American Osteopathic College of Dermatology
Program Director's Annual Evaluation Report

Program Director:	
Name of Program:	
Training Institution:	
Mailing Address:	
City, State, Zip:	
Name of Resident:	
AOA#	Training Year: ☐ 1 ☐ 2 ☐ 3
Training Contract:	Start Date: Contract End Date:

Maintain a copy of this report in the resident's file. For any box checked deficient, the specifics of the deficiency must be detailed and a corrective action plan must be submitted as an addendum to this form.

A section for comments is provided on Page 6 of this document.

Competency 1: Osteopathic Philosophy Principles and Manipulative Treatment

This competency is not to be evaluated separately but its teaching and evaluation in the training program shall occur through Competencies 2-7 into which this competency has been fully integrated.

Residents are expected to demonstrate and apply knowledge of accepted standards in OPP/OMT appropriate to Dermatology. The educational goal is to train a skilled and competent osteopathic practitioner who remains dedicated to life-long learning and to practice habits in osteopathic philosophy and manipulative medicine.

Competency 2: Medical Knowledge and Its Application Into Osteopathic Medical Practice		
2.1	This resident demonstrated competency in the understanding and application of clinical medicine to osteopathic patient care.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional
2.2	This resident must know and apply the foundations of clinical and behavioral medicine appropriate to Dermatology with application of all appropriate osteopathic correlations.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional
2.3	This resident demonstrated a desire to continually improve his/her medical knowledge and that of others.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional

Competency 3: Osteopathic Patient Care		
3.1	This resident gathered accurate, essential information from all sources, including medical interviews, osteopathic physical and structural examinations as indicated, medical records, diagnostic/therapeutic plans, and treatments.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional

3.2	This resident validated competency in the performance of diagnosis, osteopathic, and other treatment and procedures appropriate to Dermatology.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional
3.3	This resident provided Dermatology services consistent with osteopathic philosophy, including preventative medicine and health promotion based on current scientific evidence.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional

Competency 4: Interpersonal and Communication Skills in Osteopathic Medical Practice		
4.1	This resident demonstrated effectiveness in developing appropriate doctor-patient relationships.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional
4.2	This resident exhibited effective listening, written and oral communication skills in professional interactions with patients, families, and other health professionals.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional
4.3	This resident demonstrated an awareness of psychosocial issues and incorporates health promotion into clinical practice.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional

Competency 5: Professionalism in Osteopathic Medical Practice		
5.1	This resident demonstrated respect for his/her patients and families and advocated for the privacy of his/her patients' welfare and autonomy.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional
5.2	This resident adhered to ethical principles in the practice of osteopathic medicine.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional
5.3	This resident demonstrated awareness and proper attention to issues of culture, religion, age, gender, sexual orientation, and mental and physical disabilities.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional
5.4	This resident demonstrated awareness of one's own mental and physical health.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional

5.5	This resident demonstrates sound judgment in assessing the risks from therapy and the diagnosis of the patient and understands the legal and ethical principles associated with his/her actions.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional
5.6	This resident understands the necessity of participating in community and professional organizations and how it relates to his/her development as a physician.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional
5.7	This resident understands the importance of participating in continuing education and understands the importance of his/her professional and personal growth.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional

Competency 6: Osteopathic Medical Practice-Based Learning and Improvement		
6.1	This resident treated patients in a manner consistent with the most up-to-date information on diagnostic and therapeutic effectiveness (traditional and osteopathic).	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional
6.2	This resident performed self-evaluations of clinical practice patterns and practice-based improvement activities using a systematic methodology.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional
6.3	This resident understood research methods, medical informatics, and the application of technology as applied to medicine.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional

Competency 7: System-Based Osteopathic Medical Practice		
7.1	This resident understands national and local health care delivery systems and medical societies and how they affect patient care, professional practice, and relate to advocacy.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional
7.2	This resident advocated for quality health care on behalf of his/her patients and assisted them in their interactions with the complexities of the medical system.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional
7.3	This resident demonstrated and integrated Osteopathic Principles and Practices into all clinical and patient care activities.	☐ Deficient ☐ Usually meets Competencies ☐ Consistently meets Competencies ☐ Exceptional

Demonstrated OPP Competencies which may include but not be limited to the following:

1	Performing critical appraisals of medical literature related to OMT and/or OPP.	☐ Yes ☐ No
2	Completing OMT and/or OPP computer-based educational modules.	☐ Yes ☐ No
3	Participating in CME programs provided by COMs, the AAO, and the osteopathic specialty colleges.	☐ Yes ☐ No
4	Participating in OMT and/or OPP training at hospital and ambulatory sites.	☐ Yes ☐ No
5	Performing critical appraisals of medical literature related to OMT and/or OPP.	☐ Yes ☐ No
6	Demonstrating understanding of somato-visceral relationships and the role of the musculoskeletal system in disease.	☐ Yes ☐ No
7	Performing of OMT through the assessment of his/her diagnostic skills, medical knowledge, and problem-solving abilities.	☐ Yes ☐ No
8	Participating in AOA Clinical Assessment Program.	☐ Yes ☐ No
9	Performing a critical appraisal of medical literature related to OMT and/or OPP.	☐ Yes ☐ No
10	Meeting performance standards of OPP through the assessment of his/her diagnostic skills, medical knowledge, and problem-solving abilities.	☐ Yes ☐ No
11	Participating in activities that provided osteopathic educational programs at the student and intern levels, including osteopathic correlations.	☐ Yes ☐ No
12	Demonstrating knowledge of and behavior in accordance with the Osteopathic Oath and AOA Code of Ethics.	☐ Yes ☐ No
13	Assuming increased responsibility for the incorporation of osteopathic concepts in his/her patient management.	☐ Yes ☐ No
14	Demonstrating the treatment of people rather than symptoms.	☐ Yes ☐ No
15	Demonstrating listening skills in interaction with patients.	☐ Yes ☐ No
16	Utilizing caring, compassionate behavior and touch with patients.	☐ Yes ☐ No

This resident has been assessed with at least two evaluation tools for each required element of each of the enumerated competencies. ☐ Yes ☐ No

Please check the box(es) for the evaluation tool used to document methods, outcomes, or demonstrations of compliance.

- ☐ 360-Degree Evaluation Instruments
- ☐ Chart Stimulated Recall Oral examinations (CSR)
- ☐ Monthly Service Rotation Evaluations
- ☐ Portfolio
- ☐ Written Examinations (i.e., in-training exam)
- ☐ Direct Observation
- ☐ Other: _____

If any of the answers to the following questions are ***"No",*** please provide an explanatory statement at the end of this form or on an additional sheet.

1. Have you reviewed and approved the resident's research assignment (e.g., scientific paper, etc.)?
   ☐ Yes ☐ No ☐ N/A

2. Did the resident participate in the annual resident in-service examination as required by the specialty college?
   ☐ Yes ☐ No ☐ N/A

3. Did you review the results of the in-service exam with the resident?
   ☐ Yes ☐ No ☐ N/A

4. Have you reviewed the results of the COMLEX III with the resident and confirmed a passing score was achieved before the resident entered the third year of training?
   ☐ Yes ☐ No ☐ N/A

5. Has the resident met the requirement for the management of a panel of patients followed throughout the year in an ambulatory continuity setting?
   ☐ Yes ☐ No ☐ N/A _____ # in panel?

6. Has the resident completed a resident clinical skills evaluation in a satisfactory manner during this training year as required?
   ☐ Yes ☐ No ☐ N/A

7. Has the resident completed all other specialty specific requirements for this year?
   ☐ Yes ☐ No ☐ N/A

8. This resident has made satisfactory progress in this training program and is capable to proceed to the next year.
   ☐ Yes ☐ No ☐ N/A

This confirms that this resident has completed this year of training.
☐ Yes ☐ No ☐ N/A

_____ _____
Program Director Signature Date

_____
Printed Name of Program Director

The following signature verifies that the resident has had the opportunity to review this report.

_____ _____
Resident Signature Date

_____
Printed Name of Resident

Comments:

NOTE: You must complete and submit a "Program Complete Summary – Final Resident Assessment" form for all third year residents who are completing training.

STOP here if the resident is NOT graduating at this time.

PROGRAM "COMPLETE" SUMMARY – FINAL RESIDENT* ASSESSMENT FOR DERMATOLOGY

"Program Complete Summary Final Resident Assessment" form must be submitted for all residents who are completing training.

Maintain a copy of this form in the resident's file and forward a copy to the OPTI.

This resident has been assessed with at least two evaluation tools for each required element of each of the enumerated competencies. ☐ Yes ☐ No

A document portfolio of this resident's "best performance" evaluations for each competency is attached to this report.
☐ Yes ☐ No

Please mark a summary assessment for each competency at Residency Program Completion.				
	Deficient	Usually Meets Competencies	Consistently Meets Competencies	Exceptional
Osteopathic philosophy, principles and manipulative treatment	☐	☐	☐	☐
Medical knowledge and its application to osteopathic medical practice	☐	☐	☐	☐
Osteopathic patient care	☐	☐	☐	☐
Interpersonal and communication skills in osteopathic medical practice	☐	☐	☐	☐
Professionalism in osteopathic medical practice	☐	☐	☐	☐
Osteopathic medical practice-based learning and improvement	☐	☐	☐	☐
Systems-based osteopathic medical practice	☐	☐	☐	☐

I HEREBY ATTEST THAT THE GRADUATING RESIDENT HAS SUCCESSFULLY COMPLETED ALL THE REQUIREMENTS OF THE TRAINING PROGRAM, AND IS RECOMMENDED FOR PROGRAM COMPLETE STATUS. ☐ Yes ☐ No

If no, explain:

_____ _____
Signature of Program Director Date

_____
Printed name of Program Director

The following signature verifies that the resident has had the opportunity to review this report.

_____ _____
Signature of Trainee Date

_____
Printed name of Trainee