



LMRC

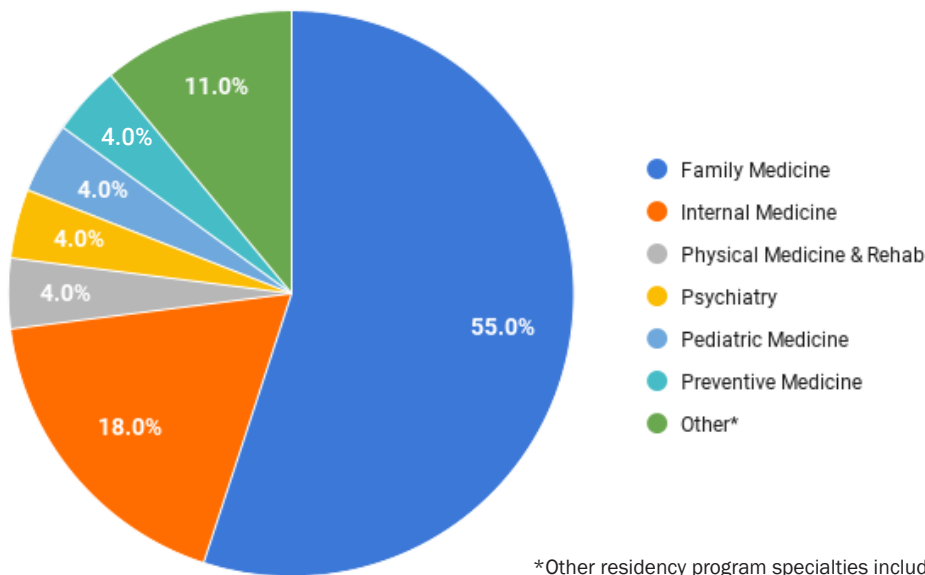
Lifestyle Medicine Residency Curriculum



The **Lifestyle Medicine Residency Curriculum (LMRC)** is a comprehensive, applicable, and flexible curriculum that prepares residents to make evidence-based, lifestyle behavior interventions. Upon completion of the education and practicum components, residents qualify to sit for the American Board of Lifestyle Medicine (ABLM) certification exam.

In 2024, the LMRC is currently offered in >350 residency programs and fellowships across the United States and Canada.

Types of Programs Implementing the Lifestyle Medicine Residency Curriculum in 2024



A collaborative initiative of:



*Other residency program specialties include Occupational Medicine, Sports Medicine, Gastroenterology, Urology, Cardiology, Neurology, Emergency Medicine, Rheumatology, General Surgery, OBGYN, Endocrinology & Metabolism, Geriatrics, Primary Care, Hematology/Oncology, Nephrology, Oral And Maxillofacial Surgery, Transitional Year, Radiology, Lifestyle Medicine Intensivist, Global Health, Dermatology, Clinical Informatics, Colon Rectal, Faculty Development, Orthopedics, Otolaryngology, Pathology, Pharmacy, Podiatry, Sleep, Ophthalmology

Learn more and apply to implement the LMRC at lifestylemedicine.org/lmrc
 Questions about the LMRC? Contact LMRC@lifestylemedicine.org





LMRC

Lifestyle Medicine Residency Curriculum

General Outline

The LMRC consists of both educational and practicum components. The educational component includes 40 hours of interactive didactic material along with 60 hours of application activities designed to be completed over a one- to three-year time period. The practicum component includes 400 lifestyle medicine-related patient encounters, 10 hours of (Intensive) Therapeutic Lifestyle Change (ITLC or TLC) program experience and 10 hours of group facilitation experience.

Module 1: Introduction to Lifestyle Medicine

Module 2: Provider's Self-Care and Influence on Community Wellness

Module 3: Nutrition in Chronic Disease: Prevention, Treatment, and Remission

Module 4: Physical Activity Science and Prescription

Module 5: Sleep Health Science and Interventions

Module 6: Substance Use Disorders: Prevention, Diagnosis and Treatment

Module 7: Fundamentals of Health Behavior Change

Module 8: Key Clinical Processes in Lifestyle Medicine

Module 9: Emotional and Mental Well-being

Module 10: The Role of Positive Psychology

Topic	Requirements*	Comments
Lifestyle Medicine approach in inpatient or outpatient clinical care settings	400 patient encounters	Address the six pillars of lifestyle medicine in clinical care: nutrition, physical activity, sleep, stress management/emotional resilience, substance abuse, and connectedness
Nutritional assessments and interventions	40 patient encounters	Food recall, nutrient analysis, percent body fat, and nutrition prescriptions
Physical activity assessments and interventions	40 patient encounters	Activity diaries, exercise capacity assessments, and exercise prescriptions
Emotional and mental wellbeing, sleep, and connectedness assessments and interventions	40 patient encounters	Stress and sleep assessments, depression/anxiety/mental health screening, monitor/improve heart rate variability, mindfulness, meditation, spirituality and emotional well-being activity prescriptions, and referral to resources
Tobacco and toxic substance assessment, brief intervention, and referral training	30 patient encounters	Smoking assessments, chemical and toxic exposure assessments, abstinence prescriptions, screening and brief intervention, and indications for referral
Interpersonal and community communication skills, practice-based learning and improvement, systems based practice, and leadership in policy and community	not designated	Public relations campaigns, media campaigns, policy development and change, health system change, communication of risks vs. benefits, and family, and community engagement
(Intensive) Therapeutic Lifestyle Change (ITLC or TLC) programs**	10 hours	Possible options for ITLC/TLC implementation include: 1) creation of programs; 2) establishment of relationships with existing programs within your institution/community such as cardiopulmonary rehabilitation, the Diabetes Prevention Program, or Pivio (formerly the Complete Health Improvement Program or CHIP); 3) development of electives within or outside your institution; 4) access to free ACLM-certified treatment or education programs used with patients, such as Full Plate Living or the Lift Project.
Support or coaching group facilitation	10 hours	Group observation, recording and facilitating – this may occur at the same time or separately from an ITLC/TLC program, must have 2 or more patients participate to count as group hours

* A tracking system for patient encounters and hours is provided.

** ITLC/TLC activities must address prevention, treatment, and reversal of chronic disease process.