24 month program. The following may be scheduled as one-month blocks or four-week rotations or any combination thereof.						
5.1.1		Medical toxicology as presented by patients through:						
5.1.1.1		Hospital and outpatient settings such as emergency departments, intensive care units, medical and surgical units.						
5.1.1.2		Regional Poison Control Centers						
5.1.1.3		Occupational and public health programs in hospital wards, clinics or affiliated industrial programs.						

Standard No.	Points	Standard	Suggested Documentation/ Interviews for Verifying Compliance	Pre-Site Visit (PD Self Study)		Current Review (Site Reviewer)		Prior Review
				Met	Not Met	Met	Not Met	Not Met
5.1.2		Pharmacology / toxicology	Fellow schedules; Interview fellows					
5.1.3		Epidemiology	Fellow schedules; Interview fellows					
5.1.4		Biostatistics	Fellow schedules; Interview fellows					
5.1.5		Study design	Fellow schedules; Interview fellows					
5.1.6		Pharmacokinetic	Fellow schedules; Interview fellows					
5.1.7		Forensic medicine	Fellow schedules; Interview fellows					
<b>C.</b>		<b>Didactic Educational Activities</b>						
5.1	1	The program shall provide a minimum of four (4) hours of didactic educational activity per week	Didactic lecture schedules Fellow interviews					
5.1.1	1	Core faculty shall be involved in both the planning as well as the administration of the educational activities.	Didactic lecture schedules Staff and fellow interviews					
5.1.2	1	These activities shall be based upon the two-year core curriculum.	Didactic lecture schedules Program description					
5.1.3	1	The content shall be covered in its entirety at least once during the fellowship training program.	Didactic lecture schedules Program description					
5.1.4	1	Greater than fifty percent of these activities shall be planned and presented by non-fellow educators.	Didactic lecture schedules Fellow interviews					
5.1.5	1	The core faculty and fellows shall participate in required OPTI educational programs.	Didactic lecture schedules Staff and fellow interviews					
5.1.6	2	Fellows shall be excused from all in-house clinical duties to attend these activities.	Fellow interviews Didactic lectures schedules					
5.1.7	2	Fellows are required to attend the didactic activities unless excused by the program director.	Fellow interviews Didactic lectures schedules					

Standard No.	Points	Standard	Suggested Documentation/ Interviews for Verifying Compliance	Pre-Site Visit (PD Self Study)		Current Review (Site Reviewer)		Prior Review
				Not	Not Met	Met	Not Met	Not Met
<b>D.</b>		<b>Professional Development</b>						
	<b>1</b>	Programs should encourage fellows to:						
<b>5.1</b>		Participate in available seminars, workshops and conferences provided through regional, state and national professional organizations.	Fellow schedules and interviews					
<b>5.2</b>		Learn teaching skills by actively participating in the process of instructing medical students, residents, other fellows and allied health professionals.	Fellow schedule; lecture schedules; interviews with fellows and faculty					
<b>Program Director Section Comments:</b>								
<b>Site Evaluator's Section Comments</b>								
<b>6.</b>		<b>PROGRAM DIRECTOR / FACULTY</b>						
<b>A.</b>		The institution shall have a program director and appropriately qualified faculty and core faculty in place prior to applying for approval and shall maintain this faculty during the term of approval of the program. Only programs maintaining adequate faculty shall be eligible for approval or continuance of approval.	Physician roster Department roster Physician CVs					
<b>6.1</b>	<b>3</b>	Any proposed changes in program director or core faculty staffing shall be submitted in writing and approved by the ACOEP Committee on Graduate Medical Education prior to appointment, as applicable.	Departmental correspondence					

Standard No.	Points	Standard	Suggested Documentation/ Interviews for Verifying Compliance	Pre-Site Visit (PD Self Study)		Current Review (Site Reviewer)		Prior Review
				Met	Not Met	Met	Not Met	Not Met
<b>B.</b>		<b>Program Director</b>						
6.1	1	The sponsoring institution shall designate an osteopathic medical toxicologist as program director who has sufficient time for both program administration and clinical instruction. Appointments are subject to the approval of the ACOEP Committee on Graduate Medical Education, as applicable and subsequent registry by the AOA.	Department roster Program director's position description Physician CV					
6.2	3	The program director may not serve as or act in the capacity of the chair of the department of emergency medicine, or as program director of more than one residency or fellowship program. He or she may be the director of medical education if the institution has three or fewer osteopathic residency or fellowship programs.	Department roster Program director's position description Physician CV					
6.3		The program director of the medical toxicology fellowship shall possess the following qualifications:						
6.3.1	1	Active, full-time staff membership (a minimum of 30 hours per week which includes clinical as well as educational activities) within the department or section of emergency medicine at the base institution.	Department roster Physician schedules Medical Staff Office					
6.3.2	1	Certification by the AOA through the appropriate certifying board in emergency medicine, internal medicine, pediatrics or preventive medicine by the appropriate AOA certifying board or in the process of being certified and recertified within the prescribed time frame of the respective osteopathic specialty board. He or she shall maintain continuous certification. Lifetime certificate holders are not exempt from this recertification requirement.	Program Director's CV Verification from appropriate certifying agency View actual certificate					
6.3.2	1	Additional credentialing with a Certificate of Added Qualification in medical toxicology by the AOA through the American Osteopathic Board of Emergency Medicine and recertified within the prescribed time frame of the AOBEM. He or she shall maintain continuous certification in medical toxicology.	Program Director's CV Verification from appropriate certifying agency View actual certificate					

Standard No.	Points	Standard	Suggested Documentation/ Interviews for Verifying Compliance	Pre-Site Visit (PD Self Study)		Current Review (Site Reviewer)		Prior Review
				Met	Not Met	Met	Not Met	Not Met
6.3.3	1	Membership in the American College of Osteopathic Emergency Physicians (ACOEP).	ACOEP annual correspondence verifying physician membership					
6.3.4	1	Specialty expertise and documented educational and administrative experience acceptable to the Committee on Graduate Medical Education of ACOEP.	Physician CV Physician interview					
6.3.5	1	Three (3) years experience as core faculty within a medical toxicology fellowship, or full time practice of medical toxicology for a minimum of five (5) years.	Physician CV Physician interview					
6.3.6	1	Fulfill and maintain the qualifications as a core faculty member of a medical toxicology fellowship, in addition to administrative and demonstrated leadership skills, and completion of the AOA's Continuing Medical Education requirements, emergency medicine training skills, and faculty development.	Physician CV AOA CME verification					
6.4		The program director shall have the following responsibilities:						
6.4.1	1	Direct the medical toxicology fellowship and ensure that the fellow receives the training outlined in the written program description.	Program Director interview Program description Fellow interviews					
6.4.2	1	Ensure the arrangements of outside rotations with formal affiliation agreements as needed to meet the program's educational objectives.	Review affiliation agreements Program objectives Program director & fellow interviews					
6.4.3	1	Evaluate the fellows, faculty, and the medical toxicology fellowship program.	Fellow and faculty files for verification of reviews					
6.4.4	1	Submit reports to the ACOEP as required.	ACOEP verification					
6.4.5	1	Verify the completion of didactic and clinical schedules.	Review schedules					

Standard No.	Points	Standard	Suggested Documentation/ Interviews for Verifying Compliance	Pre-Site Visit (PD Self Study)		Current Review (Site Reviewer)		Prior Review
				Met	Not Met	Met	Not Met	Not Met
6.4.6	1	Actively participate in postdoctoral education and training at the base institution.	Department schedules Fellow interviews					
6.4.7	1	Notify the ACOEP of all fellows in training on an annual basis.	ACOEP verification					
6.4.8	1	Participate in the annual ACOEP Program Directors' Faculty Development Workshop. Attendance at this annual conference is mandatory for the program director or his/her designee. The program director shall attend a minimum of once every two years.	ACOEP verification AOA CME verification					
6.4.9	1	Ensure that the program complies with the standards, policies, and procedures of the AOA.	Program director interview Program description					
6.4.10	1	Prepare for and participate in the AOA inspection of the program in cooperation with the Division of Postdoctoral Education and the designated evaluator.	Pre-evaluation documents Correspondence between PD and Evaluator					
6.4.11	1	Inform the AOA, OPTI, and ACOEP's Committee on Graduate Medical Education of major changes in the program, including but not limited to, changes in institutional ownership, affiliation, department chair, or other major administrative changes within thirty (30) days of their occurrence.	CGME Minutes ACOEP/AOA verification					
6.4.12	1	Develop written goals and objectives for each rotation and maintain these through periodic updating.	Program description					
6.4.13	1	Maintain the appropriate ratio of qualified core faculty for the program.	Department staffing documents					

Standard No.	Points	Standard	Suggested Documentation/ Interviews for Verifying Compliance		Pre-Site Visit (PD Self Study)		Current Review (Site Reviewer)		Prior Review
					Met	Not Met	Met	Not Met	Not Met
<b>C.</b>		<b>Core Faculty</b>							
<b>6.1</b>		<b>Requirements</b>							
<b>6.1.1</b>	2	The program director shall designate a minimum of two (2) core faculty who shall participate in the medical toxicology fellowship program.	Department/program roster Department schedules						
<b>6.1.2</b>	2	Additionally, a minimum of one core faculty member for every four (4) fellow shall be maintained.	Department/program roster						
<b>6.1.3</b>	1	A minimum of fifty percent (50%) of the core faculty shall be osteopathic medical toxicologists who participate in the training of fellows	Department/program roster						
<b>6.1.4</b>	2	The program director may be counted as a member of the core faculty	Department/program roster Program director CV						
<b>6.2.</b>	3	<b>Qualifications</b>							
		Core faculty shall meet the following qualifications prior to and throughout the duration of their appointment:							
<b>6.2.1</b>		Core faculty members are specifically designated, full-time members of the Department of Emergency Medicine at the base institution. Full time is defined as a minimum of 30 hours per week which includes clinical as well as educational activities	Physician position descriptions Departmental schedules Physician interviews						
<b>6.2.2</b>		Core faculty members shall be certified or an active candidate in the process of certification by the AOA/AOBEM or ABEM. He or she shall maintain continuous certification. Lifetime certificate holders are not exempt from this recertification requirement.	Physician CV Verification by appropriate certifying agency View actual certificate						

Standard No.	Points	Standard	Suggested Documentation/ Interviews for Verifying Compliance	Pre-Site Visit (PD Self Study)		Current Review (Site Reviewer)		Prior Review
				Met	Not Met	Met	Not Met	Not Met
6.3	3	Scholarly Activity						
6.3.1		Scholarly activity should occur within a four-year period. Acceptable activities may include a minimum of 2 major or 1 major and 2 minor scholarly activity within this time frame for each core faculty member. Other activities may be accepted on an individual basis at the discretion of the committee on graduate medical education. Scholarly activity for each core faculty scholarly activities shall be well documented, to include dates, locations, and details.	Physician CV Physician files					
6.6		<b>Responsibilities</b>						
6.6.1	2	Core faculty shall be involved in the preparation and presentation of didactic educational program, such as formal lectures, case conferences and journal clubs and other requirements of the core curriculum.	Department didactic lecture schedule; Physician CV; Didactic program attendance records					
6.6.2	2	Core faculty shall attend a minimum of 33% of the program's required didactic educational activities.	Didactic program attendance records					
6.6.3	1	Core faculty shall encourage and support fellows in scholarly activities and act as mentors for required research projects.	Fellow and faculty interviews					
6.6.4	2	Core faculty shall be provided sufficient non-clinical time to provide instruction, leadership and participation in scholarly activities.	Department staffing records Medical Staff Office records Contract review; faculty interviews					
<b>Program Director Section Comments:</b>								
<b>Site Evaluator's Section Comments</b>								

Standard No.	Points	Standard	Suggested Documentation/ Interviews for Verifying Compliance	Pre-Site Visit (PD Self Study)		Current Review (Site Reviewer)		Prior Review
				Met	Not Met	Met	Not Met	Not Met
7.0		<b>FELLOW REQUIREMENTS</b>						
7.1		The fellow shall be board eligible/board certified in emergency medicine, pediatrics, internal medicine or preventive medicine through the AOA and the respective certifying boards upon entry into the program.	Verification from appropriate certifying agency View actual certificate					
7.2		The fellow shall be a member of the ACOEP and maintain membership in the ACOEP throughout their term of training.	ACOEP annual verification to individual physicians					
7.3	1	Each fellow shall adhere to established policies and procedures for fellowship training, as outlined in this document, and in the fellow manual.	Fellow files					
7.4	1	The fellow shall progressively assume responsibility for patient care during the fellowship program, so that by the final year the fellow shall be able to assume complete management of all assigned cases.	Fellow files					
7.5	1	The fellow shall maintain formal records and logs of all activities related to the educational program. These records and logs shall be submitted monthly to the program director for review and verification. Copies of these records and logs shall be kept on permanent file by the administration at the base institution and shall be available at the time of the inspection. These records and logs should document the fulfillment of the requirements of the program, describing the volume, variety, and scope, and progressive responsibility on the part of the fellow for cases and procedures performed under supervision.	Fellow procedures logs Resident files Fellow and Program Director interviews					

Standard No.	Points	Standard	Suggested Documentation/ Interviews for Verifying Compliance	Pre-Site Visit (PD Self Study)		Current Review (Site Reviewer)		Prior Review
				Met	Not Met	Met	Not Met	Not Met
7.6	3	The fellow shall complete one substantive research project related to medical toxicology during the program that is approved by the program director. The completed research project must be submitted to the ACOEP in a publishable format during the final six months of the program.	Evidence of review of project from ACOEP Fellow interview Program Director interview Fellow file					
7.7	1	The fellow shall be required to participate in professional staff activities, e.g. department meetings, hospital committees, house/staff associations, OPTI committees.	Didactic program attendance records Fellow schedules Fellow and Program Director interviews					
<b>Program Director Section Comments:</b>								
<b>Site Evaluator's Section Comments</b>								

Standard No.	Points	Standard	Suggested Documentation/ Interviews for Verifying Compliance	Pre-Site Visit (PD Self Study)		Current Review (Site Reviewer)		Prior Review
				Met	Not Met	Met	Not Met	Not Met
8		<b>EVALUATION</b>						
8.1	2	The curriculum shall be evaluated annually by faculty and fellows as a method for revision and updating of the documents.	Program manual; Fellow files; Interviews with fellows and faculty					
8.2	1	The program director, with faculty input, shall complete written quarterly evaluations of fellow performance. This should include evaluations from all affiliated training sites and supplemented rotation sites.	Program manual; Fellow files; Interviews with fellows and faculty					
8.3	1	Fellow Evaluations shall be learner-centered, developmental, foster continuous improvement, and based upon educational objectives for each assignment and program activity.	Fellow files; Interviews with fellows and faculty					
8.4	2	Completed evaluations shall be shared with the fellow in consultation for improvement. They shall be signed by the program director and fellow to document that evaluation and counseling have occurred quarterly as required. Copies of evaluations should be made available to the fellow.	Fellow files; Interviews with fellows and faculty					
8.5	2	The program director shall document that fellow requiring remediation, redirection, or counseling as a result of the evaluation process must be given feedback and a corrective action plan in a timely manner. There shall be documentation of follow-up evaluations of these fellows.	Fellow files; Interviews with fellows and faculty					
8.6	1	The fellows shall anonymously evaluate faculty on an annual basis.	Fellow files; Interviews with fellows and faculty					
<b>Program Director Section Comments:</b>								
<b>Site Evaluator's Section Comments</b>								

### ACOEP Program Evaluation Summary

**Directions:** Please review the previous section and note all standards that you have marked as “not met” on the table. On the table below, note the standard number that matches the sections marked as non-compliant and note your reason for the Standard being unmet. You may copy this form as needed

Standard Reference	Reason for Non-Compliance	Score

Standard Reference	Reason for Non-Compliance	Score