



## PRIMARY CARE OSTEOPATHIC SPORTS MEDICINE PROGRAM DESCRIPTION

GARDEN CITY HOSPITAL  
GARDEN CITY, MICHIGAN

### 1. Overview

- a. Garden City Hospital ("GCH") seeks to offer a one-year Primary Care Osteopathic Sports Medicine subspecialty residency training program ("Residency"). The Residency will provide subspecialty training in Sports Medicine for those Osteopathic physicians who have completed initial residency training in Family Medicine, Internal Medicine, Pediatrics, Physical Medicine and Rehabilitation (PM&R), OMM/Neuromusculoskeletal Medicine, Occupational-Preventative Medicine, or Emergency Medicine.
- b. Successful completion of the structured curriculum of 12 months will enable the Resident to sit for the examination for Board Certification of Added Qualifications in Osteopathic Sports Medicine through his/her own primary certifying board. This certification is awarded by the American Osteopathic Academy of Sports Medicine and the American Osteopathic Association.

### 2. Program Mission Statement

- a. The purpose of the Residency is to provide physicians with training in Sports Medicine leading to competency in diagnosis, treatment and preventive care of patients engaged in athletics and exercise.

### 3. Program Goals and Objectives

The goals and objectives of the Residency are:

- a. To develop competency in diagnosis, treatment, and preventative care relative to Sports Medicine via an organized curriculum of clinical and didactic experiences
- b. To focus on Primary Care, Physical Medicine and Rehabilitation, Orthopedics, and other subspecialties
- c. To incorporate a multidisciplinary approach including psychologists, podiatrists, nutritionists, physical therapist and trainers, as well as other health care practitioners that deal with the overall well being of the athlete.
- d. To permit Residents to focus on aspects of Sports Medicine within their areas of interest.
- e. To maintain clinical skills within the Resident's primary specialty

#### 4. Program organization

##### a. Overview of curriculum

- i. Expectations of the Resident shall be broad and varied, much like a daily Sports Medicine practice. Not only will the Resident attend assigned rotations and sporting events, instruction will be provided through a multidisciplinary model. This will involve various Medical Staff Departments including Family Medicine, Pediatrics, Emergency Medicine, Physical Medicine and Rehabilitation, Internal Medicine (with specific interest in Cardiology, Neurology and Endocrinology), Orthopedic Surgery, Neurological Surgery, Radiology and Podiatry.
- ii. The Residency will maintain an Osteopathic focus through a one month rotation devoted the diagnostic skills, treatment, and prevention associated with the Osteopathic Practices and Principles, as well as use of OPP/OMM in the clinic setting.
- iii. All rotations will focus on the diagnosis, treatment, rehabilitation, and even more important – prevention of sports related injuries. Within this framework, attention will be paid to the concept of the Industrial Athlete, chronic repetitive injury patterns, psychology of sports, and sports nutrition.

##### b. Facilities

- i. Garden City Hospital (“GCH”) will serve as the sponsoring institution for the Residency. GCH is accredited by the Healthcare Facilities Accreditation Program (HFAP) and is a full-service acute care community hospital. Medical and surgical subspecialty consultation, diagnostic and ancillary services are available at GCH.
- ii. GCH has sponsored Osteopathic internship, residency and fellowship programs since the 1950's. GCH is a member institution of the Statewide Campus System - Michigan State University College of Osteopathic Medicine.
- iii. Residency training will be carried out primarily within Garden City Hospital and its outpatient clinical sites. Affiliation agreements will be executed for any rotations outside GCH.
- iv. Sports Medicine Clinic: Residents will have ongoing participation in Sports Medicine Clinic at the Westland Specialty Center office under the supervision of a certified Sports Medicine physician. The clinic includes in-office radiography and access to on-site certified athletic trainers, physical and occupational therapists, and an outpatient rehabilitation facility.
- v. Primary specialty clinic: Residents will be assigned to various clinical sites in order to meet the one-half day per week requirement to maintain skills in their primary specialty.
- vi. Medical Library: Located in the Medical Education Center at GCH. Residents have 24-7 access to library collections, as well as online and electronic resources.

##### c. Department of Medical Education (“Medical Education”)

- i. The Department of Medical Education, the Vice President/DME, and the Residency Coordinator will work with the Program Director,

Faculty and Residents to assist with the administration of the Residency.

- ii. Contracts will be executed with all residents in accordance with AOA standards, and will be maintained as part of the Resident's permanent academic record within Medical Education. Contracts and associated information will specify stipend and benefits.
- iii. A House Staff Manual will be maintained by the Department and made available to each Resident. The House Staff Manual will include institutional policies and procedures applicable to GCH interns and residents, including but not limited to selection and advancement; due process; duty hours and outside professional activities ("moonlighting).
- iv. When the Resident has successfully met the requirements of the Residency, GCH will issue a certificate of completion, to include the name of the Resident, name and dates of the Residency; and affiliated OPTI (Statewide Campus System). Certificates are signed by the Program Director, the Vice President of Medical Education at GCH, the President and CEO of GCH, and the Dean of MSUCOM.

#### 5. Program director and Faculty

- a. Program Director qualifications and requirements:
  - i. Board Certification of Added Qualification in Sports Medicine from the AOA/AOASM and his/her primary specialty certifying Board
  - ii. AOA membership
  - iii. Medical Staff membership at Garden City Hospital
  - iv. Active State of Michigan medical licensure
  - v. Others as outlined in the AOA Basic Standards
  - vi. Experience and interest in medical education
- b. Program Director Responsibilities
  - i. Define the academic curriculum, including rotation schedule, didactic programs, and educational goals and objectives
  - ii. Provide for proper supervision and evaluation of Residents' performance as required by AOA and GCH and submit reports in a timely fashion
  - iii. Submit quarterly evaluations to GCH Department of Medical Education
  - iv. Submit an end-of-year evaluation to Resident's specialty college
  - v. Comply with other requirements for program directors as described by AOA and GCH
- c. The program director will be selected by the Administration of GCH and the Department of Medical Education at GCH. In the event of a change in program director, a written request for approval of the program director's appointment will be submitted by the Department of Medical Education to AOA.
- d. Additional program faculty will be identified in accordance with AOA standards and the standing rules of the Department of Internal Medicine at GCH. Faculty will have appropriate qualifications and credentials as per AOA

requirements, and will provide adequate supervision and evaluation of Residents.

## 6. Program eligibility and prerequisites

- a. Applicants have graduated from an AOA-accredited College of Osteopathic Medicine and have successfully completed an initial residency in Family Medicine, Internal Medicine, Pediatrics, Physical Medicine and Rehabilitation (PM&R), OMM/Neuromusculoskeletal Medicine, Occupational-Preventative Medicine, or Emergency Medicine.
- b. Applicants will obtain or maintain State of Michigan medical licensure.
- c. Applicants will be reviewed without discrimination based on race, color, religion, sex, age, national origin, handicap, marital status or other unlawful criteria. Selection of Residents will be in accordance with GCH's policy on House Staff Appointment and Advancement.

## 7. Educational Program and Curriculum

- a. Specific Knowledge and Skills: Content and skills areas defined in the Basic Standards for Subspecialty Training in Primary Care Osteopathic Sports Medicine will be incorporated into clinical and didactic instruction during the course of the Residency. These are listed in Appendix A.
- b. Rotations: The time element that is spent during each rotation will vary from rotation to rotation, and even in some cases within the same day. There is a vast amount of knowledge to be learned in a very short time, and to afford all the facets of Sports Medicine, there may be some time overlay. A list of rotations and objectives is attached (Appendix B).
- c. Sports Medicine Clinic and Events: The Resident will see patients 1 ½ days per week in the Sports Clinic setting. Sporting event coverage and interaction with athletes outside of the clinic will primarily be done on weekends and evenings as the demand calls.
- d. School/Team Assignment: The Resident will be assigned a school for which they will
  - i. conduct on site visits to the school for the beginning-of-the-year pre-participation physicals
  - ii. attend sporting events (ie football or basketball games)
  - iii. evaluate athletes at the school on request of the coach/trainer
  - iv. be available to answer questions of the teams' trainers and assist with planning
- e. Primary Care Clinic: The Resident will be in primary care clinic for ½ day per week.
- f. Inpatient Continuity: The Resident will follow clinic patients during inpatient or surgical care and resume outpatient care after discharge.
- g. Academic conferences:
  - i. In addition to bedside education on rotations and in clinic, Residents will participate in formal instruction and self-directed learning under the guidance of the Program Director and Faculty. Seminars and workshops will also be available through the OPTI (Statewide Campus System). Residents will be expected to attend SCS didactics within their primary specialty as well as relevant programs offered by other specialties (e.g. Orthopedics, PMR, OPP, etc.).

- ii. The Resident will attend at least one, if not both, AOASM conferences during the course of their Residency. A poster presentation will be submitted by the Resident to at least one of these conferences.
- h. Research paper: A research paper pertinent to Sports Medicine will be required, in a form suitable for publication in any medical journal such as supported by the AOASM.
- i. Resident presentations:
  - i. The Resident will be responsible to give one lecture to the general medical staff or other residents, interns, or students on a monthly basis. The acquisition of knowledge while is important, the ability to also teach is as equally important.
  - ii. Twice per year the Resident shall make a presentation to their primary care department for their educational portion of their quarterly meeting.
  - iii. In addition, keeping with our Osteopathic heritage, when available, weekend seminars provided by the Division of Osteopathic Practices and Principles, Family Practice shall be attended. This ensures an on going education in Osteopathic Manipulative techniques.
- j. Community Participation: In order to give back to the community in which we work, there is also an expectation of a Sports Medicine Educational Clinic will be organized and given to Coaches, Athletic Trainers, parents, and Athletic Directors of our area schools. Promoting knowledge of lay people can set the tone in which prevention takes a greater role in the training of the athlete.
- k. Mass Sporting Events: The Resident will participate in sporting events at the college and/or professional level, such as the Detroit Panthers of the PBL (Premier Basketball League).
- l. Evaluations:
  - i. On each rotation, the Resident will be evaluated by the supervising physician(s). The Residency Director shall also file an evaluation every 3 months based upon his observations of the Resident. These are evaluations to the knowledge, progression, professionalism, and character of the physician that is within the Residency.
  - ii. In the event that the Resident's performance does not meet expectations, the Program Director will discuss a remediation plan with the Resident and will document same for the Resident's academic file. Information on disciplinary actions and due process are found in the policy statement in Appendix E.
  - iii. The Resident will complete evaluations of each rotation and the faculty with whom they worked, as well as an overall evaluation of the Residency at the conclusion of training.
  - iv. A year end evaluation will be completed (Appendix B).

## 8. Core Competencies

- a. All GCH graduate medical education have the goal the achievement of competence across the seven core competencies of the osteopathic profession. These are:
  - i. Osteopathic Philosophy and OMT
  - ii. Medical Knowledge
  - iii. Patient Care
  - iv. Interpersonal and Communication Skills
  - v. Professionalism

