ACOI information

A PUBLICATION OF THE AMERICAN COLLEGE OF OSTEOPATHIC INTERNISTS
VOL. 24 NO. 8 JANUARY 15

From President Lightfoot

Happy New Year 2015!

What awaits you in 2015? Well, for me it's a need to clear the clutter, to become more organized for myself and my patients, and to have more patience with a health care system that is forever changing. For me (and many of you, too), the New Year came in with a bang, with my plate fully loaded and already a week behind. But I am ready to charge forward and go!

I began 2015 by reinforcing my personal responsibility to my own health, wellness and happiness. This will go a long way toward helping my patients. We, as physicians, are responsible for the care, management and outcomes of our patients as well as ourselves 24-hours a day, seven days a week. Yes, many of us choose our career paths with great enthusiasm and compassion. With that being said, health, wellness and happiness for any physician is critically important in the delivery of good, effective and quality health care to our patients.

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Osteopathic Representatives Take Seats On ACGME Board of Directors

The Accreditation Council for Graduate Medical Education (ACGME) announced on January 14 that the American Osteopathic Association (AOA) and the American Association of Colleges of Osteopathic Medicine (AACOM) are now ACGME member organizations. The measure took effect January 1 and is a critical step toward implementation of a single accreditation system for all graduate medical education (GME) programs in the U.S.

The single accreditation system will allow graduates of allopathic (MD) and osteopathic (DO) medical schools to complete their residency and/or fellowship education in ACGME-accredited programs and demonstrate achievement of common Milestones and competencies. Currently, the ACGME and AOA maintain separate accreditations systems for allopathic and osteopathic educational programs.

Election of new members to the ACGME Board of Directors nominated by AOA and AACOM accompanies the establishment of member organization status, and is part of the agreement reached in early 2014 by the three organizations. Two past-ACOI presidents are among the new Board members.

The AOA and AACOM join the other ACGME member organizations: the American Medical Association, American Hospital Association, Association of American Medical Colleges, American Board of Medical Specialties and Council of Medical Specialty Societies.

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AOBIM Will Offer Hospital Medicine Recertification This Year

The American Osteopathic Board of Internal Medicine (AOBIM) announced that it will administer the Focused Practice in Hospital Medicine Recertification (OCC) Examination in 2015. A confirmed date for the exam has not been determined There was some question as to whether the exam would be offered in 2015 due to low interest in the first exam last year. Recertification in internal medicine with a focus in hospital medicine is available as part of a five-year pilot program approved by the AOA.

Depending on interest in the exam this year, the AOBIM will decide whether it will be offered as a computer-based exam at multiple sites across the country, or a pen and paper exam offered at one site. General information regarding the entire process for Recertification (OCC) in hospital medicine is included in this newsletter. To receive an application, please send an email request with your mailing address to the AOBIM at ***admin@aobim.org***. The deadline for applications is April 1, 2015.

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Funding in part for *ACOInformation* has been provided by Purdue Pharma, L.P.

PURDUE

American College of
Osteopathic Internists

In Service to All Members; All Members in Service

MISSION

The mission of the ACOI is to advance the practice of osteopathic internal medicine. Through excellence in education, advocacy, research and the opportunity for service, the ACOI strives to enhance the professional and personal development of the family of osteopathic internists.

VISION

The ACOI seeks to be the organization that osteopathic internists think of first for education, information, representation and service to the profession.

VALUES

To accomplish its vision and mission, the ACOI will base its decisions and actions on the following core values:
LEADERSHIP for the advancement of osteopathic medicine
EXCELLENCE in programs and services
INTEGRITY in decision-making and actions
PROFESSIONALISM in all interactions
SERVICE to meet member needs

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jlightfoot@gsida.org

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jbulger@geisinger.edu

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Robert A. Cain, DO, FACOI.....robert.cain62@icloud.com

Annette T. Carron, DO, FACOI.....acarron@botsford.org

Robert L. DiGiovanni, DO, FACOI....robdsimc@tampabay.rr.com

Scott L. Girard, DO, FACOI.....grrdsctt@yahoo.com

Mitchell D. Forman, DO, FACOI....mitchell.forman@tun.touro.edu

Joanne Kaiser-Smith, DO, FACOI.....kaiserjo@rowan.edu

Samuel K. Snyder, DO, FACOI.....snyderdo@nova.edu

Christopher Sciamanna, DO, Resident Rep....csciamanna@gmail.com

STAFF

Brian J. Donadio, FACOI.....Executive Director
bjd@acoi.org

Timothy McNichol, JD.....Deputy Executive Director
tmcnichol@acoi.org

Susan B. Stacy, FACOI.....Finance/Administration Director
susan@acoi.org

Christina A. (Smith) Perando.....Postdoctoral Training Specialist
christy@acoi.org

Keisha L. Oglesby.....Senior Member Services Specialist
keisha@acoi.org

Katie E. Allen....Member Services Specialist/Certification Liaison
katie@acoi.org

Claudette Jones.....Executive Assistant
claudette@acoi.org

Melissa R. Stacy.....Member Services/Development Program
melissa@acoi.org

Ellen J. Donadio.....Website/Graphic Design
ellen@acoi.org

11400 Rockville Pike
Suite 801 • Rockville MD 20852
301 231-8877 • 800 327-5183 • Fax 301 231-6099
acoi@acoi.org • www.acoi.org

Letter from the President

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We are important role models for our patients and our peers. Numerous studies have shown that physicians who practice healthy behaviors are more likely to talk their patients about these topics. It is important to recognize and support personal health at each stage of our professional development from medical student, through residency and into practice.

Over the holidays, there was an abstract and commentary that caught my attention by Dr. Alan Rosenstein, who is a practicing internist and Medical Director of Clinical Efficiency and Care Management at ValleyCare Hospital in Pleasanton, CA. It appears in a recent edition of the Israel Journal of Health Policy Research. The commentary is entitled: Physician stress, burnout and compassion fatigue: the time has come. It focuses on raising awareness of the causative factors which contribute to stress, burnout and compassion fatigue. It talks about the significant adverse effects that this can have, not only personally, but also on patient care.

Dr. Rosenstein's commentary examines the multitude of internal and external factors that contribute to these problems, including age, gender, culture and ethnicity, training, personal ideology, new environmental pressures impacted by advanced technologies, increased complexity and data management, cost control along with growing oversight and performance accountability, all of which are changing physicians' expectations of care!

The commentary explains how and why physicians are being held accountable for patient outcomes and why change is necessary in order to provide effective care at a lower cost. This has and will continue to have an effect on how we train medical students, residents and fellows.

Some of the key points for me include:

1) Making physicians and other health professionals aware of the symptoms and problems related to stress, burnout and compassion fatigue and the potential negative outcomes if not addressed.

2) Dealing with the reluctance of physicians to admit that this is true and to feel comfortable in seeking advice and assistance.

3) Concerns about physician guidance and competency along with organizational sensitivity and working with physicians to help adjust to changes while juggling day-to-day activities to provide the best care possible

4) The need to identify how to rekindle and re-energize the zest for being a physician.

For me, personally, this will require a lot of creativity, examining best practices, embracing new ideas and innovations, refining skills to make patients healthier, teaching them effective tools and holding them accountable, as well!

So I challenge all my ACOI fellow members to review this commentary and give me some feedback. (Israel Journal of Health Policy Research 20132:32 or http://www.ijhpr.org/content/2/1/32)

These issues are important to the healthcare workforce. There are those who are expressing how they feel. I would love to hear other concerns that you may have. Examine your concerns and express them so I may share them with other members.

government RELATIONS

Timothy McNichol, JD

Omnibus Spending Package Signed into Law

Prior to adjournment at the end of December, the House and Senate approved, and the President signed into law, a $1.01 trillion package to fund most of the government through September 30, 2015. Included in the package was funding for Labor-Health and Human Services-Education departments. Of note, the legislation provides $158.2 billion in discretionary spending and $672 billion in spending for existing mandatory programs. The legislation also rescinded $10 million in funding for the controversial Independent Payment Advisory Board created under the Affordable Care Act (ACA) to rein in spending and increase the solvency of the Medicare program. The bill provides $2.74 billion in emergency funding to help contain Ebola in West African countries. Finally, the legislation funds the Centers for Disease Control at $6.93 billion and the National Institutes of Health at $30.1 billion, excluding the emergency funding for Ebola. Unfortunately, Congress failed to take the opportunity to address permanently the Medicare physician payment formula. As a result, the temporary patch currently in place is set to expire March 31 absent congressional action.

CMS Announces Holding of Medicare Claims

In order to make technical corrections to the 2015 Medicare Physician Fee Schedule (MPFS) to ensure the proper processing of claims, Medicare Administrative Contractors will hold claims containing 2015 services paid under the MPFS for the first 14 calendar days of January 2015. The hold should have minimal impact on provider cash flow as, under current law, clean electronic claims are not paid sooner than 14 calendar days (29 days for paper claims) after the date of receipt. Claims for services provided on or before Dec. 31, 2014 are unaffected and will be paid under normal procedures and time frames.

Doctors See Cuts in Medicare Reimbursement

According to the Centers for Medicare and Medicaid Services (CMS), 257,000 doctors and 200 hospitals will see one percent reductions in reimbursements rates in 2015 as a result of failure to meet the requirements set forth under the meaningful use program. In addition, 28,000 doctors will see a two percent reduction in Medicare reimbursement for failing to meet the requirements of both the meaningful use and electronic prescribing requirements. According to CMS, more than $25 billion in Medicare and Medicaid incentives have been paid to hospitals and doctors since 2011. Application of the penalties for non-participation began on January 1. You can learn more about electronic health record incentive programs by visiting ***www.cms.gov.***

Expired ACA Provision Results in Possible Reimbursement Reductions

In an effort to respond to an expected increase in individuals receiving health care coverage through Medicaid, and to ensure access to physician services, the Affordable Care Act (ACA) contained a temporary provision increasing reimbursements to primary care physicians under the Medicaid program. The provision expired on December 31, resulting in a nearly 43 percent average reduction in Medicaid fees. The temporary two-year increase was entirely funded by federal funds. In response to the reduction, 15 states have indicated that they will continue to pay Medicaid claims at the higher rate out of state funds to ensure that patients continue to have access to primary care services. Twenty-three states have indicated that they will not maintain the higher rates. The remaining states are still identifying what action they will take. It is unclear whether Congress will act to address this additional reduction in physician reimbursement. The ACOI is continuing to monitor this matter closely.

House Passes Legislation to Amend the ACA

The new Congress wasted little time in acting on legislation to amend the ACA. The House approved legislation to amend the ACA to redefine the work week from 30 to 40 hours. Under existing law, the work week is defined as 30 hours to increase the number of employers required to provide health insurance coverage under the "employer mandate." The provision has been a source of contention with policy makers and others who have contended that the current definition adversely impacts workers by creating an incentive for employers to reduce work hours to avoid application of the employer mandate. The legislation approved by the House would allow employers to increase the number or hours an employee can work before being required to provide employer-sponsored health insurance coverage.

According to estimates by the Joint Committee on Taxation (JTC) and the Congressional Budget Office (CBO), the legislation is expected to reduce the number of people receiving employer-based coverage by one million; increase the number of people receiving coverage through Medicaid, the Children's Health Insurance Program (CHIP) or health insurance exchanges by 500,000 to one million; and increase the number of uninsured by less than 500,000. The White House has issued a statement indicating that it will veto the legislation should it make it to the President's desk. It is not clear that Congress would be able to override the veto.

Washington Tidbits: The Candy Desk

Every two years a new Congress convenes in Washington. While tradition plays an important role in the activities of the House and Senate, one tradition warrants special attention due to its ability to strike a bipartisan chord and transcend partisan differences.

Senator George Murphy began in 1965 keeping a supply of candy in his desk located at the back of the Senate chamber. Since that time, occupants of the desk have kept the tradition and maintained a supply of candy that is available to all of their colleagues, regardless of party affiliation. The task now falls to Senator Pat Toomey of Pennsylvania. Senator Toomey has indicated that he will continue the tradition and stock the desk with confectionary treats made by companies located in Pennsylvania, such as Hershey's, Mars and Wilbur Chocolate, among others. The "Candy Desk" allows for a rare bipartisan respite from the daily grind of the chamber.

coding CORNER

Jill M. Young, CPC, CEDC, CIMC

The ACOI Coding Corner is a column written by Jill M. Young, CPC, CEDC, CIMC. Ms. Young is the Principal of Young Medical Consulting, LLC. She has over 30 years of experience in all areas of medical practice, including coding and billing. Additional information on these and other topics are available at www.acoi.org and by contacting Ms. Young at YoungMedConsult@aol.com.

The information provided here applies to Medicare coding. Be sure to check with local insurance carriers to determine if private insurers follow Medicare's lead in all coding matters.

Four New Coding Modifiers Introduced

Many physicians use coding modifiers such as 25 for significant, separately identifiable evaluation and management (E/M) services. While modifier 59 is lesser known, it has been valuable in billing for a distinct procedural service independent from other non-E/M services performed on the same day. It allows for the "unbundling" of services that are normally considered component parts of a service or procedure. There are, however, some changes that have taken effect on January 1.

The Centers for Medicare and Medicaid Services (CMS) introduced four new modifiers for increased reporting specificity where modifier 59 was previously used. They are as follow:

- XE – Procedure done during a separate encounter
- XP – Procedure done by a separate practitioner
- XS – Procedure done on a separate structure
- XU – Procedure for an unusual service that does not overlap with the main service

An Office of Inspector General (OIG) study found that 40 percent of modifier 59 services billed were paid inappropriately. As a result, CMS has released these new, more distinct modifiers that require more specific documentation. Each modifier has nuances and if providers understand this, the minor changes to their documentation needed will give them confidence in coding and billing correctly using these new modifiers. Additional information is available through CMS and your local Medicare Administrative Contractor (MAC).

Have You Moved?

Keep us updated.
If you have recently made any changes in your address, phone number or email, please notify the ACOI.
www.acoi.org

2014 Generational Advancement Fund Donors

The ACOI is most grateful to those members who contributed in 2014 to the ACOI Generational Advancement Fund. Donations are used to further the ACOI's efforts on behalf of osteopathic medical students and residents. The funds support the Visiting Professor Program, Resident Textbook Program and provide grants to student medicine clubs for participation in the ACOI convention. More than $44,000 was received on behalf of these efforts. The members below made contributions in 2014. (Please note, this list does not include hundreds of members who contributed $25 as part of their dues renewal).

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Gerald Blackburn, DO
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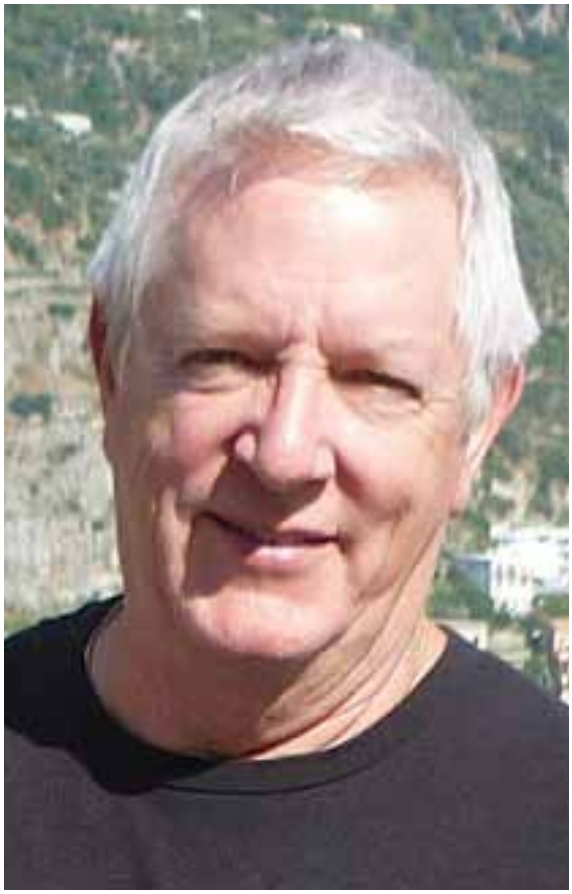
Rob Wall, DO
Brian Walsh, DO
Henry Wehrum, DO
Charles White, DO
Larry Wickless, DO
Kevin Wietecha, DO
Winter Wilson, DO

ACOI Provided a Pathway To Success for Dr. Blackburn

(This is one in a series of interviews with ACOI members who are strongly committed to the College and why they believe it has made a difference in their lives. This series is presented by Barbara L. Ciconte, CFRE, Development Counsel to ACOI.)



Gerald W. Blackburn, DO, MACOI, an ACOI member for 36 years, has served on numerous ACOI committees and been the education chair for the Infectious Diseases Subspecialty Section for many years. He was named ACOI's Teacher of the Year in 1998. A nationally-known infectious diseases specialist, he is Chief of Infectious Diseases at Botsford General Hospital in Farmington Hills, MI and Clinical Professor of Medicine at Michigan State University College of Osteopathic Medicine.

Ms. Ciconte spoke to Dr. Blackburn at the 2014 Annual Convention in Baltimore.

Ms. Ciconte: Tell me why you have dedicated your time and talents to ACOI.

Dr. Blackburn: My service to ACOI is my way of giving back to the profession. I wouldn't be where I am today without ACOI since it enabled me to follow paths not allowed in allopathic medicine. Over the years, I have had amazing opportunities to network with members of our profession who are experienced, approachable, and open to new ideas.

Ms. Ciconte: How can ACOI continue to serve its members in the future?

Dr. Blackburn: ACOI needs to keep doing what they are doing well. They should continue to strive to put on the best educational sessions, like those at this annual convention. Given its size, ACOI can be more flexible in meeting the needs of its members.

Ms. Ciconte: In addition to sharing your time and talents with ACOI, you have made financial contributions to ACOI over and above your dues. Tell me what motivates you to give.

Dr. Blackburn: My giving is another example of giving back. I choose to donate part of my speaker honorariums each year so that ACOI has additional funds to do what is needed.

Ms. Ciconte: I know many ACOI members are generous with their time and talents for ACOI serving as convention speakers, education program trainers and on ACOI committees. In your opinion, what can ACOI do to encourage others to financially support the College's Generational Advancement Fund?

Dr. Blackburn: There will always be some who will give and some who won't. I would suggest that the messages used to appeal for support focus on "giving back to the ACOI." Use ACOI and not "College" to better differentiate the ACOI from the academic institutions where we went to school, received our postgraduate training, or otherwise have an affiliation with due to our teaching duties or other relationships.

Ms. Ciconte: Dr. Blackburn, ACOI thanks you for the many contributions you have made and continue to make to help us educate and train the next generation of osteopathic internists.

New Members Welcomed

The ACOI Board of Directors and staff welcome the following members whose membership applications or changes in membership status have been approved by the Credentials Committee and Board of Directors.

Active Membership:

Steven C. Baird, DO
Jason W. Blair, DO
Helen-Valentine N. Chukwu, DO
Richard E. Cunanan, DO
Katherine H. Eilenfeld, DO
Tina A. Fabiano, DO
Kimberly J. Hull, DO
Yamine Saddouk, MD, DO
Courtney R. Spence, DO
Jamiel Wattoo, DO

Emeritus Membership:

David A. Bevan, DO, FACOI

Associate Membership:

Christopher N. Rheams, MD

PROFESSIONAL OPPORTUNITIES

ASSISTANT PROFESSOR - New York. The Department of Medicine at the NYIT College of Osteopathic Medicine (NYITCOM) is seeking a full-time academic Internal Medicine physician at the Assistant Professor level for immediate employment. Responsibilities to include ambulatory patient care in our Academic Health Care Centers, pre-clinical and clinical medical student education, research, scholarly activities and institutional service.
Qualifications: DO or MD degree; completion of an ACGME or AOA approved Internal Medicine residency; board eligible or certified by the AOBIM or ABIM; NY State licensed or eligible; subspecialty training or other advanced certification a consideration but not mandatory.

Environment: NYIT offers a competitive salary and attractive benefits package along with a professional environment designed to enhance career development. NYIT has been recognized by the Chronicle of Higher Education as one of the "Great Colleges to Work For" according to its 2010 and 2011 published surveys. Come join a growing department at a progressive, technologically-oriented osteopathic medical school.

Interested candidates please send a copy of your CV along with cover letter to: Candi Rosen at crosen@nyit.edu

POSITIONS AVAILABLE FOR GERIATRIC MEDICINE FELLOWSHIP - Stratford, New Jersey
Consistently ranked among the best Graduate Schools in Geriatrics by U.S. News & World Report, Rowan University School of Osteopathic Medicine's Geriatric Internal Medicine Fellowship has one- and two-year positions available 7/1/15. The program provides the opportunity to train with experts in geriatric internal medicine and to develop and enhance teaching and research skills and clinical expertise in treating older adults. Qualified applicants must have completed an AOA-accredited residency program in internal medicine and have or be eligible for a NJ medical license. Applications should be submitted through Electronic Residency Application Service (ERAS). For more information, visit our web site www.rowan.edu/som/njisa/ or contact Susan Huff at (856) 566-6124 or email huffsm@rowan.edu.interested, email Dr. Bonnie Portier at BPor486@aol.com.

INTERNIST OR FAMILY PRACTICE OSTEOPATHIC PHYSICIAN - Emmitsburg, Maryland. To be part of Emmitsburg Osteopathic Primary Care Center in Emmitsburg, Maryland. EOPCC is a non profit teaching practice which serves Emmitsburg and local community with compassionate care regardless of ability to pay.

We have office hours plus serve the local nursing home. Opportunity in future to become CEO. Beautiful rural setting in foot hills of the Appalachians , 12 miles south of Gettysburg Hospital. We have completed Medication and First Certification with Medicare for EMR use. Visit our web site www.eopcc.com. Bonita J. Krempel-Portier, DO. If interested, email Dr. Bonnie Portier at BPor486@aol.com.

PROGRAM DIRECTOR/INTERNAL MEDICINE RESIDENCY PROGRAM - Bowling Green, Kentucky. Seeking qualified physician to serve as Program Director for The Medical Center at Bowling Green's new Internal Medicine Residency Program which opens July 1, 2015. The program is accredited through the American Osteopathic Association (AOA) and affiliated with the Appalachian Osteopathic Postgraduate Training Institute Consortium (A-OPTIC). The program will accept six (6) residents to each incoming class. Physician must be certified in internal medicine or an internal medicine subspecialty by the AOA through the American Osteopathic Board of Internal Medicine. Physician must have practiced in internal medicine or an internal medicine subspecialty for a minimum of three (3) years and be an active member of the ACOI. Physician will replace the Interim Program Director and prepare the program for July 2015 implementation. Physician will report to the hospital's Director of Medical Education (DME).

Contact Trisha K. Lackey, Physician Recruiter, The Medical Center, 250 Park Street, PO Box 90010, Bowling Green, KY 42102. (lackta@chc.net)

SEEKING BC/BE FP/IM AND PA-C - Roxborough/Manayunk, Pennsylvania. Busy Primary Care Practice looking for a motivated and energetic practitioner. This practice has been established for 20 years in the Roxborough/Manayunk (PA) community. We are partnered with 2 local community teaching hospitals. The practitioner will share duties with 2 Physicians and 2 PA-C's. Duties include Outpatient office, Inpatient Hospital, Skilled Nursing and Long Term Care facilities. Call will be rotated 1 in 4. Salary commensurate with experience. There is a 401K, profit sharing, and bonus structure. Potential for partnership exists and can be discussed at a future date.

Full time preferred, Part time option exists. Employer will assist with relocation costs. Email: drpedano@aol.com

RHEUMATOLOGIST - Kirksville, Missouri. 9am to 5pm clinics only. No evenings or weekends. Four days of service per week (or less) with six weeks off annually for vacations and CME. Base income >$380,000.00 with an opportunity for teaching at AT Still University rheumatology courses and provide presentations in ATSU CME conferences. Contact: Robert W. Jackson, DO, FACOI, robert.jackson@psnmo.net.

2015 ACOI COMMITTEE APPOINTMENTS

The ACOI Board of Directors approved the committee and task force rosters for the this year during a January conference call. More than 175 members applied to fill approximately 35 openings. President Judith A. Lightfoot, DO, and the Board express gratitude to all who volunteered. Members who were not selected will be considered for openings that occur next year.

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Mary Suchyta, DO
David Miller, DO
Bryan Watson, DO
Joseph Gambale, DO, ALT
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Alan Ghaly, DO, Resident Representative
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2015 ACOI INTERNAL MEDICINE REVIEW COURSE AGENDA

Wednesday, March 18

6:30–7:00 am **Registration & Continental Breakfast**

Rheumatology

7:00–7:30 am Rheumatoid Arthritis - *Robert L. DiGiovanni, DO, FACOI*
7:30–8:00 am Vasculitides and Osteoarthritis - *Robert L. DiGiovanni, DO, FACOI*
8:00–8:30 am Scleroderma, Lupus and Dermatomyositis - *Howard L. Feinberg, DO, FACOI*
8:30–9:00 am Spondyloarthropathies and Reactive Arthritis *Robert L. DiGiovanni, DO, FACOI*
9:00–9:15 am **Break**
9:15–9:45 am Gout and Pseudogout-Crystal Arthropathies *Howard L. Feinberg, DO, FACOI*
9:45–10:15 am Osteomyelitis, Septic Arthritis, Lyme Arthritis, Rheumatic Fever & AID Arthritis - *Howard L. Feinberg, DO, FACOI*
10:15—10:30 am Joint Fluid Analysis - *Drs. Feinberg and DiGiovanni*
10:30–10:45 am Rheumatology Board Questions - *Drs. Feinberg and DiGiovanni*

Infectious Diseases

10:45–11:15 am Clinical Microbiology - *Gerald W. Blackburn, DO, MACOI*
11:15–11:45 am Pneumonia &TB - *David V. Condoluci, DO, FACOI*
11:45 am–1:00 pm **Lunch Break**
1:00–1:30 pm Endocarditis & Prophylaxis; Infectious GI Diseases *Gerald W. Blackburn, DO, MACOI*
1:30–2:00 pm CNS Infections - *David V. Condoluci, DO, FACOI*
2:00–2:30 pm HIV/AIDS - *Gerald W. Blackburn, DO, MACOI*
2:30–2:50 pm Hemorrhagic Fevers and Fevers of Unknown Origin *David V. Condoluci, DO, FACOI*
2:50–3:00 pm Infectious Disease Board Review Questions - *Drs. Blackburn and Condoluci*

Allergy/Immunology

3:00–3:30 pm Asthma - *Timothy R. Craig, DO, FACOI*
3:30–4:00 pm Clinical Basis of the Immune Response and the Compliment Cascade - *Bryan L. Martin, DO, FACOI*
4:00–4:30 pm Food, Sinusitis, Rhinitis and Drug Allergy - *Timothy R. Craig, DO, FACOI*
4:30–5:00 pm Systemic Allergic Disorders, Immunodeficiency and Immunoglobulin Disorders - *Bryan L. Martin, DO, FACOI*
5:00–5:30 pm Allergic Skin Disorders and HAE - *Timothy R. Craig, DO, FACOI*
5:30–5:45 pm Allery/Immunology Board Review Questions - *Drs. Craig and Martin*
6:00–7:00 pm **Reception**

Thursday, March 19

6:30–7:00 am Continental Breakfast

Cardiology

7:00–7:30 am Cardiac Risk Factors and Noninvasive Cardiac Diagnosis-ECG, Echo, et.al *Gail D. Burchett, DO, MACOI*
7:30–8:15 am Valvular and Congenital Heart Disease - *Martin C. Burke DO, FACOI*
8:15–8:30 am Diagnosis of Peripheral Arterial Diseases - *Martin C. Burke, DO, FACOI*
8:30–9:00 am Cardiomyopathies - *Gail D. Burchett, DO, MACOI*
9:00–9:15 am Cardiology Board Review Questions - *Drs. Burchett, Burke and Chilton*
9:15–9:30 am **Coffee Break**
9:30–10:00 am Congestive Heart Failure - Gail D. Burchett, DO, FACOI
10:00–10:30 am Management of Chronic Coronary Syndromes - *Robert J. Chilton DO, FACOI*
10:30–11:00 am Acute Coronary Syndromes - *Martin C. Burke, DO, FACOI*
11:00–11:30 am Management of Cardiac Arrhythmias and Conduction Disorders *Robert J. Chilton DO, FACOI*
11:30–11:45 am Cardiology Board Questions - *Dr. Burchett, Burke and Chilton*
11:45 am–1:00 pm **Lunch Break**

Endocrinology

1:00–1:30 pm Parathyroid Disease; Calcium Metabolism; Osteoporosis *Jack L. Snitzer, DO, FACOI*
1:30–2:00 pm Disease of the Thyroid - *John R. Sutton, DO, FACOI*
2:00–2:30 pm Endocrine Pancreas; Diabetes Mellitus; Metabolic Syndrome *Jack L. Snitzer, DO, FACOI*
2:30–3:00 pm Endocrine Board Review Questions - Drs. Snitzer and Sutton
3:00–3:15 pm **Coffee Break**
3:15–3:45 pm Disease of the Adrenals and Gonads - *John R. Sutton, DO, FACOI*
3:45–4:15 pm Pituitary and Related Disorders - *Jack L. Snitzer, DO, FACOI*
4:15–4:45 pm Interactive Identification Optic Fundi and Endocrine Physical Findings *John R. Sutton, DO, FACOI*
4:45–5:00 pm Endocrine Board Review Questions - *Drs. Sutton and Snitzer*

Friday, March 20

6:30–7:00 am Continental Breakfast

General Medicine

7:00–7:30 am Acute and Chronic Neuropathies - *Scott L. Spradlin, DO, FACOI*
7:30–8:00 am The Role of Genetic Testing and Counseling for the General Internist *John B. Bulger, DO, FACOI*
8:00–8:30 am Amyotrophies, Motor Disorders, Headaches - *Scott L. Spradlin, DO, FACOI*
8:30–9:00 am Nutritional Disorders and Their Management *John B. Bulger, DO, FACOI*
9:00–9:15 am General Medicine Board Review Questions - *Drs. Spradlin and Bulger*
9:15–9:30 am **Coffee Break**
9:30–10:00 am Cutaneous Manifestations of Systemic Disease - Part 1 *F. Richard Darrow, DO, MACOI*
10:00–10:30 am Cutaneous Manifestations of Systemic Disease-Part 2 *F. Richard Darrow, DO, MACOI*
10:30–11:00 am Diagnosis of Stroke, Multiple Sclerosis & Acute and Chronic Neuropathies *Scott L. Spradlin, DO, FACOI*
11:00–11:30 am Drug Caused Side-Effects and Disorders - *F. Richard Darrow, DO, MACOI*
11:30–11:45 am General Medicine Board Review Questions - *Drs. Darrow and Spradlin*
11:45 –1:00 pm **Lunch Break**

Gastroenterology

1:00 am–1:30 pm Disease of the Esophagus - *Catherine Kerschen, DO, FACOI*
1:30–2:00 pm Disease of the Stomach - *Jack D. Bragg, DO, FACOI*
2:00–2:30 pm Disease of the Small Intestine - *Catherine Kerschen, DO, FACOI*
2:30–3:00 pm Disease of the Colon - *Jack D. Bragg, DO, FACOI*
3:00–3:15 pm GI Board Review Questions - *Drs. Bragg and Kerschen*
3:15–3:30 pm **Coffee Break**
3:30–4:00 pm Disease of the Pancreas - *Jack D. Bragg, DO, FACOI*
4:00—4:30 pm Liver Diseases - *Catherine Kerschen, DO, FACOI*
4:30–5:00 pm GI Surgery Review: Indications and Complications – What to Look For *Catherine Kerschen, DO, FACOI*
5:00–5:30 pm Cancer of the GI Tract, Liver and Pancreas - *Jack D. Bragg, DO, FACOI*
5:30–5:45 pm GI Board Review Questions - *Drs. Bragg and Kerschen*

Saturday, March 21

6:30–7:00 am **Continental Breakfast**

Pulmonary Diseases

7:00–7:30 am Respiratory Failure, Ventilator Therapy and PFT - *Thomas F. Morley, DO, FACOI*
7:30–8:00 am Chronic Obstructive Lung Disease - *Amita Vasoya, DO, FACOI*
8:00–8:30 am Restrictive Lung Disease - *Thomas F. Morley, DO, FACOI*
8:30–9:00 am Lung Cancer and Paraneoplastic Syndromes - *Amita Vasoya, DO, FACOI*
9:00–9:15 am **Coffee Break**
9:15–9:45 am Pulmonary Thromboembolism - *Thomas F. Morley, DO, FACOI*
9:45–10:15 am Unknown PFTs, Chest X-rays - *Drs. Vasoya and Morley*
10:15–10:45 am 5 Key Board Concepts for ICU Medicine - *Timothy J. Barriero, DO, FACOI*
10:45–11:15 am Sleep Medicine Review - *Timothy J. Barriero, DO, FACOI*
11:15–11:45 am Pulmonary/Sleep Board Review Questions - *Drs. Morley, Vasoya and Barriero*
11:45 am–1:00 pm **Lunch Lecture (Medicine for the Boards)** - *Scott L. Spradlin, DO, FACOI*

Nephrology

1:00–1:30 pm Acute Kidney Injury and Chronic Kidney Disease - *Mark D. Baldwin, DO, FACOI*
1:30–2:00 pm Tubulointerstitial Disease - *Mark D. Baldwin, DO, FACOI*
2:00–2:30 pm Glomerulonephritis-Diagnosis and Management - *John E. Prior, DO, FACOI*
2:30–2:45 pm Nephrology Board Review Questions - *Drs. Baldwin and Prior*
2:45–3:00 pm **Coffee Break**
3:00–3:30 pm Case Studies of Electrolyte Disorders - *Mark D. Baldwin, DO, FACOI*
3:30–4:00 pm Case Studies of Acid/Base Disorders - *John E. Prior, DO, FACOI*
4:00–4:30 pm Hypertension - *John E. Prior, DO, FACOI*
4:30–4:45 pm Nephrology Board Review Questions - *Dr. Prior and Baldwin*

Sunday, March 22

6:30–7:00 am **Continental Breakfast**

Hematology

7:00–7:30 am Benign Hematology - *Cheryl D. Kovalski, DO, FACOI*
7:30–8:00 am Disorders of Hemostasis - *Cheryl D. Kovalski, DO, FACOI*
8:00–8:30 am Basic Oncology, Markers, Genes - *Kevin P. Hubbard, DO, FACOI*
8:30–9:00 am Clinical Oncology, Physical Diagnosis, Systemic Manifestations, Chemotherapy - *Kevin P. Hubbard, DO, FACOI*
9:00–9:30 am Leukemia and Lymphoma - *Cheryl D. Kovalski, DO, FACOI*
9:30–9:45 am **Coffee Break**

Oncology

9:45–10:15 am Oncologic Palliative Care Session - *Kevin P. Hubbard, DO, FACOI*
10:15–10:45 am Myelodysplastic Syndrome & Plasma Cell Dyscrasias - *Cheryl D. Kovalski, DO, FACOI*
10:45–11:15 am Cancer in Men-Prostate, Testes and Kidney - *Kevin P. Hubbard, DO, FACOI*
11:15–11:45 am Cancer in Women - Breast, Uterus and Ovary - *Kevin P. Hubbard, DO, FACOI*
11:45 am–Noon Hem/Onc Board Review Questions - *Drs. Hubbard and Kovalski*

2015 ACOI INTERNAL MEDICINE REVIEW COURSE REGISTRATION FORM

The Cosmopolitan Hotel, Las Vegas, NV • March 18-22, 2015

Registration available online at www.acoi.org/education/cme/board-review-course.html

Full Name

AOA Number

Mailing Address

City **State** **Zip**

Work Phone ( ) **Fax Number** ( )

Home Phone ( ) **Cell** ( )

Email Address

Preferred Name on Badge

Emergency Contact **Telephone** ( )

- ☐ ACOI Member (Registering ON/BEFORE 2/24/15...$820)
- ☐ Non-Member (Registering ON/BEFORE 2/24/15...$975)
- ☐ Resident/Fellow (Registering ON/BEFORE v...$720)
- ☐ Printed Syllabus $80 (Electronic copy provided with registration)
- ☐ ACOI Member (Registering AFTER 2/24/15...$870)
- ☐ Non-Member (Registering AFTER 2/24/15...$1025)
- ☐ Resident/Fellow (Registering AFTER 2/24/15...$770)
- ☐ *ACOI Generational Advancement Fund $_____
- ☐ TOTAL $_____

Payment Method ☐ Check to ACOI ☐ MasterCard ☐ Visa

Name on Card

☐ **Check here if billing address is same as mailing address listed above. If not, please provide below**

Billing Street

Billing City **State** **Zip**

Credit Card Number **Security Code**

Credit Card Exp. Date

Signature

Send this form & payment to: ACOI, 11400 Rockville Pike, #801, Rockville, MD 20852 or Fax to 301 231-6099, or register at ***www.acoi.org***.

NOTE: All registrations must be accompanied by a check for payment in full or appropriate credit card information. A processing fee of $50 will be charged for cancellations received at any time. In order to obtain a refund, written cancellations must be received by February 24, 2015. No refunds will be made after that date, but registration fees (less $50 cancellation fee) may be applied to a future ACOI meeting registration.

*The **ACOI Generational Advancement Fund** was created to foster the growth and assure the future of osteopathic internal medicine. The Fund directs its efforts toward assisting students, residents and fellows as they begin their careers as osteopathic internists. For more information, visit ***https://www.acoi.org/mms/legacy_fund.cgi.***

☐ **PLEASE NOTE: Check here if you plan to stay at the Cosmopolitan Hotel. Separate hotel registration is required. This does not register or guarantee a room at the hotel.**

☐ **SPECIAL NEEDS:** In accordance with the Americans with Disabilities Act, every effort has been made to make this conference and activities accessible to people of all capabilities. Please list specific special assistance needed or any dietary restrictions, or contact Susan Stacy at susan@acoi.org or by phone, 301 231-8877.

List special requirements here:_____

ACOI 2015 Clinical Challenges in Inpatient Care
AGENDA

WEDNESDAY, MARCH 18 - WELCOME RECEPTION 6:00-7:00 PM

THURSDAY, MARCH 19

7:30 – 8:00 am	**Continental Breakfast**
8:00 – 8:15 am	**Welcome** - *Frederick A. Schaller, DO, FACOI, Moderator*
8:15 – 9:00 am	Peripheral Vascular Disease and Wound Care - *Glenn D. Haraway, DO FACOI*
9:00 – 9:45 am	Hyperbaric Medicine – Care of the Diabetic Foot Ulcer - *Glenn D. Haraway, DO, FACOI*
9:45 – 10:30 am	BP Management in the Elderly: Orthostasis, Post-Prandial and Autonomic - *Terri B. Ginsberg, DO, FACOI*
10:30 – 10:45 am	**BREAK**
10:45 – 11:15 am	Delirium in the Hospitalized Patient - *Terri B. Ginsberg, DO, FACOI*
11:15am – Noon	Hepatitis C Update - *Peter G. Gulick, DO, FACOI*
Noon – 1:15 pm	**LUNCH**
1:15 – 2:00 pm	Opportunistic Infections You Will Still See - *Peter G. Gulick, DO, FACOI*
2:00 – 2:15 pm	**BREAK**
2:15 – 3:00 pm	Lessons Learned for Ebola...and for "The Next Big One" *Gerald W. Blackburn, DO, MACOI*
3:00 – 3:45 pm	The Next Big One - What's Out There? - *Gerald W. Blackburn, DO, MACOI*
3:45 – 4:30 pm	Treatment of Acute Pain in the Chronic Pain Patient - *Michael Karagiozis, DO*
4:30 – 5:15 pm	Palliative Care in the Hospital Patient - *Michael Karagiozis, DO*

FRIDAY, MARCH 20

7:30 – 8:00 am	**Continental Breakfast**
8:00 – 8:45 am	Hepatorenal Syndrome - *Jack E. Prior, DO, FACOI*
8:45 – 9:30 am	ESRD: Medical Management and Mismanagement - *Jack E. Prior, DO, FACOI*
9:30 – 10:15 am	Bariatric Surgery: Long-Term Complications - *Marc Cote, DO, FACOI*
10:15 – 10:30 am	**BREAK**
10:30 – 11:15 am	Nutrition in the Hospitalized Patient - *Marc Cote, DO, FACOI*
11:15 am – Noon	Rheumatologic Markers: What to Order in the Hospitalized Patient - *Scott Harris, DO*
Noon – 1:15 pm	**LUNCH**
1:15 – 2:00 pm	Rheumatology Topic TBA - *Scott Harris, DO*
2:00 – 2:45 pm	Assessing Bleeding Risks HASBLED/ATRIA: Which to Use - *Kevin P. Hubbard, DO, FACOI*
2:45 – 3:00 pm	**BREAK**
3:00 – 3:45 pm	Oncologic Emergencies - *Kevin P. Hubbard, DO, FACOI*
3:45 – 4:30 pm	Syncope: Cost Effective Evaluation - *Frederick A. Schaller, DO, FACOI*
4:30 – 5:15 pm	DVT/PE Diagnosis and Therapy - *Paul Stewart, MD*

SATURDAY, MARCH 21

7:30 – 8:00 am	**Continental Breakfast**
8:00 – 8:45 am	COPD Update - *Sandra K. Willsie, DO, FACOI*
8:45 – 9:30 am	Anaphylaxis – What You Need to Know - *Sandra K. Willsie, DO, FACOI*
9:30 – 10:15 am	Diabetes Medications: Understanding the Names and Mechanisms of Action in New Diabetes Treatments *Louis C. Haenel, IV, DO, FACOI*
10:15 – 10:30 am	**BREAK**
10:30 – 11:15 am	Proper Use of Insulin Therapy in the Hospitalized Patient - *Louis C. Haenel, IV, DO, FACOI*
11:15 am – Noon	Pre Operative Risk Assessment - Improving the Process - *Bruce Feldman, DO, FACOI*
Noon – 1:15 pm	**LUNCH**
1:15 – 1:45 pm	ACS: Initial Management of UA/NSTEMI - *Bruce Feldman, DO, FACOI*
1:45 – 2:30 pm	GI Potpourri for the Hospitalist: When to Call Your GI Consultant - *Gary Cornette, DO, FACOI*
2:00 – 5:00 pm	ACLS (Additional fee required) *Jonathan S. Simmons, DO, MS, FCCP*
2:30 – 3:15 pm	Acute Colitis - *Gary Cornette, DO, FACOI*
3:15 – 3:30 pm	**BREAK**
3:30 – 4:15 pm	Neurologic Emergencies - *Paul Janda, DO*
4:15 – 5:00 pm	CODE WHITE: Optimal Stroke Management - *Paul Janda, DO*

SUNDAY, MARCH 22

7:30 – 8:00 am	**Continental Breakfast**
8:00 – 8:45 am	Hospital-Based Ethics - *Rick A. Greco, DO, FACOI*
8:45 – 9:00 am	Medical Malpractice for the Hospitalist - *Weldon D. Havins, MD, JD*
9:00 – 9:45 am	Improving Communication at the Bedside - *Robert Hasty, DO, FACOI*
9:45 – 10:30 am	Hospital Patient Hand-Off Strategies - *Robert Hasty, DO, FACOI*
10:30 – 11:30 am	Post Test - *Frederick A. Schaller, DO, FACOI*

ACOI 2015 Clinical Challenges in Inpatient Care
REGISTRATION FORM

The Cosmopolitan Hotel, Las Vegas, NV • March 19-22, 2015

Registration available online at www.acoi.org/education/cme/clinical-challenges-in-inpatient-medicine.html

Full Name			
AOA Number			
Mailing Address			
City		**State**	**Zip**
Work Phone		**Fax Number**	
Home Phone		**Cell**	
Email Address			
Preferred Name on Badge			
Emergency Contact		**Telephone**	

Fees

Registration on/before 2/24/15		Registration after 2/24/15	
☐ ACOI Member	$620	☐ ACOI Member	$670
☐ Non Member	$750	☐ Non Member	$800
☐ Non Physician Provider	$620	☐ Non Physician Provider	$670
☐ Residents/Fellows	$520	☐ Residents/Fellows	$570
☐ ACLS Certification	$100	☐ ACLS Certification	$100
☐ *ACOI Generational Advancement Fund	$_____		
		TOTAL	$_____

Payment Method ☐ Check to ACOI ☐ MasterCard ☐ Visa

Name on Card

☐ **Check here if billing address is same as mailing address listed above. If not, please provide below**

Billing Street			
Billing City		**State**	**Zip**
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Credit Card Exp. Date			
Signature			

Send this form and payment to: ACOI Office, 11400 Rockville Pike, Suite 801, Rockville, MD 20852 or Fax to 301 231-6099 or register online at ***www.acoi.org***

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List special requirements here:_____

Hospital Medicine Recertification

continued from page 1

General Information for OCC in Internal Medicine With Focused Practice in Hospital Medicine

This program is for clinicians that concentrate their clinical practice in the diagnosis and management of hospitalized patients. It is available only to those who hold an active certification or recertification certificate in Internal Medicine. Applicants with time-limited certification or recertification certificates will relinquish their current Internal Medicine certificate which will be replaced by the Osteopathic Continuous Certification certificate in Focused Practice in Hospital Medicine. If in the future the candidate's practice reverts to general internal medicine they may complete the Osteopathic Continuous Certification requirements for general internal medicine in order to maintain their certification.

Requirements to Sit for Examination:

1. Valid AOA certification certificate in Internal Medicine
2. Active AOA membership prior to examination with continuous membership during osteopathic continuous certification
3. Compliance with Code of Ethics of AOA
4. Valid, unrestricted State license to practice medicine

Internal Medicine Hospital Medicine Blueprint

Content Area	% on Exam
Allergy/Immunology Disorders	1-2
Cardiovascular Disease	10-15
Endocrine/metabolic Disorders	5-7
Hematologic Disorders	3-4
Gastroenterologic Disorders	5-7
Oncologic Disorders	2-4
Nephrology/Urinary Tract/Electrolytes	6-8
Hypertension	2-4
Rheumatologic Disorders	2-4
Pulmonary Diseases	8-10
Infectious Diseases/Infection Control	6-8
Neurology/Psychiatric Disorders	4-5
Dermatology	1-2
ENT/Ophthalmologic Disorders	1-2
The following cross-content areas may overlap into some of the above categories	
Clinical Pharmacology	2-3
Gynecology/Obstetrical Complications	1-2
Patient Safety/Quality Improvement	2-4
Transitions of Care	2-4
Palliative Care/Pain Management	3-5
Substance Abuse	1-2
Adolescent Medicine	1-2
Bioethics	1-2
Critical Care Medicine	5-6
Clinical Epidemiology	1-2
Pre-/Peri-operative Consultation	3-5
Geriatric Medicine	2-3
Nutrition	1-2
TOTAL	**100%**

5. ACLS certification
6. 3 years of clinical practice in Hospital Medicine for a minimum of 3 consecutive years prior to examination. Must demonstrate a minimum of 1000 in-patient encounters/year over the 3 years in general internal medicine or a total of 3000 encounters over the 3 year period. The encounters are limited to one encounter per patient per day. This must be verified by the Medical Director (or equivalent) of the hospital where the practice is maintained and the Chairman of the Department of Internal Medicine. If the Diplomate is in an administrative hospital position they must have a minimum of 250 in-patient encounters/year over 3 consecutive years which must comprise 75% of the total clinical activity and at least 50% of the remaining non-clinical professional time must be involved in the improvement of the care of hospitalized patients.
7. For those candidates sitting for the secure examination in Hospital Medicine in 2014 and 2015 must complete 20 credit hours in Self-assessment CME in Hospital Medicine as a part of the OCC requirement. The ACOI hospital medicine course (contact susan@acoi.org) will meet this credit hour requirement. All other CME must be preapproved by the AOBIM. For those taking the secure examination after 2015 must complete the OCC requirements in Hospital Medicine as described on the website. After satisfactory performance on the examination Diplomates will be required to complete 60 points over the 10 year OCC period in Self-evaluation CME and Practice Performance Improvement in Hospital Medicine. The remaining 40 points can be obtained in the general area of internal medicine. In addition all 5 components of OCC must be met in order to maintain certification.
8. All candidates must pass the secure examination.

The examination will contain items common to the certification examination in Internal Medicine in the content area of in-hospital medicine. A minimum of 25% of the examination will contain items relating to consultative co-management, patient safety, quality improvement, epidemiology, medical ethics, decision-making, systems based practice, and transitions to ambulatory medicine.

CME CALENDAR

Future ACOI Education Meeting Dates & Locations

NATIONAL MEETINGS

- 2015 Internal Medicine Board Review Course
  March 18-22 The Cosmopolitan Hotel, Las Vegas, NV
- 2015 Challenges in Inpatient Care
  March 19-22 The Cosmopolitan Hotel, Las Vegas, NV
- 2015 Congress on Medical Education for Resident Trainers
  May 1-3 Kierland Resort, Phoenix, AZ
- 2015 Annual Convention & Scientific Sessions
  Sept 30-Oct 4 Marriott Waterside Hotel, Tampa, FL
- 2016 Annual Convention & Scientific Sessions
  Oct 12-16 San Francisco Marriott Marquis, San Francisco, CA
- 2017 Annual Convention & Scientific Sessions
  Oct 15-19 Gaylord National Resort and Convention Center, Washington, DC
- 2018 Annual Convention & Scientific Sessions
  Oct 17-21 Orlando World Center Marriott, Orlando, FL
- 2019 Annual Convention & Scientific Sessions
  Oct 30- Nov 3 JW Marriott Desert Ridge Resort & Spa, Phoenix, AZ

Please note: It is an ACOI membership requirement that Active Members attend the Annual Convention or an ACOI-sponsored continuing education program at least once every three years.

Information on any meeting listed here may be obtained from ACOI Headquarters at 800 327-5183 or from our website at www.acoi.org.

2015 Certifying Examination Dates & Deadlines

Internal Medicine Certifying Examination
Computerized Examination 200 Sites Nationwide
September 10, 2015 - *Application Deadline: February 1, 2015*
Late Registration Deadline: April 1, 2015

Subspecialty & Certification of Added Qualifications:
Aug. 22, 2015 • Lombard, IL - *Application Deadline: April 1, 2015*
Late Registration Deadline: May 1, 2015
Cardiology • Clinical Cardiac Electrophysiology • Endocrinology • Gastroenterology • Geriatric Medicine
Hematology • Infectious Disease • Nephrology • Oncology • Pulmonary Diseases • Rheumatology

Internal Medicine Recertifying Examination
Computerized Examination 200 Sites Nationwide
September 11, 2015 - *Application Deadline: April 1, 2015*
Late Registration Deadline: May 1, 2015

Focused Hospital Medicine Recertification
Date and location to be announced.

Subspecialty and Added Qualifications Recertifying Examinations:
Aug. 22, 2015 • Lombard, IL

Cardiology • Clinical Cardiac Electrophysiology • Critical Care Medicine • Endocrinology • Gastroenterology • Geriatric Medicine • Hematology • Infectious Disease • Interventional Cardiology • Nephrology • Oncology • Pulmonary Diseases • Rheumatology
Application Deadline: April 1, 2015
Late Registration Deadline: May 1, 2015

Further information and application materials are available at www.aobim.org or by writing to: Gary L. Slick, DO, MACOI, Executive Director, American Osteopathic Board of Internal Medicine, 1111 W. 17th Street, Tulsa, OK 74107. admin@aobim.org. Contact the AOBIM at admin@aobim.org for deadlines and dates for the ***Hospice/Palliative Medicine, Pain Medicine, Undersea/ Hyperbaric Medicine and Correctional Medicine*** *examinations.*

ACGME

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Beginning July 1, AOA-accredited programs will begin a five-year transition to ACGME accreditation. Osteopathic standards will be added to ACGME standards to define osteopathic programs, and MDs and DOs will remain eligible for all residencies. The AOA will cease accrediting GME programs after June 30, 2020.

As member organizations, AOA and AACOM will be integrated into governance and operations of the ACGME. Four osteopathic physicians have been elected to the Board of Directors, two nominated by the AOA and two by AACOM. Additional Board members from the two organizations will be seated during the course of the transition.

AOA Appointees:

Karen J. Nichols, DO, MA, MACOI, CS is dean of the Midwestern University Chicago College of Osteopathic Medicine. She is a past president of the AOA and ACOI and was vice chair of AACOM's Board of Deans until resigning from that board to accept this position.

David Forstein, DO, FACOOG is a reproductive endocrinologist and residency program director at Greenville Health System in South Carolina, where he also serves as vice chair for clinical affairs in the Department of Obstetrics and Gynecology.

AACOM Appointees:

Gary Slick, DO, MACOI is a medical director at the Osteopathic Medical Education Consortium of Oklahoma (OMECO), director of medical education at OMECO Teaching Health Centers, professor of internal medicine at OSU Center for Health Sciences and a past president of the ACOI.

Clinton Adams, DO, FACHE is a professor of family medicine, the senior advisor for strategic leadership and external affairs, and formerly vice president of clinical affairs and dean at the Western University of Health Sciences.