AMERICAN BOARD OF INTERNAL MEDICINE (ABIM)
AMERICAN BOARD OF MEDICAL GENETICS AND GENOMICS (ABMGG) COMBINED RESIDENCY TRAINING PROGRAM APPLICATION FORM

A. INSTRUCTIONS

The Combined Residency Training Program Application Form may be downloaded from either the ABIM or ABMGG website. Once completed, make two copies and submit one to each of the following Boards:

American Board of Internal Medicine
510 Walnut Street, Suite 1700
Philadelphia, PA 19106-3699

American Board of Medical Genetics and Genomics
6120 Executive Blvd, Suite 525

Submission of an ABIM/ABMGG Combined Residency Training Program Application Form will require a commitment on the part of both categorical programs and their respective institutions to meet all the program requirements. The application form must be signed by the designated program director, associate program director, and the Designated Institutional Official at each of their institutions, if they are not in the same institution. The ABIM and the ABMGG will send a confirmation acknowledging receipt of the application.

Both the categorical programs in internal medicine and medical genetics and genomics must have ACGME accreditation. If either the program in internal medicine or medical genetics and genomics loses accreditation, approval of the combined program will be withdrawn. If either categorical program is on probation, the combined program may not accept additional trainees until this is corrected.

The administrative home for the combined program should be within the department and institution where the director of the combined program primarily functions.

All programs must receive prospective approval from both the ABIM and the ABMGG before any trainees are accepted into the combined program.

Residents who do not complete the combined program in the required amount of time or wish to transfer to another accredited combined program must have the prospective approval of both Boards.

Please indicate the annual number of trainees requested for the Combined Residency Training Program on the application form. There should be verification that these additional trainees will not compromise the training of residents in either of the categorical residency programs. The number of positions permitted in these combined programs will be approved for each program by the ABIM and ABMGG in conjunction with their respective RRC's when applicable. These numbers will be in addition to the number of trainees in the independent categorical programs of internal medicine and medical genetics and genomics and will count as 0.5 FTE toward both programs for each of the four years.

B. ELIGIBILITY

Eligible residents must be graduates of U.S. or Canadian medical schools or be sponsored by the ECFMG for the duration of the combined training. Acceptance will be determined by the directors of both programs in internal medicine and medical genetics and genomics. Senior medical students or internal medicine residents may apply; they may do so during the first year of internal medicine residency training. Internal medicine residents who wish to apply for this program should do so as soon as possible in their residency training and before the end of the PGY-1. The time medical genetics and genomics training is to begin must be acceptable to the program directors of both the internal medicine and medical genetics and genomics programs.

AMERICAN BOARD OF INTERNAL MEDICINE (ABIM)
AMERICAN BOARD OF MEDICAL GENETICS AND GENOMICS (ABMGG) COMBINED RESIDENCY
TRAINING PROGRAM APPLICATION FORM

SPONSORING INSTITUTION: Indicate the sponsoring institution of the combined program. This should be the institution where the Director of the combined program primarily functions. If the internal medicine program is sponsored by an independent, free standing institution, the sponsoring institution will be the one responsible for oversight of the internal medicine residency.

Institution	***City***	***State***

ACCREDITED RESIDENCY PROGRAMS: Indicate the name and the ACGME program number for the specialty programs offering the combined training.

Program	***ACGME #***	***Primary Training Site***
Internal medicine		
Medical Genetics & Genomics		

ACCREDITED RESIDENCY PROGRAM INFORMATION: Indicate the accreditation status of each specialty program.

Program	***Date of Last ACGME Accreditation***	***Date of Next ACGME Review***	***ACGME Approved Residents per Year***
Internal medicine			
Medical Genetics & Genomics			

Number of requested positions in the combined program: _____

PROGRAM DIRECTOR: Indicate the administrative structure for program directorship and check the appropriate boxes. The designated director may be the director of either categorical program, and the other categorical director must be the associate director. A single director who is certified in both specialties and has an academic appointment in each department may be the combined director.

Program Director	***Name***	***Board Certified IM, CGG or Both***	***Internal Medicine Categorical Director***	***Medical genetics and Genomics Categorical Director***
Designated Program Director				
Associate Program Director				
Combined Director (if applicable)				

GENERAL PROGRAM POLICIES AND DOCUMENTS: The following are policies the program must develop, distribute to residents and faculty, and have on file for ABIM and ABMGG review. Indicate (Y) if the requirement has been met in the program.

	The administrative home is within the department and institution where the director of combined program primarily functions.
	The program is based on a written curriculum of planned educational experiences in both specialties and is not simply a listing of rotations between the two specialties.
	The written curriculum is periodically reviewed by internal medicine and medical genetics and genomics faculty and residents.
	There is adequate, ongoing evaluation of the knowledge, skills and performance of residents as well as a method of documenting procedures and providing written evaluations following each rotation. A semi-annual formal written evaluation is conducted. Evaluations are permanently maintained by the institution.
	There is a schedule of at least quarterly meetings between the designated director and associate director unless there is a single combined program director.
	Salaries and benefits for residents in the combined program are arranged in such a way as to minimize difficulties/disparities for residents, regardless of the rotations taken, to protect residents from the vagaries of different institutional policies.
	The vacation/leave policy is on file and time-off is equally distributed between internal medicine and medical genetics and genomics.
	The program informs residents leaving the program of the need to request Board approval to receive credit for previous experience.
	The program will inform the ABIM and ABMGG of residents leaving the program, transferring to another program, or entering from a categorical residency.
	The ABIM and ABMGG will be notified immediately if there is a change in the designated program director, associate program director, or combined director.
	Written agreements exist between all institutions in which training will occur.
	The components of combined training must be derived from training that has been accredited by ACGME as part of the core programs. Participating sites that are used for training by the combined program must be approved for simultaneous use by the core programs.

INTERNAL MEDICINE REQUIREMENTS: Indicate (Y) that the program includes each of the following requirements for approved training in internal medicine. Resident rotations and evaluations must be reported to both the ABIM and ABMGG according to current policies of the respective Boards.

	The internal medicine residency has full ACGME accreditation.
	A letter signed by the internal medicine department chair documents institutional and faculty commitment to combined training.
	Each resident must obtain 20 months of direct patient care responsibility in settings where the resident personally provides or supervises less experienced residents who provide direct care to patients in inpatient or ambulatory settings

	At least four weeks experience in emergency medicine in blocks not less than 2 weeks in length, having first-contact responsibility, for the diagnosis and management of adults. Not more than two months of Emergency Medicine will count toward the requirements of Internal Medicine.
	Each resident must be assigned to the care of patients in critical care units (e.g. intensive care units, cardiac care unit, respiratory care unit) for 4 weeks in the first year, and again, at least on two four-week rotations during the months of internal medicine training which may occur during years R-2, R-3, or R-4. Minimum critical care experience for Internal Medicine is 3 months.
	At least 33 percent of the 24 months of internal medicine experience must involve ambulatory experiences. This must include continuity clinic experience for each resident. Block clinic experiences are allowed. Each resident's longitudinal clinic experience must include a minimum of 130 distinct half-day outpatient sessions, extending at least over a 30-month period, devoted to longitudinal care of the residents' panel of patients.
	Subspecialty experience must be provided to every resident for at least four months. Subspecialty experience should include both inpatient and outpatient experiences.
	When on internal medicine rotations, residents must regularly attend the usual conferences of the IM residency, e.g., morning report, core curriculum conferences, medicine grand rounds, work rounds and morbidity and mortality conferences.

MEDICAL GENETICS & GENOMICS REQUIREMENTS: Indicate (Y) that the program includes each of the following requirements for approved training in medical genetics and genomics: Resident rotations and evaluations must be reported to both the ABIM and ABMGG according to current policies of the respective Boards.

	The medical genetics and genomics residency has full ACGME accreditation
	A letter signed by the medical genetics and genomics department chair documents institutional and faculty commitment to combined training
	30 months of clinical medical genetics and genomics experience with the primary responsibility in patient care. (outpatient; inpatient; and consultations)
	One year (or equivalent) of graduate level course in human genetics and genomics
	Minimum of 2 continuous weeks <u>each</u> in clinical biochemical genetics, clinical molecular genetics and genomics, and clinical cytogenetics and genomics laboratories
	Curriculum must meet the RRC requirements for medical genetics and genomics training and include rotations in cancer, adult, pediatric, and prenatal genetics
	Mandatory attendance at seminars and conferences in medical genetics and genomics

ROTATION OUTLINE: Indicate (Y) that the program meets each of the following requirements for the combined curriculum.	
	There must be 24 core internal medicine months with 12 months occurring in year one
	There must be 18 core medical genetics and genomics months
	6 months of credit appropriate to internal medicine during the medical genetics and genomics training
	In years two and three, rotations should include no less than four months full-time equivalent in each specialty.
	Categorical and combined residents interact at all levels of training.
	Care has been exercised to avoid unnecessary duplication of educational experiences to provide as many clinical/educational opportunities as possible.

SIGNATURES: Indicate by signing below that the information contained herein is correct and that the hospital and faculty of each department are committed to supporting the combined program.

Role	***Print Name***	***Signature***	***Date***
Designated Program Director			
Associate Program Director			
A single director who is certified in both specialties and has an academic appointment in each department may be the **Combined Director (if applicable).**			
Chair of the medical genetics and genomics department where core			
Chair of the Internal medicine department where core internal			
***Primary Designated Institutional Official (DIO)**			
Other Designated Institutional Official (when applicable)			

***** The Primary DIO is the DIO of the institution where the Designated Program Director primarily functions.

Combined Internal Medicine-Medical Genetics &
Genomics Training Block Diagram

For internal Medicine rotations, please define the activity under "Experience or Rotation."
Use VAC for vacation.

1st Year – Required Internal Medicine

1st Year Block Diagram

Month/4wk	1	2	3	4	5	6	7	8	9	10	11	12	13
Experience or Rotation													
Internal medicine	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y
Supervisory													
Inpatient %													
Outpatient %													

Please check appropriate box indicating whether rotation is satisfying requirement in Internal Medicine or Medical Genetics & Genomics
Please indicate by "X" if rotation includes supervisory responsibility.

Combined Internal Medicine-Medical Genetics & Genomics Training

For internal Medicine rotations, please define the activity under "Experience or Rotation." Use VAC for vacation.

Use these abbreviations for the Medical Genetics and Genomics rotations:

MGG-P	Pediatric Genetics	MGG-MOL	Molecular Genetics and Genomics Laboratory
MGG-B	Medical Biochemical Genetics	MGG-BGL	Biochemical Genetics Laboratory
MGG-C	Cancer Genetics	VAC	Vacation
MGG-PN	Prenatal Genetics	Elec/ IC	Experiences chosen for individualized curriculum or elective
MGG-A	Adult Genetics		
MGG-CYL	Cytogenetics and Genomics Laboratory		

2nd Year – Combined Internal Medicine and Medical Genetics & Genomics

2nd Year Block Diagram

Month/4wk	1	2	3	4	5	6	7	8	9	10	11	12	13
Experience or Rotation													
Internal medicine	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y
Medical Genetics & Genomics	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y
Supervisory													
Inpatient %													
Outpatient %													

Please check appropriate box indicating whether rotation is satisfying requirement in Internal Medicine or Medical Genetics & Genomics
Please indicate by "X" if rotation includes supervisory responsibility.

3rd Year – Combined Internal Medicine and Medical Genetics & Genomics

3rd Year Block Diagram

Month/4wk	1	2	3	4	5	6	7	8	9	10	11	12	13
Experience or Rotation													
Internal medicine	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y
Medical Genetics & Genomics	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y
Supervisory													
Inpatient %													
Outpatient %													

Please check appropriate box indicating whether rotation is satisfying requirement in Internal Medicine or Medical Genetics & Genomics
Please indicate by "X" if rotation includes supervisory responsibility

4th Year – Combined Internal Medicine and Medical Genetics & Genomics

4th Year Block Diagram

Month/4wk	1	2	3	4	5	6	7	8	9	10	11	12	13
Experience or Rotation													
Internal medicine	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y
Medical Genetics & Genomics	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y	❑ Y
Supervisory													
Inpatient %													
Outpatient %													

Please check appropriate box indicating whether rotation is satisfying requirement in Internal Medicine or Medical Genetics & Genomics
Please indicate by "X" if rotation includes supervisory responsibility.

Describe the plan for meeting the requirement for internal medicine and medical genetics and genomics continuity clinics.

7/2017