

Dong T, Shapiro M, Soh M, et al. Pursuing osteopathic recognition: a national survey on US program director perspectives. *J Grad Med Educ.* 2025;17(1):81-88.

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Supplementary Data

Appendix I. Never applied for OR survey

First question: Is your residency program interested in applying for OR at all?

Section 1: Please rate the level of challenge you foresee for pursuing Osteopathic Recognition (OR)

- Administrative time required to implement OR
- Lack of leadership personnel (e.g. Director of osteopathic education)
- Lack of osteopathic faculty
- Lack of interest in osteopathic education from potential applicants to the residency program
- Lack of support from colleagues
- Difficulty in reviewing osteopathic medicine applicants' materials such as letters of recommendation from osteopathic faculty
- Insufficient time for osteopathic principles and practices (OPP) training in addition to normal residency schedule
- Osteopathic evaluation requirement
- Osteopathic recognition continued accreditation requirement
- Lack of osteopathic medicine in practice at site
- Lack of physical space to conduct osteopathic principles and practices (OPP)
- Uncertainty in integration of osteopathic principles and practices (OPP) in patient care
- Lack of relevance to specialty
- Lack of funding
- Uncertainty over documentation
- Uncertainty over billing

Section 2: Please rate the value or importance of pursuing Osteopathic Recognition (OR)

- How valuable is OR in the recruitment of DO students to your program?
- How valuable is OR in the recruitment of MD students to your program?
- How valuable to your program is the ability to provide instruction that includes Osteopathic Principles and Practices (OPP)?
- How valuable is the inclusion of osteopathic principles in enhancing patient satisfaction and fostering health promotion in your residency practice?

Section 3: Tell us about your residency program

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- What percentage (approximately) of faculty in your program have a DO degree?
- What percentage (approximately) of faculty in your program can teach the Osteopathic Principles and Practices (OPP) curriculum?
- What percentage (approximately) of residents in your program came from osteopathic medical schools?
- What percentage (approximately) of DO residents who begin your program complete your program?
- What percentage (approximately) of MD residents who begin your program complete your program?
- Which state is your program located in?
- Program age
- Program size (i.e. how many residents)
- Program specialty
- Is your residency program university based or community based?
- Is the university public or private?

Section 4: What resources do you need to be able to help your program to apply for OR?

[Open text item]

Last question: Would you be interested in a follow up interview to talk about your thoughts on OR application in more detail? If yes, please provide your email address and/or phone number

Appendix II. Cross tabulation of background of the residency programs by the Yes, Maybe, and No group with the row percentage in parenthesis

		Range of percentage (0-100%)			
		0 to 25%	26 to 50%	51 to 75%	76 to 100%
Percentage of faculty have a DO degree	Yes	13 (25%)	14 (27%)	12 (23%)	13 (25%)
	Maybe	4 (13%)	6 (20%)	10 (33%)	10 (33%)
	No	21 (34%)	19 (31%)	7 (12%)	14 (23%)
Percentage of faculty who can teach the OPP curriculum	Yes	20 (38%)	17 (32%)	9 (17%)	7 (13%)
	Maybe	20 (65%)	6 (19%)	2 (7%)	3 (10%)
	No	45 (73%)	5 (8%)	3 (5%)	9 (15%)
Percentage of residents who came from osteopathic medical schools	Yes	2 (4%)	10 (19%)	7 (13%)	35 (65%)
	Maybe	1 (3%)	2 (7%)	6 (19%)	22 (71%)
	No	3 (5%)	11 (18%)	16 (25%)	33 (52%)
Percentages of DO residents (of total DO residents) who complete the residency program	Yes	0	0	2 (4%)	51 (96%)
	Maybe	0	0	0	31 (100%)
	No	0	1 (1%)	1 (1%)	61 (97%)
Percentage of MD residents (of total MD residents) who complete the residency program	Yes	15 (36%)	0	1 (2%)	26 (62%)
	Maybe	3 (13%)	0	0	20 (87%)
	No	9 (17%)	0	1 (2%)	44 (82%)

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		University based		Community based
Residency program community university based or community based?	Yes	13 (24%)		41 (76%)
		Public	Private	
		8	5	
	Maybe	4 (13%)		28 (82%)
		Public	Private	
		2	2	
	No	10 (15%)		55 (85%)
		Public	Private	
		6	4	

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Appendix III. Emergent themes from the Never applied for OR survey -- What resources do you need to be able to help your program to apply for OR? (total number of responses = 128)

Emergent themes	Number of Respondents	Ranking
Lack of resources: Faculty	44	1
Application process/system/template/guidance in application process	29	2
Administrative burden	28	3
Fear of receiving citation/compliance maintenance/site visits/maintaining accreditation	26	4
Institutional support/program support	24	5
Already Osteopathic, already practicing OPP, OMT (Osteopathic at the Core)	21	6
Lack of resources: funding	21	6
Time	17	8
Faculty development	13	9
Support from MD colleagues	11	10

Appendix IV. Example statements about resources needed to apply for OR

Example statements from open-ended survey responses about what resources would be needed to apply for OR:

1. *“I would need an Osteopathic lead to develop curriculum, perform administrative duties related to application and certification, and handle faculty recruitment plus scheduling of Didactics and hands-on training.”*
2. *“We were an osteopathic residency program and very challenging to maintain. We were advised to not go for OR as we do not have osteopathic faculty.”*
3. *“Having resources available for evidence-based didactics. National or regionally led education programs for residents and faculty development.”*
4. *“I’m a big fan of what we offer as osteopathic physicians, I have been saddened by having osteopathic residents are almost embarrassed by OPP and feel that they have to qualify any usage of manipulation in the clinic. There are MDs that are interested, but I feel like OPP and POCUS have a lot of similarity when we talk about creating curriculum. There is both a knowledge and physical component to each, and someone that is interested has to use it constantly to actually become proficient. We have lots of interest in the knowledge, but few that want to put in the effort.”*
5. *“We have no interest. We currently teach OMM, OPP, and everything that OR advocates; we simply aren't interested in obtaining OR. It adds nothing to the program that we don't already have. It adds nothing to graduation or board certification of our residents. Medical students (both DO and MD) applying to our program rarely ask about it. No point in going through the hassle of applying.”*
6. *“As an Osteopathic physician and program director, I integrate OPP into my teachings already. I don't need OR to be allowed to teach OPP. Plus I don't have to go through all the work in maintaining OR, since I don't have OR certification. Having OR, would not change how I run my program and teach medicine.”*

7. *“The resources needed are largely administrative, from the sponsoring institution. The administrative and evaluative workload is similar to having an entirely separate ACGME program.”*
8. *“While I strongly support the idea of Osteopathic Recognition, it is more administrative work and time that many programs are able to complete. I would need to see a huge benefit for this in terms of recruiting DO's to agree to jump through the extra hoops.”*
9. *“I would need a faculty who wants to donate his time to teach and run OR.”*
10. *“Admin time - I intend to pursue OR as soon as possible, and believe we exceed the requirements, but I simply have not had the time to complete and submit the application given other professional responsibilities.”*
11. *“The OR requirements are too time intensive and labor intensive. Asking residents to do more work is difficult. They would do it if it didn't appear as EXTRA work that the others don't have to do. It is also expensive to have another clinic with paying faculty and staff and taking residents away from the operating room for that. We do not have the time, the resources or the interest from residents to make this worth the efforts.”*