



AMERICAN OSTEOPATHIC ASSOCIATION

**Basic Standards
for
Fellowship Training In
Medical Toxicology**

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

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FELLOWSHIP PROGRAMS IN MEDICAL TOXICOLOGY: STANDARDS FOR APPROVAL

AUTHORITY AND PURPOSE

The Bureau of Osteopathic Education of the American Osteopathic Association (AOA) is the only accrediting agency recognized by Federal and State authorities in the United States for Osteopathic Medical Education. Postdoctoral training is approved by the American Osteopathic Association through its Council on Postdoctoral Training (COPT), a component of the Bureau of Professional Education.

Educational Fellowship program approval implies that a program has appropriately identified its mission, has secured the resources necessary to accomplish that mission, shown evidence of accomplishing its mission, and demonstrated its ability to carry its mission into the future.

Approval signifies that an educational fellowship program meets or exceeds the AOA standards for educational quality with respect to organization and administration, faculty, curriculum, instruction and evaluation; as well as resident and fellow relations, and facilities.

The process of approval of an educational fellowship in medical toxicology is a cooperative activity calling for continuing self-assessment on the part of each training program, periodic peer evaluation through site visits, and review by the Graduate Medical Education Committee of the American College of Osteopathic Emergency Physicians (ACOEP), the Council on Postdoctoral Training, and the AOA Board of Trustees. Toxicology standards are contained in chapter one of the document. The context and process used by the Board and Council in approving programs is found in Chapter Two, Approval Procedures. Supplementary statements may be found in the document Administrative Handbook of the Council on Postdoctoral Training.

The approval process for postdoctoral fellowship in medical toxicology training is a public trust. Its purposes are many and include assuring that:

- (1) Osteopathic training programs meet AOA and ACOEP standards.
- (2) Fellows in training programs receive education and training consistent with AOA and ACOEP standards.
- (3) Those responsible for Fellow education are competent.
- (4) Sponsored programs meet acceptable national standards.
- (5) Educational programs merit support from funding agencies.
- (6) Graduates of the Fellowship Programs are competent toxicologists.

SECTION ONE

BASIC STANDARDS FOR APPROVAL OF A FELLOWSHIP IN MEDICAL TOXICOLOGY

INTRODUCTION

The AOA, Bureau of Professional Education, COPT, ACOEP, and each AOA-approved fellowship in medical toxicology are required to adhere to the policies, procedures, and standards contained in these documents. Exceptions must be clearly identified and have explicit approval as determined by the AOA Board of Trustees.

Osteopathic fellowship in medical toxicology is defined as a formal training period of two years in an approved program following AOA-approved training in a primary specialty leading to board eligibility to qualify for a Certificate of Added Qualifications through the AOA and the American Osteopathic Board of Emergency Medicine. This program shall be planned and conducted for the purpose of providing advanced and concentrated training in medical toxicology. Fellowship training in medical toxicology is full-time. Providing education of the highest quality must be the major mission of the program. Education, not service, is the primary purpose of a fellowship program. These Standards are identified as Basic Standards each program is therefore required to meet all the standards and encouraged to exceed them.

The purpose of an educational fellowship in medical toxicology training is to provide progressive learning experiences that develop the attitudes, skills, and knowledge of an osteopathic physician to EXPERTLY provide quality care of patients. Specific program objectives are stated in the curriculum referred to in Section IV.

STANDARDS FOR PROGRAM APPROVAL

Standards I through VIII of this document contain standards for an educational fellowship in medical toxicology. The standards and prerequisites are used by the AOA and the ACOEP to evaluate the fellowship program on a continuing basis.

STANDARD I

MISSION

The mission of fellowship training in medicinal toxicology is to provide an organized educational experience leading to the competent practice of medical toxicology. This training shall be based on educational goals and objectives that meet or exceed those outlined in this document. Training must cover all topics presented in the Core Curriculum.

Fellowship Residency programs must provide a mission statement for the program and evidence that this statement is periodically reviewed and updated by the institution.

STANDARD II

EDUCATIONAL PROGRAM GOALS AND OBJECTIVES

A. EDUCATIONAL GOALS

The goals of an educational fellowship in medical toxicology program are to:

1. Provide learning experiences that promote a broad understanding of the role of medical toxicology as it relates to other medical disciplines.
2. Develop measurable objectives to assess the progression of the educational fellow in the two-year training program.
3. Integrate the sciences applicable to medical toxicology with clinical experiences in a progressive manner.
4. Provide the educational fellow in medical toxicology with progressive patient care responsibilities, commencing with general medical skills and progressing to complete care of patients in need of toxicologic care.
5. Provide training that will enable the educational fellow in medical toxicology to rapidly evaluate, initiate treatment, and provide appropriate therapy, and disposition of the patient.
6. Provide the opportunity to develop the teaching skills of fellows in emergency medicine in regard to toxicologic emergencies.
7. Provide the opportunity to develop the skills necessary for problem solving in the practice of medical toxicology.
8. Provide the opportunity to develop professional leadership and management skills.
9. Provide the opportunity to promote lifelong learning in medical education.
10. Provide the opportunity to conduct research in medical toxicology.
11. Prepare the fellow to meet board eligibility requirements for the presentation of a Certificate of Added Qualifications of the AOA through the American Osteopathic Board of Emergency Medicine.
12. Prepare and distribute a written description of the process and criteria for the selection of fellows. This statement shall be included in the institution's policies regarding contract renewal for fellows who demonstrate competence.
13. Admission to a fellowship program shall not be influenced by race, sex, religion, creed, national origin, age sexual orientation, marital status, national origin, veteran status, disability, or other legally protected status.
14. Provide the opportunity to learn to practice medicine in an ethical fashion.
15. Provide the opportunity to develop Osteopathic Manipulative Medicine (OMM) skills and its application to medical toxicology.
16. Provide a learning environment that encourages cultural sensitivity and patient safety.
17. Provide training and evaluation of Fellows relative to the seven core competencies defined by the AOA.

B. PROGRAM OBJECTIVES

An educational fellowship in medical toxicology program, approved by the AOA through the ACOEP, shall provide meaningful objectives that prepare the Fellow to:

1. Manage clinical problems in an emergency department setting, clinic setting, and bedside consult setting, employing basic scientific principles, and evidenced-based medicine.
2. Use critical thinking in making effective decisions for patient management.
3. Rapidly and accurately evaluate, organize, and initiate treatment of the patient in need of toxicologic intervention.
4. Make sound judgments as to the expected risk/benefit ratio arising from therapy as well as the condition being treated with an understanding of associated ethical and legal principles.
5. Demonstrate proficiency in the psychomotor skills required of a competent toxicologist.
6. Provide cost-effective care to toxicology patients.
7. Collaborate effectively, and share knowledge with colleagues and allied health professionals.
8. Teach basic skills needed for mass casualty management and coordination for the hospital and community
9. Educate patients and their families concerning health care needs.
10. Participate in community and professional organizations.
11. Read, interpret, and participate in clinical research.
12. Participate in opportunities for continuing education to promote personal and professional growth.
13. Teach basic skills and clinical practices needed in the field of medical toxicology to medical students, interns, and other residents within the context of the educational fellowship.
14. Appropriately integrate OMM and its applications in the practice of medical toxicology.
15. Be sensitive to the patient populations served and its implications to providing healthcare to them.
16. Train Fellows in such a manner as to prove competent in the seven core competencies so defined by the AOA.

STANDARD III

INSTITUTIONAL REQUIREMENTS FOR PROGRAM APPROVAL

- A. An institution must meet the following requirements to be considered for approval to sponsor an educational fellowship in medical toxicology program:
 1. Be accredited by the American Osteopathic Association/Healthcare Facilities Accreditation Program (HFAP) or JCAHO and affiliated with an OPTI accredited by the AOA.
 2. Document that the program meets the policies and procedures of the OPTI with which it is affiliated.
 3. Be in operation at least twelve (12) months immediately preceding the date of application for residency training.
 4. Have an approved residency in emergency medicine that has been approved by the AOA or ACGME for a minimum of 3 years.
 5. Be affiliated with a poison control center, certified by the American Association of

Poison Control Centers (AAPCC).

B. Organizational Structure

Have an appropriate administrative structure, including a postdoctoral education committee with membership to include a director of medical education (DME) who is an osteopathic physician with AOA-approved intern training, program directors of all specialty training programs at the institution, and representatives of supporting specialty services.

C. Program Director

The sponsoring institution shall designate an osteopathic emergency medicine physician as program director for the program who has sufficient clinical time for program administration and clinical instruction. Appointments are subject to the approval of the ACOEP Committee on Graduate Medical Education and subsequent registry by the AOA.

The program director may not serve as the Chair of the Department of Emergency Medicine, or as program director of the emergency medicine residency program. He or she may be the Director of Medical Education if the institution has three or fewer osteopathic residency programs.

1. The program director of the educational fellowship in medical toxicology program must possess the following qualifications:
 - a. Active, full-time staff membership within the department or section of emergency medicine
 - b. Certification by the AOA in emergency medicine, pediatrics, emergency medicine, preventive/occupational medicine, or family medicine by the appropriate specialty board and recertified within the prescribed time frame of that body.
 - c. Certification / recognition by the AOA through the American Osteopathic Board of Emergency Medicine or by the American Board of Emergency Medicine (ABEM) with a Certificate of Added Qualifications in medical toxicology or certification in medical toxicology by the American Board of Medical Specialists (ABMS) or the American Board of Medical Toxicology (ABMT).
 - d. Practice of medical toxicology for a minimum of two (2) years with a medical toxicology fellowship program or three (3) years of clinical experience in an accredited emergency medicine residency; or five (5) years in the practice of medical toxicology.
 - e. Membership in the American Osteopathic Association.
 - f. Membership in the American College of Osteopathic Emergency Physicians (ACOEP) or the appropriate osteopathic specialty association.
 - g. Active clinical practice of medical toxicology at the base institution
 - h. Fulfill the qualifications as a core faculty member of an emergency medicine residency program, including administrative and demonstrated leadership skills,

and completion of the AOA's continuing medical education requirements and medical toxicology training skills and faculty development.

- i. Active participation in community and professional organizations appropriate to their basic specialty.
 - j. Involvement in research and academic pursuits such as publication in peer review journals, textbooks, local or specialty publications, formal lectures, and visiting professorships.
2. The program director shall have the following responsibilities:
- a. Direction of the educational fellowship in medical toxicology to ensure that the Fellow has the opportunity to receive training outlined in the written program description.
 - b. Ensure the arrangements of outside rotations with formal affiliation agreements that meet the program's educational objectives.
 - c. Evaluation of Fellows, faculty, and the emergency medicine residency program and submission of required reports as outlined in the Approval Procedures section of this document.
 - d. In coordination with the DME, have responsibility for all schedules, and appropriate time for fellowship training, including lectures, educational sessions, and study time.
 - e. Working with the DME to support the predoctoral and postdoctoral education and training at the institution.
 - f. Notify the ACOEP of all fellows in training on an annual basis.
 - g. Participation in the annual ACOEP Program Directors' Workshop. Attendance at this annual workshop is mandatory for the program director or his/her designee. The program director must attend at least every two years.
 - h. Ensuring that the program complies with the standards, policies, and procedures of the AOA.
 - i. Preparation for and participation in the AOA inspection of the program in cooperation with the Division of Postdoctoral Education and the designated evaluator.
 - j. 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 program director, core faculty institutional ownership, and affiliation, or other major administrative changes within thirty (30) days of their occurrence.
 - k. Develop goals and objectives for each rotation featured in the program and maintain these through periodic updating.
3. To fulfill all the above requirements and the requirements under the core faculty section, a program director needs to have available non-clinical time. The program director should have at least 12 hours of compensated non-clinical time per week; however, this should be adjusted to compensate for larger clinical or more complex programs.

D. Department or Section of Emergency Medicine

To be considered for approval of an educational fellowship program in medical toxicology,

the department or section of emergency medicine at the base institution must:

1. 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). The Chairperson of the Department may not be the program director and must achieve re-certification within prescribed time frame by the certifying body.
2. Have faculty as well as core faculty to teach and supervise Fellows and fellows. All physicians supervising medical toxicology fellows must meet the faculty requirements. In addition, a group of core faculty must be appointed who meet more stringent core faculty requirements. The role and duties of the core faculty must be clearly defined.
3. Have all additional physicians who are clinically supervising educational fellows in medical toxicology must be certified in emergency medicine, pediatrics, internal medicine, preventive/occupational medicine, or family medicine by the AOA through their appropriate certifying board or in the process of being certified (non-core faculty). Supervision by faculty members must be provided 24 hours a day.
4. Significant clinical exposure to osteopathic physicians and toxicologists must be provided.
5. Have a minimum of one (1) core faculty member for every three (3) fellow positions.
6. Have the scope, volume, and variety to support a fellowship program with at least two (2) approved fellow positions. This is generally a minimum volume of 25,000 Emergency Department visits annually at the base institution, and sufficient opportunities for active consultation and clinical research, as well as active medical, surgical, and technological divisions. Larger programs may require higher volumes. Other emergency medicine sites that are affiliated with this base institution must each have a minimum volume of 15,000 Emergency Department visits annually.
7. Provide experience and training in the management of medical toxicology patients. This training should take place at the base hospital and its affiliated sites; however, at least 50% of the training must take place at the base institution.
8. Ensure that osteopathic principles and practice and their application to medical toxicology are emphasized and employed.
9. Have an AOA-approved emergency medicine residency program and fulfill the requirements as stated in the guidelines for establishing an Osteopathic Postdoctoral Training Institution (OPTI).

STANDARD IV

FACULTY

The sponsoring institution, in conjunction with the program director shall designate a minimum of **one (1)** core faculty who shall participate in the medical toxicology fellowship program. Core faculty is specifically designated, full-time members of the departments of emergency medicine, pediatrics, internal medicine, preventive/occupational medicine, or family medicine at the base institution.

- A. Core faculty members must be certified or an active candidate in the process of certification in medical toxicology by the AOA and their respective specialty board.
- B. Core faculty members must be qualified by training and experience to perform their teaching role, including recertification within the prescribed time frame of the certifying body
- C. Fifty percent (50%) of the core faculty must be osteopathic physicians who participate in the training of Fellows.
- D. Core faculty must demonstrate sufficient scholarly activity, such as lecturing on a national basis, participation in textbook chapters, research or active involvement in national emergency medicine organizations. Faculty credentials must be on file and available at the time of inspection.
- E. Core faculty must be provided sufficient non-clinical time to provide instruction, leadership and participation in scholarly activities. Furthermore, Core faculty must participate in the academic educational program, such as formal lectures, case conferences and journal clubs and other requirements of the core curriculum. This will require at least four (4) hours of compensated, non-clinical time per week.
- F. The program director may be counted as a member of the core faculty.
- G. The institution shall have administrative and other non-physician staff committed to the program to support teaching and administrative in the medical toxicology fellowship program.
- H. The educational fellowship in toxicology program must adopt formal policies and the fellows must be advised of these policies. There must be an educational manual that will include, but not be limited to:
 - 1. The institution's medical toxicology fellowship curriculum.
 - 2. The rules and regulations stating the fellow's duties and responsibilities.
 - 3. Leave policies.
 - 4. Financial arrangements, including housing, meals, and other benefits, as may be determined by the institution and described in the fellow's contract.
 - 5. Institutional policies and procedures for the supervision and evaluation of residents and fellows, due process, (e.g., grievances, disciplinary action, academic deficiencies or failure) and appeal processes.
 - 6. Policies governing outside activities of a professional nature.
 - 7. Institutional policies regarding contract renewal, contract interruption or cancellation, and the number of medical toxicology positions offered each year of training.
 - 8. AOA work hours policy (Appendix 1).
- I. To fulfill requirements of the basic standards or enhance training, the program director may arrange for required rotations with affiliated training sites.
 - 1. A program seeking to fulfill its requirements through affiliations with other AOA or ACGME institutions shall sign formal affiliation agreements with these training sites.

Affiliation agreements shall be signed by representatives of both the base institution and the affiliate training sites, and shall be maintained on file with the DME at the base institution. Affiliations shall be consistent with the guidelines of the AOA.

2. Fellows on rotation to affiliated training sites shall remain under contract to the base institution. Fellow training logs shall reflect training and service to the affiliated training site and shall be included in the fellow records at the base institution. Written evaluation of the performance the educational fellow at the affiliated training site must be submitted by the on-site faculty to the program director at the base institution.

- J. There must be effective, timely evaluation of the toxicology fellowship.

STANDARD V

FELLOWS

- A. An applicant for medical toxicology fellowship training must:
 1. Be a graduate of an AOA-accredited college of osteopathic medicine and have successfully completed an AOA-approved internship.
 2. Be a member of the AOA and maintain membership in the AOA throughout their term of training.
 3. Have successfully completed an AOA approved residency program in emergency medicine, pediatrics, internal medicine, preventive / occupational medicine, or family medicine.
 4. Be board eligible or board certified in their respective specialty area by the appropriate osteopathic certifying board through the AOA.
 5. Be and remain a member of their respective osteopathic specialty organization throughout the term of training.
 6. Sign an annual training contract with the institution.
- B. The fellow is legally, morally, and ethically responsible to pursue exclusively the agreed upon program of training. The fellow shall not engage in any outside activities of a professional nature during fellowship training except those approved by the program director and designated institutional authorities. Such activities must not interfere with the fellow's participation in the training program.
- C. The fellow shall progressively assume responsibility for patient care of those patients presenting with toxicologic – related illnesses during the fellowship program, so that by the last year of training, he or she must be able to assume complete management of all assigned cases.
- D. Increased competency in medical toxicology is based on experience and number and variety of cases managed in the emergency medicine department, intensive care units, medical and surgical floors, and outpatient facilities. Such experience is gained through participation in highly specialized rotations as deemed necessary by the program director.

It is required that by the completion of a two-year medical toxicology fellowship program,

each fellow will have experience in all of the following elements during the course of the program:

- Pharmacology
- Epidemiology
- Biostatistics
- Study Design
- Pharmacokinetics
- Forensic Medicine
- Poison Control Center

At least one year of the program will include clinical services with the affiliate poison control center.

- E. Each fellow shall adhere to established policies and procedures for fellowship training, as outlined in this document, and in the fellow training manual.
- F. The fellow shall maintain formal records of all activities related to the educational program. These records shall be submitted monthly to the program director and DME for review and verification. Copies of these records 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 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 emergency cases and procedures performed under supervision.
- G. The fellow shall prepare one substantive research project related to toxicology during the two-year training program.
The completed research project must be submitted to the ACOEP in a publishable format. In all instances research projects must be approved by the program director.
- H. The fellow shall be required to participate in professional staff activities.
- I. The fellow must be board eligible/board certified in Emergency Medicine, Pediatrics, Internal Medicine, or Preventive Medicine.
- J. Work hours in the program must be educationally oriented and established AOA work hour regulations need to be followed (Appendix 1).

STANDARD VI

CURRICULUM AND INSTRUCTION

- A. The medical toxicology fellowship program shall adhere to a two-year curriculum that meets or exceeds the requirements listed within this document. The program shall create and implement a core curriculum for medical toxicology fellowship training that prepares the fellow for subspecialty certification or recognition in medical toxicology.
 - 1. The two-year curriculum in medical toxicology must include the following core curriculum components:

- a. Use of osteopathic principles and practice relating to medical toxicology.
 - b. Development of a growing competence on the part of the fellow in the clinical practice of medical toxicology.
 - c. Development of a philosophy of medical toxicology directed toward delivery of the best possible patient care.
 - d. Advanced training in the basic sciences, which shall include structured learning and clinical experience in the basic sciences and clinical skills in medical toxicology.
 - e. Participation in required OPTI educational programs.
2. The program will provide training in toxicology, including but not limited to:
 - a. Medical toxicology
 - 1) As presented in patients in emergency departments, intensive care units, medical and surgical floors, and outpatient facilities.
 - 2) As presented through a Regional Poison Control Center.
 - 3) As presented through occupational health programs in hospital wards, clinics, or affiliated industrial programs.
 - b. Pharmacology / toxicology.
 - c. Epidemiology.
 - d. Biostatistics.
 - e. Study design.
 - f. Pharmacokinetics.
 - g. Forensic medicine.
 3. Clinical consultations from wards, outpatient clinics, emergency departments, poison control centers, and industrial clinics will be part of the program.
 4. The program will include case reviews, journal clubs, and literature reviews, as well as teaching opportunities for the subspecialty fellows.
 5. The program will include opportunities for subspecialty fellows to participate in bench and/OR animal research, clinical studies, and epidemiologic investigations. The details for these activities will be included in a research paper of publishable quality that must be submitted to the ACOEP, by the completion of the second year of training, as part of the training requirements.
 6. The program must provide a minimum of four (4) hours of planned educational activity per week (not including sign-out rounds):
 - a. Fellows must be excused from clinical duties to attend planned educational experiences.
 - b. No more than fifty percent of the conference may be planned and presented by fellows or residents.
 - c. Fellows must be exposed to the core curriculum during their training.
 - d. Fellows are required to attend the academic portions of the program, unless excused by the program director.
 - e. Core faculty must be involved in the planning and administration of the planned educational activities.

7. Progression through the fellowship program must be based on documentable, educational goals and objectives.
8. The program must provide an environment that is conducive to education. This environment must include exposure to both the clinical applications of medical toxicology as well as the skills necessary to develop the proper attitudes towards patients, professional staff, and administration of the institution.
9. The program must ensure that the fellow demonstrates increasing competence in all facets of toxicology skills and techniques in the use of its diagnostic and therapeutic modalities. This shall be done through:
 - a. Documentable educational outcomes through multiple measures. Faculty input is required.
 - b. Observation, assistance, and supervised participation leading toward greater responsibility for diagnosis, care, and treatment of patients.
 - c. Opportunities to attend or participate in teaching and training inside and outside of the parent institution.
 - d. Participation in available seminars, divisional society meetings, workshops in other institutions, programs provided by universities, and clinical activities in affiliated outpatient clinics or specialty institutions.
10. Fellows in the program will learn teaching skills by actively participating in the process of instructing interns, medical students, and residents.
11. The curriculum shall include instruction in medical ethics and interpersonal skills.
12. The curriculum shall be based on written objectives for each rotation.
13. The curriculum will provide for annual evaluation by faculty and fellows as a method for revision and updating of the document.

STANDARD VII

FACILITIES AND OTHER RESOURCES

- A. Institutional facilities and resources must be adequate to provide educational opportunities to the educational fellow. The institution is responsible for assuming the financial, technical, and educational support for the program. The institution must provide the necessary space, facilities and learning environment for the establishment and maintenance of an AOA-approved program.
 1. The institution shall have the following:
 - a. Sufficient administrative personnel to support the fellowship program.
 - b. A medical library that is properly staffed and maintained by a qualified librarian. This library shall include access to standard medical reference texts and current medical journals, and computer-assisted literature search capabilities, e.g., Medline.
 - c. Conference room(s) that are available for formal instruction.

- d. Sleeping and lounge facilities and food facilities.
 - e. Faculty and administrative office space.
 - g. Office space for fellows.
2. Facilities for medical toxicology.
- a. While the medical toxicology fellowship may take place in many places, the program must provide training in at several distinct sites, including one Regional Poison Control Center serving a large geographical area and recognized by the American Association of Poison Control Centers; a school of pharmacology with active programs in clinical toxicology, clinical pharmacology, and pharmacokinetics, and a school of public health with programs in epidemiology, biostatistics, and occupational and environmental health.
 - b. The institution must provide facilities that provide sufficient space and ancillary medical assistance to provide expedient and excellent patient care.

STANDARD VIII

EVALUATION

The program must implement and document an evaluation of at least the following aspects and other related aspects as necessary. The following must be maintained by the institution and available to evaluators or the ACOEP on request. The core competencies need to be followed in these evaluations.

- A. The curriculum will be evaluated annually by faculty and fellows as a method for revision and updating of the documents.
- B. The program director, with faculty input, will complete written semi-annual evaluations of the performance of the educational fellow. This should include evaluations from all affiliated training sites and supplemented rotation sites.
- C. Evaluations should be learner-centered, developmental, foster continuous improvement, and based upon educational objectives for each assignment and program activity.
- D. Completed evaluations must be shared with the fellow in consultation for improvement. They must 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.
- E. The program director must document that fellows needing remediation or counseling as a result of evaluation are given it in a timely manner. There must be documentation of follow up evaluations of these fellows.
- F. The faculty and program must be evaluated annually by the fellows and an opportunity provided to conduct these evaluations anonymously.

Appendix One

EDUCATIONAL FELLOW WORK HOURS AND SUPERVISION POLICIES

It is recognized that excessive numbers of hours worked by resident physicians and educational fellows can lead to errors in judgment and clinical decision-making. These can impact on patient safety through medical errors, as well as the safety of the physician trainees through increased motor vehicle accidents, stress, depression and illness related complications. The training institution, director of medical education (DME) and fellowship director must maintain a high degree of sensitivity to the physical and mental well being of residents and make every attempt to avoid scheduling excessive work hours leading to sleep deprivation, fatigue or inability to conduct personal activities.

A. Work Hours

1. The following work hours policy will apply to all residents in all specialties.
 - a. The educational fellow shall not be assigned to work physically on duty in excess of eighty hours (80) per week averaged over a four (4) week period, inclusive of in-house night call.
 - b. The educational fellow shall not work in excess of twenty-four (24) consecutive hours inclusive of morning and noon educational programs. Allowance for, but not to exceed up to six (6) hours for inpatient and outpatient continuity, transfer of care, educational debriefing and formal didactic activities may occur. Educational Fellows may not assume responsibility for a new patient after twenty-four (24) hours.
 - c. If moonlighting is permitted, all moonlighting will be inclusive of the eighty (80) hour per week maximum work limit and must be reported. (See Moonlighting Policy.)
 - d. The educational fellow shall have alternate week forty-eight (48) hour periods off or at least one (1) twenty-four (24) hour period off each week.
 - e. Upon conclusion of a twenty-four (24) hour duty shift, educational fellows shall have a minimum of twelve (12) hours off before being required to be on duty again. Upon completing a lesser hour duty period, adequate time for rest and personal activity must be provided.
 - f. All off-duty time must be totally free from assignment to clinical or educational activity.
 - g. Those rotations requiring the educational fellows to be assigned to Emergency Department duty shall not be assigned longer than twelve (12) hour shifts.
 - h. The educational fellow and training institution must always remember the patient care responsibility is not precluded by this policy. In the case where an educational fellow is engaged in patient responsibility, which cannot be interrupted, additional coverage should be provided to relieve the educational fellow involved as soon as possible.
 - i. The educational fellow may not be assigned to call more often than every third night averaged over any consecutive four (4) week period.

2. The training institution shall provide an on-call room for educational fellows, which is clean, quiet, safe and comfortable, so to permit rest during call. A telephone shall be present in the on-call room. Toilet and shower facilities should be present in or convenient to the room. Nourishment shall be available during the on-call hours of the night.

B. Moonlighting Policy

Any professional clinical activity (moonlighting) performed outside of the official fellowship program may only be conducted with the permission of the program administration (DME/Program Director). A written request by the educational fellow must be approved or disapproved by the Program Director and DME and be filed in the institution's fellow file. All approved hours are included in the total allowed work hours under AOA policy and are monitored by the institution's graduate medical education committee. This policy must be published in the institution's house staff manual. Failure to report and receive approval by the program may be grounds for terminating a fellow's contract.

APPENDIX TWO

CORE CONTENT MEDICAL TOXICOLOGY

1. Principles of Toxicology
2. Toxins and Toxicants
 - 2.1 Drugs
 - 2.2 Industrial, Household, and Environmental Toxicants
 - 2.3 Natural Products
 - 2.4 Warfare, Terrorism, and Riot Control Agents
3. Therapeutics
4. Assessments and Population Health
5. Analytic and Forensic Toxicology