

From President Burke Physicians Need to Value Knowledge and Care



Devotedly, the ACOI continues to transform its services to provide cutting edge and timely medical education. **The ACOI is extremely proud to have a dedicated group of highly productive**

members as part of its CME Committee led by Dr. Rick Schaller. The Committee met this month to discuss our future and review upcoming educational content and delivery. The generations are represented on the Committee and the discussion was vibrant. We are on near path to our MEGA CME event in Chicago. There from April 26-30 we will offer four separate activities in one central venue: the Internal Medicine Board Review Course; the Clinical Challenges in Inpatient Care program for hospitalists; a first-ever, subspecialty-level New Science in Cardiovascular Medicine program, and the Annual Residency Trainees' Congress faculty development meeting. Please consider joining us for these high-quality and progressive-content symposia.

Osteopathic Integration/Recognition

A critical part of our strategic plan this year is to insure that the principles of Osteopathy are integrated into all ACOI activities, but first and foremost into our residency programs. **The majority of our current medical students, the lifeblood of our College**

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Early Registration Discount Expires April 3 for Hospital Medicine Program

Clinical Challenges in Inpatient Care, the popular ACOI CME program for hospitalists and others who treat patients in the hospital, will take place April 26-29 in Chicago. The ACOI Continuing Medical Education Committee and activity Chair Rick A. Greco, DO, have designed an appealing program that will provide up to 26.75 1A credits in internal medicine.

Internists have very busy practices and it can be difficult to keep updated on the medical advances and structural initiatives related to the myriad of clinical cases presented to them. Clinical Challenges in Inpatient Care will address key gaps that have been found to exist in hospital-based internists' practices. These gaps were determined through literature reviews, population health data reported by the CDC, quality measurement sources (e.g., AHRQ, NCQA), and ongoing survey activities within ACOI.

This activity is designed for internists, subspecialists and other health professionals who are hospital-based clinicians. At the completion of the program, attendees will be able to:

- Articulate the multiple indications for antithrombin therapy including bleeding risks and management;
- Delineate the classifications of Diastolic Heart Failure and different treatment options;
- Describe the most recent developments in non-invasive ventilation techniques;
- Develop strategies for managing the complexities in the treatment of the obese patient with pulmonary complications
- Identify the optimal approaches for managing the side effects of newer chemotherapeutic agents;

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ACOI Board Nominations Sought

Active members of the ACOI who are interested in serving on the Board of Directors are invited to contact the College's office and request a nominating packet. The members of the ACOI will elect three individuals to three-year terms on the Board at the Annual Meeting of Members, October 21 in Orlando, FL. As part of an ongoing self-assessment process, the Board has developed a position description for Board members, and a list of competencies that should be possessed by the Board as a whole. Potential candidates must complete an application form that allows them to describe how their experience and expertise match up with the desired competencies.

In order to be considered by the Nominating Committee, the completed nomination packet must be returned to the ACOI office no later than June 15, 2018. The slate of candidates will be announced in the July issue of the newsletter.



American College of Osteopathic Internists

In Service to All Members; All Members in Service

MISSION

The mission of the ACOI is to promote high quality, distinctive osteopathic care of the adult.

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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Letter from the President

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and our future colleagues, prefer to carry on their training in programs that integrate osteopathic principles and practices and are recognized as such by the ACGME. Indeed, identifying methods to accomplish this integration is challenging.

Led by President-elect Dr. Annette Carron, a task force of ACOI members with a passion for Osteopathy met this month to craft strategies to more easily define and integrate Osteopathic Medicine, and specifically Osteopathic Internal Medicine, into our educational activities and beyond. The meeting was highly productive, producing action items including: 1) engage focus groups of our members in order to find a common understanding of the distinctiveness of osteopathic practice; 2) begin the process of infusing research on osteopathic manipulative treatment and its benefits into our CME events, not as separate silos of educational content, but as a commonality of content, where applicable; and 3) explore current research and determine methods to expand the scholarly activity of our brand of medicine. **Osteopathic integration and recognition is critical to the preservation of our roots and the training of future doctors.**

Worldwide CME Access

The CME Committee received the first glimpse of our new, 24/7 ACOI Online Learning Center this month. The Board authorized and our staff is implementing an integrated learning management system (LMS) for Cloud-based educational content. This new initiative and platform is being funded through the generosity of members who contributed to our 75th Anniversary Campaign. The CME Committee comments were enthusiastic and many steps for improved member access have already been implemented, starting with upgrading our website to be mobile-device friendly. In order to experiment with new delivery methods of our educational brand, we will be recording select lectures at the MEGA CME event in Chicago. This content will be made available as CME opportunities through the new LMS later this year. The CME Committee's engagement has been critical to insure that the content is in keeping with our members' expectations and needs. Our entire IT system of communication and validation (i.e., credits and requirements) with this new platform will be easily accessible for each member electronically.

Creating non-destination educational content that is globally accessible, accredited and outstanding in quality is a critical path to the ACOI's transformation into a professional services organization, but of equal importance is the ability to market Osteopathic Internal Medicine beyond our membership.

Control Your Data-Use Your Knowledge-Be Official, Not Artificial

Finally, I have to reiterate the need for physicians to better leverage and value our data and care. My current research and development pursuits involve machine-learning algorithms that are somewhat characterized by the term Artificial Intelligence, or AI. AI is essential for access to capital, but it is horrible terminology. As I become more proficient in the language and concepts of machine learning, I have been struck that the algorithm coding is only as good as the data content that teaches it (DUH!). "Artificial" is not a good term because the added content that is taught to the neural network should be "official" intelligence (OI).

Physicians are and must be the purveyors of medical/clinical intelligence (OI, not OY). Somehow, our profession has been marginalized by just about everyone, including some within our profession. **The deep, neural network heuristic learning boom is an ideal opportunity for the profession to regain our MOJO!!** We need to rally together to begin this process and pool our data into banks that are controlled by physicians, not insurance companies or hospitals. Stop giving away your data for free. Value financially your data more efficiently and set up secure depositories for your clinical science and scenarios similar to the way you have secured your current practice since you were a medical student. Consider that medical students are the tip of the medical neural network needing patient encounters fed to them to become doctors. The physician becomes better with each encounter. We are incredibly good, but have limited bandwidth compared to current binary computational capacity, especially in signals (i.e., ECGs and all imaging). Still, our owning the intelligence is critical to insure that our care remains personal and contributes to the survival of holistic medicine.

As always, I welcome your comments.

Martin C. Burke, DO, FACOI, President



government RELATIONS

Timothy McNichol, JD

Right-to-Try Legislation Advances

The House recently approved legislation that expands the ability of terminally-ill patients to try investigational drugs without being subject to the Food and Drug Administration's oversight. The bill allows the use of eligible experimental drugs by those who have been diagnosed with a disease or condition that is likely to result in death within months. While similar legislation was approved in the Senate, the two bills differ slightly and must be reconciled before being sent to the President's desk for his signature. It is expected that the President will sign into law the right-to-try legislation should it be presented to him. He announced his support for the legislation in January during his State of the Union address.

Administration Moves to Put Patients in Charge of Personal Health Data

Centers for Medicare and Medicaid Services (CMS) Administrator Seema Verma announced the creation of the MyHealthEData initiative. The initiative is intended to help put patients in control of their healthcare information allowing them to make more informed decisions. According to a statement released by CMS, "By ensuring patients have access to their full healthcare records and can take them with them from doctor to doctor, provider to provider, we will increase competition and reduce costs." The initiative is being led by the White House Office of American Innovation with participation from the US Department of Health and Human Services (HHS) and others. CMS announced that it will concurrently be launching Medicare's Blue Button 2.0 initiative, which will provide beneficiaries with their claims data in a universal and secure digital format. These actions are in response to President Trump's Executive Order to Promote Healthcare and Competition Across the United States. You can learn more by visiting www.cms.gov.

2018 NHSC Loan Repayment Program Now Open

The National Health Service Corps (NHSC) Loan Repayment Program (LRP) is now accepting applications through April 23. Applications must be submitted by 7:30 PM ET for the 2018 application cycle. The NHSC offers tax-free loan repayment assistance to support qualified health care providers who choose to take their skills where they are most needed. The NHSC LRP offers eligible clinicians up to \$50,000 in student loan repayment in exchange for a two-year service commitment to work at an NHSC-approved site in a high-need, underserved area. Additional information is available at <https://nhsc.hrsa.gov/loanrepayment/>.

Legal Challenges to ACA Continue

Following enactment of the tax reform bill signed into law in December 2017, 20 states filed suit to stop implementation of the Affordable Care Act (ACA). Prior to enactment of the tax reform law, the Supreme Court upheld the individual mandate provisions contained in the ACA as a lawful exercise of the government's taxing power. The tax reform law eliminated the individual mandates created under the ACA and thus the 20 states filed suit to stop implementation of the healthcare reform law. The contention is that the rationale for the Court's decision saving the ACA is no longer applicable. The coalition of states is led by attorneys general for Texas and Wisconsin. According to a statement released by the Texas attorney general, "Through our multi-state lawsuit, we hope to effectively repeal Obamacare, which will then give President Trump and congress an opportunity to replace that failed experiment with a plan that ensures Texans and all Americans have better choices for healthcare coverage at more affordable prices."

Opioid Crisis Remains a Concern in Washington

President Trump recently unveiled plans to address the ongoing opioid epidemic. He announced his intentions to increase federal funding for the development of non-addictive pain killers, prioritize access to medication-assisted treatment (MAT), and to get tough on drug dealers, among other things. In addition to the recent announcements by the Administration, congressional committees are actively considering more than 25 separate bills to address this issue. The ACOI is continuing to monitor potential administrative and legislative efforts to combat the ever-increasing opioid epidemic.

Washington Tidbits The Transition of a Government

The Constitutional Convention met in Philadelphia, Pennsylvania from May to September of 1787. Tasked with addressing the weak central government created under the Articles of Confederation, the Convention delegates produced a document that could not take effect until ratified by nine states. On June 21, 1788 New Hampshire became the ninth state. This followed ratification by Delaware, Pennsylvania, New Jersey, Georgia, Connecticut, Massachusetts, Maryland and South Carolina. Virginia and New York followed shortly thereafter. Ratification by New Hampshire set in motion the final steps necessary for the founding of our Nation.

Following ratification by New Hampshire, the existing government, established by the Articles of Confederation, chose March 4, 1789 as the date it would hand power over to the new government established under the Constitution. Following transition to the new government in March 1789 in New York City, it took nearly a month before the Senate and House had enough members present to establish a quorum. That did not stop James Madison, however, from introducing one of the first bills for consideration – legislation establishing the Bill of Rights.



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.

Clinical Staff vs. Auxiliary Personnel

Many of the newer patient care coordination codes state in their description that “clinical staff” are to perform all or a portion of the service. How is clinical staff defined? How does clinical staff differ from “auxiliary personnel” and does it matter? It does matter, and the distinction between the two terms can be of significant importance depending on where you practice.

Social Security regulations define auxiliary personnel as any individual who is acting under the supervision of a physician or other practitioner. There must be an employee relationship; the individual cannot be excluded from Medicare; and the individual must meet any applicable state requirements to provide incident-to-services in the jurisdiction in which the services are provided.

Clinical staff fits the definition for auxiliary personnel with the addition of the word “licensure.” As a result, clinical staff is viewed as someone with credentials greater than the average employee. Other than this reference, the Centers for Medicare and Medicaid Services (CMS) refers all other questions about the definition of clinical staff to the Current Procedural Terminology (CPT) book. The important part of this CPT book’s definition is “health care professional who is allowed by law, regulation and facility policy to perform or assist.”

Licensed individuals that might work in the medical profession would include, nurse practitioners (NP), physician assistants (PA), registered nurses (RN) and licensed practical nurses (LPN). In some states medical assistants (MA) are also licensed. In other states they are registered or certified, but not licensed. As a result, depending on the state in which you practice, your MA may or may not be considered clinical staff.

As an example, depending on your jurisdiction, this could create a problem if your office wants to provide transitional care management (TCM) services and does not employ a licensed medical professional that fills the clinical staff requirement. Absent clinical staff, you cannot compliantly perform, or appropriately bill for, TCM services. TCM services state that a clinical staff member must make the call to the patient within two days of discharge from the hospital. If you cannot meet this first requirement of TCM you cannot bill for TCM services. The descriptors for the chronic care management and behavioral health integration codes also refer to clinical staff time. Does your office employ anyone who meets the definition of clinical staff?

While I have not personally heard of any auditors or inspectors checking the credentials of the person providing a service that is to be performed by clinical staff, there is value to considering this risk. A review of your practice along with jurisdictional consideration for what constitutes “clinical staff” could save you potential challenges should you be audited in the future.

Resources Available for ACGME Osteopathic Recognition

As part of the College’s ongoing effort to assist all internal medicine residency programs complete the transition to ACGME accreditation and achieve Osteopathic Recognition, ACOI is pleased to announce the development of an Osteopathic Recognition (OR) Tool Box.

The toolbox includes numerous resources that will help programs through the process. The resources in the tool box may be accessed by [here](#).

In Memoriam

Word has been received of the death of **Laurie Ann Milatz-Atkinson, DO**, of Chester, SC. Dr. Milatz-Atkinson died on March 3. She was 57. A graduate of the Oklahoma State University College of Osteopathic Medicine, Dr. Milatz-Atkinson completed her internal medicine residency at Memorial Hospital in York, PA. She practiced as an internist and hospitalist in Chester after completing her training. Dr. Milatz-Atkinson was an Active member of the ACOI from 1994 until her death.



talking science & education

Donald S. Nelinson, PhD

Greetings colleagues and welcome to the March issue of Talking Science and Education. Look, I am a devout skier and the conditions have been great! But even I am saying it's enough! Two words for winter: Bye Bye!

February's trivia question asked you to identify the state ranked fourth healthiest in the country, but where the death rate from cardiovascular disease has risen 10 percent since 2012. A trend over the past five years shows that even some of the nation's healthiest states by overall rank have experienced notable increases in key measures of mortality. This trend is also true for cardiovascular deaths. Although ranked as the fourth healthiest state in 2017, Utah experienced one of the largest increases in the rate of cardiovascular deaths (additional 21.9 deaths per 100,000 population) from 2012 to 2017.

While we had no winners in February, remember, the first person to respond with the right answer will receive valuable prizes. BUT in the spirit of good sportsmanship, no Googling allowed. Here's the question for March. Good luck!

While some of the nation's healthiest states by overall rank, three New England states have experienced large increases in drug deaths. Which state is NOT one of these?

- A. Massachusetts
- B. Rhode Island
- C. New Hampshire
- D. Vermont

Send your answer to don@acoi.org.

Talking Education

In Eric Cassell's important treatise "The Nature of Suffering and the Goals of Medicine," he is deeply concerned that the involvement of physicians with the biologic dimensions of sickness has caused them to misperceive the nature of doctoring — the essential transactions that occur in a physician's relationship with a patient, the expressions of suffering in the patient, and the steps required for therapy to work.

Cassell begins his argument with a point that has been made by others — that modern medicine considers the most authentic medical knowledge to be scientific knowledge, which is characterized in medicine by the ability to measure bodily events in objective terms. But according to this definition of medical knowledge, suffering — the quintessential feature of sickness — cannot be analyzed or relieved. What is needed is a kind of knowledge that will lead physicians to understand who the patient is. Cassell elaborates the content of this personal kind of knowledge, which he considers the counterpart of the scientific kind. Personal knowledge particularizes illness and deals with human values (such as opinions, attitudes, and hopes); scientific knowledge generalizes about illness and deals with objective facts. According to this view, the nature of the illness reflects the nature of the patient. The doctor reconstructs the patient's past and tries to anticipate the patient's future from what is learned.

Dr. Cassell's thinking had a profound impact on my work training medical students and residents, yet I fear that our trainees' abilities to listen to the patient and use their feedback in the therapeutic choices the resident makes is too often lost.

In light of these points, I was excited to read in the upcoming Journal of Graduate Medical Education a study conducted by a group out of Stanford and the University of Chicago (Bogetz et al, *JGME*, 2018) which I'd like to summarize for you here.

Residents may view feedback from patients and their families with greater skepti-

cism than feedback from supervisors and peers. While discussing patient and family feedback with faculty may improve residents' acceptance of feedback and learning, specific strategies have not been identified.

In this study, the investigators explored pediatrics residents' perspectives of patient feedback and identified strategies that promote residents' reflection on and learning from feedback. In the multi-institutional, qualitative study, they conducted focus groups with a purposive sample of pediatrics residents who had participated in a randomized controlled trial in which they received written patient feedback and either discussed it with faculty or reviewed it independently. Focus group transcripts were audio recorded, transcribed, and analyzed for themes using the constant comparative approach associated with grounded theory.

Thirty-six of 92 (39%) residents participated in seven focus groups. Four themes emerged: (1) residents valued patient feedback, but felt it may lack the specificity they desire; (2) discussing feedback with a trusted faculty member was helpful for self-reflection; (3) residents identified five strategies faculty used to facilitate their openness to and acceptance of patient feedback (e.g., help resident overcome emotional responses to feedback and situate feedback in the context of lifelong learning); and (4) residents' perceptions of feedback credibility improved when faculty observed patient encounters and solicited feedback on the resident's behalf prior to discussions.

The authors concluded that discussing patient feedback with faculty provided important scaffolding to enhance residents' openness to and reflection on patient feedback. For me, this study represents a positive step toward trainees incorporating the patient narrative into their assessments and treatment-planning.¹

Diabetes Dialogues

Few U.S. Adults Meet Most T2DM Risk Reduction Goals

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Clinical Challenges

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- Describe the principles of blood product utilization as well as evaluation and management of hypercoagulable states;
- Discuss strategies for managing acute stroke, improving compliance with sepsis management, and appreciating the role of new biomarkers in management of infected patients while improving antibiotic stewardship;
- Demonstrate the proper coding and billing of acute care patient visits;
- Improve recognition and management of common endocrine emergencies
- Describe best practices in improving glycemic control in the hospitalized patient;
- Describe the proper use and management of nutrition in end of life situations;
- Relate best practices in care for late stage liver failure patients;
- Describe the evolving changes to MACRA/MIPS and their impact on current hospital practice as well as hospitalist impact on Bundled Care Payment Initiative.

This activity will provide internists and subspecialists updates in the areas of healthcare administration, cardiology, pulmonary disease, critical care medicine, infectious diseases, gastroenterology, hematology/oncology, and internal medicine, empowering them to provide improved care to their patients. Outcomes will be assessed via immediate and time-delayed post-tests assessing intent to change practice behavior, and self-report of changes.

The host hotel is the Marriott Chicago Downtown Magnificent Mile, located at 540 N. Michigan Avenue, Chicago, IL 60611. For hotel information, call 1-877-303-0104. A room rate of \$199/per night has been arranged for this meeting. Reservations must be made by April 3, 2018 in order to receive this special ACOI discounted rate. Reservations also may be made online [here](#).



Special Award Nominations Also Sought

Fellows Nominations Due April 30

The deadline for submitting nominations for the honorary Degree of Fellow is April 30, 2018. The minimum eligibility requirements for consideration are two consecutive years of Active ACOI membership and certification by either the American Osteopathic Board of Internal Medicine or the American Board of Internal Medicine. Nomination packets have been mailed to all current Fellows, as well as those who are eligible through AOBIM certification. Interested members who are certified by the ABIM are asked to contact the ACOI office for an application as the College does not maintain a complete list of ABIM-certified physicians.

Nominations also are sought for the Internist, Researcher and Teacher of the Year Awards, and Master Fellowship. The deadline for nominations for these awards is June 1.

Bylaws changes approved last year simplified the nomination process and made it easier for candidates who do not have two Fellows available to nominate them. Such members are urged to contact the ACOI office for assistance.

Talking Science & Education

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No surprise here, right? A small proportion of U.S. adults engage in lifestyle behaviors known to reduce the risk of type 2 diabetes, according to a study published in the March issue of *Diabetes Care*.

Karen R. Siegel, Ph.D., M.P.H., from the U.S. Centers for Disease Control and Prevention in Atlanta, and colleagues conducted a cross-sectional analysis of 3,679 non-pregnant, non-lactating individuals aged 20 years or older without diabetes. Participants provided two days of reliable dietary data in the 2007 to 2012 National Health and Nutrition Examination Surveys (NHANES). The average of two days of dietary recall and self-reported leisure time physical activity were used to assess whether participants met type 2 diabetes risk reduction goals.

The researchers found that about 21, 29, and 13 percent of individuals met fruit, vegetable, and dairy goals, respectively. About half (51.6 percent) and 18 percent met the goals for total and whole grains, respectively; 54.2 percent met the meat/beans goal; and 40.6 percent met the oils goal. Overall, 37.8 and 58.6 percent met the physical activity and weight loss/maintenance goals, respectively. Only 3.1 percent of participants met the majority of type 2 diabetes risk reduction goals. The probability of meeting goals was lower with younger age and lower educational attainment.

“A small proportion of U.S. adults engages in risk reduction behaviors,” the authors write. “Research and interventions targeted at young and less-educated segments of the population may help close gaps in risk reduction behaviors.” The ongoing challenge for busy HCPs, is the time needed for effective monitoring and education.²

1Bogetz AL, Orlov N, Blankenburg R. How residents learn from patient feedback: A multi-institutional qualitative study of pediatrics residents’ perspectives. *JGME*; April 2018; Online Ahead-of-Print.

2Siegel KR, McKeever Bullard K, Giuseppina I. Prevalence of major behavioral risk factors for type 2 diabetes. *Diabetes Care* 2018 Mar; dc171775. <https://doi.org/10.2337/dc17-1775>

April 27-29, 2018 in Chicago, IL

Advanced CME Course for Cardiologists Planned for April

Whether a general cardiologist, interventionalist, or electrophysiologist, the place to be on April 27-29, 2018 is at ACOI's New Science in Cardiovascular Medicine, which will be held at the Marriott Chicago Downtown Magnificent Mile Hotel. An internationally recognized faculty will bring the very latest in evidence-based advances using a highly interactive, case-centric approach. This activity is the first in a series of new CME offerings the ACOI plans to offer for subspecialists.

A number of important topics will be featured. Risk management and treatment, including a frank discussion on diabetic heart disease and conflicting blood pressure targets contained in recent guidelines (ACC vs ADA), will be presented by Robert J. Chilton, DO, FACOI, FACC and George Bakris, MD.

The course will focus on several new and timely topic areas, including cardio-oncology, women and heart disease, and the state-of-the-art in DVT assessment and treatment: science vs. pseudoscience. A full complement of presentations will deliver value to the interventional cardiologist, such as TAVR and the patient with low gradient severe aortic stenosis, the latest thinking on the treatment for STEMI and non-STEMI with program chair Asif Serajian, DO, and a panel discussion on the readiness of the mitral clip for use in day-day practice.

Heart failure will be well-represented on the agenda with talks on differential diagnosis of heart failure in patients with preserved

ejection fraction, the use of biomarkers in heart failure management, and best practice use of echocardiography in heart failure and cardiomyopathies.

Finally, a section on arrhythmias and electrophysiology will feature presentations on when to order a wearable defibrillator, with Martin C. Burke, DO, FACOI, FACC; atrial fibrillation: ablation vs medical intervention; stroke risk reduction with NOACs vs LA Appendage Devices, and cardiac resynchronization.

This program has been designed specifically for clinical cardiologists. Registration and additional information on this program can be found on the ACOI website [here](#).



2018 Board Review Course Early Registration Deadline is April 3

Registration is open for the 2018 ACOI Internal Medicine Board Review Course, which will take place April 25-29 at the Marriott Chicago Downtown Magnificent Mile. This 5-day course is a comprehensive review of general medicine and each of the subspecialties. It is an excellent way for practicing physicians to update their medical knowledge, and it provides an intensive and comprehensive overview of most of the major areas of importance to physicians preparing for the American Osteopathic Board of Internal Medicine Certifying Examination (September 12, 2018) and Recertifying Examination (September 12, 2018).

Special emphasis is placed on recent advances in various subspecialty areas in internal medicine and clinical skills management as they pertain to clinical practice and the examinations. In addition, several "board-type" questions are included during each lecture to improve registrants' readiness to respond to examination questions. The lectures are given by distinguished faculty who are recognized for their ability as teachers and clinicians. A detailed syllabus is provided to registrants. Immediately following each day's lectures, designated faculty from each subspecialty area are available for a question and answer period.

This postgraduate course is appropriate for physicians who provide personal care to adults: general internists; family physicians; residents and fellows-in-training; and subspecialists who want to remain current in the field of internal medicine.

The Marriott Chicago Downtown Magnificent Mile is located at 540 N. Michigan Avenue, Chicago, IL 60611. For hotel information, call 1-877-303-0104. A room rate of \$199/per night has been arranged for this meeting. Reservations must be made by April 3, 2018 in order to receive this special ACOI discounted rate. Reservations also may be made online [here](#).

Have You Moved?

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

75th Anniversary Campaign Honor Roll of Donors

(Outright Gifts and Multi-Year Commitments of \$1,000 or more as of February 5, 2018)

The ACOI Board of Directors wishes to thank all ACOI members for their annual support for the College. The generous support of our 75th Anniversary Campaign donors is of the utmost importance as we seek to maintain an osteopathic approach to internal medicine for future generations of patients.

\$75,000

Lawrence U. Haspel, DO, MACOI

\$45,000

Martin C. Burke, DO, FACOI

\$25,000 - \$44,999

Rick A. Greco, DO, FACOI and
Carol A. Greco, DO
Robert J. Stomel, DO, MACOI
William D. Strampel, DO, FACOI

\$15,000 - \$24,999

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and Catherine Ottaviani
Frederick A. Schaller, DO, MACOI
and Amy Schaller
James C. Wells, DO, PhD, FACOI
Larry A. Wickless, DO, MACOI

\$7,500 - \$9,999

Robert A. Cain, DO, FACOI
and Gina Eversole-Cain
C. Clark Milton, DO, FACOI

\$5,000 - \$7,499

Damon L. Baker, DO, FACOI
Lee Peter Bee, DO, FACOI
Brian J. Donadio, FACOI and Ellen Donadio
Scott L. Girard, DO, FACOI and Laura J. Girard
James C. Giudice, DO, MACOI
Karen J. Nichols, DO, MA, CS, MACOI
Eugene A. Oliveri, DO, MACOI
Ruben Tenorio, DO, FACOI

\$2,500 - \$4,999

Michael A. Adornetto, DO, MBA, FACOI
Steven B. Calkin, DO, FACOI
Annette T. Carron, DO, FACOI
Janet E. Cheek, DO, FACOI
Pamela R. Gardner, DO, FACOI
Bonita J. Krempel-Portier, DO, FACOI
and Bill Portier, PhD
Sara Liter-Kuester, DO
Daniel J. Peasley, DO and Marti Peasley
Keith A. Reich, DO, FACOI
Morvarid Rezaie, DO, FACOI
Samuel K. Snyder, DO, FACOI
and Pamela Snyder
Scott Spradlin, DO, FACOI
John F. Uslick, DO, MACOI
Winter Wilson, DO, FACOI
and Tina Wilson
Randall Worth, DO, FACOI

\$1,000 - \$2,499

Gary A. Agia, DO, FACOI
Barbara Atkinson, DO, FACOI
Mark D. Baldwin, DO, FACOI
Jay Beckwith, DO, MACOI
and Beth Beckwith
Robert Biggs, DO, FACOI
Gerald W. Blackburn, DO, MACOI
Francis X. Blais, DO, FACOI
Robert E. Bulow, DO, FACOI

Boyd Buser, DO

Terry Bushnell, DO, FACOI
Kenneth E. Calabrese, DO, MACOI
Thomas A. Cavaliere, DO, MACOI
Humayun Chaudhry, DO, MS, MACOI
David Chesner, DO, FACOI
Barbara L. Cicone, Donor Strategies
Sharolyn Cook, DO, FACOI
Lawrence Cowsill, DO, FACOI
Carmella D'Addezio, DO, FACOI
Margaret Davenport, DO, FACOI
Kenneth P. Dizon, DO
Kathleen J. Drinan, DO, FACOI
Bruce D. Dubin, DO, MACOI
Susan E. Duke, DO, FACOI
Susan M. Enright, DO, FACOI
Ira Epstein, DO, FACOI
Mitchell D. Forman, DO, FACOI
Eric D. Good, DO, FACOI
Debora Goodrich DO, FACOI
and John Goodrich
David J. Greathouse, DO, FACOI
Robert T. Hasty, DO, FACOI
Dory Jarzabkowski, DO, FACOI
G. Michael Johnston, DO, MACOI
Robert Juhasz, DO, FACOI
Joanne Kaiser-Smith, DO, FACOI
and Kevin Smith
Michael Keefe, DO, MACOI
Marc M. Kesselman, DO, FACOI, FACC
Teresa M. Kilgore, DO, FACOI
Andrew Kotis, DO, FACOI
Cheryl Kovalski, DO, FACOI
Paul Kudelko, DO, MACOI
Nathan J. Landesman, DO, FACOI
Alexander "Sandy" Macnab
Daniel L. Maxwell, DO, FACOI
Timothy W. McNichol, JD
Michael J. Menolasino, III, DO, FACOI
Nathan Miller, DO, FACOI
Jo Ann Mitchell, DO, FACOI
Rizwan K. Moinuddin, DO
Joseph Namey, Jr., DO, MACOI
Donald S. Nelinson, PhD
V. Kim Newsome, DO, FACOI
and Tim Stainbrook, RN, BSN
Herbert Pasternak, DO, FACOI
Joanna Pease, DO, MACOI
William Peppo, DO, FACOI
Daniel K. Peshka, DO
John Prior, DO, FACOI
Bennet Radford, DO, FACOI
Jeffrey A. Ranalli, DO
and Trina A. Poretta, DO
Laura Rosch, DO, FACOI for her mentor
George Caleel, DO, MACOI
Christine M. Samsa, DO, FACOI
and Nathan P. Samsa, DO, FACOI
Roy J. Sartori, DO, FACOI
and Christine Sartori
Thomas Schneider, DO, FACOI
Martin W. Schwarze, DO, FACOI
Suzanne Shenk, DO, FACOI
and Scott Siegal, DO, FACOI
Laura Smith, DO, FACOI
Duane Sossong, DO
Scott Spradlin, DO, FACOI
David G. Stainbrook, Jr., DO, FACOI
Christina A. Stasiuk, DO
and George Farlan, Esq.
W. W. Stoeve, DO, MACOI
Brad Suprenant, DO, FACOI
David Susser, DO, MACOI
John R. Sutton, DO, FACOI
Richard R. Thacker, DO, FACOI
Kenneth Trinidad, DO
Gordon P. Tussing, Jr., DO
Amita Vasoya, DO, FACOI
William H. Voss, DO, MACOI
Thomas Waltz, DO, FACOI
R. Colin Wetz, DO, FACOI
Mark L. Woodard, DO, FACOI
William Zipperer, Jr., DO, FACOI

Thanks to You ACOI's 75th Anniversary Campaign Surpasses Goal – Raising \$841,195.95!



75th Anniversary Circle Tree is Growing! Still Time to Reserve Your Leaf!

The tree that started out with 100 leaves is now 125 leaves and growing! Due to the interest in being a 75th Anniversary Circle member, the ACOI has extended the deadline to June 1, 2018 to make a tax deductible gift of \$1000 to reserve your leaf. Visit www.acoi.org to make a credit card contribution, mail a check to the ACOI office at 11400 Rockville Pike, Suite 801, Rockville, MD 20852 or contact Katie Allen at mailto:
katie@acoi.org or 301-231-8877.

Do you want to know how the new law will impact your finances and your ability to help ACOI and the other organizations you want to support?

The good news is that you can still help ACOI and yourself. For example, the limit for cash gifts is now raised to 60% of your Adjusted Gross Income (AGI), up from 50%.

While personal exemptions have been eliminated, the standard deduction has been dramatically increased to \$12,000 for single filers, \$18,000 for heads of households and to \$24,000 for joint filers. The itemized deduction for state and local taxes (sales, income, and real estate) is limited to \$10,000 and new rules will apply to home equity loan interest. To be deductible, the funds must be used to make improvements to your home – things like a new roof, kitchen renovations, or a room addition qualify.

It's a win-win and can be accomplished by you, or by asking your broker to contact ACOI to arrange the transfer. The value of your tax deduction is fixed by the value of the securities on the day your gift is made. For securities that are fluctuating in value, timing can be important. Let us know what you plan to do, or ask your broker to call us so ACOI gift planners can help you take maximum advantage of your giving. A gift of mutual fund shares will benefit you in the same way.

If you want to know more, mailto: katie@acoi.org to receive the two helpful planning documents: Your 2018 Personal Planning Guide, and Charitable Gift Planning Guidelines. You will find ideas and strategies about

- If you would like to have the ACOI planned giving consultant talk with you, mailto: bjd@acoi.org or call Brian Donadio at 301-231-8877.



- The College is upgrading its use of technology that will allow us to offer CME in a variety of formats our members need.

- We should be recognized as a provider of CME that qualifies for both AOA and AMA credit, and meets the recertification requirements of both the AOBIM and the ABIM in late 2018.

- The ACOI will continue to emphasize the distinctive osteopathic approach that is both beneficial to patients and valued by them in all our continuing medical education offerings.

9

ACOI 2018 Clinical Challenges in Inpatient Care

Chicago Marriott Downtown Magnificent Mile, Chicago, IL • April 26-29, 2018

Thursday, April 26

7:30 – 8:00 am
8:00 – 8:05 am
8:05 – 8:50 am
8:50 – 9:35 am
9:35 – 9:50 am
9:50 – 10:50 am
10:50 – 11:50 am
11:50 am – 12:00 pm
12:00 pm – 1:00 pm
1:00 – 2:00 pm
2:00 – 2:45 pm
2:45 – 3:00 pm
3:00 – 4:00 pm
4:00 – 5:00 pm
5:00 – 5:15 pm

Continental Breakfast

Welcome - Rick A. Greco, DO, FACOI

Why Are My Patients Bleeding? Indications of Cardiac Anticoagulation - Robert J. Fanning, DO, FACOI

Improving Glycemic Control in Hospitalized Patients - Jack L. Snitzer, DO, FACOI

Break

Diastolic Heart Failure - Robert J. Fanning, DO, FACOI

Potpourri of Endocrine Emergencies - Louis Haenel, IV, DO, FACOI

Q&A with Drs. Fanning, Snitzer and Haenel

LUNCH (on your own)

E&M Coding Pitfalls - Jill M. Young, CPC, CEDC, CIMC

Obesity Hypoventilation Syndrome - Timothy J. Barreiro, DO, FACOI

Break

Time-Based Billing - Jill M. Young, CPC, CEDC, CIMC

Non-Invasive Ventilator Techniques - Amita Vasoya, DO, FACOI

Q&A with Drs. Vasoya, Barreiro and Ms. Young

Friday, April 27

7:30 – 8:00 am
8:00 – 8:45 am
8:45 – 9:30 am
9:30 – 10:15 am
10:15 – 10:30 am
10:30 – 11:15 am
11:15 – 11:55 am
11:55 – 12:00 pm
12:00 pm – 1:00 pm
1:00 – 2:00 pm
2:00 – 3:00 pm
3:00 – 3:15 pm
3:15 – 4:15 pm
4:15 – 5:15 pm
5:15 – 5:30 pm

Continental Breakfast

Code Stroke - William Hicks, MD

Addressing Code Status: A Practical Guide to Difficult Conversations - Marianne M. Holler, DO, FACOI

Peripheral Arterial Occlusive Disease - Glenn D. Haraway, DO, FACOI

Break

Superficial Varicose and Deep Vein Concerns - Glenn D. Haraway, DO, FACOI

Artificial Nutrition and Hydration at the End of Life- Marianne M. Holler, DO, FACOI

Q&A with Drs. Hicks, Haraway and Holler

Lunch (on your own)

Managing DMARDs in the Inpatient Setting - Robert L. DiGiovanni, DO, FACOI

Management of Toxicities of the New Oncologic Agents - Kevin P. Hubbard, DO, MACOI

Break

Medication Strategies for the Polysubstance Abuse Patient - Thomas Jan, DO (invited)

Cardiorenal Syndrome - Samuel K. Snyder, DO, FACOI

Q&A with Drs. DiGiovanni, Snyder, Jan

Saturday, April 28

7:30 – 8:00 am
8:00 – 9:00 am
9:00 – 10:00 am
10:00 – 10:15 am
10:15 – 11:00 am
11:00 am – 12:00 pm
12:00 pm – 1:00 pm
1:00 – 2:00 pm
2:00 – 3:00 pm
3:00 – 3:15 pm
3:15 – 5:15 pm
5:15 – 5:30 pm

Continental Breakfast

Liver Failure: Chronic Liver Diagnosis and Management in the Hospital - Kevin Dolehide, DO, FACOI

Tips on Diagnosis and Management in Bleeding and Coagulopathy - Amanda E. Haynes, DO

Break

Blood Product Utilization - Amanda E. Haynes, DO

Bundled Care Payment Initiative - Dale W. Bratzler, DO, MACOI

Lunch

MIPS/MACRA/VBP - Dale W. Bratzler, DO, MACOI

Effective OMM in the Hospital - Laura M. Rosch, DO, FACOI

Break

Curbside Consultations - Gerald W. Blackburn, DO, MACOI;

Martin C. Burke, DO, FACOI; Scott L. Girard, DO, FACOI; Bryan L. Martin, DO, FACOI

Q&A with Drs. Bratzler, Rosch, Blackburn, et al.

Sunday, April 29

7:30 – 8:00 am
8:00 – 9:00 am
9:00 – 10:00 am
10:00 – 10:15 am
10:15 – 11:00 am
11:00 – 11:15 am
11:15 – 11:30 am

Continental Breakfast

Sepsis: Get with the Guidelines, Save Lives - David V. Condoluci, DO, MACOI

Strategies for the Use of Procalcitonin - Matthew Exline, MD (invited)

Break

The Speed of Trust - Bryan L. Martin, DO, FACOI

Q&A with Drs. Condoluci, Exline and Martin

Closing of Agenda - Rick A. Greco, DO, FACOI

ACOI 2018 Clinical Challenges in Inpatient Care REGISTRATION FORM

Chicago Marriott Downtown Magnificent Mile, Chicago, IL • April 26-29, 2018

Registration available online at www.acoi.org/education/continuing-medical-education/hospital-medicine-update-clinical-challenges-inpatient-care

Full Name														
AOA Number														
Mailing Address														
City	State	Zip												
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Home Phone ()	Cell ()													
Email Address														
Preferred Name on Badge														
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Fees <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> ACOI Member (Registering ON/BEFORE 4/3/18...\$625)</td> <td><input type="checkbox"/> ACOI Member (Registering AFTER 4/3/18...\$675)</td> <td><input type="checkbox"/> *ACOI Generational Advancement Fund \$ _____</td> </tr> <tr> <td><input type="checkbox"/> Non-Member (Registering ON/BEFORE 4/3/18...\$750)</td> <td><input type="checkbox"/> Non-Member (Registering AFTER 4/3/18...\$800)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Resident/Fellow (Registering ON/BEFORE 4/3/18...\$525)</td> <td><input type="checkbox"/> Resident/Fellow (Registering AFTER 4/3/18...\$575)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Non Physician Provider (Registering ON/BEFORE 4/3/18...\$625)</td> <td><input type="checkbox"/> Non Physician Provider (Registering ON/BEFORE 4/3/18...\$675)</td> <td><input type="checkbox"/> TOTAL \$ _____</td> </tr> </table>			<input type="checkbox"/> ACOI Member (Registering ON/BEFORE 4/3/18...\$625)	<input type="checkbox"/> ACOI Member (Registering AFTER 4/3/18...\$675)	<input type="checkbox"/> *ACOI Generational Advancement Fund \$ _____	<input type="checkbox"/> Non-Member (Registering ON/BEFORE 4/3/18...\$750)	<input type="checkbox"/> Non-Member (Registering AFTER 4/3/18...\$800)		<input type="checkbox"/> Resident/Fellow (Registering ON/BEFORE 4/3/18...\$525)	<input type="checkbox"/> Resident/Fellow (Registering AFTER 4/3/18...\$575)		<input type="checkbox"/> Non Physician Provider (Registering ON/BEFORE 4/3/18...\$625)	<input type="checkbox"/> Non Physician Provider (Registering ON/BEFORE 4/3/18...\$675)	<input type="checkbox"/> TOTAL \$ _____
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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.

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List special requirements here: _____

ACOI 2018 Exploring New Science in Cardiovascular Medicine

Chicago Marriott Downtown Magnificent Mile, Chicago, IL • April 27-29, 2018

Friday April 27th

7:30 AM – 8:00 AM	Breakfast
8:00 AM	Welcome and Orientation <i>Asif Serajian, DO, Moderator</i>
8:00 AM – 8:30 AM	Goal-Directed Therapy in Lipid Management <i>Robert Chilton DO, FACOI, FACC</i>
8:30 AM – 9:00 AM	A Light in the Dark: Cardiac MRI and Risk Mitigation <i>Ronald Mikolich, MD</i>
9:00 AM – 9:30 AM	ASCVD Risk Reduction Therapy: Beyond Statins <i>Robert Chilton DO, FACOI, FACC</i>
9:30 AM – 10:00 AM	Diabetic Heart Disease: A Ticking Time Bomb! <i>Robert Chilton DO, FACOI, FACC</i>
10:00 AM – 10:15 AM	Break
10:15 AM – 10:45 AM	Cardiac CT: Your Chest Pain Patient CAN be Discharged From the ED <i>Asif Serajian, DO</i>
10:45 AM – 11:30 AM	Who's Your PAPP? Leveraging ECG to Identify High-Risk Patients <i>Felix J. Rogers, DO, FACOI</i>
11:30 AM – 12:00 PM	When to Order a Wearable Defibrillator <i>Martin C. Burke, DO, FACOI</i>
12:00 PM – 12:30 PM	Selecting the Best ICD - What, Who, When? <i>Martin C. Burke, DO, FACOI</i>
12:30 PM – 1:30 PM	Lunch (on your own)
1:30 PM - 2:00 PM	Hypertension: Are We Going Too Low? <i>George Bakris, MD</i>
2:00 PM – 2:30 PM	Atrial Fibrillation: The New Epidemic - Ablation vs Medical Intervention Stroke Risk Reduction with NOACs vs LA Appendage Devices <i>Eric D. Good, DO, FACOI</i>
2:30 PM - 3:30 PM	Cardiac Resynchronization Therapy: Indications and Implant Techniques <i>Eric D. Good, DO, FACOI</i>
3:30 PM - 3:45 PM	Break
3:45 PM – 4:15 PM	Pulmonary Hypertension: When to Initiate Advanced Therapy <i>Jonathan Rich, MD</i>
4:15 PM - 4:45 PM	State of the Art - Advanced Heart Failure/LVAD/Transplant Update <i>Jonathan Rich, MD</i>
4:45 PM – 5:15 PM	Case Presentations with Panel Discussion and Questions <i>Drs. Bakris, Rich and Good</i>

Saturday April 28

7:30 AM – 8:00 AM	Breakfast
8:00 AM – 9:00 AM	Cardio-Oncology: Why Cancer Needs a Heart Doctor <i>Tochi M. Okwuosa, DO, FACC (invited)</i>
9:00 AM – 9:30 AM	TAVR Update <i>Andrzej S. Boguszewski, MD</i>

9:30 AM – 10:00 AM	Mitral Clip – Ready for Primetime? <i>Andrzej S. Boguszewski, MD</i>
10:00 AM – 10:15 AM	Break
10:15 AM – 10:45 AM	Low Gradient Severe Aortic Stenosis & Relation to Valve Replacement: Who Qualifies for TAVR? <i>Andrzej S. Boguszewski, MD</i>
10:45 AM – 11:15 AM	Case Presentations with Panel Discussion and Q & A <i>Tochi M. Okwuosa, DO and Andrzej S. Boguszewski, MD</i>
11:15 AM – 12:15 PM	Antiplatelet and Anticoagulant Therapies: When and for How Long? <i>Asif Serajian, DO</i>
12:15 PM-1:00 PM	Lunch (on your own)
1:00 PM – 1:30 PM	ST Elevation MI: The State of the Art Treatment <i>Ravi Ramana, MD</i>
1:30 PM – 2:00 PM	NonSTEMI: The State of the Art Treatment <i>Ravi Ramana, MD</i>
2:00 PM – 2:45 PM	Women & Heart Disease Prevention – Should we be Doing Anything New? <i>Sandra K. Birchem, DO</i>
2:45 PM – 3:00 PM	Break
3:00 PM – 3:30 PM	ACC Update <i>Sandra K. Birchem, DO</i>
3:30 PM – 4:00 PM	DVT: Science/Pseudoscience: Or the Truth as We Know it <i>Bruce L. Mintz, DO</i>
4:00 PM – 4:15 PM	Case Presentation with Panel Discussion and Q&A

Sunday April 29

7:30 AM – 8:00 AM	Breakfast
8:00 AM – 8:30 AM	State of the Art – Heart Failure with Decreased Ejection Fraction <i>Felix J. Rogers, DO, FACOI</i>
8:30 AM – 9:00 AM	Heart Failure with Preserved Ejection Fraction: Does Your Patient Have Heart Failure or Diastolic Dysfunction? <i>Felix J. Rogers, DO, FACOI</i>
9:00 AM – 9:30 AM	Echocardiography in Valvular Heart Disease, Heart Failure, and Cardiomyopathies <i>Asif Serajian, DO</i>
9:30 AM – 9:45 AM	Break
9:45 AM – 10:15 AM	Overcoming Clinical Inertia: Using Biomarkers in Heart Failure <i>Felix J. Rogers, DO, FACOI</i>
10:15AM – 10:45 AM	Case Presentations, Panel Discussion, Q&A
10:45 AM – 11:00 AM	Closing Remarks/Adjourn

ACOI 2018 Exploring New Science in Cardiovascular Medicine REGISTRATION FORM

Chicago Marriott Downtown Magnificent Mile, Chicago, IL • April 27-29, 2018

Registration available online at www.acoi.org/education/continuing-medical-education/cardiology-new-science/2018-acoi-cardiology-focused-review

Full Name							
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<table style="width: 100%; border: none;"> <tr> <td style="width: 10%; vertical-align: top;">Fees</td> <td style="width: 30%;"> <input type="checkbox"/> ACOI Member (Registering ON/BEFORE 4/3/18...\$625) <input type="checkbox"/> Non-Member (Registering ON/BEFORE 4/3/18...\$775) <input type="checkbox"/> Resident/Fellow (Registering ON/BEFORE 4/3/18...\$525) </td> <td style="width: 30%;"> <input type="checkbox"/> ACOI Member (Registering AFTER 4/3/18...\$675) <input type="checkbox"/> Non-Member (Registering AFTER 4/3/18...\$825) <input type="checkbox"/> Resident/Fellow (Registering AFTER 4/3/18...\$575) <input type="checkbox"/> *ACOI Generational Advancement Fund \$ _____ </td> <td style="width: 30%; text-align: right;"> <input type="checkbox"/> TOTAL \$ _____ </td> </tr> </table>				Fees	<input type="checkbox"/> ACOI Member (Registering ON/BEFORE 4/3/18...\$625) <input type="checkbox"/> Non-Member (Registering ON/BEFORE 4/3/18...\$775) <input type="checkbox"/> Resident/Fellow (Registering ON/BEFORE 4/3/18...\$525)	<input type="checkbox"/> ACOI Member (Registering AFTER 4/3/18...\$675) <input type="checkbox"/> Non-Member (Registering AFTER 4/3/18...\$825) <input type="checkbox"/> Resident/Fellow (Registering AFTER 4/3/18...\$575) <input type="checkbox"/> *ACOI Generational Advancement Fund \$ _____	<input type="checkbox"/> TOTAL \$ _____
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Billing Street							
Billing City		State	Zip				
Credit Card Number		Security Code					
Credit Card Exp. Date							
Signature							

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List special requirements here: _____

ACOI 2018 Internal Medicine Board Review Course

Chicago Marriott Downtown Magnificent Mile, Chicago, IL • April 25-29, 2018

WEDNESDAY, APRIL 25

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, MACOI*
8:30-9:00 am Clinical Oncology, Physical Diagnosis, Systemic Manifestations, Chemotherapy - *Kevin P. Hubbard, DO, MACOI*

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 Oncology Palliative Care Session – *Kevin P. Hubbard, DO, MACOI*
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, MACOI*
11:15-11:45 am Cancer in Women - Breast, Uterus and Ovary - *Kevin P. Hubbard, DO, MACOI*
11:45-12:00 pm Hem/Onc Board Review Questions -
Kevin P. Hubbard, DO, MACOI and Cheryl D. Kovalski, DO, FACOI

12:00 pm-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*
6:00-7:00 pm **Reception**

THURSDAY, APRIL 26

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

Cardiology

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

11:45 am-1:00 pm **Lunch Break**

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*

FRIDAY, APRIL 27

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

Pulmonary Diseases

7:00-7:30 am Respiratory Failure, Ventilator Therapy and PFT - *Thomas F. Morley, DO, MACOI*
7:30-8:00 am Chronic Obstructive Lung Disease - *Amrita Vasoya, DO, FACOI*
8:00-8:30 am Restrictive Lung Disease - *Thomas F. Morley, DO, MACOI*
8:30-9:00 am Lung Cancer and Paraneoplastic Syndromes - *Amrita Vasoya, DO, FACOI*
9:00-9:15 am **Coffee Break**

9:15-9:45 am Pulmonary Thromboembolism - *Thomas F. Morley, DO, MACOI*
9:45-10:15 am Unknown PFTs, Chest X-rays - *Drs. Vasoya and Morley*
10:15-10:45 am Sleep Medicine Case Studies – *Timothy J. Barriero, DO, FACOI*
10:45-11:15 am Critical Care Case Studies – *Timothy J. Barriero, DO, FACOI*
11:15-11:45 am Pulmonary/Sleep/CCM Board Review Questions - *Drs. Barriero, Morley and Vasoya*
11:45 am-1:00 pm **Lunch Break**

Gastroenterology

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

SATURDAY, APRIL 28

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 Vaculitides 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 **Coffee 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, MACOI*
11:45 am-12:45 pm **Lunch Lecture** (Medicine for the Boards – *Scott L. Spradlin, DO, FACOI*)
12:45-1:15 pm Endocarditis & Prophylaxis; Infectious GI Diseases
Gerald W. Blackburn, DO, MACOI
1:15-1:45 pm CNS Infections - *David V. Condoluci, DO, MACOI*
1:45-2:15 pm HIV/AIDS - *Gerald W. Blackburn, DO, MACOI*
2:15-2:45 pm Hemorrhagic Fevers and Fevers of Unknown Origin - *David V. Condoluci, DO, MACOI*
2:45-3:00 pm Infectious Disease Board Review Questions - *Drs. Blackburn and Condoluci*

Allergy/Immunology

3:00-3:15 pm **Coffee Break**
3:15-3:45 pm Asthma - *Timothy R. Craig, DO, FACOI*
3:45-4:15 pm Clinical Basis of the Immune Response and the Complement Cascade -
Bryan L. Martin, DO, FACOI
4:15-4:45 pm Food, Sinusitis, Rhinitis and Drug Allergy - *Timothy R. Craig, DO, FACOI*
4:45-5:15 pm Systemic Allergic Disorders, Immunodeficiency and Immunoglobulin Disorders - *Bryan L. Martin, DO, FACOI*
5:15-5:45 pm Allergic Skin Disorders and HAE - *Timothy R. Craig, DO, FACOI*
5:45-6:00 pm Allergy/Immunology Board Review Questions - *Drs. Craig and Martin*

SUNDAY, APRIL 29

General Medicine

7:00-7:30 am Acute and Chronic Neuropathies: Diagnosis and Management
Scott L. Spradlin, DO, FACOI
7:30-8:00 am The Role of Genetic Testing and Counseling for the General Internist
Robert Hasty, DO, FACOI
8:00-8:30 am Headache, Motor Disorders and Amyotrophies - *Scott L. Spradlin, DO, FACOI*
8:30-9:00 am Nutritional Disorders and Their Management - *Robert Hasty, DO, FACOI*
9:00-9:15 am General Medicine Board Review Questions - *Drs. Spradlin and Hasty*
9:15-9:30 am **Coffee Break**
9:30-10:00 am Cutaneous Manifestations of Systemic Disease - Part 1
Lloyd Cleaver, DO
10:00-10:30 am Cutaneous Manifestations of Systemic Disease-Part 2
Lloyd Cleaver, DO
10:30-11:00 am Diagnosis of Stroke & Multiple Sclerosis - *Scott L. Spradlin, DO, FACOI*
11:00-11:30 am Drug Caused Side-Effects and Disorders - *Lloyd Cleaver, DO*
11:30-11:45 am General Medicine Board Review Questions - *Drs. Cleaver and Spradlin*
11:45 am-12:00 pm **Questions and Wrap Up**

ACOI 2018 Internal Medicine Board Review Course REGISTRATION FORM

Chicago Marriott Downtown Magnificent Mile, Chicago, IL • April 25-29, 2018

Registration available online at www.acoi.org/education/continuing-medical-education/acoi-internal-medicine-board-review-course

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 <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> ACOI Member (Registering ON/BEFORE 4/3/18...\$850) <input type="checkbox"/> Non-Member (Registering ON/BEFORE 4/3/18...\$1025) <input type="checkbox"/> Resident/Fellow (Registering ON/BEFORE 4/3/18...\$750) <input type="checkbox"/> Printed Syllabus \$80 (Electronic version provided with registration) </div> <div style="width: 50%;"> <input type="checkbox"/> ACOI Member (Registering AFTER 4/3/18...\$900) <input type="checkbox"/> Non-Member (Registering AFTER 4/3/18...\$1075) <input type="checkbox"/> Resident/Fellow (Registering AFTER 4/3/18...\$800) <input type="checkbox"/> ACOI Generational Advancement Fund \$ _____ </div> </div> <div style="text-align: right;"> <input type="checkbox"/> TOTAL \$ _____ </div>			
Payment Method <input type="checkbox"/> Check to ACOI <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa			
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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 April 3, 2018. 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/donation_form.cgi

☐ **PLEASE NOTE:** Check here if you plan to stay at the Marriott Chicago Downtown Magnificent Mile 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: _____

CME CALENDAR

Future ACOI Education Meeting Dates & Locations

NATIONAL MEETINGS

- 2018 Internal Medicine Board Review Course - April 25-29
- 2018 Clinical Challenges in Inpatient Care - April 26-29
- 2018 Exploring New Science in Cardiovascular Medicine - April 27-29
- 2018 Congress on Medical Education for Resident Trainers - April 27-28
Chicago Marriott Downtown Magnificent Mile, Chicago, IL
- 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
- 2020 Annual Convention & Scientific Sessions
Oct 21-25 Marco Island Marriott Beach Resort, Marco Island, FL
- 2021 Annual Convention & Scientific Sessions
Sept 29-Oct 3 Marriott Marquis Hotel, San Francisco, CA

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.

2018 Certifying Examination Dates & Deadlines

Internal Medicine Certifying Examination

Computerized Examination 300 Sites Nationwide

September 12-14, 2018 - *Application Deadline: Expired*

Internal Medicine Recertifying Examination

Computerized Examination 300 Sites Nationwide

September 12-14, 2018 - *Application Deadline: May 1, 2018*

Internal Medicine Recertifying with a Focus in Hospital-Based Medicine Examination

Computerized Examination 300 Sites Nationwide

September 12-14, 2018 - *Application Deadline: April 1, 2018*

Subspecialty Certifying Examinations

Computerized Examination 300 Sites Nationwide

August 28-30, 2018 - *Application Deadline: April 1, 2018*

- Cardiology • Critical Care Medicine • Endocrinology • Gastroenterology
- Hematology • Hospice and Palliative Medicine • Interventional Cardiology
- Infectious Disease • Nephrology • Oncology • Pulmonary Diseases • Rheumatology

Subspecialty Recertifying Examinations

Computerized Examination 300 Sites Nationwide

August 28-30, 2018 - *Application Deadline: May 1, 2018*

- Cardiology • Clinical Cardiac Electrophysiology • Critical Care Medicine • Endocrinology
- Gastroenterology • Geriatric Medicine • Hematology • Hospice and Palliative Medicine
- Infectious Disease • Interventional Cardiology • Nephrology • Oncology
- Pulmonary Diseases • Rheumatology • Sleep Medicine

Further information and application materials are available by contacting Daniel Hart, AOBIM Director of Certification at admin@aoxim.org; 312 202-8274.

Contact the AOBIM at admin@aoxim.org for deadlines and dates for the Allergy, Sports Medicine, Pain Medicine, Undersea/Hyperbaric Medicine and Correctional Medicine examinations.

News From the AOBIM

Advanced Heart Failure and Transplant Cardiology Subspecialty Exam

The AOBIM is currently in the beginning stages of creating a subspecialty exam in the field of Advanced Heart Failure and Transplant Cardiology. The AOBIM is working toward the goal of offering this initial exam in conjunction with other AOBIM subspecialty exams in August of 2019 via Prometric testing centers.

REMINDER: AOBIM 2018 Recertification Deadlines

The initial application deadline for all AOBIM recertification exams is April 1, 2018. The AOBIM will continue to accept late applications for the recertification exam until the final deadline of May 1, 2018. The AOBIM Internal Medicine recertification exam will be offered via Prometric testing centers from September 12-14, 2018 and subspecialty recertification exams from August 28-30, 2018.