

ADVOCATES FOR THE AMERICAN OSTEOPATHIC ASSOCIATION 2017 Midyear Report to AOA BOT

As President, my theme this year is Foundation, Innovation, and Rejuvenation, and so the AAOA Board has been using this year to reorganize and reconnect. As you know, this is a grassroots organization with AAOA at the hub of a network of state and school affiliates. While the AOA enjoys the support of several prominent organizations, the AAOA is, and will always be, its most important, loyal and consistent source of support.

Going back to Foundation, the first leg of our theme this year, we are taking a look at everything and everyone that we partner with, and are fortifying several of these connections. One new area that we are participating in is the AOA's Physician Wellness Task Force, chaired by Dr. Robert Piccinini. Having been involved with Yellow Ribbon Suicide Prevention International for fifteen years we plan on sharing our insight and experiences in this area with the Wellness Task Force.

We are continuing our partnership with the AOF to fund the Donna Jones Moritsugu Award, which recognizes the partners of graduating osteopathic medical students who have gone above and beyond in supporting their student during medical school.

Another important part of this year's activities involves reconnecting with AOA staff to review exactly what it is that the AAOA is and does. This is particularly important given the transitions on the AOA staff and, in particular, the position of Director for the AOA. With these recent efforts, though, we feel as though we have made great progress.

Change is definitely upon us, and to assume that the current and future members and leaders of the Advocates for the AOA aren't mindful of these changes would be a mistake, so we ask you now to step back and take a hard look at not only who we are but all that we can be.

If all D.O.'s practicing in the United State were asked to respond to a survey regarding the most important changes and challenges within the osteopathic profession lately, no doubt the ACGME/AAOA collaboration would rank high on those responses. We have seen questions over and over on many of the spouse's blogs on Facebook. But with enormous challenges come great opportunities, so the AAOA is preparing to deal with the questions and changes that follow this new reality. We hope to find within this dialogue new and more relevant purpose in our work as advocates at all levels of the osteopathic family.

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Regarding activities at OMED, we have decided to give the golf tournament a rest this year but look forward to a record-breaking Fun Run in Philadelphia. This year Dr. Peter Ajluni has agreed to serve as our Honorary Chair, a move which we know will inspire many new runners and sponsors to participate.

As a follow through on the theme and efforts of our Immediate Past President (Pam Kolinski, Michigan), we continue to look at ways of taking traditions into tomorrow, and are looking to utilize media such as Google Chat, Zoom, and other methods of connecting more effectively and in a more modern fashion with our younger members – current and future.

So we are intent on building on all of the support we have and that we are creating so that we can continue to transform the AAOA into an organization that is more effective and relevant. To facilitate this process we have continued the practice of board development that was started by our most recent past presidents. At this point I can say that, given the median age, we have the youngest AAOA board ever, but this also means that we have the board with the greatest long-term potential. Innovation will be our mantra in all efforts moving forward.

Getting back to basics, though, we need to continue to educate the masses regarding who the AAOA is and what our mission is. For my part I have made it a priority to spend extra time and resources to reach out to staff, affiliates, and other important members of our profession.

While our membership numbers are down for now, we are using the new-found AOA support in reaction to this downturn to create greater traction and momentum.

There are now over 100,000 osteopathic physicians practicing in the United States, and most of them have either a spouse or significant other who, with the proper guidance, could join our small army of advocates in support of your American Osteopathic Association.

We indeed have great hope that our Advocacy membership will grow not just in terms of the numbers we had before the great loss last year – and we certainly intend on surpassing that previous mark – but also to the extent that we can become much more effective in carrying out our mission. While these goals will require many hours of time donated by our loyal volunteers, we also believe that reaching this new plateau of service and accomplishment will require changes in the way the AOA and AAOA interact. But we are not talking about small, incremental, and, quite often, temporary fixes when communication and support break down, but rather a total shift of posture, perceptions, expectations, and organizational processes on the part of both our organizations. While this sea change will usher in a new and exciting era of recognition, respect, and collaboration between our two organizations, the most important benefit will be ability to reach out and have a positive effect on more members of our osteopathic family, especially those who are most vulnerable: the students and their families. And as quickly as we are seeing osteopathic medical schools pop up on the landscape, we as the national advocates need all the help we can get in this regard.

So that we may begin this new level of collaboration we respectfully ask for a leadership summit between the AOA and AAOA where we can discuss these great opportunities and plot out a course to reach them.

Respectfully submitted,

Linda Kazen Garza,
President,
Advocates for the American Osteopathic Association

Official SOMA Report to the American Osteopathic Association

February 8th, 2017

Who are we this year?

- We added 3558 new members in our fall membership drive, equal to 48.86% of the incoming DO Class of 2020.
- In response to the rapid growth of osteopathic colleges, SOMA took an innovative step when starting our chapter at the Burrell College of Osteopathic Medicine. The chapter was chartered in advance of their school beginning its first academic term. SOMA also had representation on campus during their orientation to promote SOMA and establish a strong membership drive. As a result, the BCOM chapter gained seventy four members this year and has proven to be one of the most active SOMA chapters nationally. We intend to continue using this accelerated charter process with future startup chapters to continue to establish SOMA's presence in osteopathic student life.

What have we been up to?

- SOMA submitted 11 resolutions to the AOA's House of Delegates in the 2016, which is as many as any affiliate organization brought forward.
- Our summer leadership meeting featured student-driven workshops and programming aimed at developing our chapter leaders into functional SOMA chapter leaders and empowered representatives of our organization and the osteopathic profession.
- SOMA was a founding partner of the National Outreach for Diversity (NOD) in Medicine Coalition which had a successful first year of programming. The NOD is a national partnership including SNMA, AMSA, LMSA, APAMSA, ANAMSA and SOMA that aims to empower Underrepresented in Medicine youth to pursue education in the sciences and medicine. Overall, 16 SOMA chapters hosted events reaching hundreds of K-12 students. Our chapter leaders held skills workshops, taught students about the human body, and let them practice being doctors. The goal of this coalition is to show all K-12 students that careers in science and medicine are accessible to them.
- SOMA's Fall Convention at OMED was also a great success, offering our attendees programming from our own leaders including a board prep workshop, a resolutions writing workshop, an OMT workshop and of course access to all of the great programming that OMED had to offer. As always, our convention schedule was anchored by our House of Delegates.
- 70 sites registered for National Osteopathic Night Out (NONO), and over 200 pre-medical students attended these coffee shop conversations with our members about how to get accepted to medical school, what life in medical school is like and much more.

Advancing the Profession

- DO the Vote, a SOMA voter registration initiative, enrolled 762 members in a pledge to participate ahead of the national election in November 2016.
- SOMA attended the COCA Standards Forum this past December in Chicago and provided commentary on the proposed standards changes on behalf of our members and all osteopathic medical students. We are submitting written commentary to COCA as well and will be attending the COCA Standards Forum in April.
- SOMA submitted formal written commentary on behalf of our members to ACGME regarding the proposed changes to Sections I-V and Section VI of the Common Program Requirements.
- SOMA's Board of Trustees attended and participated in the AOA's Member Value summit in Tampa this January to help guide AOA in the next phase of planning for its membership benefits of the future.

Where are we going?

- SOMA's current strategic plan is active for the 2015-2018 period. Planning is already underway for the next iteration of our strategic plan, and the main pillars of the plan are already being put together.
- We are currently putting the finishing touches on our 2017 Spring Convention. Our convention will be held in Washington, DC the two days preceding DO Day on Capitol Hill this year and will feature our House of Delegates, a variety of leadership developing workshops and preparation for DO Day topics.

Respectfully submitted by the 2016-2017 SOMA Board of Trustees.



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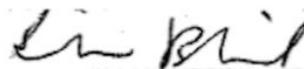
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*Association of Osteopathic State Executive Directors * 2544 Blairstone Pines Drive * Tallahassee, FL 32301*

Association of Osteopathic State Executive Directors (AOSED) Report to the AOA Board of Trustees

AOA Mid-Year Meeting

March 1, 2017

On behalf of the Association of Osteopathic State Executive Directors Board of Trustees, I am pleased to submit this update to the AOA Board of Trustees. AOSED has been working diligently to update our own strategic plan over the past 18 months. At our January 2017 meeting, AOSED voted to approve the new strategic plan. Prior to this, AOSED's last strategic planning process was developed over a two-year timeframe in 1997- 1999.

As many of you know, the Association of Osteopathic State Executive Directors (AOSED) was originally organized in 1918. Its purposes as stated in the 2014 Bylaws are to: (1) facilitate development of strong divisional societies of the American Osteopathic Association; (2) to promote closer affiliation of divisional societies and coordinate their programs; (3) to provide communication, professional development, training, and continuing education for its members; (4) to develop programs and materials which promote the osteopathic profession; and (5) to provide input or advice to the American Osteopathic Association.

Under my predecessor Mr. David Walls' leadership, AOSED began a strategic planning initiative in 2016 and appointed several state osteopathic executive directors to serve on a Strategic Planning Committee. Those members included:

- Brian Bowles, Missouri
- Kathleen Creason, California
- Suzanne Frederick, AOSED President-Elect, Idaho
- Barbara Greenwald, New York
- David Walls, AOSED Immediate Past-President, Oregon
- Angela Cole Westhoff, AOSED President, Maine
- Ed Williams, PhD, AOSED Trustee, SPC Chair, LOMA

Based on a review of its history and the current environment (both internal and external) in which AOSED operates, the Strategic Planning Committee concluded that AOSED must focus its efforts on four "Strategic Paths". These paths are the fundamental areas where energy and resources will be focused to develop, implement, and enhance policies, programs, and services. AOSED's four strategic pathways include:

- Organizational Structure
- Collaboration/Networking
- Resources/Support/Education
- Advocacy/Awareness

Additionally, we also updated our mission statement. The revised mission statement now reads: **“The Association of Osteopathic State Executive Directors' mission is to empower state osteopathic associations in facilitating advancement of the osteopathic profession.”**

As a result of this strategic planning effort, AOSED will be focusing and enhancing its efforts to assist affiliate executive directors in their efforts to:

- Build efficient and competent organizational and operative business models
- Advocate for and promote the osteopathic philosophy and practice of medicine
- Provide quality CME programs and non-CME educational opportunities
- Build public awareness of osteopathic medicine
- Promote the delivery of quality cost-effective health care

As such AOSED’s vision statement has also been refined and simplified. Our new vision is: **AOSED will be the foremost resource for state osteopathic associations.** As the osteopathic profession grows and changes, there will be increased demand for AOSED to be responsive to its stakeholder needs. AOSED must position itself to face change and be responsive to new challenges.

AOSED also surveyed its members and collected data on the specific needs and resources that state executive directors need to do their jobs to the best of their abilities. We are now working on an action plan to prioritize and address those needs.

AOSED continues to maintain its DO*CME platform for continuing medical education programming and we are focusing on growing and expanding both the number of states and the amount of content available on the website. We are proud to have launched DO*CME and that it continues to be profitable.

The Association also has worked at developing its governance structure and clarifying the roles and responsibilities of AOSED representatives to AOA Bureaus/Councils/ Committees. We have a written document of expectations that representatives have signed and we also enforce expectations of written updates to the AOSED membership distributed via our own e-mail listserv and our AOSED website.

Finally, in terms of bold ideas for the future, AOSED is working on increasing collaboration among state osteopathic association in geographic regions. Discussion about piloting regional hybrids of association has surfaced. If resources could be identified to help with a pilot project, AOSED would be very interested in exploring this concept.

We would also like to revitalize our state-to-state mentoring program for new Executive Directors and offer more in-depth training and support for our colleagues and will be looking for ways to collaborate with the AOA on making sure that new state executive directors have the information and support they need to be successful.

In conclusion, AOSED is actively engaged in a strategic planning process and is focused on providing the needed information, resources, and support to state executive directors. Our goal is to assist them in reaching their full potential and we welcome opportunities to work collaboratively with the AOA to accomplish this. AOSED was pleased to participate in the Affiliate Alignment retreat held in conjunction with the Advocacy for Healthy Partnerships meeting in January. Communication with the AOA, state associations, and between state associations themselves, is critical to our efforts to serve the osteopathic profession. While the affiliate alignment meeting was a good start, we need to establish reliable and regular engagement between the AOA and AOSED to ensure our efforts are in sync. As AOSED sets out on new projects, we must have a clear understanding of the strategic direction of the AOA as changes in rules and other policy have a profound impact on our ability meet new challenges.

We thank you for the opportunity to comment here today and AOSED looks for opportunities to be an engaged stakeholder as the future of the osteopathic profession evolves.

Respectfully submitted,



Angela Cole Westhoff
AOSED President, 2016-2017
Email: awesthoff@mainedo.org

**Report to the AOA Board of Trustees
American Association of Colleges of Osteopathic Medicine
March 1, 2017**

The American Association of Colleges of Osteopathic Medicine (AACOM) represents the 33 accredited colleges of osteopathic medicine in the United States. These colleges are accredited to deliver instruction at 48 teaching locations in 31 states. Six of the colleges are public, 27 are private.

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Assembly of Presidents Chair: Kenneth H. Johnson, DO, Executive Dean, Ohio University Heritage College of Osteopathic Medicine

- College of Osteopathic Medicine Dean Updates (as of July 2016):

William T. Betz, DO, Acting Dean, University of Pikeville-Kentucky College of Osteopathic Medicine
(Serving during AOA Presidency of Boyd R. Buser, DO)

Jane E. Carreiro, DO, Dean, University of New England College of Osteopathic Medicine

Gregory Christiansen, DO, MEd, Dean, Des Moines University College of Osteopathic Medicine

Martin Diamond, DO, Interim Dean, Touro University College of Osteopathic Medicine, Harlem Campus

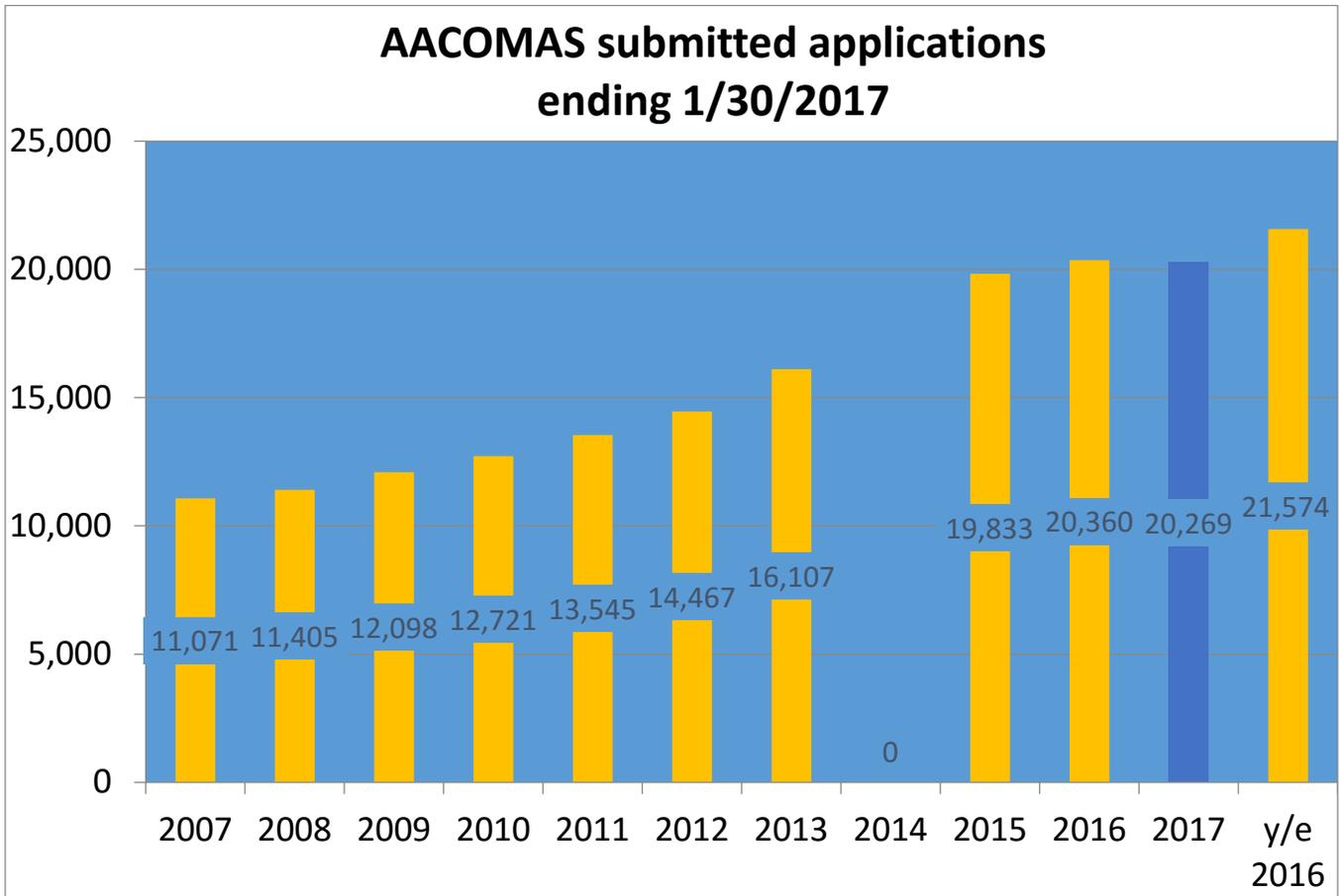
David F. Klink, DO, Interim Dean, Liberty University College of Osteopathic Medicine

Shane Speights, DO, Site Dean, New York Institute of Technology College of Osteopathic Medicine at Arkansas State University

Ray E. Stowers, DO, Provost and Dean, Arkansas College of Osteopathic Medicine

AACOMAS Update

- The 2017 application cycle began on May 4, 2016, with the opening of the 2017 AACOMAS application. Current submitted applications as of January 30, 2017, total 179,476, a decrease of 0.85 percent from last year.



- The 2017 application cycle ends April 1, 2017, although many colleges maintain submission deadlines before and some after this date. To view information for potential applicants, visit <http://www.aacom.org/become-a-doctor/applying>.

Research Activities

- AACOM recently launched a new Research Dashboard, which provides an interactive environment for users to explore the distribution of AACOMAS applicants and matriculants by U.S. state/territory and college of osteopathic medicine (COM) for the 2016 entering class. The new dashboard allows users to control how data are presented by adjusting built-in filters, to gain insight tailored to user needs and preferences. This dashboard is a test implementation of new approaches to presenting the various data that AACOM collects from the annual survey, special surveys, AACOMAS applications, and the entering and graduating student surveys, along with data from other sources. Comments and suggestions are welcome to research@aacom.org.
- AACOM has also recently released its [Applicant and Matriculant Summary Report for Entering Class 2016](#). Highlights include:
 - Applicants and matriculants to the 2016 entering class designated up to 36 colleges of osteopathic medicine (COMs) as recipients of their osteopathic medical school applications

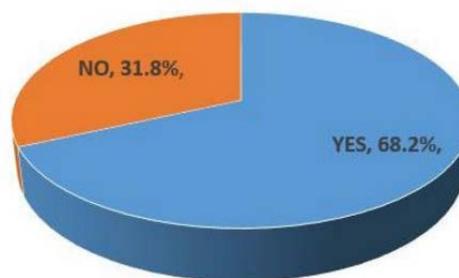
- A total of 20,381 and 6,702 matriculants indicated a U.S. state/territory as their permanent residence
 - Almost one-third of all designations came from legal residents of California, Florida, and New York
 - Nearly 30 percent of all matriculants listed their legal residence to be California, Florida, and New York
- The AACOM Research Department continues to develop and expand data on osteopathic medical education and make such data available to the osteopathic community and the public through the AACOM website at <http://www.aacom.org/reports-programs-initiatives/aacomreports>.

Graduate Medical Education Update

- [DO Match Day](#) was celebrated across the nation on February 6, 2017, with over 2,200 DO students and graduates learned where they would be completing their residencies.
- AACOM conducted a survey in November-December 2016 (a follow-up from the original survey done in March 2015) to examine the preferences of third-year students at COMs who are starting the process of choosing their residency training programs. The goal of the survey was to determine if COM students were interested in pursuing ACGME-accredited programs with osteopathic recognition within the single GME accreditation system. In this survey, third-year students were asked whether they would prefer an ACGME-accredited program with osteopathic recognition over one without osteopathic recognition, and how important osteopathic recognition would be in their rank order of preference for GME programs.

The newly-released data brief, [Survey Results: Appeal of ACGME-Accredited Programs with Osteopathic Recognition among Third-Year Osteopathic Medical Students](#), reports on the data collected from November/December 2016 survey. The findings of this survey reveal that students continue to convey overwhelming interest in ACGME-accredited programs with osteopathic recognition—68.20 percent of those surveyed indicated that a program with osteopathic recognition has greater appeal to them than an ACGME-accredited program without osteopathic recognition (see figure below).

Would an ACGME-accredited program with Osteopathic Recognition be more appealing to you than an ACGME-accredited program without Osteopathic Recognition?



Other key findings from the survey include:

- Osteopathic recognition of an ACGME program has some degree of influence in how 78.2 percent of respondents may choose to rank GME programs.
 - Over half (51.20 percent) of respondents specify that osteopathic recognition is a “very important” or “important” influence in how they rank GME programs.
 - The most frequently cited reasons for selecting a program with osteopathic recognition is to maintain their commitment to osteopathic medicine and the osteopathic profession and to continue to develop skills in Osteopathic Manipulative Treatment (OMT) to use in future practice.
- **ACGME Quarterly Board Meeting in February**
The ACGME Board of Directors met on February 3-6, 2017, for its first quarterly meeting of the year. AACOM President & CEO Stephen C. Shannon, DO, MPH, attended the meeting and presented on AACOM’s activities and priorities since the last ACGME board meeting in September 2016. Topics discussed at the meeting include the single accreditation system, the changing political landscape and other legislative efforts impacting graduate medical education in the future. The board meets next on June 9-11, 2017.
 - **ACGME Annual Education Conference**
The ACGME’s 2017 Annual Educational Conference will be held March 9-12 in Orlando, FL. AACOM will be exhibiting at the conference with several staff members disseminating information and data on OME. Several additional AACOM staff members and leadership will be attending the meeting and taking in programming while at the conference.
 - AACOM continues to work with ACGME and the AOA on operational, implementation, and educational efforts toward establishing the single GME accreditation system. AACOM provides regular updates and resources on the transition to member colleges, students, and other stakeholders in the osteopathic community on our [Single GME Accreditation System web page](#).

Government Relations Update

- **AACOM Public Policy Agenda for 115th Congress**
In December, AACOM released its [Public Policy Agenda for the 115th Congress](#). This agenda reflects AACOM’s legislative and regulatory priorities to ensure that osteopathic medical education (OME) is an active force in the formulation of national health and higher education policies as osteopathic medical schools continue to grow in number, size, and importance to the U.S. health care and medical education systems. AACOM will aggressively pursue these goals, notwithstanding the challenging political and fiscal environment.
- **COM Day on Capitol Hill**
AACOM will be holding its 2017 COM Day on Capitol Hill March 7-8. During this advocacy event, participants will address key policy issues such as the reauthorization of the Higher Education Act, the sustainment of GME, the federal investment in the future physician workforce, and other federal policies that impact the future health care workforce during its annual advocacy day.

On March 8, in conjunction with COM Day on Capitol Hill, AACOM will also host a Virtual Hill Day, allowing COM faculty, students, and other advocates from across the country will be able to participate in COM Day on Capitol Hill via social media.

- **Advocacy Alerts**

Government Relations staff regularly issue information and action alerts on the wide range of policy activities AACOM is addressing, and on federal funding and other opportunities. [View the alerts](#), or [sign up to receive AACOM alerts](#).

AACOM Annual Conference

The [AACOM & AODME 2017 Annual Conference](#) will be held April 26-29 in Baltimore, MD. Under the theme *Educating Leaders for Integrated Health Systems: A Paradigm for the Future*, this year's conference will bring together respected members of the OME community and beyond to engage in discussion and collaboration around a program focused on topics such as transformative innovations, functions, and challenges of a demanding and dynamic health care environment, as well as next-generation integrated academic health systems, GME, faculty development, research and leadership, osteopathic entrustable professional activities (EPAs), and other high-priority topics important to OME and health professions education landscape as a whole. Program and conference planning, led by 2017 conference co-chairs Lisa Nash, DO, MS-HPed, and Isaac Kirstein, DO, is well underway.

Senior Leadership Development Program

AACOM launched its new [Senior Leadership Development Program \(SLDP\)](#) with the inaugural call for nominations on January 11, 2017. This program is focused on individuals in senior leadership positions at U.S. colleges of osteopathic medicine, and is designed to assist current, interim, or designated deans (both new and experienced), and others identified by their schools as potential future deans, in developing and enhancing critical leadership and management competencies.

Fellows in the initial class will begin the program this April at AACOM's 2017 Annual Conference in Baltimore, MD and conclude in April 2018. It will involve four and one-half days of on-site participation over the course of the fellowship, as well as occasional team coaching, conference calls, and other time commitments throughout the year.

Visit the [SLDP web page](#) for application information and additional program details.

AACOM Diversity Committee

AACOM's Diversity Committee had its inaugural meeting December 5-6, 2016. Twenty-one diversity representatives from the nation's colleges of osteopathic medicine attended, along with AACOM staff and special guests. At the meeting, the group discussed broad topics related to diversity in medical education and medicine, including its definition and meaning, research, as well as current COM and AACOM efforts to increase diversity in the osteopathic medical education continuum in relation to AACOM's mission to actively support excellence in undergraduate, graduate, and continuing medical education.



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AOA BOARD OF TRUSTEES STUDENT DELEGATE

COSGP Year-End Summary for AOA Board of Trustees
February 10th, 2017

To the AOA Board of Trustees,

It is my honor to represent the Council of Osteopathic Student Government Presidents. Thank you for allowing me the opportunity to report the activities of COSGP. Below are a few of the highlights of what we as a council have been working on this year.

I. Mental Health Awareness Task Force Report

II. Public Relations & Web Committee Report

III. Leadership Committee Report

IV. Research Committee Report

V. Medical & Clinical Education Committee Report

VI. Legislative Committee Report

VII. Global Health Committee Report

VIII. Finance Committee Report

IX. Student Services Committee Report

X. Student Representative to the AOF Report

XI. Student Representative to the AOA BOT Report



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I. Mental Health Awareness Task Force

Led by National Second Vice Chair Caleb Hentges, OMS-III,

Mission. COSGP recognizes the need to advocate for student resiliency and well being. In a much needed effort to strengthen our osteopathic community, we want to abolish the stigma surrounding future healthcare providers and their mental health needs. We believe this mission is best addressed by beginning mental health awareness and prevention in medical school.

Vision. To strengthen the Osteopathic community through mental health awareness and physician well being advocacy.

Mental Health Ambassador Program

Developed by Alyssa Beda, OMS III- West Virginia College of Osteopathic Medicine

Proposal:

Ambassadors to the COSGP Mental Health Awareness Task Force

Title of positions: Regional Alumni Coordinator to the MHATF- broken up into Regions (7 regions total)

Goals:

- To create a national network of COSGP Alumni and future osteopathic physicians, who share a passion for mental health and reducing physician burnout
- To create a position for those interested, who will be dedicated to oversee this project over the following 5 years, and beyond, and for those ambassadors to be spread throughout the country.
- To extend the work and research of the Mental Health Awareness Task Force into osteopathic residencies
- For COSGP Alumni to maintain contact with current COSGP members regarding Initiatives surrounding mental health and how it pertains to future physicians

Role of the Regional Ambassadors

- Stay up to date on the MHATF surveys/research/3 goal plan
- To continue to be an advocate for Physician & Medical Student Wellbeing
- To be involved in their own initiatives, and to push for conversation and events surrounding mental health and wellbeing at their respective rotation sites or residencies
- To serve as both a resource & contact for the current / incoming COSGP
- To make MHATF a lasting effort 7 sustainable

Year Progress

- National network installed.
- Each campus has two student ambassadors and there are currently regional ambassadors to help organize and collaborate events.
- Currently working on establishing a faculty champion at each COM.

Advocate for the mental health needs of students. There is a stigma that surrounds mental health in our medical profession, which leads to unhealthy students, residents, and eventually, doctors.

cosgp
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STUDENT GOVERNMENT PRESIDENTS

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Advocacy Social Media Campaign

Originally created by Steve Bialick, Kenyanita Ellis, and the COSGP PRWeb Committee of 2015-2016: Alex Bauer, Jenna Choi, Caleb Hentges, Daniel Henery, Anya Pacleb, David Winston, Daniel Kim

#SAVE400 pins- Since April 2016 we've shared pins with COSGP council members that say "SAVE400" as a conversation starter about the 400 physicians lost annually to suicide as well as the nearly 400,000 physicians who have suffered from burnout in their lifetime. We intend for these pins to start the conversation to a better future for physicians.

OMS Day of Wellness:

Created by Payal Aggarwal and the 2015-2016 COSGP Global Health Committee: Shawn Hamm, Juan Gonzalez, Karim Fahmy, Whitney Wolfe, Alyssa Beda, Harsha Kannan, Matthew Macoul, Julet Baltonado.

Currently overseen by COSGP's Global Health Representative, Luke King

- February 10th 2017 was the second annual event with events held across many COMs across the country.

II. Public Relations & Web Committee

Led by National Second Vice Chair, Caleb Hentges, OMS-III, AXCUM

& National PR&Web Representative Ronak Mistry, OMS-IV, Rowan-SOM

Program Director Letter. COSGP National Chair, Angelo Mascia, and current SOMA National President in conjunction with the Student Representative to the AOA Board of Trustees, Carisa Champion, DO, JD, MPH drafted a letter to program directors urging them to transition into the single accreditation system. Our letter also provided resources, including the AOA SAS Application Assistance Program, to help program directors navigate their transition.

Second Single Accreditation Webinar. COSGP National Chair, Angelo Mascia, COSGP First Vice Chair, Daniel Krajcik, COSGP PR/Web representative, Ronak Mistry, and immediate past Clinical Education Representative, Louisa Sethi worked in conjunction with AACOM to provide student opinion on important topics for the Single Accreditation Webinar to be conducted January 2017.

The Pulse. The newly designed COSGP digital newsletter was a big success this year. Opening the list of authors from purely COSGP members to ALL osteopathic medical students allowed for a greater realm of article ideas and topics. Utilizing a brand new template and appeal, The Pulse was popular among students across the nation and was used to highlight major COSGP projects throughout the year. Some of the important events covered in The Pulse were OMS Day of Wellness, the MHATF efforts, COSGP's annual poster contest, and many editorials from various osteopathic medical students and their personal insight into medical school, medical education, and the entire healthcare frontier.

Website. COSGP launched a new website this year, housed under the umbrella of the main AACOM URL: aacom.org/cosgp. Using this website in addition to our social media outlets allowed for dissemination of information to the masses. We utilized this website for news updates, marketing campaigns, and council projects. While the new layout of the website first posed a challenge, the postings became easier as the year progressed. In fact, we even created a new

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subpage specific to the COSGP Mental Health Task Force at aacom.org/cosgp/mentalhealth. We use this website as a data bank for COSGP information, meeting attendees, award recipients, and much more.

III. Leadership Committee

Led by National First Vice Chair, Daniel Krajcik, OMS-III,

2017 Leadership Lecture Series. This year's leadership series was intended to highlight our theme of empowerment. Topics included: Utilizing and Knowing your Strengths, Group Formation, The Value of Relationships, Collaboration & Communication, Influencing Others and Influencing Up, Self-Care as Leader, Doing What is Right vs. Doing What is Easy, and Women in D.O. Leadership.

2017 NOSS: Dr. Avey had spoken to the council on the topic of Medical Leadership in the 21st Century with the subthemes of trust, empowerment, and positive psychology.

IV. Research Committee

Led by National Research Representative, Varun Malik, OMS-III

Student Researcher of the Year Award (SROY). COSGP sponsored the third annual Student Researcher of the Year (SROY) award this year. This award recognizes osteopathic medical students making substantial contributions to clinical, translational, or basic science research. The purpose of this recognition is to emphasize contributions aligned with the mission of both the osteopathic profession and COSGP—to advance the philosophy, practice, and science of osteopathic medicine. The SROY winner will receive their national award and recognition at the 2017 AACOM annual conference in Washington D.C.

Poster Presentation & Competition. At COSGP's Quarterly meeting held at Western COMP in January of 2017, the research committee hosted the second annual research poster presentation and competition. This annual event is held to encourage research participation and presentations among osteopathic medical students. There were over 12 participants with many entering from the school's student body.

V. Medical & Clinical Education Committee

*Led by National Medical Education Representative, Kortnee Koziara, OMS-III,
& National Clinical Education Representative, Matthew Macoul, OMS-II*

Proposal to the COCA. National Chair Angelo Mascia had spoken at the COCA meeting in December to formally request increased student involvement in the school survey process and site visits.

Student nomination to the COCA *ad-hoc* committee: National Chair Angelo Mascia nominated Louisa Sethi, OMS IV, NYIT-COM to serve on the COCA *ad-hoc* committee to review current standards.

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Medical Education Award. Medical schools that have experienced a new curriculum change within the last three years were encouraged to apply for this distinguished award. This year's award winner is pending and expected to be announced in April 2017

ERAS. The committee has been working on material to help improve students' understanding of ERAS and how the application process works.

VI. Legislative Committee

*Led by National Parliamentarian, Reid Malcolm, OMS-III,
& National Legislative Representative, Owais Durrani, OMS-III*

National Osteopathic Student Caucus (NOSC). The NOSC is an annual COSGP sponsored event where all DO students form an official opinion on certain resolutions that will go before the floor of the AOA's annual House of Delegates. Students from COSGP and SOMA are usually present in Chicago and all students in the country are invited to attend online. Students debate and vote on resolutions, which are then finalized by the Leadership Panel consisting of all student organization presidents. The NOSC was a huge success this year; students who attended in person and through video conferencing were all very engaged and excited about health policy.

Constitution & Bylaws Update. The National Parliamentarian and National Legislative Representative had formed a Membership Taskforce to evaluate the current process by which we define COSGP members. Based on the recommendations from this task force constitution changes were proposed to expand the definition of COSGP representative to be more in line with how the AACOM Board of Deans in defined. Anticipate final decision in Spring 2017.

Partnership with AACOM Government Relations. We have continued our efforts with working with the AACOM GR team and currently Owais Durrani is working with the GR team to promote and advocate for the Ed to Med campaign. Each COM across the country now has an ambassador to the campaign.

Partner Organization Collaboration. Legislative Committee members attended the OPAC reception in Chicago, IL during the AOA's Annual Business Meeting and House of Delegates. Additionally, committee leadership promoted involvement in Omega Beta Iota, the national political action honor society for osteopathic medical students.

VII. Global Health Committee

Led by National Global Health Representative, Luke King, OMS-III

OMS Day of Wellness. The National Global Health Representative's contribution to the COSGP Mental Health Awareness Task Force Initiative was the creation of OMS Day of Wellness. The representative was responsible for creating, marketing and helping execute this day across all CoS/SOMs. OMS Day of Wellness was a day for students to reflect on their own mental health and well-being. It was also a day to raise awareness of the stigma surrounding mental

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health and the importance of medical student mental health. The day included activities from the 4 pillars of mind, body, spirit and reflection. The range of activities for these pillars was determined by the COSGP members at the January 2016 meeting.

Grassroots Outreach Movement. Involvement on the grass roots level was a new initiative this year. Historically, global health leaders at COMS have not been the Presidents of the student governments (COSGP members). This year, the DOCare and global health student organization leaders were contacted to provide information directly to the students responsible for global health opportunities on their campuses. The National Global Health Representative and the Global Health Committee members organized regional delegation meetings and were present for meetings with global health leaders at various COMS. This was one of the greatest achievements this year.

Culture Awareness Project. During the past two years, the Global Health Committee compiled information on 12 countries for the culture awareness project. This year, the committee doubled the number of countries to include 24 countries in the project. Also, the committee reformatted all the information into a succinct and informative manner to include the following sections:

- Demographics
- Variation between regions:
- Typical illnesses
- Environmental factors
- Existing healthcare system
- Healthcare perception
- Medical training requirements
- Regions : religions and languages
- Family and Gender roles-- >
- Patients w/ typical illnesses: % men and women afflicted; % men and women seeking care
- Traditional healing beliefs
- Beliefs of end of life care
- Acceptance of OMT & Treatment restrictions
- Relevant Microbiology to relevant diseases of area
- Vaccination Checklist: refer to the CDC

BIOM. COSGP sponsored the BIOM project at OMED this year, which enabled all osteopathic medical students to participate as it was previously only open to SOMA members. BIOM submissions increased two fold due to COSGP's involvement; COSGP will continue to foster and develop a working relationship with BIOM. COSGP will continue to co-sponsor the event for the 2017 OMED.

VIII. Finance Committee Report

Led by National Treasurer, Tom Hanna, OMS-III,

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Annual Silent Auction Fundraiser. At the AOA's annual House of Delegates meeting in July, COSGP hosted its annual Silent Auction fundraiser, and raised the largest dollar amount in donations in COSGP history.

Alumni Outreach. The Finance Committee has also established a new COSGP alumni list to facilitate distribution of newsletters.

Budget. COSGP's 2016-2017 Annual budget has been submitted to AACOM for review and approval.

IX. Student Services Committee

*Led by National Secretary, Anya Pacleb, OMS-III,
& National Programs Representative, Taylor Brown, OMS-III*

TOUCH Website. Since the induction of the new national TOUCH website last year there have been many technical difficulties. COSGP is currently working with AACOM and an IT team to re-develop the website to eliminate these issues and to make the site more functional for the student body.

DO Day of Compassion. COMs/SOMs around the country increased their participation this year to create awareness of osteopathic medicine in remembrance of those who lost their lives on the flight in 2004. Examples of what schools did include volunteering at arboretums, senior centers, local hospitals, having faculty/administration appreciation gifts/cards, participating in "pay it forward" activities. This continues to be a national event that COSGP leaders encourage at all COMs/SOMs.

X. COSGP Student Representative to the American Osteopathic Foundation

Andrew Cudmore, OMS-III

AOA Awards Honor Dinner: Every COSGP member was in attendance for the AOA Awards Dinner to help support the cause and mission of the American Osteopathic Foundation with a majority of our membership donating 35\$.

Guest Speaker; Mr. Jeff Heatherington. Mr. Heatherington graciously donated his time to speak in a special event with the COSGP General Council during the January Meeting at WesternCOMP. He spoke on the topic of leadership and offered his insight into the profession of medicine and how he has developed professionally and personally.

XI. COSGP Student Representative to the AOA Board of Trustees

Vanessa Halverson, OMS-III

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AOA's Bureau of Emerging Leaders (BEL). With the newly created BEL, the Student Representative advocated for the incorporation of COSGP and SOMA representative into the new AOA Bureau. This group of student leaders met during the OMEL Conference in Tampa, FL in January 2017.

Collaboration with SOMA. Worked with SOMA throughout year on various projects and issues.

This concludes COSGP's annual summary for the AOA Board of Trustees. Thank you for your time and consideration of these student-led initiatives and projects. Your continued support is vital to COSGP's continued success.

Respectfully yours,

Angelo Mascia, OMS-IV
COSGP National Chair 2016-2017
cosgpchair@aacom.org



**Report to the American Osteopathic Association's
Board of Trustees
Midyear Meeting | March 2017**

John R. Gimpel, DO, MEd
President & CEO
jgimpel@nbome.org

1. NBOME 2016 Annual Board Meeting: Elections and Awards

The NBOME Board of Directors met in December 2016 under the gavel of Chair Gary L. Slick, DO, MA. During this meeting, the Board elected and installed three [new Board Members](#) to its 21-member Board of Directors. We welcome Mousumi Som, DO, from Oklahoma, Mollie M. James, DO, MPH, from Iowa, and Donald H. Polk, DO, from Tennessee. Deborah Pierce, DO, MS, completed her third and final term on the Board and was recognized for her long-term, outstanding service to the Board. Mr. Gary R. Clark from Missouri, former executive director of the Oklahoma State Board of Osteopathic Medicine and of the American Association of Osteopathic Examiners (AAOE), and former public (non-DO) member of the NBOME Board of Directors, was awarded the inaugural [NBOME Clark Award for Patient Advocacy](#). The Board awarded its highest honor, the [Santucci Award](#), to William G. Anderson, DO, former NBOME Board member and former president of the American Osteopathic Association.

2. NBOME Board Actions Regarding Candidate Behavior – Irregular Conduct

The NBOME is committed to maintaining the integrity of its examinations in order to protect the public and so that state medical and osteopathic medical licensing boards may rely on COMLEX-USA as part of their decision-making process for licensure. The Board reviews cases throughout the year involving allegations of irregular conduct by COMLEX-USA candidates. Irregular conduct can occur in connection with the application or registration for, administration of, or the integrity and security of the COMLEX-USA examination. Please see Section VI of the [COMLEX-USA Bulletin of Information](#) for details.

At its 2016 Annual Board meeting, the NBOME Board reviewed evidence that a candidate altered a COMLEX-USA score report. Actions taken include permanent annotation of the COMLEX-USA Score Report and Official Transcript for this candidate, notification of the candidate's college of osteopathic medical school, and immediate suspension from COMLEX-USA examination eligibility.

COMLEX-USA candidates and their advisors are reminded to read the COMLEX-USA Bulletin of Information carefully, comply with the rules of conduct during testing, and refrain from pre- or post-examination conduct deemed to be irregular conduct. NBOME encourages all stakeholders to promptly provide information about irregular conduct, cheating and other activity that they are aware that may compromise the security and integrity of any COMLEX-USA examination.

Individuals who suspect an occurrence of irregular conduct should contact NBOME's Client Services team, clientservices@nbome.org, (866) 479-6828. More information on irregular conduct is contained in the COMLEX-USA Bulletin of Information.

3. **NBOME 2016 National Faculty Award Winners, Scholarly Activity and Recruiting**

The NBOME Board recently announced [2016 Test Item Writer and Case Author of the Year Awards](#) for the COMLEX-USA and COMAT examination programs. The NBOME greatly appreciates the support for COM faculty members who contribute in so many ways to the development of NBOME assessments. About 50 percent of our 1,005 NBOME National Faculty members are COM or LCME-accredited school faculty, and others are from graduate medical education (GME) programs and teaching hospitals, state medical and osteopathic medical licensing boards, and private practice. Faculty members who participate in NBOME activities find it to be a meaningful opportunity for professional development, to achieve CME credits, and to participate in scholarly activity and fellowship.

We are currently recruiting for DOs and other subject matter experts in radiology, health care delivery and patient safety, medical ethics, jurisprudence and professionalism, public health and preventive medicine, OBGYN, and general surgery. Please have interested individuals contact Tracy Spinks, NBOME National Faculty Program Manager at tspinks@nbome.org.

4. **2017 Brings Numerous Enhancements to the COMLEX-USA Program**

In response to candidate feedback, effective with the 2017-2018 COMLEX-USA testing cycles, NBOME will change the two 10-minute optional breaks for COMLEX-USA Level 1, Level 2-CE and Level 3 from "on-the-clock" to "off-the-clock." The new breaks **will not** count against the total examination time if taken within the allotted 10 minutes. The new breaks will continue to take place between sections 2 and 3 in the morning session, and sections 6 and 7 in the afternoon session for standard exam administrations. The optional 40 minute lunchtime break will remain.

To support an improved experience for our candidates, additional planned enhancements for the 2017-2018 test cycles include:

- Lab values with reference ranges, as applicable, embedded directly in the test questions and clinical cases (This enhancement will also be added to COMAT in the 2017-2018 test cycle beginning July 1, 2017.)
- A standard calculator feature
- Upgrades for digital images (This enhancement will begin to roll out in the 2018-2019 examinations.)
- Additional Prometric Test Center sites

5. **Single Accreditation System (SAS) for GME Update: Your COMLEX-USA Continues to Shine!**

2016 was a great year for the NBOME's COMLEX-USA examination program as it relates to secondary uses of examination scores by program directors for GME applications. Published manuscripts adding to predictive validity of COMLEX-USA in residency training and board certification pass rates, like the one below published in *Academic Medicine* in November 2016, continue to help with ACGME-accredited program directors: [The Predictive Validity of the National Board of Osteopathic Medical Examiners' COMLEX-USA Examinations With Regard to Outcomes on American Board of Family Medicine Examinations](#).

Similarly, the ACGME's *Journal of Graduate Medical Education* published this landmark NBOME study, thanks to partnership with AACOM and three participating COMs: [The Use of COMLEX-USA and USMLE for Residency Applicant Selection](#).

This article highlights the comparability of COMLEX-USA Level 1 and USMLE Step 1 for secondary purposes but continues to warn residency program directors against overuse or misuse of any licensing examination program for secondary uses.

In 2016, the ACGME added clarifying information about the comparable use of COMLEX-USA to USMLE for fellowship applications in cases where residents completed non-ACGME accredited residency programs but are applying to ACGME-accredited fellowship training programs. Importantly, COMLEX-USA is cited as an equivalent assessment tool by the ACGME as well as for documentation of achievement of ACGME milestones, as illustrated in this example with the [ACGME and the American Board of Emergency Medicine](#).

An important independent Residency Program Director's Survey by the [National Residency Matching Program](#)[®] (NRMP) in 2016 again revealed that 77 percent of ACGME-accredited residency program directors use COMLEX-USA for DO applicants. While there is some specialty and geographic variation, this study replicated NRMP findings in 2014 and 2012, and showed significant increases in a number of popular specialty programs, including internal medicine. In fact, when adding in AOA-accredited residency programs, all of which are very familiar with COMLEX-USA, we find an 85-90 percent use of COMLEX-USA in all of the most popular, most-applied to, specialties for residency training for DO applicants. At the same time, the NRMP studies point out that a minority of ACGME residency program directors, and more likely in certain fields, report that they do not typically interview and rank DO applicants. We are all working together to facilitate the education and change needed in this area.

Some upcoming educational opportunities to advocate for the qualifications of COM graduates, including COMLEX-USA, include the NBOME exhibit booth and plenary address featuring COMLEX-USA at the upcoming ACGME Annual Conference, March 9-12, 2017. "Understanding COMLEX-USA and AOA Specialty Board Certification: A Primer for Residency Program Directors." Moderated by American Osteopathic Association President Boyd R. Buser, DO, FACOFP dist., the session will take place on March 11, 2017 at 8 am. We are submitting COMLEX-USA transcript updates to Program Directors in 2017 via the Electronic Residency Application Service (ERAS[®]), which will highlight tools for residency program directors to better understand the scores. In addition, we recognize that helping to educate our colleagues in the GME world requires a "grass-roots" effort. Identifying DOs who have trained in programs of interest, are on hospital staffs, or on the faculty at GME programs of interest, is a key strategy, best facilitated by alignment between the COMs, AACOM, AOA and NBOME. Please let me know if you identify areas or specific teaching hospitals or programs where alignment to provide education might be helpful.

With all of the gains that COM graduates have made with their qualifications both before and since the SAS for GME, it appears that some in our own profession continue to play a perplexing role in perpetuating a disadvantage for DO graduates through their acceptance of self-undermining behaviors and biases. Surprisingly, with all of the confusion reinforced by misinformation, last year, only 51 percent of DO students elected to take USMLE Step 1, in addition to their required COMLEX-USA Level 1. That number has slowly crept up from 48-49 percent five years ago, but at a much slower rate than the growth of DO graduates.

When I had the privilege of addressing the AOA Board of Trustees in February 2016, I warned against referring to GME training programs as "MD programs" or "allopathic programs." Especially when discussing residency programs with students and faculty members, referring to programs using these (what I believe to be) archaic terms is both inaccurate and confusing and helps to create mental models in the eyes of DO students that undermine their own professional identity. These terms still somehow

occasionally appear on osteopathic websites. As you know, residency programs now are either "AOA-approved" (AOA-accredited), "ACGME-accredited," or both, and, by 2020, all will be ACGME-accredited. Some will earn the distinction of "osteopathic recognition" status. I believe words mean a great deal. To DO students, YOUR words can mean everything.

The NBOME stands firmly in support of the AOA and all members and stakeholders of the osteopathic medical community. We will continue to advocate for the osteopathically distinctive philosophy of health care that requires osteopathically distinctive AOA-COCA COM accreditation, and osteopathically distinctive assessment for licensure that is designed for and has validity evidence for the practice of osteopathic medicine. Our patients deserve this. Most of our MD colleagues already do or are coming to understand and respect this. And with alignment across our profession, we can help to ensure that this is our future as well!

6. COMLEX-USA Master Blueprint 2018-2019 – Additional Details to Be Released

The [COMLEX-USA Master Blueprint 2018-2019](#) was released last summer and several additional important enhancements and administrative details were recently approved by the NBOME Board and will be available on the NBOME website by July 2017. These include individual test specifications for COMLEX-USA Level 1, Level 2-CE, Level 2-PE and Level 3, as well as detailed blueprint descriptions for both examination dimensions, Dimension 1 (Competency Domains) and Dimension 2 (Clinical Presentations).

7. Revised Examination Eligibility Modifications

The NBOME Board has also approved candidate examination eligibility modifications. These will be subject to a period of commentary from NBOME's stakeholders between February 1 and March 17, 2017. New eligibility criteria, which go into effect with the 2018-2019 test cycle for COMLEX-USA Level 3, will require an attestation from an AOA- or ACGME-accredited GME program director that the Level 3 resident/exam candidate is in "good academic and professional standing." Beginning with the 2019-2020 test cycles, eligibility for the COMLEX- USA Level 1, Level 2-CE or Level 2-PE will require an attestation from an AOA COCA-accredited COM dean that an osteopathic medical student is in "good academic and professional standing."

We invite you to review the [changes in eligibility criteria](#), including guidelines for medical professionalism based on the competencies detailed in the [NBOME Fundamental Osteopathic Medical Competency Domains 2016](#). Please share your [comments](#) with us on these changes to the eligibility criteria by the end of the public commentary period on 3/17/17.

In addition, eligibility modifications to the new COMLEX-USA Level 3 two-day examination were made. NBOME will also **recommend** that Level 3 candidates have completed a minimum of six months of residency training prior to testing. For 2018-2019, COMLEX-USA Level 3 will begin the new two-day test administrations in September 2018, and 2017-2018 Level 3 administrations will cease at the end of April 2018. Please note that there will be no Level 3 testing from May through August 2018.

8. COMLEX-USA Level 2-PE Scheduling Enhancements and Level 2-PE Administration at Two Sites

COMLEX-USA Level 2-PE testing seats at both National Center for Clinical Skills Testing Philadelphia (Conshohocken) and Chicago (O'Hare) were expanded by 30 percent in the 2016-2017 test cycle and are now opened on a rolling basis every week through the month. Responding to COM and candidate feedback, test sessions are now again opened about one year in advance (e.g., most seats for March 2018

will be opened throughout March 2017). As we continue to monitor candidate scheduling trends, additional seats at both locations may be opened throughout the testing cycle. Candidate feedback at both locations remains excellent and we have exceeded benchmark targets for indicators regarding standardization of testing at two centers.

9. NBOME Sponsoring Joint AACOM & AODME 2017 Annual Conference

We are again privileged to serve as a sustaining platinum sponsor for the conference, and will host a preconference workshop on April 25. We look forward to providing information and soliciting stakeholder feedback on the COMLEX-USA Master Blueprint 2018-2019 and enhancements, as well as on NBOME's COMAT examination program. Don't miss this opportunity to learn more about new test specifications and provide feedback. We will also be staffing an exhibit booth and hope to address the AACOM Board of Deans. In addition, the NBOME will again offer its informative "NBOME and COMLEX-USA Luncheon Presentation" on Friday, April 28.

10. COMAT Program Enhancements

Nearly all COMs are now actively engaged and participating in NBOME's COMAT program of osteopathically distinctive subject examinations, providing high quality assessment tools, meeting accreditation requirements for osteopathic distinctiveness, documenting direct evidence of student learning, and assuring educational equivalency at varied clinical rotation/clerkship training sites. New for 2017 are COM Comparative Summary Reports by COMAT discipline that will be available to "COMAT COMs" on the NBOME secure Dean's Page of the Client Registration System/Portal. COMs will be able to compare their COM student performance with other unidentified COMs. We anticipate these reports for the testing cycle/academic year to be uploaded annually in August or September.

In 2016, the COMAT program continued to experience a high rate of growth, bolstered by the increased utilization of the newer COMAT-Emergency Medicine. Now with standard scores provided, COMAT-Emergency Medicine is used by more than 50 percent of COMs, and is increasingly of interest to emergency medicine residency program directors.

The newest COMAT program initiative, COMAT-Foundational Biomedical Sciences, is expected to launch several fixed form comprehensive versions by late 2018 and more customizable, organ body system and discipline sectional exams in 2019. We will be providing more details and gathering your input at the upcoming AACOM Annual Conference.

Finally, in January we introduced enhancements for registering students to take COMAT examinations. These improvements provide COMs with greater control and flexibility in managing the entire COMAT registration process, and are designed to create a more positive experience for COMs and students. Deans may [login](#) to their COMAT registration page to view the new COMAT registration guide.

11. Have You Heard the Buzz about the New NBOME CATALYST Platform?

CATALYST is NBOME's flexible, innovative assessment platform that supports lifelong learning and continuous professional development. It has customizable features that make it perfect for assessment used across the continuum, including as an alternate way to assess knowledge for continuous board certification (e.g., American Osteopathic Association's Osteopathic Continuous Certification program), resident in-service assessment, and other assessment needs. Test questions reflecting the content required are delivered to examinees on smart phones, tablets or other devices of choice as determined by the client program, including other features that can include frequency and timing, immediate feedback,

spaced repetition and assessment of an examinee's confidence and content relevance to his or her practice. We are currently proposing the use of the CATALYST platform on a pilot basis to several assessment organizations and will be updating you throughout 2017.

12. New NBOME Website Coming Mid-2017!

After extensive design work and planning, we are preparing for the launch of our new website by late spring/early summer! The new site will be more graphically engaging and will make it easier for you to navigate to the specific information and resources you need. In addition to our website, we are reaching important stakeholders via social media. If you haven't done so already, connect with us today on [Facebook](#), [Twitter](#) or [LinkedIn](#). Please look for our bimonthly electronic newsletter, [The Osteopathic Examiner](#), with updates of interest to our stakeholders.

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STUDENT OSTEOPATHIC
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**SOMA Foundation Midyear Update to the AOA Board of Trustees
February 8, 2017**

Thank you for offering the Student Osteopathic Medical Foundation an opportunity to update you on several of our organization's recent activities.

SOMA FOUNDATION RECEPTION

We would like to thank members of the AOA Board of Trustees and AOA staff who attended our "Foundation Fiesta" at OMED 2016 in September. It was our honor to recognize the *2016 Northrup Educator of the Year, Dr. John Kasimos, DO* and to show our appreciation and gratitude to all of our generous donors.

FALL SCHOLARSHIPS

Since the start of our fiscal year on July 1, the Foundation has disbursed \$3,500 in scholarships to 8 osteopathic medical students from across the country. These include: *Humanism in Medicine Scholarship, the Community and Preventive Medicine Scholarship, the New Member Scholarships and the Robert S. Juhasz, DO Innovative Leadership in Osteopathic Medicine Scholarship.* Visit our website to learn more about current and past recipients.

ADVISORY BOARD

Over the past two years, **Jonathan Bardahl, OMS IV**, has organized a SOMA Foundation Advisory Board to help the Foundation receive feedback from donors and members of the osteopathic community. The Foundation would like to recognize Jon for his work and to thank the members of the 2016-2017 Advisory Board: **Dr. Robert S. Juhasz, DO; Mr. Tal Frank; Dr. Edward G. Loniewski, DO; Dr. Lee VanderLugt, DO; Dr. Karen J. Nichols, DO; Mr. Mike Roseman** and a special thanks to **Ms. Sherri Wise, CPA** who will serve in an advisory role to the SOMA Foundation Board.

On behalf of the SOMA Foundation, I thank you all for your continued support and guidance as we strive to celebrate the education and accomplishments of osteopathic medical students and the impact they have within the community.

Sincerely,

Paul Robbins, OMS IV
SOMA Foundation Chairperson