

# COLLEGE CATALOG

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# 2021-2022

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WVSOM reserves the right to make changes to this catalog at any time to reflect current policies of the West Virginia Higher Education Policy Commission and the WVSOM Board of Governors, WVSOM procedures, administrative regulations and procedures, amendments necessitated by changes in state and federal law, fee changes and other reasons deemed necessary or appropriate by WVSOM. Information provided in this catalog is subject to change without notice and does not constitute a contract between WVSOM and any student or applicant for admission.

# Accreditation

#### Commission on Osteopathic College Accreditation (COCA)

The West Virginia School of Osteopathic Medicine (WVSOM) is fully accredited by the Commission on Osteopathic College Accreditation (COCA) of the American Osteopathic Association. COCA is the only accrediting agency that is recognized by the U.S. Department of Education (USDE) for accrediting institutions regarding predoctoral education of osteopathic physicians in the U.S. The address and phone number of the accrediting agency are:

Secretary, Commission on Osteopathic College Accreditation American Osteopathic Association 142 East Ontario St. Chicago, IL 60611-2864 Phone: 312-202-8097 Fax: 312-202-8397

#### Higher Learning Commission (HLC)

The West Virginia School of Osteopathic Medicine is accredited by the Higher Learning Commission [hlcommission.org], an institutional accreditation agency recognized by the U.S. Department of Education. The address and phone number of the Higher Learning Commission are:

The Higher Learning Commission 230 South LaSalle St., Suite 7-500 Chicago, IL 60604-1411 Phone: 800-621-7440 Fax 312-263-0456

WVSOM's website with the COCA and HLC marks of accreditation is available at <u>www.wvsom.edu/about/accreditation</u>.

#### Society for Simulation in Healthcare (SSH)

The Clinical Evaluation Center at the West Virginia School of Osteopathic Medicine became the first center in West Virginia to be accredited by the Accreditation Council of the Society for Simulation in Healthcare. WVSOM is accredited in the areas of teaching/education and assessment.

The Society for Simulation in Healthcare is the largest health care simulation accrediting body in the world with more than 100 accredited programs from 10 countries.

# **Catalog Policy Statement**

This catalog is an official bulletin of WVSOM and is intended to provide general information. It contains summaries of and references to certain policies, procedures, regulations and fees in effect as of July 1, 2021.

WVSOM reserves the right to make changes to this catalog at any time to reflect current policies of the WVSOM Board of Governors, WVSOM procedures, administrative regulations and procedures, policies of the West Virginia Higher Education Policy Commission, as applicable, and amendments necessitated by changes in state and federal law, fee changes and other reasons deemed necessary or appropriate by WVSOM. Information provided in this catalog is subject to change without notice and does not constitute a contract between WVSOM and any student or applicant for admission.

Students are urged to read this catalog carefully, as they are responsible for observing any regulations and requirements contained herein. This catalog does not contain references to all institutional policies, procedures or regulations for which students are responsible. Students should also review the complete list and full text of all applicable WVSOM institutional policies and procedures, which is available online at

www.wvsom.edu/About/policies\_procedures. WVSOM reserves the right to dismiss a student for cause at any time.

WVSOM is an equal opportunity institution and is committed to fostering an educational environment that values the development of human potential, cultural and ethnic diversity, and understanding. It is the policy of WVSOM not to discriminate on the basis of race, ethnicity, color, religion, sex (including pregnancy), gender, gender identity, sexual orientation, national origin, age, marital status, veteran or military status, disability, genetic information or other category that is protected under federal, state or local anti-discrimination laws in its educational programs, activities, admissions or employment policies. WVSOM neither knowingly affiliates with nor grants recognition to any individual, group or organization having such discriminatory policies or practices. This rule extends to all WVSOM activities related to the management of its education, employment, financial, business, personnel management practices and other affairs. With respect to disability, the disability must not be such as would, even with reasonable accommodation, in and of itself require a fundamental change in the nature of educational programs, activities, admissions or employment. Questions or complaints concerning equal opportunity or affirmative action should be directed to the WVSOM Office of Human Resources, 400 Lee Street North, Lewisburg, WV 24901, or by phone at 304-647-6279 or 800-356-7836. Questions or complaints concerning sexual discrimination or sexual misconduct should be directed to the WVSOM Title IX Coordinator, Dr. Rebecca Morrow, 400 Lee Street North, Lewisburg, WV 24901, or by phone at 304-793-6591. See WVSOM's Institutional Policy GA-14: Equal Opportunity, Nondiscrimination, Sexual Misconduct, and Other Forms of Harassment.

Additional information for students is located on the WVSOM student resources webpage at <u>www.wvsom.edu/students</u>.

# **The Educational Process**

WVSOM pledges to provide students with a quality medical education. In return, the student, by registering, accepts the rules and regulations pertaining to student conduct as established by the school. Additionally, the student agrees to abide by all other policies and procedures of the institution.

WVSOM's osteopathic medicine curriculum is both demanding and enriching. Students should be aware that full participation in required classroom, small group, laboratory and clinical training experiences is essential. Medical education programs require palpation of classmates as part of hands-on clinical training sessions.

# **Student Complaints**

If a student has a complaint, he/she is referred to the Institutio nal Policy ST-16.

# The Mission

The mission of the West Virginia School of Osteopathic Medicine (WVSOM) is to educate students from diverse backgrounds as lifelong learners in osteopathic medicine and complementary health related programs; to support and develop graduate medical education training; to advance scientific knowledge through academic, clinical and basic science research; and to promote patient-centered, evidence-based medicine. WVSOM is dedicated to serve, first and foremost, the state of West Virginia and the health care needs of its residents, emphasizing primary care in rural areas.

# Recognition

WVSOM is nationally recognized as a leader in rural primary care:

**No. 1** in the nation for percentage of graduates from U.S. medical schools practicing in rural areas (*Academic Medicine*, Vol. 85, No. 6);

**No. 1** in the nation for percentage of graduates from U.S. medical schools practicing primary care medicine in rural Appalachia (*Academic Medicine*, Vol. 87, No. 4);

**No. 1** in providing primary care physicians for West Virginia (*W.Va. Higher Education Policy Commission Health Sciences Report Card*);

**No. 4** in the nation for percentage of medical school graduates entering primary care residencies. Sixty-nine percent of our 2018-20 graduates entered primary care residencies. (*U.S. News & World Report,* 2022 edition of "Best Graduate Schools");

For 23 consecutive years, WVSOM has been recognized as one of the nation's top medical schools by U.S. News & World Report.

As one of 36 accredited osteopathic medical colleges in the nation, WVSOM plays a unique role in the state. The curriculum prepares its graduates to be osteopathic physicians who are well qualified to meet the need for quality rural primary health care in West Virginia and across the country. The curriculum prepares students for all medical specialty residency programs and licensure in all states.

WVSOM admits students and recruits faculty and staff in accordance with all equal employment opportunity and affirmative action standards.

# The Early History of the School

Throughout its history, our nation has traditionally faced a shortage of quality primary care physicians in rural areas. In the early 1970s, Lewisburg, W.Va., was selected as the site of an osteopathic medical school because of its rural setting and the availability of the former campus of the Greenbrier Military School. Following renovations to the military school complex, the newly chartered Greenbrier College of Osteopathic Medicine accepted its first class of 36 osteopathic medical students in 1974.

In January 1976, the college became part of the state system of higher education and was renamed the West Virginia School of Osteopathic Medicine. The new school focused on training West Virginia residents to practice primary care medicine in rural West Virginia. Thirty-three physicians received Doctor of Osteopathy (D.O.) degrees in June 1978, marking the beginning of a new era of medical care for West Virginia.

From its inception, WVSOM has fulfilled its mission with many graduates practicing osteopathic medicine in West Virginia and other rural communities across the nation. During the years, the school has developed a reputation for quality osteopathic medical education, innovative programs and a commitment to community service.

# Location

WVSOM is located in Lewisburg, the county seat of Greenbrier County, in the southeastern part of West Virginia. With a population of approximately 4,000, Lewisburg is one of the smallest medical school communities in the U.S., making it an ideal location for an osteopathic medical college that emphasizes rural primary care.

Lewisburg offers small-town friendliness and safety with amenities often found only in much larger cities. Just a few miles from campus is a beautiful, inviting countryside, including the free-flowing Greenbrier River with miles of surrounding hiking and biking trails.

Lewisburg is the third oldest town in West Virginia, with a rich history dating back to 1782. The surrounding Greenbrier Valley is noted for its beauty, magnificent farmlands and lush bluegrass pastures. With a blend of historic sites, farms, coal and timber industries, wilderness areas and modern resorts, the Greenbrier Valley is truly diverse. The world-renowned Greenbrier Resort is located only minutes from the campus. Some of the finest ski resorts, whitewater rafting and other recreational opportunities are nearby.

A major interstate network provides easy access to the urban centers of the mid-Atlantic region. Charleston, the capital

of West Virginia, is located 120 miles to the west; Roanoke, Va., is 85 miles to the southeast; Washington, D.C., is 265 miles to the northeast; and Pittsburgh, Pa., is 250 miles to the north. Other major cities and beaches on the eastern seaboard are just a few hours away by car, air or train.

# Campus

WVSOM's campus encompasses 67.3 acres, blending past and present, as historic buildings combine with 21<sup>st</sup>-century classrooms, laboratories and clinical facilities.

The main building houses classrooms, teaching laboratories, the James R. Stookey Library and Osteopathic Clinical Skills Lab, faculty and administrative offices.

The Center for Technology and Rural Medicine contains two modern lecture halls that are used by first- and secondyear students. With more than 21,000 square feet of space, the facility also houses the Information Technology department, a student commons area and offices for the associate dean for preclinical education.

The Admissions Center houses the WVSOM admissions office and is the first stop for applicants interviewing at the school. It offers an attractive reception area, a comfortable interview room and offices for the admissions and recruiting staff.

The Fredric W. Smith Science Building houses a modern gross anatomy lab that includes a state-of-the-art ventilation system, abundant natural light and a multi-purpose anatomy demonstration room that enhances the learning experience. The facility also includes a variety of laboratories where basic science faculty members conduct research projects and interested students and graduate teaching assistants can participate in research at WVSOM. WVSOM also maintains a clinical and translational research labs facility, with four subject encounter rooms that mirror clinic exam space.

The Roland P. Sharp Alumni Conference Center is the focal point on campus for alumni gatherings as well as student, faculty and community activities. It also houses the offices of the WVSOM Alumni Association, the Office of Continuing Medical Education and the WVSOM Foundation Inc.

The Founders' Activity Center includes a full-size basketball court, a multi-purpose space for free weights, a cardiovascular exercise area, men's and women's locker rooms and a lounge.

The Clinical Evaluation Center (CEC) is a 36,000-square-foot instructional facility that opened in 2009, then was expanded in 2014. Clinical skills courses, an osteopathic manipulative medicine (OMM) community clinic, electronic medical records training and clinical encounters involving standardized patients and human-patient simulators take place within the center. The CEC's numerous clinical teaching facilities are equipped with a state-of-the art integrated computerized digital recording system that documents students' clinical encounters for feedback and evaluation.

In 2016, the 67,849-square-foot WVSOM Student Center opened. Considered the heart of the campus, the Student Center is graced with a soaring clock tower and features an upper terrace and lower promenade. It includes a food service area and a 1,000-seat conference center that can be divided into smaller rooms. There is a large, open study space, quiet study areas, a recreational room, student government offices, Department of Student Life offices and the Campus Store, all with natural light designed to provide an enhanced student environment.

Also on campus is the Robert C. Byrd Clinic, a 55,000-square-foot affiliated outpatient clinic, where WVSOM clinical faculty provide medical care to the community. It also serves as a training site for WVSOM students and residents.

# Technology

WVSOM strives to stay at the forefront of medical education. Technology plays an integral role in each student's education from the day they apply through the day they graduate. Prospective students can periodically check and review their application status online. Preparation for entering WVSOM is efficient and user friendly. Students use the admissions webpage that provides important information and deadlines along with useful information under the "Applied: What's Next?" section.

All entering first-year students receive a laptop computer for use during their four years of study at WVSOM. Use of WVSOM information technology resources are governed by the Acceptable Use Policy that can be viewed on the information technology webpage at <u>www.wvsom.edu/it</u>. The Information Technology department maintains several webpages that offer resources to students on many topics that are accessible from the main IT home page.

Each entering student is required to take the Acceptable Use Policy exam under the Moodle course management system. The Moodle system is a web tool used by administration to deliver online course content and exams such as Acceptable Use and Title IX. Moodle links pertinent information through each individual course in which a user is registered. It may contain course syllabi, reading material, videos and various file formats (PDF, Word, Excel and PowerPoint) used to present relevant information. Moodle is available at <u>moodle.wvsom.edu</u>.

Network access is available to students in both wired and wireless environments. Students use their network username and password to access various areas of the WVSOM private website at <u>my.wvsom.edu</u>. The institution uses the Office 365 platform for the delivery of Outlook email and the Microsoft Office suite of products. WVSOM offers access to the Banner Student Self Service system where students can review grades, unofficial transcripts, financial aid and other valuable student record information. Both applicants and students can make payments on their WVSOM accounts by using the West Virginia State Treasurer's Office ePay site at <u>epay.wvsto.com/WVSOM\_ePay/wvsom1.aspx</u>.

Student printing is available in the technology building, Student Center and library for both color and black-and-white printing. Students are given a specific print allotment each academic year. If a student exceeds the allotment, the accounts receivable department will invoice the student charges based on the overage for the year-to-date in December and May. Color printing is charged at a higher rate. A computer lab is maintained in the library for student use in addition to publicly accessible computers.

WVSOM uses TurningPoint as its audience response system. Faculty can use TurningPoint to incorporate polling into their PowerPoint presentations. Students have the ability to view and respond to interactive questions using the free TurningPoint app on their smartphone/tablet or by going to <u>ttpoll.com</u> via the web browser on their computer. Students will be asked to enter a specific Session ID along with their first and last names to use TurningPoint. Instructional videos for how to set up and use TurningPoint can be found on eMedley.

The Clinical Evaluation Center utilizes Electronic Health Records (EHR) in all aspects of curriculum (case presentations, simulation and standardized patient encounters). The EHR is accessed through students' laptops, iPads and on-site computers.

During the third and fourth years, students are based throughout West Virginia for clinical training. Students on rotation can access the clinical education manual via WVSOM's secure website. eMedley, an academic management system, is also used to track student schedules and will allow, in most cases, preceptors to complete and submit electronically the student's grade form. The student site evaluations also have the ability to be submitted electronically from the eMedley system at <u>he.emedley.com/wvsom</u>.

WVSOM maintains a graduation web page. From a congratulatory message to schedules and forms that need to be completed, students can complete all required documents for graduation from off-site locations.

The Information Technology department maintains a help desk to assist with hardware and software issues including mobile devices. It is located in the technology building, and the hours of operation are 8 a.m. to 4:30 p.m., Monday –

Friday. WVSOM is proud of its commitment to the latest technology. We are dedicated to staying abreast of the latest technology trends and teaching tools and continue to strive to stay on the cutting edge of medical education.

# Library

The library serves the curricular and lifelong learning needs of students, alumni, faculty and staff. Additionally, the library serves as a medical resource library for physicians and allied health professionals in the region. Library staff provides medical research assistance, training and outreach on medical resources and interlibrary loan requests. Library holdings include essential medical and biomed/science texts and e-books, e-journals, CME materials, audiovisual materials, medical databases and daily newspapers from local and national sources. The library also houses study areas, a conference room and a computer laboratory in the 24/7 area. Of special note are the library's unique historical collection of osteopathic resources and collection of WVSOM-related publications.

# **Campus Store**

The WVSOM Campus Store, located in the Student Center, supplies everything needed to help students complete their medical education, from required textbooks to medical equipment (stethoscope, oto/ophthalmoscope set, blood pressure kits and small tools). Students, alumni and families will find traditional WVSOM-branded items such as T-shirts, sweatshirts, glassware, blankets, frames, etc. The Campus Store hours are 8 a.m. to 4:30 p.m., Monday – Friday. The Campus Store is also open during special occasions such as White Coat/Convocation and Graduation.

# Robert C. Byrd Clinic

The Robert C. Byrd Clinic (RCBC) has two locations, both of which have achieved Rural Health Clinic certification from the Centers for Medicare and Medicaid Services. The main clinic is located on the WVSOM campus and the satellite clinic is located in Rupert, W.Va. RCBC is a comprehensive nonprofit health care organization committed to providing quality primary health care to the residents of the greater Greenbrier Valley. Clinically, RCBC offers a wide range of services including family medicine, internal medicine, osteopathic manipulative medicine, pediatric medicine, psychiatry, proctology, medical acupuncture, psychological/behavioral health, pediatric pulmonology and radiology. Laboratory services are provided by Laboratory Corporation of America (LabCorp). Ancillary services include social services, radiology, ultrasonography, bone density scanning, consultant pharmacist and diabetic education. RCBC has Level 3 Patient-Centered Medical Home status from the National Committee for Quality Assurance. The clinic has transitioned its practice to meet meaningful use guidelines and is committed to providing quality care close to home. RCBC offers evening appointments Monday – Friday and Saturday morning appointments.

# **Affiliated Facilities**

While initial clinical experience is gained on campus through the Robert C. Byrd Clinic and community primary care practice sites, the school maintains contractual arrangements with off-campus hospitals and clinics to provide a large part of the clinical experiences in the third and fourth years. Affiliated clinical training sites range from large teaching hospitals to rural Appalachian clinics. Current WVSOM affiliate training facilities are listed in the Statewide Campus section of the catalog.

# **Student Housing**

WVSOM does not offer student housing. However, the Office of Student Life maintains an online housing directory to assist first- and second-year students in securing housing. The directory is a compilation of information regarding rental properties in Lewisburg and Greenbrier County. Students are encouraged to use the directory and visit the area. First-year students should be moved in and settled prior to the start of orientation.

The housing listings do not represent an endorsement, approval or recommendation by WVSOM of the landlord, owners or management company; the quality, conditions or features of the properties; or the business practices of

those involved. Listings are not reviewed, vetted or inspected by WVSOM, and we rely solely on the landlord/owner for information about the housing offerings. WVSOM, therefore, is not responsible for any issues that may arise with any property or rental agent (e.g., issues with refund of deposits or conflicts with landlords/owners). Any issues that do arise with any property or landlord/owner should be addressed directly with the landlord/owner. Although WVSOM does not assume responsibility for the quality, conditions or features of the properties, strict adherence to nondiscrimination practices are required of those who list properties. Current and accepted students may access the housing directory through MyWVSOM.

# **Community Service**

WVSOM provides students with numerous opportunities to participate in service and community outreach activities. These activities complement the school's commitment to osteopathic medical education and enhance the efforts to improve the health in communities on local, state, regional, national and international levels through education and advocacy. Many of the service activities enable students to apply their skills and knowledge to assist those in need as well as further develop their own skills under the guidance of experienced faculty members.

# WVSOM's Center for Rural and Community Health

WVSOM's Center for Rural and Community Health (CRCH) drives engagement in rural health through evidence-based education and training, research, outreach and special projects. Growing dynamic grant-fueled programs and projects, CRCH works together with communities on their priorities to build capacity, infrastructure and leadership that empowers holistic health and well-being. CRCH community partners encompass diverse WVSOM, local, state and national stakeholders impacting population health at the grassroots level. CRCH's key nonprofit partner, the Greenbrier County Health Alliance (GCHA), focuses on strengthening policies, environments and systems to build health equity across the Greenbrier Valley. Together, we provide services spanning grantmaking, program and project management, professional development, education and training, research, scholarly activity, and data management, policy, technical assistance, and collaborative community spaces and platforms.

WVSOM students and stakeholders are CRCH's most valued community, and we continue to grow opportunities for students to engage with stakeholders in cultivated, meaningful ways that positively impact medical skills and training, orientation and future practice. WVSOM students partner with CRCH on community-centric initiatives targeting health promotion, disease prevention and management, professional and workforce development, substance use and recovery, health behavior and literacy, clinical and translational science, research and scholarly activity, public health response and holistic health equity.

CRCH is located on WVSOM's campus and in various outlets across the Greenbrier Valley and beyond. Notably, the Clingman Center for Community Engagement, located in downtown Lewisburg's Montwell Commons, is an inclusive hub that brings together WVSOM and grassroots communities and partners in opportunities to enhance cross-learning, collaboration, engagement and quality of life. The Clingman Center is available for private and community-based events and activities. To learn more, visit the Center for Rural and Community Health at <u>crch.wvsom.edu</u>.

# WVSOM Research and Scholarly Activity

At WVSOM, the primary mission is to offer a high-quality medical education. Research and scholarly activity are important aspects in the advancement of medicine and many WVSOM faculty members are involved in research in basic science and clinical sciences. Further, faculty also engage in other scholarly activity, such as case reports and quality improvement projects. Faculty enthusiastically offer opportunities for medical students to become involved in research and scholarly activities each year. Opportunities most often take place in the summer months between the first and second years of their medical studies. However, medical students also have the opportunity to continue summer research and scholarly activity during their second year. Students may also participate in research rotations during their third and fourth years. Medical students are offered the opportunity to present research and scholarly activity findings at WVSOM-affiliated seminars and national meetings. WVSOM supports medical students being

involved in research and scholarly activity and encourages them to explore these opportunities.

# **Basic Requirements for Admission**

English – 6 hours Behavioral Science (psychology/sociology) – 6 hours Biology/Zoology – 6 hours Physics – 6 hours Chemistry – 12 hours (must include at least 3 hours of biochemistry) Labs – 6 hours (must include at least 2 hours of biology lab and 4 hours of any combination of biology, chemistry and/or physics lab)

A grade of "C" or better must be earned in all prerequisite coursework. Applicants must complete a total of 90 semester hours of credits from an accredited college or university.

It is recommended that prospective applicants also have the following:

- Anatomy
- Cell Biology
- Embryology
- Histology
- Immunology
- Medical Microbiology
- Modern Genetics
- Physiology
- Psychology
- Sociology

For more detailed information, visit <u>www.wvsom.edu/admissions/application-requirements</u>.

# **Transfer Policy**

Students in good standing who have successfully completed their first and/or second year at other osteopathic or allopathic medical colleges may apply for admission to WVSOM. Students in good standing may apply to transfer from WVSOM to another osteopathic or allopathic medical school or college. A student is considered to be in good standing if he/she has met the school's academic requirements in a satisfactory manner and has demonstrated professional behavior.

#### I. Transfer to WVSOM

#### A. Information:

Students requesting a transfer to WVSOM must be in good academic standing in their first and/or second year at an accredited osteopathic medical school or at an allopathic school accredited by the Liaison Committee on Medical Education (LCME). Acceptance of transfer students will be dependent upon the student's qualifications, curricular compatibility and available space. Additional coursework may be required to meet the requirements of the WVSOM curriculum. Credits may be transferred only from medical schools and colleges accredited either by the Commission on Osteopathic College Accreditation (COCA) or by the LCME.

The student must provide:

- 1. A completed American Association of Colleges of Osteopathic Medicine Application Service (AACOMAS) application accompanied by a nonrefundable application fee.
- 2. A letter from the applicant indicating why he/she wishes to transfer to WVSOM and explaining any circumstances resulting in his/her request for a transfer from his/her current medical school.
- 3. Official transcripts from all colleges and/or universities attended including osteopathic/allopathic medical school(s). Candidates with credentials from a college outside the U.S. are required to meet the equivalency of the minimum requirements for admission to WVSOM. Coursework taken at a foreign institution must be evaluated for U.S. equivalency by an approved evaluation service.
- 4. An official copy of all Medical College Admission Test (MCAT) scores.
- 5. A letter from the academic dean of the osteopathic/allopathic medical college in which the student is currently enrolled giving the enrollment status of the student and the terms of withdrawal from that institution.
- 6. Letters of recommendation from two faculty members at the medical college where the student is currently enrolled.

#### B. Requirements:

- 1. Students who transfer to WVSOM from another college of osteopathic medicine must complete the last two years of instruction at WVSOM.
- 2. When a student transfers from an LCME-accredited medical school or college to WVSOM, at least two years of instruction must be completed at WVSOM.
- 3. A student who transfers from an LCME-accredited medical school or college to WVSOM must complete all required courses in osteopathic principles and practice and osteopathic manipulative medicine before graduation.
- 4. Proof of U.S. citizenship or permanent resident status (green card).

#### C. Process:

- Once complete, the transfer application file will be sent to the Admissions Committee to review the file and determine admissibility based on the student's academic record and compatibility with the mission of the institution. If found acceptable at this stage, the transfer application file will be sent to the Student Promotions Committee.
- 2. The Student Promotions Committee will review the file to determine compatibility with the curriculum and, if appropriate, specify the deficiencies to be addressed. If found acceptable at this stage, the transfer application file and a list of deficiencies will be returned to the Admissions Committee. If the applicant's records are found incompatible with the curriculum, the file will be returned with the recommendation to deny transfer.
- 3. Any transfer applicant found acceptable by the Admissions Committee and the Student Promotions Committee will be interviewed by the Admissions Committee, which makes a final recommendation to the vice president for academic affairs and dean, who, in turn, will make the final determination of acceptability regarding admission.

#### **II. Transfer from WVSOM**

Any WVSOM student requesting transfer from WVSOM to an accredited college or school of medicine must meet the following requirements:

- A. Be in good academic standing at the time transfer is requested.
- B. Follow the WVSOM Withdrawal Policy procedures as outlined in Institutional Policy E-38.
- C. Have a letter from the WVSOM vice president for academic affairs and dean acknowledging the student's intent to transfer.

# Curriculum

The WVSOM curriculum is carefully constructed to thoroughly prepare its graduates for practice in any setting. However, the WVSOM educational program is tailored to train physicians for practicing primary care medicine in rural settings.

The four-year program at WVSOM emphasizes basic and clinical sciences, training in hospital and primary care clinical settings, and extensive training in diagnostic skills including early clinical experiences. Students are prepared for the challenges of rural practice through family medicine and other clerkships. The common thread of osteopathic medical principles and practice ties together all elements of WVSOM's curriculum.

WVSOM's Year 1 and Year 2 curriculum is referred to as the Patient Presentation Curriculum (PPC). This curriculum is described below.

# **Credit Hours**

A credit hour is defined by the Code of Federal Regulations in 34 CFR 600.2, except as provided in 34 CFR 668.8(k) and (l), as an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency that reasonably approximates not less than:

- 1. One hour of classroom or direct faculty instruction and a minimum of two hours of out-of-class student work each week for approximately 15 weeks for one semester or trimester hour of credit, or 10 to 12 weeks for one quarter hour of credit, or the equivalent amount of work during a different amount of time; or
- 2. At least an equivalent amount of work as required in paragraph 1 of this definition for other academic activities as established by the institution including laboratory work, internships, practice, studio work and other academic work leading to the award of credit hours.

For Year 1 and Year 2 courses, one credit hour is equal to 15 hours of lecture or 30 hours of laboratory (rounded to the nearest 0.50 credit hour). When calculating lecture contact hours, a 50-minute lecture is considered one hour.

For Year 3 and Year 4 courses, 1.5 credits are awarded for each week of rotations. For rotations, students are available 7 a.m. to 7 p.m. Monday through Friday, with weekend work sometimes required to enhance the student's educational experience. The Year 3 and Year 4 curricula total 66 credit hours and 57 credit hours, respectively.

# **Program Outcomes**

The comprehensive medical curriculum at WVSOM facilitates the mastery of core competencies that are necessary for students to develop into caring and compassionate physicians who excel in their field. These program outcomes are

measured through a variety of assessment methods including course exams, lab practicals, team-based learning activities and national board exams.

The following reflects the knowledge and attributes expected of our students upon successful completion of the medical curriculum.

#### Osteopathic Principles and Practice (OPP) and Osteopathic Manipulative Treatment (OMT)

Candidates must be able to demonstrate knowledge of osteopathic principles and practice, and to apply knowledge of somatic dysfunction diagnosis and Osteopathic Manipulative Treatment in the clinical setting. Upon graduation from WVSOM all students will be able to:

- Demonstrate knowledge of OPP and OMT, and apply it to all patients, with an emphasis on the needs of rural and underserved areas.
- Apply knowledge of OPP and OMT across a variety of clinical settings.
- Describe the interrelationship of body structure and function in the delivery of whole person heath care.
- Describe how the human body's self-healing and self-regulatory mechanisms affect treatment options.
- Articulate the scientific knowledge supporting the use of OPP and OMT, including the basic science of the mechanisms and evidence-based clinical application of OMT in the diagnosis and treatment of somatic dysfunction in the various regions of the body.
- Name and describe the types of OMT, identifying their indications and contraindications, and articulating their relative value, advantages and disadvantages.

#### **Osteopathic Patient Care**

Provide patient-centered care that is culturally responsive, compassionate, and appropriate for the effective treatment of illness and promotion of health. Upon graduation from WVSOM all students will be able to:

- Obtain a complete and focused patient history, to include belief systems, and psycho-social and cultural, and integrate this information into the comprehensive care of the patient, without respect to age, gender, gender identity, sex, sexual orientation, race, color, creed religion, handicap, or national origin.
- Provide patient-centered care that is culturally responsive, compassionate, osteopathically oriented, and appropriate for the effective treatment of illness, prevention of disease and promotion of health.
- Conduct relevant, complete, and focused physical and mental status examinations.
- Perform osteopathic structural examination and OMT as well as other common medical procedures with attention to patient safety and comfort.
- Identify and provide appropriate initial care for life-threatening medical conditions.
- Engage patients and family members as partners in health care through effective patient education and counseling.
- Integrate OPP and OMT into the treatment, management, and prevention of illnesses.
- Demonstrate the ability to incorporate health promotion, screening, and disease prevention into the care of patients.

#### Medical Knowledge for Osteopathic Medical Practice

Demonstrate an understanding and application of the evolving osteopathic, biomedical, clinical, epidemiological, biomechanical, and social sciences to optimize patient care. Upon graduation from WVSOM all students will be able to:

- Apply the foundational scientific basis of the normal structure, development, function, and relationships among the organ systems of the body to concepts of health and disease.
- Apply principles of pathophysiology to diseases and disorders.
- Apply pharmacological principles to medical therapeutics.
- Appraise the role of normal human biological, cognitive, psychological, and behavioral development across the lifespan as determinants and influences of health and illness.
- Accurately interpret the clinical, laboratory, pathologic and radiologic manifestations of health and common diseases.

- Engage in a systematic approach to clinical reasoning to solve clinical problems in the context of osteopathic principles.
- Apply the scientific foundations of medicine to the practice of evidence-based medicine.
- Recognize indications and contraindications of medical therapeutics, complementary, alternative, integrative medical treatments, and surgical interventions.
- Describe the principles of the scientific method and translational research as they apply to caring for patients.

# Practice-Based Learning and Improvement in Osteopathic Medicine

Demonstrate the ability to continuously evaluate patient care practices, scientific evidence and personal beliefs and biases as they relate to improving the care of patients and optimizing patient outcomes. Upon graduation from WVSOM all students will be able to:

- Utilize fundamental epidemiologic concepts, clinical decision-making skills, evidence-based medicine principles and practices, and biomedical informatics resources to locate and evaluate the relevance, validity, quality, and clinical significance of research information.
- Model how new scientific findings can be incorporated into patient care.
- Develop a systematic methodology for integrating practice-based improvements into one's own clinical practice.
- Critically appraise the effectiveness of diagnostic testing and therapeutic interventions.
- Employ strategies for seeking out and integrating feedback from patients and colleagues to identify competency in performance, selecting appropriate educational opportunities to correct deficits and improve performance.
- Utilize self-reflection as a method of continuous self-assessment to enhance self-awareness through identification of one's own strengths and challenges in order to improve one's performance and guide life-long learning.

# Interpersonal and Communication Skills in the Practice of Osteopathic Medicine

Demonstrate the ability to consistently interact respectfully, empathetically, and professionally with patients, families, allied health care providers, staff, and colleagues, to optimize patient outcomes. Upon graduation from WVSOM all students will be able to:

- Establish positive, professional, and productive relationships with patients, the patients' families, other members of health care team, and the community through respectful and effective information exchange.
- Demonstrate appropriate strategies for engaging patients and their families in difficult conversations (e.g. endof-life, medical errors, serious diagnosis, etc.).
- Demonstrate an awareness of each patient's cultural and spiritual beliefs, and health literacy level across all interactions and communications.
- Demonstrate shared decision-making techniques when communicating with patients, families, and allied healthcare providers.
- Effectively negotiate conflicts within the health care team to optimize patient outcomes.

# Professionalism in the Practice of Osteopathic Medicine

Demonstrate a commitment to the highest standards in the conduct of professional responsibilities, adherence to ethical principles and culturally-aware responsiveness to diverse beliefs and customs. Upon graduation from WVSOM all students will be able to:

- Demonstrate knowledge of the behavioral and social science concepts that encompasses professional behaviors and attitudes (e.g. humanistic behaviors; responsiveness to the needs of patients that supersedes self-interest; accountability to patients, society and the profession, etc.).
- Demonstrate respect, sensitivity and responsible behavior to people of all gender identities, skin colors, ethnicities, ages, sexual orientations, religious affiliations, socio-economic statuses, and abilities.
- Demonstrate a commitment to personal cultivation and ongoing professional development through lifelong learning.
- Demonstrate respect for patients, families, allied health care providers, staff and colleagues, etc. through the consistent application of ethical principles in practice and research.

- Promote the ethical behavior of peers and organizations; intercede when unethical actions are encountered.
- Identify personal and professional conflicts of interest.
- Demonstrate a spirit of progressive cooperation with colleagues and show respect for their rightful practices.
- Acknowledge the contribution of those who have educated them.
- Recognize signs and symptoms of physician impairment, and utilize wellness resources available.

#### Health Care Delivery and Systems-Based Practice in Osteopathic Medicine

Demonstrate an awareness of, and responsibility to, the larger context and system of health care, and effectively utilize its available resources to provide optimal health care and value to the individual patient and local and global communities. *U*pon graduation from WVSOM all students will be able to:

- Appreciate the complexity of the larger environment in which health care occurs (e.g. payment, regulatory, legal and educational systems).
- Describe and analyze how health care is currently organized, financed and delivered. Promote improvements to this process whenever possible.
- Identify the resources available in the health care system in order to maximize the health of the individual and the community-at-large, especially in the context of underserved areas.
- Describe the role of advocacy and health care policy in improving patient care and optimizing patient outcomes.
- Assist patients and family members in their understanding of applicable healthcare benefits, coverage limits, and utilization management procedures.
- Synthesize information concerning the health of patient populations and communities to identify needs and develop appropriate supportive interventions.
- Apply principles of evidence-based, cost-conscious, and cost-effective health care to optimize patient outcomes.
- Delineate those components of the health care system that create barriers to access and lead to disparities in health care provision.
- Analyze the current organization, financing, and delivery of health care in the U.S.
- Describe the role of medical jurisprudence and commercial endeavors as they relate to conflicts of interest in the health care system.
- Employ telehealth applications when needed to ensure patient access to appropriate care and to deliver healthcare.

#### Social Accountability in the Practice of Osteopathic Medicine

Prioritize and address community health outcomes through civic engagement, ethical leadership, and global social responsibility while delivering equitable and sustainable health care based on the tenets of social accountability. Upon graduation from WVSOM all students will be able to:

- Define, explain, and apply the principle of social accountability in the practice of osteopathic medicine in clinical and community settings.
- Define, explain, and apply principles of social justice to healthcare in the practice of osteopathic medicine in clinical and community settings.
- Identify, explain, and apply the osteopathic physician's commitment to health equity in service to underserved, vulnerable, disenfranchised, and special populations.
- Identify, explain, and apply basic public health principles, practices, and sciences to the practice of osteopathic medicine in clinical and community settings at the levels of the individual patient, family, community and society.
- Examine, explain, and integrate principles of civic engagement, ethical leadership, and health advocacy, and global social responsibility in the practice of osteopathic medicine in clinical and community settings.
- Assess and address the factors influencing the use of health services.
- Explain how the health care system relates to Medicare, Medicaid, insurance, and community health centers and the osteopathic physicians' role as health advocate.
- Examine and influence health policy-making efforts at the local and national levels.

#### Mental Health and Wellness in the Practice of Osteopathic Medicine

Partner with healthcare consumers, family members, and behavioral health and primary care providers to integrate the experience and expertise of the team into the provision of mental health and wellness services across the lifespan. Upon graduation from WVSOM all students will be able to:

- Exhibit leadership by directing, guiding, or influencing the collaboration and mental health service delivery of the healthcare team.
- Clearly convey relevant information in a non-judgmental manner about behavioral health using person-centered concepts and terms.
- Use strengths-based wellness, resilience, and recovery models in conceptualizing the mental wellness and care of patients.
- Implement focused interventions to engage patients and families and increase their desire to improve health (e.g., motivational interviewing, motivational enhancement therapy).
- Safeguard patient privacy and confidentiality with respect to communication, documentation, and data.
- Identify the role of the osteopathic physician in addressing the medical consequences of common social and
  public health factors (such as racial, socioeconomic and cultural factors that affect access to and quality of care)
  that contribute to the burden of disease.

# **Core Competencies Statement**

To complete the degree of Doctor of Osteopathic Medicine, the student will be able to demonstrate the following:

1. Osteopathic Principles and Practice

Knowledge of the osteopathic philosophy, general precepts and principles; demonstrate the requisite skills to address patient issues and concerns; apply knowledge of somatic dysfunction diagnosis; and apply appropriate osteopathic manipulative treatment in the clinical setting.

2. Medical Knowledge

The understanding and application of biomedical, clinical, epidemiologic, biomechanical, and social and behavioral sciences in the context of patient-centered care.

3. Patient Care

The ability to determine and monitor the nature of a patient's concern or problem, using a patient-centered approach that is appropriate to the age, level of health literacy and culture of the patient. He/she must be able to provide safe patient care that incorporates a strong fund of applied medical knowledge and best medical evidence, osteopathic principles and practice, sound clinical judgment and patient and family preferences.

#### 4. Interpersonal and Communication Skills

The knowledge, behaviors and attitudes that facilitate accurate and efficient information gathering, empathetic rapport building and effective information giving in interactions with patients, families and other members of health care teams.

#### 5. Professionalism

Knowledge of the behavioral and social sciences that underpin the professionalism competency, e.g. humanistic behavior; responsiveness to the needs of patients that supersedes self-interest; accountability to patients, society and the profession; a commitment to excellence and ongoing professional development; knowledge and application of ethical principles in practice and research; and awareness and proper attention to the issues within cultural competency.

6. Practice-Based Learning and Improvement

The ability to describe and apply fundamental biostatistical epidemiologic concepts, clinical decision-making skills, evidence-based medicine principles and practice, fundamental information mastery skills, methods to

evaluate relevance and validity of research information and the clinical significance of research evidence.

#### 7. Systems-Based Practice

Awareness of and responsiveness to the larger context and system of health care and ability to effectively identify system resources to maximize the health of the individual and the community or population at large.

NOTE: All the above should include knowledge and skills relevant to rural medicine and primary care, where appropriate.

#### **First-Year Curriculum**

The Patient Presentation Curriculum is based on the most common ways that patients present to a physician. These presentations provide the framework for the curricular structure. The Year 1 curriculum begins with a Foundations course to provide basic information needed to understand the subsequent patient presentations and treatments. The year continues with relatively uncomplicated presentations organized by organ systems. Early clinical experiences are emphasized from the earliest stages of instruction through the Clinical Skills, Osteopathic Principles and Practice and Early Clinical Exposure courses. Also, in the first year, students receive instruction important to WVSOM's mission of training primary care physicians for rural medical practice, including a focus on the special health care needs in West Virginia.

#### 607/FOM - Foundations of Osteopathic Medicine Course (credit hours 4.0)

This course is designed to introduce basic topics in clinical sciences, biochemistry, cell biology, physiology, pharmacology, microbiology, immunology, epidemiology, anatomy and pathology. Mastery of these topics will be needed to allow student success in the patient presentation courses to follow.

#### 609/Skin - Skin Course (credit hours 2.0)

This course is designed to provide the basic clinical science and biomedical science foundations needed for the diagnosis and treatment of diseases and injuries of the skin and integumentary system within the context of common patient presentations.

#### 610/MSK - Musculoskeletal Course (credit hours 3.0)

This course is designed to provide clinical science and biomedical science foundations needed for diagnosing, understanding the underlying disease mechanisms and treatment options for diseases and injuries of the musculoskeletal system, within the context of common patient presentations.

#### 620/CV - Cardiovascular Course (credit hours 2.5)

This course is designed to provide the basic clinical science and biomedical science foundations needed for the diagnosis and treatment of diseases and injury of the cardiovascular system within the context of common patient presentations.

#### 643/Resp - Respiratory Course (credit hours 2.5)

This course is designed to provide the basic clinical science and biomedical science foundations needed for the diagnosis and treatment of diseases and injury of the respiratory system within the context of common patient presentations.

#### 645/Neuro - Neuroscience Course (credit hours 3.5)

This course is designed to provide the basic clinical science and biomedical science foundations needed for the diagnosis and treatment of diseases of the central nervous system within the context of common patient presentations.

#### 692/B&L - Blood and Lymph Course (credit hours 3.5)

This course is designed to provide the basic clinical science and biomedical science foundations needed for the diagnosis and treatment of diseases of the blood and lymph system within the context of common patient

#### presentations.

#### 651/GI - Gastrointestinal Course (credit hours 3.0)

This course is designed to provide the basic clinical science and biomedical science foundations needed for the diagnosis and treatment of diseases and injury of the gastrointestinal system within the context of common patient presentations.

#### 644/Renal - Renal Course (credit hours 1.5)

This course is designed to provide the basic clinical science and biomedical science foundations needed for the diagnosis and treatment of diseases and injury of the renal systems within the context of common patient presentations.

#### 680/Endo - Endocrine Course (credit hours 2.5)

This course is designed to provide the basic clinical science and biomedical science foundations needed for the diagnosis and treatment of disorders of the endocrine system within the context of common patient presentations.

#### 685/Repro - Reproductive Course (credit hours 2.5)

This course is designed to provide the basic clinical science and biomedical science foundations needed for the diagnosis and treatment of diseases and injury to the reproductive system within the context of common patient presentations.

696/ECE - Early Clinical Encounters (credit hours 0.25) Physician shadowing experiences at the Robert C. Byrd Clinic.

#### 698/CS I - Clinical Skills I Lab (credit hours 1.0)

Students receive instruction in physical diagnosis and evaluation skills such as auscultation, use of diagnostic equipment and physician-patient communication in a laboratory setting as preparation for early clinical contact. These labs include experience with standardized patients and human-patient simulators.

#### 699/OPP I - Osteopathic Principles and Practice Lab (credit hours 3.5)

This course provides an introduction to the principles of osteopathic medicine, emphasizing diagnostic palpation methods and multiple corrective procedures for structural abnormalities. Integration of osteopathic principles and practice with organ systems is maintained throughout the course of instruction. This hands-on course provides the foundation for practice of osteopathic manipulative treatment.

#### Electives

#### 684/CULN – Culinary Medicine Elective (credit hours 3.0)

Culinary Medicine is the utilization of a unique combination of nutrition and culinary knowledge to assist patients in achieving and maintaining optimal health. This course is intended to expand students' comfort in counseling patients in successful behavior change around nutrition and cooking.

#### 665/ULTR - Ultrasound Elective (credit hours 1.0)

This course is designed to provide a basic understanding of ultrasound technology and use of ultrasound for clinical diagnosis. Additionally, this course will enhance understanding of anatomy, physiology and pathology related to these diagnoses. This is accomplished via participation in short lectures, group discussions and presentations, and hands-on ultrasound practice in a lab setting.

# Second-Year Curriculum

Year 2 of the PPC continues the presentation of basic clinical science and biomedical science foundations needed for the diagnosis and treatment of disease. Second-year presentations will become progressively more complex and incorporate previous presentations to form a spiral curriculum that reinforces and builds on previous learning. Students will continue to develop their clinical and osteopathic skills in lab courses.

#### 724/Heart - Heart Course (credit hours 2.0)

This course explores the pathologic and physiologic basis of, the pharmacologic treatment for, and the clinical aspects of congenital heart and lung diseases, hypertension, myocarditis, cardiomyopathies and heart failure using a variety of modalities including lecture, team-based learning, application exercises and other small-group activities.

#### 726/Rheum - Rheumatology Course (credit hours 2.0)

This course presents studies of the basic clinical science and biomedical science foundations of osteopathic medicine centered on patient presentations involving diseases affecting the joints, connective tissue and muscular systems as well as rheumatic diseases and trauma.

#### 728/Repro II - Reproductive II Course (credit hours 2.5)

This course is designed to provide the clinical science and biomedical science foundations needed for the diagnosis and management of abnormal uterine bleeding, contraception, menopause, osteoporosis and pregnancy, within the context of common patient presentations.

#### 736/Neuro II - Neuroscience II Course (credit hours 2.5)

This course explores the basic clinical science and biomedical science foundations of osteopathic medicine centered around patient presentations involving nervous system medicine.

# 738/Renal II - Renal II Course (credit hours 1.5)

This course focuses on the structural, functional and integrative aspects of the kidney and urinary system that underlie the pathologic mechanisms of the disease process. It begins with a review of the basic physiologic mechanisms that underpin renal function and continues to evolve around the differential diagnosis of kidney diseases and therapeutics through case presentations of hematuria and chronic kidney disease. The basic clinical science and biomedical science concepts encompassing diabetes mellitus type II is integrated into this module, as it is the leading cause of chronic kidney disease.

# 739/CP - Cardiopulmonary Course (credit hours 2.0)

# This course is divided into three sections:

Opening scheme is dyspnea, presenting a diverse group of pulmonary pathologies including interstitial, occupational, restrictive and vascular lung disease. Secondly, working off a scheme of chest pain, ischemic and valvular heart disease are presented including EKG interpretation, pharmacology, pathophysiology and an auscultation exercise. Finally, the scheme of syncope is presented and includes cardiac arrhythmias. Team-based learning is presented to support knowledge of ischemic and antiarrhythmic pharmacology.

# 742/GI II - Gastrointestinal II Course (credit hours 2.5)

This course is designed to provide the basic clinical science and biomedical science foundations needed for the diagnosis and treatment of diseases and injury of the gastrointestinal system. This is accomplished via participation in lectures, workshops, team-based learning and directed studies that apply pertinent anatomy, physiology, microbiology and pharmacology to clinically relevant case presentations.

#### 744/BhM - Behavioral Medicine Course (credit hours 2.0)

This course provides an overview of clinical science and biomedical science regarding normal and abnormal human psychosocial-behavioral development as well as psychiatric classification and diagnosis of mental illness, within the context of common patient presentations.

#### 747/BLIB - Blood Immune Bone Course (credit hours 2.5)

This course is designed to provide the basic clinical science and biomedical science foundations needed for the diagnosis and treatment of diseases and injury of the blood, immune and bone systems. This is accomplished via participation in lectures, workshops, team-based learning and directed studies that apply pertinent anatomy, physiology, microbiology and pharmacology to clinically relevant case presentations.

# 748/GU - Genitourinary Course (credit hours 2.0)

This course is designed to provide the basic clinical science and biomedical science foundations needed for the

diagnosis and treatment of diseases and injury of the genital-urinary system. This is accomplished via participation in lectures, workshops, team-based learning and directed studies that apply pertinent anatomy, physiology, microbiology and pharmacology to clinically relevant case presentations.

# 749/Neuro III - Neuroscience III Course (credit hours 2.5)

This course provides an overview of clinical science and biomedical science related to motor weakness, stroke, localization of neural function, pain and addictions; as well as the medical and societal response to the phenomenon of the opioid crisis in the U.S., within the context of common patient presentations.

#### 751/Skin II and MPF - Skin II and Medical Professionalism Course (credit hours 2.0)

This course is designed to provide the basic understanding of pathophysiology, typical presentations, pathologic features, diagnostic and management options associated with rashes and skin lesions. The Medical Professionalism components will expose the student to professional responsibilities of a physician including participating in activities related to compassionate care, the safety of patients and commitment to ethical issues in research and patient care. Additional training in Basic Life Support (BLS) and Interprofessional Education (IPE) is provided.

#### 795/CS II - Clinical Skills II Lab (credit hours 2.5)

Clinical preparation is emphasized throughout the curriculum in the second year of instruction in the lab-based course. Clinical instruction and practice are provided via lab and clinical experiences in the Robert C. Byrd Clinic and other medical facilities in the region including clinics, private physician offices, nursing homes, physical therapy, ambulance services and other allied health services. Clinical experiences include labs with standardized patients and with humanpatient simulators. Additional training is offered in casting/splinting, suturing, ophthalmology, ultrasound, communitybased patient education, end-of-life conversations and other medical procedures.

#### 731/OPP II - Osteopathic Principles and Practice II Lab (2.5 credit hours)

Training in osteopathic principles and practice continues during the year. The osteopathic concepts of the integrity of the body, the interrelationships of structure and function and osteopathic manipulative treatment in health and disease are central to the curriculum. One of the highlights of the second year is a student-driven free clinic for osteopathic structural diagnosis and osteopathic manipulative treatment under the supervision of OPP clinical faculty that provides students with hands-on experiences with actual patients.

# **Clinical Education**

WVSOM offers students many opportunities to work directly with patients before clinical rotations in the third and fourth years of medical school. Students' initial exposure to the clinical setting takes place early in their first year when they are assigned to the Robert C. Byrd Clinic, WVSOM's on-campus health facility, shadowing a physician.

Students' exposure to clinical skills gradually increases during the first two years. Students learn how to take a history, perform a physical, write a SOAP note, deliver osteopathic manipulative treatment (OMT), suture, apply and remove casts, scrub for surgical procedures and give injections, as well as various other clinical skills. Students also work with the Electronic Health Record (EHR) that has become standard for practicing physicians and hospitals. This early clinical skills training prepares WVSOM students well for the start of their clinical rotations.

Students learn osteopathic manipulative medicine by practicing on each other in weekly Osteopathic Principles and Practice Lab and delivering osteopathic manipulative treatment with actual patients during the Student OMM Clinic. WVSOM faculty and osteopathic physicians from the community instruct students during lab sessions and during the Student OMM Clinic. Students also participate in numerous labs with standardized patients and human-patient simulators. In these labs, students practice their communication, physical and history-taking skills prior to the beginning of Year 3.

The essence of clinical education has been said to be "experience with graduated responsibility." The first clinical rotations are preceptorships with primary care physicians. During this training period in a primary care physician's office, students develop the basic skills necessary for the practice of osteopathic medicine. This course serves as the foundation for all future clinical rotations. Concentrated clinical training follows through the remainder of the third year and continues until graduation.

Clinical education is designed to accomplish four objectives: provide ambulatory care training; provide hospital-based training; consolidate clinical knowledge and skills and how to use them in a clinical setting; and allow students, through electives, to augment their education in areas of medicine that are of special interest.

# Statewide Campus

Years 3 and 4 of a student's medical education are often referred to as the "clinical years," because most of the learning takes place in clinical settings instead of in the classroom. Clinical settings include physicians' offices, health centers, medical centers, hospitals, etc. Clinical sites are grouped into regional consortia (Statewide Campus sites) predominantly within the state of West Virginia. Students complete their required third-year core rotations at a Statewide Campus site. Year 4 rotations may be either at a Statewide Campus site or a site of their choosing in accordance with site validation and WVSOM graduation requirements.

Students are involved in various educational programs at their Statewide Campus site in addition to their clinical rotation requirements. These programs may include clinical case conferences, tumor board and skills labs. Students also learn to present clinical cases to a mix of audiences. They may be involved with research/QI/QA within the region and community service projects.

Students have 12 weeks of vacation (four weeks in Year 3 and eight weeks in Year 4).

# **Third-Year Curriculum**

The third-year curriculum focuses on the core clinical rotations (family medicine, internal medicine, obstetrics and gynecology, general surgery, psychiatry, pediatrics and emergency medicine). The students rotate in four- to eight-week blocks with board-certified/eligible licensed physicians. All Year 3 students must complete a CORE rotation in a health care setting with a resident enrolled in an accredited GME program. The preceptors mentor the students in patient issues specific to the specialty. For example, in family medicine, the student will initially take histories and physicals, and as the student's skills advance, they can assist in developing management plans. The precepting physician can use various methodologies, from Socratic bedside teaching to assigning readings and end-of-day summary discussions. The family medicine rotation also includes a comprehensive patient encounter note graded by the student's regional assistant dean.

Each month there is a planned regional comprehensive topical Education Day, mandatory for all Year 3 students. Rotation specific didactics are offered to students during their rotations on pediatrics, surgery, OB-GYN and psychiatry. These half-day and full-day sessions are varied and may include traditional lectures, clinical skills and case studies. There are often hospital-based didactics as well.

Evaluation and grading of the student performance is two-part:

- 1. Core competencies are graded by the preceptor.
- 2. Medical knowledge is assessed at the end of each core rotation and OPP via standardized testing from the NBOME ("COMAT" exam).

Throughout the year, osteopathic principles and practice is emphasized in a comprehensive and longitudinal fashion. Many preceptors perform osteopathic manipulation, Education Days encompass OPP didactics and the student completes an OPP-intensive rotation. The syllabus for each Core Rotation includes an associated OMM module and quiz. This "James R. Stookey, D.O." OMT rotation includes performing osteopathic manipulative treatment and an osteopathic case study that is graded by OPP faculty.

In preparation for the NBOME Level 2 PE, students are given an Education Day specifically to review the key skills and techniques the examination requires. They are then brought back to the main campus in Lewisburg for a Year 3 OSCE (Objective Structured Clinical Examination).

Students also participate in an interprofessional experience (IPE), working with others who constitute a health care team, including nursing students, physician assistant students and pharmacy students. These events often include simulation, standardized patient encounters, role-playing and group discussions.

The third-year curriculum also includes exposure to subspecialty care in a "Dean's Selective" and an opportunity for students to explore their specific interests in an elective month. The opportunity for an international rotation may be available during the elective month in Year 4. The third year concludes with a focused study month for COMLEX Level 2 CE.

#### Family Medicine I (8 weeks); Course Number: 806; 12 credit hours

Family medicine is an intellectually challenging specialty and is an essential component of the primary care infrastructure of the U.S. health care delivery system. Family medicine provides first contact, ongoing and preventive care to all patients from pediatric to geriatric age groups regardless of gender, culture, care setting or type of problem. The osteopathic family physician must also take into account the four tenets of osteopathic medicine, prevention and screening, coordination of health care, continuity of service, and family and community dynamics. The principles of family medicine are exemplified by these key components:

- Biopsychosocial aspects of care
- Comprehensive care
- Continuity of care
- Contextual care
- Coordination and integration of care
- Population health; patient safety

During the Family Medicine I rotation, the student will spend time in the physician's office, in the physician's business office and with members of the physician's health care team. When appropriate, the student will accompany the physician to the hospital, nursing home and home visits.

# Internal Medicine I (8 weeks); Course Number: 812; 12 credit hours

Studying the discipline of internal medicine provides the foundational knowledge to formulate a diagnostic and therapeutic plan for all adult medical patients. The Internal Medicine core course is divided into two four-week rotations which will address the care provided in the ambulatory and hospital settings. During these two four-week rotations, it is important that students read and study the conditions they see in each of the different settings. It is critically important that they integrate their knowledge of pathology, physiology, pharmacology, OPP and other basic sciences as they note the patient presentation, signs, symptoms and laboratory and imaging findings. This will allow students to develop a broad differential diagnosis and ultimately will lead to a diagnosis and treatment plan. This analytical process will be the foundation for future physicians' evaluation and care of patients throughout their career.

# Pediatrics I (4 weeks); Course Number: 815; 6 credit hours

Pediatrics I is the first formal introduction to pediatrics, in which students learn about the care of infants, children and adolescents. Children are not "little adults," as they have unique physiology as they develop, along with a multitude of age-specific diseases and conditions. Pediatrics encompasses preventive and medical care, which includes evaluation of developmental, emotional and social well-being. Students must learn developmental milestones and become proficient at obtaining psychosocial and developmental histories and performing physical examinations. In addition, pediatrics provides an introduction to the young patient and can set the tone for future interactions with the health care system.

# Psychiatry (4 weeks); Course Number: 801; 6 credit hours

No matter which field of medicine a student pursues, it is important to understand how a patient's behavioral health affects their general well-being. This rotation will expose students to the complexities of psychiatric diagnoses and psychopharmacology. Psychiatric diagnoses can be complex, as longitudinal interviewing is often necessary to form an accurate assessment. Many patients have two or three concurrent diagnoses, such as anxiety and depression. The situation can be further complicated by issues such as substance use disorders and social instability. Past students have recommended the benefit of learning about psychotropic medications. This study includes mechanisms of action, drug-drug interactions and common side effects. Many medical standardized examinations will emphasize these topics. We encourage students to meet with as many patients as possible. Each patient brings a different story and will help the student build a foundation of psychiatric knowledge. We will approach each patient individually, utilizing the biopsychosocial model to come up with diagnoses and treatment plans.

# Surgery I (4 weeks); Course Number: 825; 6 credit hours

The third-year general surgery rotation is a student's introduction to the surgical disciplines. The student will learn how to evaluate patients with presenting complaints that may require surgical intervention. Although scrubbing and assisting with various surgeries is an important component of this rotation, the evaluation of preoperative and the care of postoperative patients compose the core content for the third-year osteopathic medical student.

As there are strict protocols in the operating room, communication with preceptors is critically important. It is excellent practice to review the expectations and duties of this rotation, either just prior (by email if possible) or on the first day of your rotation.

Surgical rotation days typically are long. Your preceptor may have you round on his/her patients early in the morning, scrub into surgeries, then round on his/her postoperative patients at the end of the day.

#### Dean's Selective (4 weeks); Course Number: 831; 6 credit hours

#### Dean's Selective (2 weeks); Course Numbers: 832, 833; 3 credit hours each

This rotation is specific to each base site facility within the Statewide Campus regions. The rotations are identified by the regional assistant deans to permit a range of specialties for student selection. This rotation provides the student a greater opportunity to identify areas of interest or topics to broaden their experience base during their first clinical year. These rotations may be scheduled as a four-week rotation or two two-week rotations that may or may not occur in a consecutive four-week time period (e.g., vacation and the Dean's Selective may be scheduled together for two four-week blocks).

The supervising physician is required, midway through the rotation, to review with the student his/her progress toward fulfilling the educational objectives. If not offered, the student should request this opportunity. As in the core third-year rotations, students will need to improve their physical diagnosis skills.

#### Emergency Medicine (4 weeks); Course Number: 802; 6 credit hours

The emergency medicine rotation will cover a wide spectrum of patients and presentations, from infants to the elderly and from routine respiratory infections to the critically ill. The job of the ER physician revolves around timely and accurate triage, identifying the unstable patient, the stable ill patient requiring hospital admission, and those who can be safely treated and sent home with proper follow-up.

The history and physical will initially be more focused on the presenting complaint. Students will find that the vital signs are often of paramount importance. It is a prudent approach to never ignore an abnormal vital sign, historical findings, or a focused, accurate physical exam in developing a differential diagnosis.

Utilize ancillary tests to support or refute the differential diagnosis. In emergency medicine, we have to be comfortable with some amount of uncertainty; treatment is often initiated before a firm diagnosis can be established. Therefore, observing the patient's response to treatment and making rapid modifications if necessary is a pivotal component of this rotation.

During this rotation, students will be expected to learn specific procedures such as suturing, starting an IV and other emergency medical procedures. The emergency department works as a team and expects students to be a part of that team in taking care of seriously ill or injured patients.

Students will be challenged to have a basic knowledge of clinical medicine and will be expected to read the required reading list of topics, the patients' diagnoses or topics suggested by the attending physician. Students must remember to represent WVSOM in a professional manner on every rotation.

**Obstetrics and Gynecology/Women's Health** (4 weeks); Course Number: 803; 6 credit hours The OB-GYN/Women's Health clinical course is a four-week rotation focusing on the health care provided to female patients. Clinical learning activities should include experiences in labor and delivery, the operating room and the outpatient office. This specialty encompasses preventive health, reproductive health, maternal care and gynecologic surgery for women of all ages.

Regardless of the final specialty choice the student makes, they will be providing care to women. The rotation is challenging, with the goal to prepare each medical student to develop competence in the areas of reproductive and preventive care for women.

# Fourth-Year Curriculum

The Year 4 curriculum builds upon the core rotations. Students take the COMLEX Level 2 CE and Level 2 PE early in the fourth year.

In the late summer and early fall, students perform clinical rotations in their specialties of interest. These clinical experiences are often called "audition rotations" or "sub-internships." The students are given increasing levels of responsibility as their skills progress and mature. Here they are typically assigned to a care team including postgraduate-level learners, attending physicians, and often nurses or pharmacists in a multidisciplinary team. The teaching becomes more advanced, including complex patients, oral presentation skills, independent management under supervision and working within an inpatient care team. The hospital often has morning rounds and other scheduled didactics. If a student remains in his or her region, they are welcome to attend the regional Education Day as well.

The evaluation of the student is based upon assessment of the core competencies by the preceptors of record. The fourth-year curriculum also includes a second family medicine experience (including a second case study graded by WVSOM clinical faculty), subspecialty internal medicine and subspecialty surgery.

Internal Medicine II (4 weeks); Course Number: 914; 6 credit hours Internal Medicine III (2 weeks); Course Numbers: 971, 973; 3 credit hours each Internal Medicine III (4 weeks); Course Number: 911; 6 credit hours Internal Medicine III (2 weeks); Course Numbers: 912, 913; 3 credit hours each This is an extension of the internal medicine rotations taught during the student's third year. It is expected that the student has grasped the basics of the earlier medicine experience and is now adequately prepared to devote time to improving these skills and becoming more involved with the diagnosis and treatment of conditions commonly seen by the general internist and subspecialist.

An increased level of patient care and medical/osteopathic management is expected of students on this rotation. Internal Medicine II and III will be at a site of the student's choosing. These may also be scheduled as four two-week rotations. These will be graded as two or four separate rotations in general internal medicine or a subspecialty.

Students will have an opportunity to accompany their supervising physician while making hospital rounds, perform histories and physicals, participate in patient care, utilize their skills in osteopathic diagnosis, principles, practice and treatment, attend hospital lectures, and be generally introduced to hospital routine. Students are expected to attend morning report, internal medicine conferences and medical grand rounds. Presentation of cases by students should be

encouraged early, and their performance should be observed and critiqued. Time will be provided for independent research, study, reading of journals and evaluation.

Surgery II (4 weeks); Course Number: 920; 6 credit hours

Surgery II (2 weeks); Course Numbers: 921, 922; 3 credit hours each

Surgery III (4 weeks); Course Number: 925; 6 credit hours

Surgery III (2 weeks); Course Numbers: 926, 927; 3 credit hours each

**Surgery II and Surgery III** (Selective) are designed to further train the student in basic surgical skills, preoperative patient evaluations, operating room procedures and postoperative patient care in general surgery or certain surgical subspecialties. During these rotations the student will:

- Continue to develop skills in their performance of a detailed presurgical history and physical examination.
- Learn the indications for the selection of common presurgical tests.
- Become involved with all parameters of a patient's evaluation needed to reach a diagnosis.
- Learn the method of grading operative risks.
- Be exposed to the considerations employed in the selection of anesthetic agents.
- Become familiar with operating room protocol.

The student should have the opportunity to provide assistance on certain operative procedures and will be expected to follow the patient's care from admission to discharge. They are expected to become familiar with hospital surgical record requirements and should gain experience in ambulatory surgical diagnosis and postoperative follow-up.

Surgery II and Surgery III are selectives and may be scheduled as four two-week rotations, and may be done in a training hospital of the student's choosing. They may be done in a surgical subspecialty such as urology, gynecology, orthopedics or others (in accordance with the approved rotations list) that the student may identify as an area of personal interest or need in his/her program.

Family Medicine II (4 weeks); Course Number: 931; 6 credit hours

Family Medicine II (2 weeks); Course Numbers: 932, 933; 3 credit hours each

Family Medicine III (4 weeks); Course Number: 960; 6 credit hours

Family Medicine III (2 weeks); Course Numbers: 961, 962; 3 credit hours each

Between Family Medicine I and Family Medicine III, students must complete at least one of these rotations with a D.O. and at least one must be completed in a rural area. A student may choose to meet these two requirements within the same rotation (D.O. and rural), or may choose one rotation with a D.O. and one in a rural area. This rotation must run eight weeks consecutively with the same preceptor. With an approved exception request, this rotation may be divided into two four-week rotations if the student is auditioning for Family Medicine residencies. This rotation takes place in a clinic or other outpatient setting either in a rural West Virginia site or other approved rural site outside of West Virginia. It is expected that he/she will gain considerable experience in the evaluation and treatment of a variety of cases that are seen in general practice. It is anticipated that the clinical skills acquired during training in Family Medicine I will be expanded in this advanced rotation. To be sure students have sufficient training in osteopathic manipulative treatment (OMT), all must complete at least one "James R. Stookey, D.O." OMT rotation in their fourth year.

Family Medicine II and Family Medicine III are advanced rotations where the student demonstrates a significant level of maturation and responsibility in the application of physician skills toward the diagnosis and treatment of those conditions commonly seen by the family practitioner.

The supervising physician is required, midway through the rotation, to review with the student his/her progress toward fulfilling the educational objectives. If not offered, the student should request this opportunity. At this level of clinical education, the student must not misinterpret a less structured academic program as being a lesser opportunity to learn. Self-motivation to seek out knowledge is essential for the successful physician. Fourth-year students are expected to display this quality as they pursue, on their own, the additional studies required during each rotation.

#### Pediatrics II (4 weeks); Course Number: 950; 6 credit hours

Pediatrics II (2 weeks); Course Numbers: 951, 952; 3 credit hours each

The Pediatrics II rotation is designed to further refine the knowledge and skills required for the unique care of infants, children and adolescents. This rotation is a continuation of the Pediatrics I course. This rotation should be on a children's hospital general pediatric ward, in a NICU or PICU, or with a pediatric subspecialist and preferably not with a general pediatrician in an office-based practice. Greater emphasis should be placed on the study of diagnostic technologies and management aspects during Pediatrics II than in Pediatrics I. This may be a four-week rotation or two two-week rotations.

Elective I (4 weeks); Course Number: 835; 6 credit hours

Elective I (2 weeks); Course Numbers: 836, 837; 3 credit hours each

Elective II (4 weeks); Course Numbers: 935; 6 credit hours

Elective II (2 weeks); Course Numbers: 936, 937; 3 credit hours each

Elective III (4 weeks); Course Number: 940; 6 credit hours

Elective III (2 weeks); Course Numbers: 941, 942; 3 credit hours each

Elective IV (2 weeks); Course Number: 945; 3 credit hours

Students may choose selective rotations with the supervising physician and institution of their choice. These directed electives must be in the subject area required, but this flexibility in site selection allows the student to design the experience to better fit his/her personal needs. In addition, electives afford the student an opportunity to be visible at hospitals where he or she may wish to complete postdoctoral education, but which are not in the WVSOM system. This allows the student to be more competitive in the resident selection process (match program).

# **Statewide Campus Site Locations**

#### 1. South East Region

#### **Base Sites**

- A. Beckley Appalachian Regional Healthcare Hospital Beckley, W.Va.
- B. Raleigh General Hospital Beckley, W.Va.
- C. Greenbrier Valley Medical Center Ronceverte, W.Va.
- D. WVU Medicine Princeton Community Hospital Princeton, W.Va.

# Affiliate Sites

- 1. Beckley Veterans Affairs Medical Center Beckley, W.Va.
- 2. Catawba Hospital Catawba, Va.
- 3. Plateau Medical Center Oak Hill, W.Va.
- 4. Pocahontas Memorial Hospital Buckeye, W.Va.
- 5. WVU Medicine Summersville Regional Medical Center Summersville, W.Va.

# 2. South Central Region

#### **Base Sites**

- A. Charleston Area Medical Center Charleston, W.Va.
- B. Logan Regional Medical Center Logan, W.Va.
- C. Thomas Memorial Hospital South Charleston, W.Va.

#### **Affiliate Sites**

- 1. Boone Memorial Hospital Madison, W.Va.
- 2. CAMC-Teays Valley Hospital Hurricane, W.Va.
- 3. Highland Hospital Charleston, W.Va.
- 4. Montgomery General Hospital Montgomery, W.Va.
- 5. St. Francis Hospital Charleston, W.Va.
- 6. Tug Valley Appalachian Regional Hospital Williamson, Ky.
- 7. Williamson Memorial Hospital Williamson, W.Va.

# 3. South West Region

#### **Base Sites**

- A. Holzer Health System Gallipolis, Ohio
- B. St. Mary's Medical Center Huntington, W.Va.

# Affiliate Sites

- 1. Cabell Huntington Hospital Huntington, W.Va.
- 2. CAMC-Teays Valley Hospital Hurricane, W.Va.
- 3. King's Daughters Medical Center Ashland, Ky.
- 4. Pleasant Valley Hospital Pt. Pleasant, W.Va.
- 5. River Park Hospital Huntington, W.Va.
- 6. Southern Ohio Medical Center Portsmouth, Ohio

# 4. Northern Region

#### **Base Sites**

- A. WVU Medicine Reynolds Memorial Hospital Glen Dale, W.Va.
- B. Trinity Health System Steubenville, Ohio
- C. Washington Health System Washington, Pa.
- D. Weirton Medical Center Weirton, W.Va.
- E. WVU Medicine Wheeling Hospital Wheeling, W.Va.

# **Affiliate Sites**

- 1. Heritage Valley Health Beaver, Pa.
- 2. Sistersville General Hospital Sistersville, W.Va.
- 3. WVU Medicine Wetzel County Hospital New Martinsville, W.Va.

# 5. Central East Region

#### **Base Sites**

- A. Davis Medical Center Elkins, W.Va.
- B. WVU Medicine St. Joseph's Hospital Buckhannon, W.Va.
- C. Mon Health Medical Center Morgantown, W.Va.
- D. WVU Medicine United Hospital Center Bridgeport, W.Va.

# Affiliate Sites

- 1. WVU Medicine Braxton County Memorial Hospital Gassaway, W.Va.
- 2. Louis A. Johnson Veterans Affairs Medical Center Clarksburg, W.Va.
- 3. Mon Health Stonewall Jackson Memorial Hospital Weston, W.Va.
- 4. William R. Sharpe Jr. Hospital Weston, W.Va.

# 6. Central West Region

# **Base Sites**

- A. Marietta Memorial Health System Marietta, Ohio
- B. WVU Medicine Camden Clark Medical Center Parkersburg, W.Va.

#### **Affiliate Sites**

- 1. Appalachian Behavioral Healthcare Athens, Ohio
- 2. Holzer Health System Athens, Ohio
- 3. Hopewell Health Centers Athens, Ohio
- 4. Jackson General Hospital Ripley, W.Va.
- 5. Minnie Hamilton Health Care System Grantsville, W.Va.
- 6. Ohio Health O'Bleness Hospital Athens, Ohio
- 7. Roane General Hospital Spencer, W.Va.

# 7. Eastern Region

#### **Base Sites**

- A. WVU Medicine Berkeley Medical Center Martinsburg, W.Va.
- B. WVU Medicine Jeffereson Medical Center Ranson, W.Va.
- C. Frederick Health Hospital Frederick, Md.
- D. Grant Memorial Hospital Petersburg, W.Va.
- E. Meritus Health/Meritus System Hagerstown, Md.

# **Affiliate Sites**

- 1. Wellspan Chambersburg Hospital Chambersburg, Pa.
- 2. Martinsburg Veterans Affairs Medical Center Martinsburg, W.Va.
- 3. WVU Medicine Potomac Valley Hospital Keyser, W.Va.
- 4. War Memorial Hospital Berkeley Springs, W.Va.
- 5. Winchester Medical Center Winchester, Va.

# State Authorization of Postsecondary Education

The State Authorization Reciprocity Agreement (SARA) is a voluntary agreement among member states that establishes national standards for interstate offering of postsecondary distance education courses and programs. West Virginia was accepted as a SARA state in 2014, with the West Virginia Higher Education Policy Commission serving as the State Portal Entity. WVSOM was accepted as a SARA institution in 2015. SARA allows WVSOM to offer out-of-state clinical rotation courses to its students without seeking state-by-state approval.

# **Postdoctoral Training**

Postdoctoral training is a fundamental part of becoming an osteopathic physician and builds upon students' practical clinical experiences. On average, postdoctoral training requires an additional three to six years after graduation from medical school. WVSOM partners with the Mountain State Osteopathic Postdoctoral Training Institutions Inc., to provide postdoctoral training opportunities for our graduates.

In 2020, the American Osteopathic Association (AOA) ended its accreditation of residency programs. AOA residency training sites have undergone the change to a single accreditation system in partnership with the Accreditation Council for Graduate Medical Education (ACGME). All current Mountain State OPTI member training programs and institutions have achieved ACGME accreditation, and many are also seeking osteopathic recognition status to ensure osteopathic graduate medical education continues for our students.

Student rotations are available at all MSOPTI member training institutions and in most specialties. Educational programming is designed to provide medical students, interns and residents with an array of learning opportunities that will facilitate the trainee's ability to become a lifelong learner. WVSOM's Office of Graduate Medical Education offers counseling and support to students throughout the application and match processes for all postdoctoral training programs.

# **Mountain State OPTI Members**

The Mountain State Osteopathic Postdoctoral Training Institutions (MSOPTI) is a consortium consisting of WVSOM, as the central academic partner, and regional hospitals and training institutions offering ACGME-accredited postdoctoral training programs. A variety of residency specialties are offered. Current MSOPTI member institutions include:

AccessHealth Teaching Health Center, Beckley, W.Va. \* Charleston Area Medical Center, Charleston, W.Va. \* Cornerstone Care Teaching Health Center, Mount Morris, Pa. \*\* Greenbrier Valley Medical Center, Ronceverte, W.Va.\* Meritus Medical Center, Hagerstown, Md. \* Trinity Health System, Steubenville, Ohio \* WVU Medicine United Hospital Center, Bridgeport, W.Va. \*\*

Supporters offering clinical rotations:

- Beckley Veterans Administration Hospital, Beckley, W.Va.\*
- Monongalia General Hospital, Morgantown, W.Va.

\*Indicates a WVSOM Statewide Campus site (these sites offer all or most of the required rotations for selected third- and fourthyear WVSOM students participating in the Statewide Campus program).

\*\*Indicates a WVSOM Statewide Campus site with family medicine residency programs that have achieved ACGME Osteopathic Recognition.

#### **WVSOM Historical GME Match Information**

The past five years of performance of WVSOM graduates in the Graduate Medical Education (GME) Match can be found on the institution's website at <a href="http://www.wvsom.edu/academics/gme/match-data">www.wvsom.edu/academics/gme/match-data</a>.

# **Objective Structured Clinical Examination**

Students are required to take a practical examination called the Objective Structured Clinical Examination (OSCE) at the end of the second and middle of their third year. Students are required to pass both of these OSCEs before being allowed to progress further into their clinical rotations.

The OSCE utilizes standardized patients who are lay people with intensive training at depicting specific illnesses. The student performs clinical tasks in a series of stations while interacting with the patients.

Standardized checklists are used to evaluate each student. Every student sees the same problems and is asked to perform the same tasks. The tasks are representative of those faced in real clinical situations.

The OSCE is used to evaluate patient-centered skills and to measure clinical performance. Areas measured include doctor-patient communication, history taking, physical exam skills, written communication skills, clinical problem solving, and formulating a differential diagnosis and therapeutic plan.

# National Board (COMLEX) Pass Rates

The past five years of performance of WVSOM students and graduates in the COMLEX-USA National Board pass rates can be found on the institution's website at <u>www.wvsom.edu/about/outcomes</u>.

#### **Human-Patient Simulators**

WVSOM utilizes human-patient simulators to enhance students' clinical skills training. The high-fidelity simulators are full-size, interactive, computerized simulators that allow WVSOM medical students to confront real-world patient situations in a safe, controlled clinical training environment. WVSOM has 24 simulators: 17 adults, five children and two newborns.

The simulators can be programmed to create virtually any scenario for training purposes. With the ability to deliver such a wide array of medical emergencies, the simulators are valuable learning tools. Students, working as a team, interview, diagnose and treat "patients" in a controlled, simulated environment. This is immediately followed by a debrief session.

# WVSOM's Rural Health Initiative Program

The mission of the Rural Health Initiative (RHI) program is to enhance the rural primary care curriculum at the WVSOM in order to produce graduates uniquely qualified to practice medicine in rural, underserved communities of West Virginia.

WVSOM students selected for the RHI program receive multiple benefits, which include participation in unique rural experiences during third and fourth years, financial support and connection with rural West Virginia physicians who serve as mentors.

While all medical students at WVSOM complete rural rotations in West Virginia during their clinical years, participation in the RHI program takes clinical exposure to a higher level of engagement.

To learn more about WVSOM's RHI program, visit www.wvsom.edu/academics/programs/rhi.

This program is presented with financial assistance as a grant from the West Virginia Higher Education Policy Commission.

#### Southeastern Area Health Education Center (SE-AHEC)

The Southeastern Area Health Education Center (SE-AHEC) is located on the WVSOM campus and associated with Mountain State Osteopathic Postdoctoral Training Institutions. The mission of the SE-AHEC program is to improve the health of populations by developing an interdisciplinary workforce prepared to address the health needs of rural and underserved communities of West Virginia.

First- through third-year medical students have the opportunity to participate in the West Virginia AHEC Rural Community Health Scholars program, alongside students in other health disciplines (social work, nursing, pharmacy, dental and allied health). As West Virginia AHEC Scholars, students have the opportunity to become leaders in their profession and community; receive supplemental training and education from experts in rural health care; develop an astute understanding of how to best implement health care services in rural or underserved areas; and learn to work as part of an interprofessional team and provide meaningful patient care in the field while gaining hands-on experience.

AHEC also provides support for students in grades 9-12 through pipeline programs that prepare them for possible careers in the health professions, as well as support for continuing education for health professionals.

To learn more about SE-AHEC, visit <a href="https://www.wvsom.edu/ahec">https://www.wvsom.edu/ahec</a>

#### **Student Support Services**

A variety of academic support and personal counseling services are available to students through the Academic Support and Intervention Resources (ASPIRE) program. ASPIRE services are provided by licensed professional counselors/learning specialists and a licensed psychologist.

Prior to arriving on campus for the fall semester, each first-year student is assigned a second-year student as a peer mentor. The peer mentor is available to the new student to answer questions and assist in making the transition to medical school throughout the academic year.

# **Student Dress Code**

All students are expected to dress in a manner that demonstrates respect to other students, faculty, administration, patients, standardized patients and guests to the school. The dress code is designed to communicate cultural sensitivity, address concerns of infection control and demonstrate professionalism. A complete description of the Student Dress Code is available in the Student Handbook.

# **Attendance Policy**

Modification of this general policy for a specific course or activity may occur. Students will be notified of those modifications in the course syllabus distributed at the beginning of the course.

The course director retains the right to modify the syllabus. All modifications to the syllabus must be approved by the appropriate associate dean with reasonable notice (written, including email) to students.

Students are expected to attend lectures and are responsible for all lecture-related materials including handouts and assigned readings. Attendance and participation are required for all mandatory activities (e.g., presentation introductions and wrap-ups, laboratories, small group sessions, lectures, exams, Objective Structured Clinical Exams, Hospital Day or conferences). If a student anticipates an absence from a mandatory activity, or if an emergency arises, the student shall contact the course director involved, when possible, in advance of the scheduled activity.

The student also must contact the office of the appropriate associate dean, who will, with the appropriate documentation from the student, determine if the absence is to be excused (see "Guidelines for Excused Absences" in the Student Handbook). In the event that the student is excused from the mandatory activity, the activity must be made up in a manner determined by the instructor. In circumstances where the approved absence is due to illness, the appropriate associate dean may require an excuse from the student's physician on the date of absence or referencing an ongoing illness before the student will be eligible for a makeup of the mandatory activity. For ongoing or chronic absences, the appropriate associate dean may require the student to be evaluated at the Robert C. Byrd Clinic. Penalties for unexcused absences are defined in the course syllabi.

Attendance is a vital part of the clinical training experience; therefore, attendance is required for the entire duration of each clinical rotation. Failure to report on time, attend orientations, be present during a rotation, or departure prior to the end of a rotation may result in a grade of 65 (F) being issued for the rotation. If the student anticipates an absence from any of these clinical activities, or if an emergency arises, the student must contact the preceptor and their WVSOM Statewide Campus office, which has the authority to decide whether the absence is excused. Penalties for unexcused absences are defined in the Clinical Education Manual.

# **Insurance Coverage Policy**

All students will be enrolled in a student health insurance policy beginning on the date of matriculation and continuing through the student's graduation. All students shall be required to pay a student health insurance fee that provides for that coverage. Students may apply for a waiver of the health insurance fee by providing satisfactory proof of health insurance coverage that is equivalent. See Policy ST-05: <a href="https://www.wvsom.edu/policies/st-05">www.wvsom.edu/policies/st-05</a>.

#### **Student Health Services**

The health service fee, a part of the student's total tuition and fee schedule, pays for the student's clinical co-pay for health care services rendered by the physicians and staff at the Robert C. Byrd Clinic. The health service fee will not be applied to:

- Health insurance policy deductible.
- Health care rendered off site (hospital, laboratory services, radiology fees, etc.).
- Health care services provided by non-owned entities at the Robert C. Byrd Clinic. This currently includes Laboratory Corporation of America (LabCorp) and any services or procedures specifically excluded by your insurance policy.

#### **Health Precautions**

Before the first day of orientation, matriculating students are required to submit a completed immunization form

approved and provided by WVSOM. Additionally, by matriculation, they are required to provide evidence of inoculation against various diseases. Students, faculty and others involved in any portion of the educational program of WVSOM in which human tissues, fluids, etc. are contacted are required to wear protective coverings and follow Occupational Safety and Health Administration standards.

# **Audit Policy**

Audit students are those who are taking the class only for purposes of refreshing or acquainting themselves with the material offered in the course. Auditing will be allowed only if there is adequate space available in the class and the audit is approved in writing by the course director and the vice president for academic affairs and dean. Registered students, faculty and staff of WVSOM will be eligible to audit a class at WVSOM. Attendance and other requirements for auditors shall be determined by the instructor of the course being audited. It is not possible to change a course status from audit to credit. No tuition will be charged. All applicable fees for the course will be charged. The student will be expected to attend the lectures and laboratories. No examination(s) will be administered. NO CREDIT HOURS WILL BE AWARDED. Any deviation from this policy must be approved by the vice president for academic affairs and dean.

# **Tuition, Fees and Expenses**

The WVSOM, like all state-supported colleges and universities, operates strictly on a cash basis, with all payments and obligations being collected in advance. No financial credit of any type can be extended to any individual except for the Board of Governors' approved payment plan. Therefore, an individual is not officially a student until the registration process has been completed by full payment of tuition and fees.

A formal registration period shall begin on the first day of the academic semester, or a day so designated, and shall extend for a period of three days thereafter. Beginning with the fourth day thereafter and extending through the 10<sup>th</sup> day thereafter, a late registration fee shall be assessed to each individual not having paid the tuition and fees during the regular registration period. Students whose tuition and fees are to be paid directly to the institution by third-party agents must provide written documentation to the Office of Business Affairs before or during the registration period.

Students using U.S. Department of Veterans Affairs (VA) Post 9/11 G.I. Bill (Ch. 33) or Vocational Rehabilitation and Employment (Ch. 31) benefits will not be assessed a late fee, will not be prevented from enrolling and will not be required to secure alternative funding nor denied access to any resources while payment to the institution is pending from the VA.

A 60/40 payment plan is available for students who cannot pay all tuition and fees during the regular registration period due to extenuating circumstances. Please contact the Office of Business Affairs for additional information about the 60/40 installment/deferred payment plan. If full payment of tuition and fees is not made by the end of the sixth week, the individual will be subject to dismissal.

# Financial Aid

Your education is one of the most important investments you will ever make. The costs of medical education are high; therefore, careful planning and fiscal management are essential to meet your future obligations. Our goal is to help you become an informed borrower and to provide a comprehensive system of financial assistance services. Our intent is to provide not only dollar support but also financial counseling and debt management planning services.

The WVSOM financial aid philosophy statement states that we expect that students will make every effort to finance their education. The financial aid office will assist you with financing issues. Since scholarship and grant money are extremely limited, most students must secure outside educational loans to finance their education. You should remember that a loan is not a gift or grant. It must be repaid.

Educational debt management is essential. We encourage you to learn basic budgeting techniques, to learn to cut costs

and possibly to learn to live with less. We encourage you to seek creative ways to finance your education.

#### **Loan Programs**

- Federal Unsubsidized Stafford Loan: non-need-based loan for up to \$44,944 based on grade level. Interest rate is 4.228 percent. Interest accrues from the date of first loan disbursement. Origination fee of up to 1.059 percent.
- Graduate Professional Plus Loan: federally insured loan at an interest rate of 5.3 percent. Origination fee of 4.228 percent charged up front. Interest accrues from the date of the first disbursement. Eligibility up to budget maximum less other aid.

# **Scholarships**

Scholarship opportunities are also available to WVSOM students. The director of financial aid provides specific information to those students who meet the specific scholarship qualifications.

- Institutional and privately funded scholarships: a limited number of scholarships are available through WVSOM.
- Veterans Administration: students who are eligible for VA benefits, including the Yellow Ribbon Program, should contact their regional VA office or the WVSOM registrar's office.
- Health Professions Scholarship Program: full scholarship awarded through a branch of the armed forces. Contact your local armed forces recruiter for more information.
- Federal Work Study Program: campus-based, federally funded program that allows students to work during the summer and part time during the academic year.
- National Health Service Corps (NHSC) Scholarships: Visit the NHSC website or contact the rural health office at WVSOM.

# Procedures for Applying for Financial Aid

The financial aid office will provide each student with financial aid information each year. It is the student's responsibility to complete all the necessary forms. WVSOM uses the Free Application for Federal Student Aid (FAFSA) as the official needs analysis document. This application should be filed as early as possible, but no later than April 1, for returning students. Students must maintain satisfactory academic progress as described in the Financial Aid Guide. All students who receive financial aid must complete both an entrance interview and an exit interview that is available online.

# **Tuition and Fees Refund Schedule**

The following refund schedule will pertain to:

I. First-Time Enrollees

Students who officially withdraw before or during their first period of enrollment at the enrolling institution shall have their refund calculated as follows, in accordance with the provisions contained in the 1992 amendments to the federal Higher Education Act.

•	During the first and	l second wee	ks	90% re	fund	

#### II. Continuing Students

Students who officially withdraw from school during a regular period

- During the third and fourth weeks ...... 70% refund
- During the fifth and sixth weeks...... 50% refund
- Beginning with the seventh week .....No refund

III. Students in Special Academic Programs

Students enrolled or participating in special academic programs

- From 14% to 25% of the program ...... 70% refund
- From 26% to 38% of the program ...... 50% refund
- After 38% of the program.....No refund

Refunded fees must be returned in accordance with the requirements of the federal Higher Education Act whenever Title IV funds are involved.

# **Student Organizations**

While the academic curriculum at WVSOM provides students with the foundation of medical knowledge and skills needed by the osteopathic physician, participation in the numerous student organizations and co-curricular activities further enhance the educational experience. Involvement in these opportunities allows for students to develop skills that will better prepare them for eventual practice in the community. Leadership skills, time management, interpersonal relationships, marketing, public speaking and networking with national professional and student professional associations are just some of the benefits offered through co-curricular programs.

Community service projects developed and run by students provide support and assistance to those in need in Greenbrier County, other areas of the state, across the country and even internationally. Students have numerous opportunities to work with diverse populations to prepare for practice in a global society. Below is a list of WVSOM student organizations:

AMERICAN COLLEGE OF OSTEOPATHIC FAMILY PHYSICIANS (ACOFP) AMERICAN GERIATRICS SOCIETY - WVSOM CHAPTER AMERICAN COLLEGE OF OSTEOPATHIC OBSTETRICIANS AND GYNECOLOGISTS (ACOOG) AMERICAN COLLEGE OF OSTEOPATHIC NEUROLOGISTS AND PSYCHIATRISTS (ACN-ACONP) AMERICAN COLLEGE OF OSTEOPATHIC SURGEONS – MEDICAL STUDENTS SECTION (ACOS-MSS) AMERICAN OSTEOPATHIC COLLEGE OF PHYSICAL MEDICINE AND REHABILITATION (AOCPMR) ASSOCIATION OF MILITARY OSTEOPATHIC PHYSICIANS AND SURGEONS (AMOPS) ATLAS CLUB - ETHMOID CHAPTER CHRISTIAN MEDICAL AND DENTAL ASSOCIATION (CMDA) NATIONAL OSTEOPATHIC WOMEN PHYSICIANS ASSOCIATION (NOWPA) **DOCARE - WVSOM CHAPTER** JEWISH MEDICAL STUDENT ASSOCIATION (JMSA) LIFESTYLE MEDICINE CLUB MEDICAL STUDENTS FOR CHOICE (MSFC) MEDICAL MUSLIM STUDENT ASSOCIATION (MMSA) MEDICAL STUDENT PRIDE ALLIANCE PATHOLOGY PSI SIGMA ALPHA (PSA) RESEARCH SIGMA SIGMA PHI (SSP)- NU CHAPTER STUDENT AMERICAN ACADEMY OF OSTEOPATHY (SAAO) STUDENT NATIONAL MEDICAL ASSOCIATION (SNMA)
STUDENT OSTEOPATHIC INTERNAL MEDICINE ASSOCIATION (SOIMA) STUDENT OSTEOPATHIC MEDICAL ASSOCIATION (SOMA) STUDENT CHAPTER OF THE AMERICAN OSTEOPATHIC ACADEMY OF SPORTS MEDICINE (SC-AOASM) STUDENT ASSOCIATION OF THE AMERICAN COLLEGE OF OSTEOPATHIC PEDIATRICIANS (SAACOP) STUDENT ADVOCATE ASSOCIATION (SAA) STUDENT CHAPTER OF THE AMERICAN COLLEGE OF OSTEOPATHIC EMERGENCY PHYSICIANS (SCACOEP) WILDERNESS MEDICINE

### **Diversity and Social Justice**

WVSOM is committed to fostering an educational environment that values the development of human potential, cultural and ethnic diversity and understanding. WVSOM strives to promote equitable and fair treatment in every aspect of campus life for all, regardless of race, ethnicity, color, religion, sex (including pregnancy), gender, gender identity, sexual orientation, national origin, age, marital status, veteran or military status, disability, genetic information or other category that is protected under federal, state or local anti-discrimination laws.

### **Center for International Medicine and Cultural Concerns**

WVSOM's Center for International Medicine and Cultural Concerns (CIMCC) offers one of the most diverse international medical studies programs among medical schools. CIMCC works with individual students and student groups to create travel opportunities to underserved communities in Asia, Central and Latin America, the Caribbean, and Southern and Western Africa. Traditional European placements are also available, but we encourage training in underserved communities. All students may participate in spring break service and mission medical team trips. Fourth-year students can complete four- to eight-week clinical rotations in all medical practice subject areas. WVSOM's CIMCC provides students with opportunities to learn experientially about practical and specialized medicine in clinical and research settings on a global platform. For more information on the international program, email cimcc@osteo.wvsom.edu.

# The Founders' Activity Center and Intramural Sports

The Founders' Activity Center, WVSOM's on-campus fitness facility, offers a regulation basketball court, cardiovascular machines, resistance machines, weights, lockers and shower facilities for the campus community. Secure prox card entry allows for 24-hour access to the center.

Students, faculty and staff also take time away from the demands of academics to participate in recreational sports and fitness activities. Sports such as flag football, soccer, volleyball and basketball serve to bring everyone together, strengthening the bonds of friendship and community. Other intramural sports are organized and sponsored by various student groups throughout the year.

# **Wellness Programs**

In order to provide students with exposure to a broad range of lifestyle-improvement activities that they can recommend for their future patients, introductory programs in such areas as yoga, mindfulness meditation, stress management techniques and use of multidisciplinary approaches to patient care are offered throughout the year.

# **Celebrations of Community**

WVSOM prides itself on the strong sense of community shared by students, faculty and staff. Throughout the year, the WVSOM community comes together to celebrate its mission, accomplishments and special occasions. Celebrations include the White Coat Ceremony and Convocation, the WVSOM Gala, State of the School Address, Celebrate Osteopathic Medicine week, the spring awards ceremony, the employee celebration, graduation week and Commencement.

### **Student Government Association**

The Student Government Association maintains communication among all members of the student body and acts as the sole official representative for the entire student body to the faculty, administration, fellow professionals and the public.

# **Promotion and Degree Requirements**

The faculty closely monitors students' academic progress during the academic year. Promotion from one year of study to the next is not automatic. Students are required to complete and pass all requirements of the curriculum of each academic year before progressing to the next year of training. Cases of academic deficiency are considered on an individual basis and the Student Promotion Committee may recommend remedial work when appropriate. Students are informed in writing of any deficiencies. At the end of each school year, all students are advised concerning their academic standing. In order for students to be eligible for graduation, the Student Promotion Committee will make recommendations to the vice president of academic affairs and dean for all students who have met requirements. For more detailed information, refer to the WVSOM Student Handbook.

# **Degree Requirements**

The degree of Doctor of Osteopathic Medicine may be conferred on a candidate who:

- 1. is at least 21 years of age;
- has attended four years at a Commission on Osteopathic College Accreditation (COCA)-accredited college of osteopathic medicine or a Liaison Committee on Medical Education (LCME)-accredited allopathic school of medicine, the last two of which must be at the WVSOM;
- 3. has successfully completed all academic preclinical and clinical work;
- 4. has demonstrated ethical, personal and professional qualities deemed necessary for the continued successful study and practice of osteopathic medicine;
- 5. has satisfactorily discharged all financial obligations to the school;
- has passed COMLEX USA Level 2 CE of the National Board of Osteopathic Medical Examiners (NBOME) WVSOM Institutional Policy E-23);
- 7. has passed COMLEX USA Level 2 PE [Note: This requirement is currently on hold by the NBOME.];
- 8. has satisfactorily completed all requirements for graduation as attested to by the Student Promotion Committee, and has been recommended by vote of the faculty and approved by the WVSOM Board of Governors;
- 9. attends in person the ceremony at which the degree is to be conferred. Under extenuating circumstances, the requirement to personally attend the ceremony may be waived by the vice president for academic affairs and dean or president;
- 10. has participated in all required exit interviews and completed all required surveys; and
- 11. has completed all the requirements within six years of matriculation, inclusive of all time spent on any leave(s) of absence.

In accordance with the graduation policy, students who complete the requirements for graduation after May 31 but before Dec. 31 of a calendar year, and have passed all Level 1 and 2 COMLEX exams at least 30 days prior to the May commencement ceremony, may submit a written request to the vice president for academic affairs and dean no less than 30 days in advance of commencement to participate in the graduation activities, including commencement with the class with which they have been associated. No participation will be allowed unless approved by the vice president for academic affairs and dean. A diploma will not be granted at the ceremony. For students completing the requirement after the May date of graduation, diplomas will be dated on the day in which all requirements are met. Students must fulfill the requirements for graduation within a six-year period.

# **Continuing Medical Education**

Perpetual advances in scientific research and knowledge in the medical sciences require the learning process to continue beyond medical school. Accredited by the American Osteopathic Association (AOA) as an approved sponsor of AOA CME category 1-A programs, WVSOM develops continuing medical education programs on a regular basis. CME programs bring seminars, speakers, medical literature and hands-on training to WVSOM graduates and other osteopathic physicians.

Every three years, all licensed osteopathic physicians are required by the AOA to complete at least 120 hours of approved continuing medical education study. Therefore, WVSOM-sponsored CME programs are an important service to graduates. Two major conferences – the Mid-Winter Osteopathic Seminar and the Summer Seminar – are sponsored annually. Additional programs are offered throughout the year. Information on WVSOM CME offerings is available through the Office of Continuing Medical Education. Questions or concerns should be addressed to Shannon Warren, director of alumni relations and continuing medical education, at 800-356-7836 or swarren@osteo.wvsom.edu.

# **Directory – Administration**

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Jeffrey M. Shawver, Esq. Vice President, Legal and Governmental Affairs and General Counsel

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Machelle Linsenmeyer, Ed.D. Associate Dean, Assessment and Educational Development

Arthur Rubin, D.O. Associate Dean, Predoctoral Clinical Education

Roy Russ, Ph.D. Associate Dean, Preclinical Education Victoria Shuman, D.O. Associate Dean, Graduate Medical Education

Robert W. Foster, D.O. Assistant Dean, Osteopathic Medical Education

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Marilea Butcher Director, Brand Development and Promotion

Raeann Carrier, Ph.D. Director, Office of National Boards and Exam Center

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Jennifer Seams Registrar

William Shires Executive Director, Mountain State Osteopathic Postdoctoral Training Institutions Inc.

Lisa Spencer Director, Financial Aid

Shannon Warren Director, Alumni Relations/CME

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Marla Haller, D.O. Statewide Campus Regional Assistant Dean, Central West Region

Hilary Hamric, D.O. Statewide Campus Regional Assistant Dean, South East Region

Lisa Hrutkay, D.O. Statewide Campus Regional Assistant Dean, Northern Region

Josalyn Mann, D.O. Statewide Campus Regional Assistant Dean, Central East Region

L. Michael Peterson, D.O. Statewide Campus Regional Assistant Dean, South Central Region

Brandon Rose, D.O. Statewide Campus Regional Assistant Dean, South Central Region

James Wadding, D.O. Statewide Campus Regional Assistant Dean, Eastern Region

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# West Virginia School of Osteopathic Medicine Alumni Association

The mission of the WVSOM Alumni Association is to create a cohesive and active community of alumni association members, students, administration and faculty through meaningful engagement in order to increase awareness, pride, participation and philanthropic commitment that ultimately advance the mission of WVSOM and its founders. WVSOM's Office of Alumni Relations works with the association to provide continuing medical education, networking and social activities for WVSOM graduates. Students are given opportunities through a mentorship program, scholarship funding and support of numerous activities and events that help provide enhanced educational experiences. For many years, the association has provided incoming WVSOM students their first white coat during the Convocation and White Coat Ceremony to welcome students to the osteopathic medical community.

The WVSOM Alumni Association is a 501(c)(3) organization with a board of directors composed of WVSOM graduates.

### **Alumni Association Board of Directors**

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# West Virginia School of Osteopathic Medicine Foundation Inc.

The West Virginia School of Osteopathic Medicine Foundation Inc. was established in 1978. Its mission is to employ sound financial management to support the West Virginia School of Osteopathic Medicine through a culture of philanthropy and fundraising. The foundation, overseen by a board of directors and administered by an executive director, provides funds to support the needs of WVSOM and its students, particularly those that cannot be secured

with public resources from state funds. The duties of the foundation include oversight of endowed funds, student scholarships and short-term student loans, as well as financial stewardship of WVSOM's investments and student club accounts. The foundation also manages facility rentals of the Roland P. Sharp Alumni Conference Center and the Gwen Clingman Center for Community Engagement.

The foundation is a private, 501(c)3 organization as designated by the Internal Revenue Service. All gifts received by the WVSOM Foundation are tax deductible to the fullest extent of the law. Each year, the foundation actively seeks gifts and contributions to support student and faculty programs and the general needs of WVSOM to promote and advance the school in significant ways.

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Rehan Waheed, D.O.

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Dorian Williams, M.D. Megan Williams, D.O. Jessica Wilson, D.O. Michael Wilson, D.O. Greg Wood, D.O.

#### Surgery

Emmanuel Agaba, M.D. Ehab Akkary, M.D. William Bailer, M.D. Jeffrey Barton, D.O. Rajendra Bhati, M.D. Paul Brown, M.D. Nathan Cain, D.O. Bradley Carman, D.O. Mark Choueiri, M.D. Jodi Cisco, M.D. William Cline, D.O. Kristen Conrad-Schnetz, D.O. Marc Costa, M.D. Alice Dachowski, M.D. John DeLuca, M.D. Peter Deveaux, M.D. Stephanie DeWitt, M.D. Andy Dittenhofer, D.O. Gene Duremdes, M.D. Benjamin Dyer, M.D. Christine Edwards, M.D. Zachary Ewart, M.D. Joseph Fazalare, M.D. Rick Gemma, D.O. Denise Gilman, D.O. Tyler Grant, D.O. Michael Hall, M.D. Eugene Hammell, M.D.

#### Psychiatry

James Abel, M.D. Ahmed Aboraya, M.D. Alfredo Aguirre, M.D. Richard Ajayi, M.D. Michael Ang-Rabanes, M.D. Achuta Aynampudi, M.D. Rajdip Barman, M.D. Emily Boothe, D.O. Adina Bowe, M.D. Walter Byrd, M.D. Paramjit Chumber, M.D. Ashley Collins, D.O. Edward Dachowski, M.D. Hussein El-Khatib, M.D. Ahmed Faheem, M.D. David Farris, D.O.

Mathew Wood, D.O. Nafiseh Woodard, D.O. Timothy Workman, D.O. Tembele Yangandawele, M.D. Mark Yost, D.O.

Roland Hamrick Jr., M.D. C. Heiskell, M.D. Matthew Hofeldt, M.D. Eric Hopkins, M.D. Johnna Jackson, M.D. Mark Johnson, M.D. Ray Jones, D.O. Timothy Jones, M.D. Scott Killmer, M.D. Jan Kletter, M.D. Paul Kyer, M.D. Alan Lee, D.O. Samuel Licata, M.D. Gowtham Lingamaneni, M.D. Susan Long, M.D. Carlos Malave, M.D. James Martin, M.D. Luke Martin, M.D. Ferdinand Martinez, M.D. Hannah McKeever, D.O. Stephen McKenna, M.D. Robert Meuser, M.D. Kevin Miller, M.D. Wayne Myers, D.O. Tuan Nguyen, M.D. Albert Olivier, M.D. Carl Overmiller, M.D. Herbert Oye, D.O.

Amy Fehrmann, M.D. Jeffry Gee, M.D. Alber Ghobrial, M.D. James Griffith, M.D. Nihit Gupta, M.D. L.Todd Hawkins, M.D. Cheryl Hill, M.D. Mark Hughes, M.D. David Humphreys, M.D. Hassan Jafary, M.D. Todd Jamrose, D.O. Elizabeth Kane, M.D. Sailaja Kavuru, M.D. Samira Khan, M.D. Muruga Loganathan, M.D. Elizabeth McClellan, M.D.

Sherri Young, D.O. Michael Zanic, D.O. Adrienne Zavala, M.D. Chris Zona, M.D.

Sylvanus Oyogoa, M.D. Ashley Parker, M.D. James Paugh, D.O. Izhar Rana, M.D. David Ratliff, M.D. Benjamin Raymond, D.O. Jayapal Reddy, M.D. Karl Riggle, M.D. Livio Romani, M.D. Theresa Rutledge, D.O. Joseph Schulz, D.O. Katie Schulz, D.O. Howard Shackelford, M.D. Mazin Shackour, M.D. Tommy Shelton, M.D. Yancy Short, M.D. Kristen Statler, M.D. Todd Tallman, M.D. Mark Tarakji, M.D. Edward Tiley III, M.D. Jason Turner, M.D. Sugam Vasani, M.D. James Viglianco, M.D. Warner Wang, M.D. Brian Whyte, M.D. Nan Zhang, M.D.

Amelia McPeak, D.O. Kristina Melvin, M.D. Andrew Meyer, D.O. Raja Mogallapu, M.D. Melissa Moody, M.D. Louis Nardelli, D.O. Hani Nazha, M.D. Stephen Neal, D.O. Tracy Parlett, M.D. Nathan Pearson, M.D. Chad Priestley, D.O. Sarah Rahman, M.D. Richard Rothman, M.D. Mohamedlatif Saiyad, M.D. Muhammad Salman, M.D. Ayodeji Somefun, M.D.

Debra Stultz, M.D. Lauren Sweger, M.D. Jessica Talley, M.D. Daniel Thistlewaite, M.D.

#### Hematology-Oncology

Shamsher Ali, M.D. Divya Arora, M.D. Anup Das, M.D. Mayez El-Harake, M.D. Elhamy Eskander, M.D. Mohammad Jafri, M.D. Hemamalini Karpurapu, M.D.

#### **Obstetrics-Gynecology**

Rae Bailey, M.D. Kenneth Baker, M.D. Peter Bala, M.D. Manuel Ballas, D.O. Anne Banfield, M.D. Richard Booth Jr., M.D. Amanda Borror, D.O. Brian Bower, M.D. Geoffrey Bowman, M.D. Lucy Bucher, D.O. Scott Caldwell, M.D. Byron Calhoun, M.D. Diana Carmona, M.D. Samantha Chaffin, M.D. Devin Ciliberti, M.D. Ashleigh Clickett, D.O. Adam Corcovilos, M.D. Consuela Cruden-Parham, M.D. Mark Day, D.O. Gary DeGuzman, M.D. Paul Deitz, M.D. Joseph DeRosa, D.O. Sarah Dotson, M.D. Tony Dotson, D.O. Omar Duenas, M.D.

#### **Emergency Medicine**

Russell Adams, D.O. Linette Archer, M.D. Scott Benson, M.D. Lonnie Berry, M.D. P. Berry, D.O. Ronald Best, D.O. Susan Bobes, M.D. Rickey Bradley, D.O. Thomas Brandes, D.O. Michael Carney, D.O. Oscar Urea, M.D. Russell Voltin, M.D. Tiffany White, D.O. Thomas Williams, M.D.

Rajiv Khanna, M.D. Sowmini Medavaram, M.D. Salman Osman, M.D. Danh Pham, M.D. Pooja Sahni, M.D. Sumaira Shafi, M.D. Nikunji Shah, M.D.

Joe Ellington Jr., M.D. Richard Enchill, M.D. Kimberly Farry, M.D. Peter Filozof, M.D. Karen Fluet. D.O. Lindsey Grantham, M.D. Cynthia Gray, M.D. Robert Harris, M.D. Mahreen Hashmi, M.D. Ryan Heitmann, D.O. Jessica Henry, M.D. Brian Heyman, D.O. Krista Hopkins, M.D. Lekha Hota, M.D. Jessica Hott, D.O. Caleb Huff, M.D. Scott Hunter, M.D. Heather Irvin, M.D. Michaela Kessler, D.O. Marcia Khalil, M.D. Arifa Khokar, M.D. Richard King, M.D. Laurel Kirkhart, M.D. Michael Lao, M.D. Brandon Lingenfelter, D.O.

Robert Chrest, D.O. Paul Clancy, M.D. Louis Colainni, M.D. Meagan Cooper, D.O. Adam Crawford, D.O. Clinton Curtis, M.D. Timothy Daly, M.D. Matthew Davis, D.O. Seth DeAtley, D.O. Joseph Del Zotto, D.O. Brandon Workman, D.O. Deep Yadav, M.D. Jawad Zafar, D.O.

David Shimm, M.D. Damian Silbermins, M.D. Sanaz Soltani, M.D. Michael Stewart, M.D. Sam Wanko, M.D. Waris Waris, M.D.

Andrew Martin, M.D. Sarah McCollester, M.D. Erin Miller, D.O. Fri Mofor-Eta, M.D. Rafael Molina Jr., M.D. Emad Mousa, M.D. Kara O'Karma, D.O. Kiran Patel, M.D. Connie Perkins, D.O. Peter Power, M.D. Shane Prettyman, M.D. Tyler Prouty, M.D. David Rainey, M.D. Todd Resley, M.D. Adam Ritchie, M.D. Bassam Shamma, M.D. Ammar Shammaa, M.D. Amanda Sherman, D.O. Michael Shockley, M.D. Stephen Stanley, D.O. Erin Stoehr, D.O. David Thomas, M.D. Sean Tubens, M.D. Lori Tucker, D.O. Roy Wolfe, M.D.

David Deuell, D.O. Joseph Dougherty, D.O. Christopher Edwards, D.O. Mary Edwards, D.O. Steven Eshenaur, D.O. Rodney Fisher, D.O. Jesamyn Fuscardo, D.O. Frank Gaudio, M.D. Mark Geary, D.O. Glenn Geeting, M.D.

Shawna Gelormino, D.O. Dilipkumar Ghodasara, M.D. Eric Glass, D.O. Michael Gould. D.O. Nicole Grant, D.O. Michael Gregory, D.O. Mark Gustafson, D.O. Sophia Haleem, D.O Tyler Hall, D.O. Brian Hensley, M.D. Jonathan Hess, M.D. Tyler Hill, D.O. Richard Houck, D.O. Kyle Hurst, M.D. Shawn Johnson, D.O. Justin Kazee, D.O. Noah Keller, D.O. Rudolph Kevak, M.D. Charles Kirkland, D.O. Anthony Kitchen, M.D. Pavan Kolluri, M.D. Grace Komolafe, M.D. Clara Kraft, M.D.

#### Pathology

Fahad Bafakih, M.D. George Faber, M.D. Vincent Graffeo, M.D. Robert Herceg, M.D. Sarah Kallas, M.D. Piotr Kubiczek, M.D.

#### Otolaryngology

Jeffrey Banyas, M.D. Johnathan Castano, M.D. Matthew Cosenza, D.O. Charles Crigger, M.D. Jenny Cross, M.D.

#### Radiology

Afzal Ahmed, M.D. Mark Akers, M.D. Thomas Alewine, M.D. Michael Anton, M.D. Jason DeBerry, M.D. Joseph Dorchak, M.D. Joseph Dransfeld, M.D. Landon Edwards, M.D. Frederick Gabriele, M.D. Mark Glass-Royal, M.D.

Amos Lane, D.O. Timothy Lane, D.O. Todd Lares, M.D. Reginald Lawson, M.D. Lucas Lemons, D.O. Tracy Lester, D.O. Anne Li, M.D. Vincent Linberg, D.O. John Logar, M.D. Michael Londner, M.D. Benjamin Mack, M.D. Sarah Madrid, M.D. John Marsh, D.O. Kenneth Martin, D.O. Meredith Mason, M.D. Kevin McLaughlin, D.O. Nimish Mehta, M.D. Jamie Miller, D.O. David Nicholas, D.O. Christopher O'Neal, D.O. Eugene Oteng, M.D. Justine Pagenhardt, M.D. Robert Petrarca, D.O.

Matthew Macatol, M.D. Thomas Martin Jr., M.D. Allen Mock, M.D. Gregory Moses, M.D. Scott Nestor, D.O. Donald Pojman, M.D.

Paul DiBase, M.D. Michael Goins, M.D. Brian Kellermeyer, M.D. D. Lough, M.D. Daniel Merenda, M.D. Phillip Nichols, M.D.

Mark Hackney, M.D. Nathan Hill, M.D. D. Rand Kirtland, M.D. Adam Krompecher, M.D. Alan Lintala, M.D. Mark Lisle, M.D. Phillip Long, M.D. A. Jane Maloof, M.D. Andrew Mullins, D.O. Pho Nguyen, M.D.

Erin Porfeli, D.O. Jeremy Proctor, D.O. Mansoor Raja, M.D. Razelle Reyes, D.O. Wesley Saher, D.O. Zachary Smith, D.O. Robert Snidow, M.D. Jessica Sop, D.O. Ryan Stanton, M.D. Richard Stefanic, M.D. Anthony Steratore, M.D. Samuel Stewart, D.O. James Stollings, D.O. Allison Tadros, M.D. Janelle Thomas, M.D. Brent Thornhill, D.O. Jeremy Traylor, D.O. Nathan Walters, M.D. Brent Watson, M.D. Kathy Wides, M.D. Kathryn Wieferich, M.D. Charles Williams, D.O. Brandt Williamson, M.D.

Renee Robinson, M.D. Jeffrey Vos, M.D. David Webb, M.D. Gerald Wedemeyer, M.D. Fuad Zeid, M.D.

A. Payne Jr., M.D. Andrew Petersen, D.O. Sohrab Shahab, M.D. John Wade, M.D. Mark Weitzel, D.O. Christopher White, D.O.

Vivek Padha, M.D. Bharat Patel, M.D. Paul Ratcliff, D.O. Daniel Rodgers, M.D. Anthony Rowedder, M.D. Sanjay Saluja, M.D. Abdul Tarabishy, M.D. Nick Treadwell, M.D. Trung Vu, M.D.

### Urology

Thomas Benz, M.D. Kyle Fort, M.D. Grant Franklin, M.D. Nathan Hale, D.O. Thomas Kowalkowski, M.D.

#### **Internal Medicine**

Shubash Adhikari, M.D. Krishan Aggarwal, M.D. Phillip Aguila, M.D. Ridwaan Albeiruti, M.D. Ahsen Ali, M.D. Tarake Aljarod, M.D. Joan Allman, D.O. Saad Amin. M.D. Jessica Amos, D.O. Seema Anand, M.D. Caroline Armstrong, D.O. Ghali Bacha, M.D. Sarika Bagree, M.D. Kelly Barki, D.O. Sanjay Bharti, M.D. Joseph Blatt, M.D. Harshad Bokil, M.D. Wesam Bolkhir, M.D. Zachary Bosley, D.O. Robert Bowen, M.D. Bartley Brown, D.O. Aasia Butt, M.D. James Campbell, M.D. Vincent Cantone, M.D. Richard Capito, M.D. Richard Catlett, M.D. Pradeep Chadha, M.D. John Cherian, M.D. Michael Cheshire, D.O. Noor Chima, M.D. Tarika Chowdhary, M.D. David Church, M.D. Ryan Cicenas, M.D. Heather Clawges, M.D. Christopher Cockerham, M.D. Billy Cole, D.O. Matthew Colflesh, M.D. Paul Conley, D.O. Larry Cook, D.O. Christopher Daniel, D.O. Anthony Dasaro, M.D. Jeffrey DeBord, D.O. James DeMarco, M.D. Melaku Demede, M.D.

Adam Luchey, M.D. Rocco Morabito, M.D. Joseph Mouchizadeh, M.D. Lynetta Payne, D.O. John Riordan, M.D. Chris Robison, D.O.

Christopher Dionne, M.D. Witt Durden, D.O. Amr El Gamal, M.D. Abdulkader Farran, M.D. Cynthia Gaerke, M.D. Julio Galindo, M.D. Gilberto Garza, M.D. Muhammad Ghabra, M.D. Mona Ghias, M.D. Celsio Gonzalez, M.D. Jennifer Hadam-Veverka, M.D. Jessica Harvey, D.O. Kathy Harvey, D.O. Surayia Hasan, M.D. Deena Hassuna, M.D. James Hayes, M.D. Kristen Helmick, M.D. Bradley Henry, M.D. Brian Hornsby, D.O. Farnaz Houshmand, M.D. Michael Iannetti, M.D. Thopsie Jagannath, M.D. Wadih Kabbara, M.D. John Kalasky, D.O. Sri Kanagalingam, M.D. Samia Kanooz, M.D. Lindsay Kasson, D.O. Sean Keesee, M.D. Robby Keith, M.D. Thomas Kettlewell, D.O. Rashida Khakoo, M.D. Hafsa Khan, M.D. Noma Khan, M.D. Imran Khawaja, M.D. Roselyne Knopf, M.D. Chris Koebele, M.D. Bonita Krempel-Portier, D.O. Andrea Labus, M.D. Willie Lawson Jr., M.D. Jennifer Leavitt, D.O. Benjamin Leslie, D.O. Bruce Leslie, M.D. Wesley Lieving, D.O. Gerardo Lopez, M.D.

Jaschar Shakuri-Rad, D.O. James Tierney, D.O. Eric Whitman, M.D. Carson Wong, M.D.

Bethany Lucas, M.D. Jessica Lucas, D.O. Daniel Macias, M.D. Dibbendu Mahanayak, M.D. Nicholas Mains, D.O. Kamel Marzouk, M.D. Vinay Maudar, M.D. Eric McClanahan, D.O. Mary McKelvey, M.D. Beth Mellette, D.O. Bradley Miller, D.O. Clinton Mills, D.O. F. Scott Moore, D.O. Satyasagar Morisetty, M.D. Joseph Morrello, D.O. Carolyn Morrison, D.O. Neeharika Muddana, M.D. Jeffrey Murillo, D.O. Farid Murshed, M.D. Scott Naum, D.O Elizabeth Nelson, M.D. Brian Nolen, M.D. Caroline Osborne, M.D. Kolawale Oshiyoye, M.D. Michael Owens, M.D. Hugh Palmer, M.D. Guarav Parikh, M.D. Chris Parrish, D.O. Nehal Patel, M.D. Sunil Paudel, M.D. Derek Powell, M.D. Kenneth Proops, D.O. Kumudha Rajeswaran, M.D. Salam Rajjoub, M.D. Vigneshwaran Ramanathan, M.D. Shahid Rana, M.D. Michael Remines, D.O. Roberto Reyna, M.D. Thomas Rittenger, M.D. Brandon Robinson, D.O. Sean Rogers, M.D. Leslie Romero, D.O. Rhonda Ross, M.D. Patrick Ryan, M.D.

Jalal Saied, M.D. Melvin Saludes, M.D. Spoorthi Sankineni, M.D. Timothy Saxe, M.D. Maria Setlak, D.O. Hemen Shah, M.D. Brandon Shiflett, M.D. Maria Sicat, M.D. Shahab Siddiqui, M.D. Matthew Simmons, M.D. Atul Singh, D.O. Prasad Siripurapu, M.D. Cassidy Smith, D.O. Nelson Smith, D.O.

#### Geriatrics

Eugenia Jarrell, M.D. Ron Stollings, M.D. Jianming Xie, M.D.

#### Ophthalmology

Michael Beres, M.D. Stephen Cassis, M.D. Sidney Chang, M.D. Stephen Demick, M.D. Lauren DiGiovine, M.D. Charles Francis, M.D.

#### **Orthopedic Surgery**

Stephen Alatis, D.O. Walter Boardwine, D.O. Joseph Cincinnati, D.O. Chris Courtney, D.O. John Crompton, M.D. Matthew Darmelio, M.D. Nathan Doctry, M.D. Troy Foster, D.O. Emily Griffith, D.O. Mary Haus, M.D. Gregory Hill, D.O.

#### Orthopedics

Peter Alasky, D.O. John Compton, M.D. Jason Gessel, D.O. Joseph Hahn, M.D. Ted Jefferson, D.O.

#### Neurosurgery

Abdi Ghodsi, M.D. James Harman, D.O. Todd Smith, D.O. Jessica Smith-Kelly, D.O. Michael Smutko, D.O. John Snyder, D.O. Sarah Sofka, M.D. Kimberly Spurlock, D.O. Lauren Stawovy, M.D. Daniel Suders, D.O. Thaddeus Sutton, M.D. Emily Thomas, D.O. Zachariah Thomas, M.D. Stephen Thompson, D.O. Amy Tickle, M.D. Letitia Tierney, M.D. Robin Tolbert, D.O. Maria Tranto, D.O. Edith Vargo, M.D. Thomas Waltz, D.O. Irene Wasylyk, M.D. Joseph Weigel, M.D. Robert Weingold, M.D. Sarah Wescott, D.O. Corey White, D.O. Timothy Wilson, D.O. David Wray, D.O. Yoginder Yadav, M.D. Joel Yednock, M.D. Saad Zafar, D.O.

Edgar Gamponia, M.D. David George, M.D. Zane Lazer, M.D. Harold Leeper, M.D. Heath Lemley, M.D. Mark Mayle, M.D.

Edwin Hissa, M.D. Gordon Holen, D.O. Dwight Kemp, D.O. Thomas Knutson, D.O. Paul Legg, M.D. Robert McCleary, D.O. John McElroy, M.D. Chad Micucci, M.D. Michael Myers, D.O. Naresh Nayak, M.D. Joe Pack, D.O.

James Maurer, D.O. Frederick Morgan, D.O. Michael Myers, D.O. Lucas Pavlovich, M.D. Scott Roberts, M.D.

Alastair Hoyt, M.D. Dwight Saulle, M.D. Gary Miller, M.D. Stephen Powell, M.D. Jeff Sinclair, M.D. Scott Strickler, M.D. Sadat Taoufik, M.D. Brian Wood, M.D.

- Laura Reese, D.O. Jeffrey Shroyer, M.D. Jarrod Smith, M.D. Aaron Sop, D.O. Matthew Stover, D.O. Daryl Sybert, D.O. John Tabit, D.O. George Tokodi, D.O. Kenneth Williams, D.O. Bradford G. Wright, M.D.
- Jarrod Smith, M.D. James Steinberg, D.O. Phillip Surface, D.O. Richard Topping, M.D.

### Neurology

Zaid Al-Qudah, M.D. Pascal Atanga, M.D. Elizabeth Bass, M.D. Samip Borad, M.D. Laura Brosbe, D.O. Sean Burke, M.D. Darshan Dave, M.D. Aman Deep, M.D. David Gloss, M.D.

### Nephrology

Babak Barmar, M.D. Michael Collins, D.O. Ahmad Eter, M.D. Christopher Gisler, M.D.

### Pulmonology

Kalim Ahmed, M.D. Hatim Al-Jaroushi, M.D. Mohammed AlJasmi, M.D. Rawshan Basunia, M.D. Robert Bowen, M.D. Phillip Cox, D.O.

### Gastroenterology

Emily Battle, M.D. Charles Bou-Abboud, M.D. Evelio Bravo-Fernandez, M.D. Hemant Chatrath, M.D. Sanjay Chaudhry, M.D. Chintamaneni Choudari, M.D. Cheryl Cox, M.D. J. Thomas Dorsey III, M.D.

### **Infectious Disease**

Seyoum Bage, M.D. Dino Delaportas, M.D. Melanie Fisher, M.D. Martin Gnoni, M.D. Francisco Fernandez Gonzalez, M.D. John Guilfoose, M.D. Zonaira Gul, M.D.

### Podiatry

Jana Atik, DPM Ian Aveytua, DPM Ashton Curtis, DPM Robert Dale, DPM

### Cardiology

Abbas Ali, M.D.

Victor Jaramillo, M.D. Robert Lewis, M.D. Kristina Lopez, M.D. Mohammed Khan, M.D. Carl McComas, M.D. Amanda McConnell, D.O. Khaldoun Mozahem, M.D. Swami Nathan, M.D. Shiv Navada, M.D.

Hassan Honainy, M.D. Alvin Moss, M.D. Asif Rahman, M.D. Heather Ratliff, D.O.

Kevin Eggleston, M.D. Sarah Hadique, M.D. Roshen Matthew, M.D. Santpal Mavi, M.D. Ronald Mudry, M.D. Prasha Muthukrishnan, M.D.

Kimberly Fairley, D.O. Shima Ghavimi, M.D. Kiran Khosa, M.D. Justin Kupec, M.D. Amandeep Purewal, M.D. Yaser Rayyan, M.D. Mohammad Roidad, M.D. Ziad Salem, M.D.

Shipra Gupta, M.D. Rashida Khakoo, M.D. Ann Laake, M.D. Allison Lastinger, M.D. Kathryn Moffett, M.D. Vishna Naravadi, M.D. Rebecca Reece, M.D.

Gerald Erskine, DPM Jeffrey Findling, DPM Joseph Goodwin, DPM Jenna Lou Hollnagel, DPM Apoorv Prasad, M.D. Shahid Rafiq, M.D. Vijaya Ragoor, M.D. Georgianna Richards, M.D. John Schmidt III, M.D. Yasser Shahrour, M.D. Najam Sheikh, M.D. Shalu Singh, M.D. Barry Vaught, M.D.

Rohan Rengen, D.O. Jennifer Sheyman, D.O. Staci Smith, D.O. Mahyar Tahbaz, D.O.

Melvin Saludes, M.D. Brownhilda Santo, M.D. Sigurdur Sigurdarson, M.D. Tom Takubo, D.O. Ryan Waddell, D.O. William Wade, M.D.

Diane Settles, M.D. Hamza Shah, D.O. Sardar Musa Shah-Khan, M.D. Gurinder Singh, M.D. Jeremy Stapleton, D.O. Venkata Tammana, M.D. Juan Tejada, M.D.

Thomas Rushton, M.D. Atif Saeed, M.D. Jonathan Stanley, D.O. Archana Vasudevan, M.D. Martin Weisse, M.D. Kenneth Woods, D.O.

Jennifer Michael, DPM Kirt Miller, DPM Jeffrey Wilps, DPM Daniel Wright, DPM

Mark Bodes, M.D.

Kishore Challa, M.D. Ramesh Chandra, M.D. Samantha Crites, D.O. Zane Darnell, M.D. Melaku Demede, M.D. Ahmad Elashery, M.D. Michael Englund, D.O. Christopher Epling, D.O. Payam Fallahi, M.D. Michael Fenster, M.D. Walid Gharib, M.D. David Gnegy, M.D. John Goddard, M.D. Meheswara Golla, M.D.

#### Rheumatology

Syed Ahmad, M.D. King Soon Goh, M.D. Deena Hassuna, M.D.

#### **Plastic Surgery**

Phillip Lackey, M.D. Wayne Ledinh, M.D. Ronald Luethke, M.D. Benjamin Moosavi, M.D.

#### Endocrinology

James Bailes, M.D. Puneetpal Bains, M.D. Viorica Crisan, M.D. Jillian Douglas, D.O. Amanda Dye, M.D. Brian Ely, M.D. Umut Gomceli, M.D. Abdul Haji, M.D. Abdrhman Hamo, M.D. Deepak Hooda, M.D. Showri Karnam, M.D. Gerado Lopez, M.D. Jasbir Makar, M.D. Kozhaya Mallah, M.D. Stanley Mannino, M.D. Stanley Mannino, M.D. Steven McCormick, M.D. John McKnight, M.D. Aravinda Nanjundappa, M.D. Sarah Nease, M.D. Anjlee Patel, M.D.

Charles Justice, M.D. Jonathan Krant, M.D. Jamie Latos, D.O.

Craig Oser, D.O. A. Paine Jr., M.D E. Polack, M.D. Andrew Stewart, M.D.

John Blake Epling, M.D. James Field, M.D. Adnan Haider, M.D. Evan Jones, M.D. Jaisri Maharaj, M.D. Jessica Perini, M.D. Yogendra Prasad, M.D. Gordon Prescott, M.D. Shahid Rana, M.D. Nita Ray Chaudhuri, M.D. Arshad Rehan, M.D. Charles Rhodes, M.D. Gregory Suero, M.D. Gregory Suero, M.D. Chris Vaccari, M.D. Sriharsha Velury, M.D. Ajay Virmani, M.D. Jerry White, D.O. Dean Wolz, M.D. Mohammed Yousaf, M.D.

Jennifer Reams, D.O. Devanshu Verma, M.D. Enrico Villanueva, M.D.

William Stewart, M.D. Jessica Suber, M.D. Donald Sweitzer, M.D. Jeffrey Thaxton, M.D.

Frank Schwartz, M.D. Rohma Shamsi, M.D. Richa Singh, M.D. Hazel Yang, M.D.

# **Osteopathic Oath**

I do hereby affirm my loyalty to the profession I am about to enter. I will be mindful always of my great responsibility to preserve the health and the life of my patients, to retain their confidence and respect both as a physician and a friend who will guard their secrets with scrupulous honor and fidelity, to perform faithfully my professional duties, to employ only those recognized methods of treatment consistent with good judgment and with my skill and ability, keeping in mind always nature's laws and the body's inherent capacity for recovery.

I will be ever vigilant in aiding the general welfare of the community, sustaining its laws and institutions, not engaging in those practices which will, in any way, bring shame or discredit upon myself or my profession. I will give no drugs for deadly purposes to any person, though it may be asked of me. I will endeavor to work in accord with my colleagues in a spirit of progressive cooperation and never by word or by act cast imputations upon them or their rightful practices. I will look with respect and esteem upon all those who have taught me my art.

To my college I will be loyal and strive always for its best interests and for the interests of the students who will come after me. I will be ever alert to further the application of basic biologic truths to the healing arts and to develop the principles of osteopathy, which were first enunciated by Andrew Taylor Still.

# American Osteopathic Association's Code of Ethics

The American Osteopathic Association (AOA) Code of Ethics is a document that applies to all physicians who practice osteopathically throughout the continuum of their careers, from enrollment in osteopathic medical college/school through postgraduate training and the practice of osteopathic medicine. It embodies principles that serve as a guide to the prudent physician. It seeks to transcend the economic, political, and religious biases when dealing with patients, fellow physicians, and society. It is flexible in nature in order to permit the AOA to consider all circumstances, both anticipated and unanticipated. The physician/patient relationship and the professionalism of the physician are the basis for this document.

The AOA has formulated this Code to guide its member physicians in their professional lives. The standards presented are designed to address the osteopathic and allopathic physician's ethical and professional responsibilities to patients, to society, to the AOA, to others involved in health care and to self.

Further, the AOA has adopted the position that physicians should play a major role in the development and instruction of medical ethics.

**Section 1.** The physician shall keep in confidence whatever she/he may learn about a patient in the discharge of professional duties. Information shall be divulged by the physician when required by law or when authorized by the patient.

**Section 2.** The physician shall give a candid account of the patient's condition to the patient or to those responsible for the patient's care.

**Section 3**. A physician-patient relationship must be founded on mutual trust, cooperation, and respect. The patient, therefore, must have complete freedom to choose her/his physician. The physician must have complete freedom to choose patients whom she/he will serve. However, the physician should not refuse to accept patients for reasons of discrimination, including, but not limited to, the patient's race, creed, color, sex, national origin, sexual orientation, gender identity, or disability. In emergencies, a physician should make her/his services available. <u>View further interpretation</u>.

**Section 4.** A physician is never justified in abandoning a patient. The physician shall give due notice to a patient or to those responsible for the patient's care when she/he withdraws from the case so that another physician may be engaged.

**Section 5.** A physician should make a reasonable effort to partner with patients to promote their health and shall practice in accordance with the body of systematized and scientific knowledge related to the healing arts. A physician shall maintain competence in such systematized and scientific knowledge through study and clinical applications.

**Section 6.** The osteopathic medical profession has an obligation to society to maintain its high standards and, therefore, to continuously regulate itself. A substantial part of such regulation is due to the efforts and influence of the recognized local, state and national associations representing the osteopathic medical profession. A physician should maintain membership in and actively support such associations and abide by their rules and regulations.

**Section 7.** Under the law a physician may advertise, but no physician shall advertise or solicit patients directly or indirectly through the use of matters or activities which are false or misleading. <u>View further interpretation</u>.

**Section 8.** A physician shall not hold forth or indicate possession of any degree recognized as the basis for licensure to practice the healing arts unless she/he is actually licensed on the basis of that degree in the state or other jurisdiction in which she/he practices. A physician shall designate her/his osteopathic or allopathic credentials in all professional uses of her/his name. Indications of specialty practice, membership in professional societies, and related matters shall be governed by rules promulgated by the American Osteopathic Association. <u>View further interpretation</u>.

**Section 9.** A physician should not hesitate to seek consultation whenever she/he believes it is in the best interest of the patient.

**Section 10.** In any dispute between or among physicians involving ethical or organizational matters, the matter in controversy should first be referred to the appropriate arbitrating bodies of the profession.

**Section 11.** In any dispute between or among physicians regarding the diagnosis and treatment of a patient, the attending physician has the responsibility for final decisions, consistent with any applicable hospital rules or regulations.

**Section 12.** Any fee charged by a physician shall compensate the physician for services actually rendered. There shall be no division of professional fees for referrals of patients.

**Section 13.** A physician shall respect the law. When necessary a physician shall attempt to help to formulate the law by all proper means in order to improve patient care and public health.

**Section 14.** In addition to adhering to the foregoing ethical standards, a physician shall recognize a responsibility to participate in community activities and services.

**Section 15.** It is considered sexual misconduct for a physician to have sexual contact with any patient with whom a physician-patient relationship currently exists.

**Section 16**. Sexual harassment by a physician is considered unethical. Sexual harassment is defined as physical or verbal intimation of a sexual nature involving a colleague or subordinate in the workplace or academic setting, when such conduct creates an unreasonable, intimidating, hostile or offensive workplace or academic setting.

**Section 17**. From time to time, industry may provide some AOA members with gifts as an inducement to use their products or services. Members who use these products and services as a result of these gifts, rather than simply for the betterment of their patients and the improvement of the care rendered in their practices, shall be considered to have acted in an unethical manner. <u>View further interpretation</u>.

**SECTION 18**. A physician shall not intentionally misrepresent himself/herself or his/her research work in any way.

**SECTION 19.** When participating in research, a physician shall follow the current laws, regulations and standards of the United States or, if the research is conducted outside the United States, the laws, regulations and standards applicable

to research in the nation where the research is conducted. This standard shall apply for physician involvement in research at any level and degree of responsibility, including, but not limited to, research, design, funding, participation either as examining and/or treating provider, supervision of other staff in their research, analysis of data and publication of results in any form for any purpose.