

SUBJECT: Education on Use of Artificial Intelligence for Medical Documentation

SUBMITTED BY: ACOFP Resident Council

REFERRED TO: 2025 American College of Osteopathic Family Physicians (ACOFP)  
Congress of Delegates

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RESOLUTION NO. 16

1 WHEREAS, it is not currently mandated within Accreditation Council for Graduate Medical  
2 Education (ACGME) Family Medicine Residency guidelines to incorporate teaching of the  
3 appropriate use of artificial intelligence (AI) for clinical documentation; and  
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5 WHEREAS, artificial and augmented intelligence has increasingly become a supplement to medical  
6 documentation in primary care settings<sup>2</sup>; and  
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8 WHEREAS, healthcare networks increasingly require family medicine physicians to care for a  
9 higher volume of patients with greater medical complexities, resulting in a burden that  
10 may contribute to burnout and difficulty maintaining work-life balance; and  
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12 WHEREAS, electronic health records (EHR) and patient portals have created increased physician  
13 workload, and the use of AI for documentation improves its quality, reduces administrative  
14 burden, enhances patient interaction, supports burnout reduction, and increases accuracy  
15 and compliance with billing/charges<sup>1,3</sup>; now, therefore be it  
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17 RESOLVED, that the American College of Osteopathic Family Physicians (ACOFP) encourage family  
18 medicine resident exposure to training with appropriate use of AI for documentation in  
19 this changing medical landscape; and, be it further  
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21 RESOLVED, that the ACOFP formulate a Task Force on Artificial Intelligence in Medicine.

**FINAL ACTION: AMENDED & APPROVED as of April 2, 2025**

References:

1. Miao J, Thongprayoon C, Cheungpasitporn W. Should Artificial Intelligence Be Used for Physician Documentation to Reduce Burnout? *Kidney360*. 2024 May 1;5(5):765-767. doi: 10.34067/KID.0000000000000430. Epub 2024 Mar 25. PMID: 38523133; PMCID: PMC11146645
2. Dave T, Athaluri SA, Singh S. ChatGPT in medicine: an overview of its applications, advantages, limitations, future prospects, and ethical considerations. *Front Artif Intell*. 2023;6:1169595. doi: 10.3389/frai.2023.1169595
3. Patel MR, Balu S, Pencina MJ. Translating AI for the Clinician. *JAMA*. 2024;332(20):1701-1702. doi:10.1001/jama.2024.21772