Advanced Specialty Program Requirements for Graduate Medical Education in Occupational Medicine (Internal Medicine, Family Medicine)

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ACGME International Advanced Specialty Program Requirements for Graduate Medical Education in Occupational Medicine (Internal Medicine, Family Medicine)

I. Introduction

I.A. Definition and Scope of Specialty

The medical specialty of occupational medicine focuses on the promotion, protection, and maintenance of health and well-being, and the prevention of disease, disability, and premature death of workers. Occupational medicine includes the study of the relationships among health of workers; the arrangements of work; the physical, chemical, and social environments in the workplace; and the health outcomes of environmental exposure.

I.B. Duration of Education

I.B.1. The education program in occupational medicine must be 24 or 36 months in length.

II. Institutions

II.A. Sponsoring Institutions

II.A.1. An occupational medicine fellowship must function as an integral part of an ACGME-I-accredited residency in family medicine or internal medicine.

II.B. Participating Sites

See International Subspecialty Foundational Requirements, Section I.B.

III. Program Personnel and Resources

III.A. Program Director

See International Subspecialty Foundational Requirements, Section II.A.

III.B. Faculty

See International Subspecialty Foundational Requirements, Section II.B.

III.C. Other Program Personnel

See International Subspecialty Foundational Requirements, Section II.C.

III.D. Resources

III.D.1. Access to a Master’s degree and tuition and other financial support for fellows to complete a Master’s degree must be provided.
III.D.2. Fellowship education must take place in settings that provide opportunities for fellows to manage clinical, scientific, social, legal, and administrative issues from the perspectives of workers, employers, and regulatory or legal authorities.

IV. Fellow Appointment

IV.A. Eligibility Criteria

IV.A.1. Prior to appointment in the program, fellows must have successfully completed an Accreditation Council for Graduate Medical Education (ACGME)- or ACGME International (ACGME-I)-accredited core residency program in family medicine or internal medicine, or a family medicine or internal medicine residency acceptable to the Sponsoring Institution’s Graduate Medical Education Committee.

IV.B. Number of fellows

See International Subspecialty Foundational Requirements, Section III.B.

V. Specialty-Specific Educational Program

V.A. Regularly Scheduled Didactic Sessions

V.A.1. Fellows must complete a Master’s degree prior to completion of the fellowship program.

V.A.1.a) All fellows must complete graduate-level courses that include in-depth instruction in epidemiology, biostatistics, health services management and administration, environmental health, and the behavioral aspects of health.

V.A.2. Didactic conferences must be planned throughout the fellowship program and must be structured to facilitate faculty member and fellow interaction.

V.B. Clinical Experiences

V.B.1. Fellows must have a minimum of eight months of direct patient care experience in an occupational setting, distributed throughout the program.

V.B.2. Fellows’ clinical experiences must include participation in the following learning activities:

V.B.2.a) clinical occupational and environmental medicine;
V.B.2.b) disaster preparedness and emergency management;
V.B.2.c) environmental health;
V.B.2.d) hazard recognition, evaluation, and control;
V.B.2.e) occupational and environmental medicine-related laws and regulations;
V.B.2.f) occupational and environmental medicine-related management and administration;
V.B.2.g) public health, surveillance, and disease prevention;
V.B.2.h) toxicology;
V.B.2.i) work fitness and disability integration; and,
V.B.2.j) worker health and productivity.

V.B.3. Fellows must participate in emergency preparedness programs in at least one workplace setting.

V.C. Fellows’ Scholarly Activities

See International Subspecialty Foundational Requirements, Section IV.C.

V.D. Duty Hour and Work Limitations

See International Subspecialty Foundational Requirements, Section VI.

VI. ACGME-I Competencies

VI.A. Patient Care

Fellows must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Fellows must demonstrate proficiency in:

VI.A.1. assessing and responding to individual and population risks for common occupational and environmental disorders;
VI.A.2. conducting research for innovative solutions to occupational and environmental health problems;
VI.A.3. diagnosing and investigating occupational and environmental health problems and hazards in the community;
VI.A.4. informing and educating populations about occupational and environmental health risks;
VI.A.5. planning and evaluating the medical portion of emergency preparedness programs and training exercises;
VI.A.6. providing clinical preventive medicine services within the context of the workplace, including the ability to:
VI.A.6.a) apply primary, secondary, and tertiary preventive approaches to individual and population-based disease prevention and employee health promotion; and,

VI.A.6.b) evaluate the effectiveness of clinical preventive services in the workplace at both the individual and population level.

VI.A.7. applying the following principles in a real or simulated workplace setting to reduce or prevent injury in a worker(s):

VI.A.7.a) ergonomics; and,

VI.A.7.b) toxicology.

VI.A.8. conducting a thorough musculoskeletal examination;

VI.A.9. assembling and working with a team to evaluate and identify workplace causes of injury and illness;

VI.A.10. conducting a real or simulated workplace walk-through to identify and mitigate hazards and relay this information to worksite administration;

VI.A.10.a) Fellows must apply toxicologic and risk assessment principles in the evaluation of hazards.

VI.A.11. developing plans in response to sentinel occupational and environmental health events; and,

VI.A.12. managing the health status of individuals employed in diverse work settings, including:

VI.A.12.a) preventing, mitigating, and managing medical problems of workers; and,

VI.A.12.b) using appropriate techniques to assess safe and unsafe work practices.

VI.B. Medical Knowledge

Fellows must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care. Fellows must demonstrate knowledge of:

VI.B.1. the scientific method of problem solving, and evidence-based decision making;

VI.B.2. occupational hygiene, safety, and ergonomics;

VI.B.3. occupational epidemiology;
VI.B.4. risk/hazard control and communication; and,

VI.B.5. toxicology.

VI.C. Practice-based Learning and Improvement

Fellows must demonstrate the 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. Fellows must:

VI.C.1. use information technology for reference retrieval, statistical analysis, graphic display, data base management, and communication;

VI.C.2. design and conduct an epidemiologic study using epidemiologic principles and biostatistical methods, including the ability to:

VI.C.2.a) characterize the health of a community;

VI.C.2.b) conduct a virtual or actual outbreak or cluster investigation;

VI.C.2.c) evaluate a surveillance system and interpret, monitor, and act on surveillance data for identification and prevention of disease and injury in workplaces and populations;

VI.C.2.d) select and conduct appropriate statistical analysis; and,

VI.C.2.e) translate epidemiologic findings into a recommendation for a specific intervention.

VI.D. Interpersonal and Communication Skills

Fellows must demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals. Fellows must:

VI.D.1. advise employers concerning summary results or trends in disability, disease, injuries, or risk that may have public health significance; and,

VI.D.2. report outcome findings of clinical significance from workplace investigations or surveillance systems to affected workers.

VI.E. Professionalism

Fellows must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Fellows must:

VI.E.1. practice occupational medicine from an ethical base that promotes the health and welfare of the individual worker in the context of the workplace environment and public health and public safety; and,
VI.E.2. apply an ethical approach to workers’ rights and privacy in the context of overriding public health and safety.

VI.F. **Systems-based Practice**

Fellows must 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. Fellows must:

VI.F.1. engage with community partnerships to identify and solve health problems for workers;

VI.F.2. conduct program and needs assessments, and prioritize activities using objective, measureable criteria, including epidemiologic impact and cost-effectiveness;

VI.F.3. identify and review laws and regulations relevant to occupational medicine and worker health and safety;

VI.F.4. identify organizational decision-making structures, stakeholder, styles, and processes;

VI.F.5. demonstrate skill in management and administration within an occupational medicine setting, including the ability to:

VI.F.5.a) assess data and formulate policy for a given health issue;

VI.F.5.b) assess the human and financial resources for the operation of a program or project;

VI.F.5.c) participate in the evaluation of applicants and the performance of staff;

VI.F.5.d) apply and use management information systems; and,

VI.F.5.e) plan, manage, and evaluate health services to improve the health of workers using quality improvement and assurance systems.