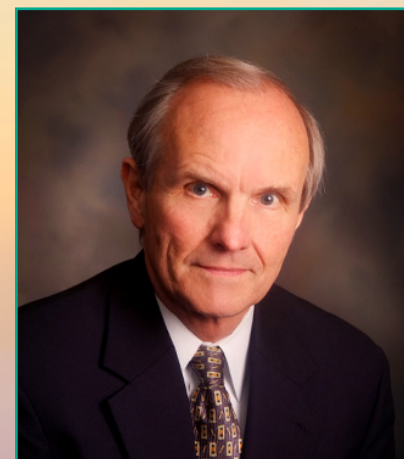


# Resolutions: Yes or No?

Dr. Kaiser-Smith offers advice on how to set ourselves up for success with our goals for the new year.



**Special Feature:**

Gary Slick, DO, MACOI:  
A Life of Practicing, Teaching,  
Leading, and Giving Back

# inside:

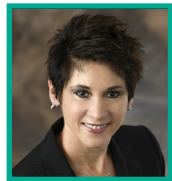
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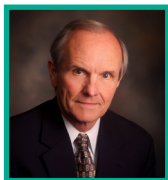
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2022-2023

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# Resolutions: Yes or No?



Happy New Year! I hope the holiday season filled you with joy, contentment, and the opportunity to spend time with family and friends. By now those of you who make New Year's resolutions have done so and perhaps have resolved never to do that again. By making a resolution

you made a promise to yourself to start doing something good or stop doing something bad on the first day of the calendar year. You might want to achieve a personal goal, improve an undesired behavior, or even continue to do the right things for yourself.

Yet, studies have shown that only about 10% of individuals are successful enough to see them through and 80% will have ditched them by February. In fact, as you read this 50% of resolutions have been thrown to the wayside.

So why do we continue to make resolutions we won't keep? How do we set ourselves up not to fail? Is there a way to be more successful? Why do we think a behavior we have not been successful in at any other time of the year will work now? Perhaps we are looking at it as a new beginning.

Let's explore where resolutions started. The Babylonians in Mesopotamia in 2000 B.C. celebrated the new year over 12 days, although it was held in March at that time.

With the focus on returning borrowed farm equipment and repaying debts, they believed the gods would look favorably upon them for the rest of the year.

The ancient Romans established January 1 as the new year circa 46 B.C. January was very special to them as the month was named for Janus, the two-faced god who looked forward to new beginnings and backward for reflection and resolution. They offered sacrifices to Janus and made promises of good behavior in the coming year.

In the early 1900s, resolutions became more religious and spiritual with goals of strong work ethic and moral character. I am most intrigued with the first recorded use of the term "New Year's resolutions" which was written in a Boston newspaper in 1813 by an unknown author who said, "And yet, I believe there are multitudes of people accustomed to receiving injunction of new year resolutions who will sin all of the month of December with a serious determination of beginning the new year with resolution and new behavior and with the full belief that they will expire and wipe away all of their faults."

If resolutions are limited in their usefulness why do we make them, focusing on behaviors we will not do as opposed to positive actions. Can we phrase our resolutions in the positive, choosing something that aligns with our values or creates happiness for you and others? Having a plan and setting achievable goals will contribute to you being in the 10% who see them through.

So, if you have read this and still want to create and keep resolutions, which do not have to start on January 1, and what will help you succeed?

Here are some suggestions:

- Choose things that you can do to make yourself feel better or become a better person. Bring joy to yourself and others.
- Select resolutions that are fluid, adaptable, and amenable to change. What might have been good for you on the first day might not be the same weeks or months later.
- Do not chastise or lambaste yourself if you have a misstep—just restart the timer and keep going.
- How do you create resolutions that have less of a chance to fail?
- Be specific. Do not set your expectations too high as you can change along the way.
- Own them. Choose them based on what you want to do and not what others think is best for you.
- Track your progress. Seeing something in writing is a powerful tool for reinforcement.
- Be accountable for your actions. Work with friends and family who will support and encourage you to keep going.
- Prepare. Set aside the time you need or the resources necessary to succeed.
- Know the "WHY." Why is this important to you, and the reason why you chose this activity.

Continued





# Resolutions: Yes or No? (Continued)

You might even want to use a formula for goal achievement and apply it to your resolutions. After all, aren't they just another way to reach your goals by embedding them into a holiday.

The S.U.C.C.E.S.S. goal formula can help you craft your resolutions in a thoughtful way, the way we as physicians address most issues in our lives. Using this formula, one can create goals that are personal, inspire action, able to commit to, concrete, revisited, and shared with others in order to generate support.

As I researched this topic, I realized why I stopped making resolutions a long time ago. They were everything I read they should not be. So, this year, albeit not January 1, I am going to make "New Year's Promises" to myself. I look forward to making changes by adding behaviors and activities to address my health and well-being while having fun along the way. I try to promote joy in myself and others without setting myself to fail.

Might I suggest:

- Reading one book a month for pure enjoyment.
- Call a friend you miss seeing or even those you see regularly at least once a week.
- Send cards and messages to let someone know you are thinking about them even if it is not a holiday.
- Take more naps.
- Give more hugs.
- Make a new friend.
- Try a new hobby.

- Take a break from social media, unless of course you are on the ACOI [Instagram](#), [Facebook](#) or [Twitter](#)!

Until next month....

**Joanne Kaiser-Smith, DO, FACOI**  
**[president@acoi.org](mailto:president@acoi.org)**

## Wellness Corner

ACOI members identify dealing with stressors as the most critical issue facing them today. Each month we'll share an idea a member shared with us on how they work to promote their own wellness.

*"30 minute morning exercise creates physical calm and good sleep. Playing saxophone in evenings with recordings or band mates helps keep craziness of modern medicine in perspective. A spiritual hour in church once a week helps me process all the loss and death I see daily."*

**Have a suggestion of your own?**  
**Email us at [katie@acoi.org](mailto:katie@acoi.org).**





## McCarthy Dealmaking Spells Uncertainty for Annual Spending Bills

The 118th Congress has convened and the cajoling that occurred during the election of Representative Kevin McCarthy (R-CA) as Speaker has left the House with handshake deals that, in concert with new House rules, will make it extraordinarily difficult for the House to fulfill its annual obligation to pass 12 fiscal year 2024 spending bills on time.

McCarthy has agreed that each spending bill will be considered on the floor individually, rather than packaged together, and the newly adopted rules restore the “[Holman Rule](#),” which will allow members to offer amendments to appropriations bills that could cut a specific program or reduce funding for federal agency salaries. Speaker McCarthy also reportedly agreed to cap fiscal 2024 federal funding at 2022 levels, although there are differing opinions among House Republicans as to the exact terms of the agreement.

These rule changes and side agreements will likely lead to House spending bills that drastically cut domestic spending—reductions the Democratic-controlled Senate will never accept, leading to protracted negotiations that are likely to extend beyond the start of the new fiscal year on October 1, 2023.

According to *Politico*, House Appropriations Ranking Member Rosa DeLauro (D-CT) said Speaker McCarthy’s “backroom deal... kills the 2024 government funding process before it has even started, all but guaranteeing a [government] shutdown.”

The new order in the House will make it difficult for the health care community to win increases for things like medical research and public health and prevention initiatives, and may require advocacy to stop cuts to existing health and research programs.

## ACOI Seeks Member Feedback on Advocacy Priorities

ACOI is in the process of developing a national advocacy platform so it can address issues most important to its members. ACOI members are being asked to rate the level of importance ACOI should place on eight topic areas ranging from physician payment and scope of practice to population health and prevention. Survey responses will guide the ACOI Government Affairs Committee as it establishes the College’s advocacy priorities for the next two years.

[Take the Survey](#)

## Two Percent Medicare Fee Cut Takes Effect

Congress ended 2022 with the passage of an omnibus spending bill that provided partial relief from a scheduled 2023 4.5 percent physician fee cut.

Congress provided a 2.5 percent positive adjustment to the 2023 conversion factor, resulting in a conversion factor of \$33.8872—2 percent less than the 2022 conversion factor of \$34.6062.

On December 22, ACOI [alerted](#) its members to Congress’ end-of-year spending deal that also included an extension through 2024 of Medicare [telehealth flexibilities](#) put in place during the COVID-19 pandemic. The two-year extension also applies to certain telehealth services furnished by audio-only (HCPCS codes 99241–99275, 99201–99215, 90804–90809, and 90862).

Relatedly, ACOI recently joined numerous medical societies in sending a [letter](#) to all Senate and House lawmakers asking for congressional hearings and collaboration with stakeholders to explore long-term solutions to the broken Medicare physician payment system.

## CMS Says Guardrails Needed for MA Plan Utilization Management

The Centers for Medicare & Medicaid Services (CMS) has released a proposed rule that revises regulations that govern Medicare Advantage (MA) and Medicare prescription drug benefits (Part D), including those related to prior authorization (PA) and reviews of medical necessity. A number of proposals in the rule related to PA would codify and clarify existing regulations in light of findings from an April 2022 Office of the Inspector General report that found cases of inappropriate prior authorization denials by MA plans.

*Continued*





# Government RELATIONS *(Continued)*



CMS also proposes to require that initial reviews of medical necessity be conducted by reviewers with expertise specific to the services being subject to a medical necessity determination request.

If this change is finalized, the same standard of expertise appropriate for a specific service would be applied at the initial determination and at the reconsideration level. ACOI is preparing comments in response to the proposals.

## Health Plans Cannot Force Providers to Accept Virtual Credit Cards

Last year, the Centers for Medicare and Medicaid Services (CMS) released guidance clarifying that while health plans are permitted to use virtual credit cards (VCCs) for physician payments, health plans may not force physicians to accept VCCs. If a physician requests to receive payment via the HIPAA-mandated standard EFT/ERA transaction, then the health plan must comply. VCCs are accompanied by hefty processing fees incurred by the physician. ACOI members wanting to learn more are encouraged to read CMS' March 2022 [guidance document](#).

## Physicians Can Still Apply for MIPS Exception

Physicians impacted by the ongoing COVID-19 public health emergency have until 8:00 PM ET, Friday, March 3, 2023, to apply for an "Extreme and Uncontrollable Circumstances" (EUC) exception to meeting Merit-based Incentive Payment System (MIPS) program requirements for the 2022 performance year.

The MIPS EUC exception application allows individual eligible clinicians/physicians, groups, virtual groups, and alternative payment model entities impacted by COVID-19 to request re-weighting for any or all MIPS performance categories.

Learn more about the Quality Payment Program exceptions and application process [here](#).

## Washington Tidbit

### Doing the Work of the People in the Light of Day

If you want to see what the Senate is doing when the deliberative body is in session all one has to do is turn to C-SPAN. However, the work of the Senate was not always so visible to the public. In fact, it was the practice of the Senate to conduct its business behind closed doors until a sticky situation arose in Philadelphia.

On February 11, 1794, while meeting at Congress Hall in Philadelphia the Senate was confronted with the question of whether an elected senator from Pennsylvania had been a US citizen for nine years, as required by the Constitution. To avoid the appearance of impropriety the case was conducted in public view. On February 28, 1794, a two-vote majority denied Swiss-born Albert Gallatin his seat in the Senate. Following this action, the Senate permanently opened its proceedings to the public following the construction of a gallery. You can learn more by visiting [www.senate.gov](http://www.senate.gov).

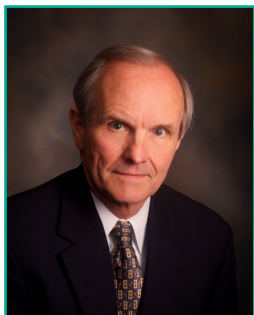




# #DOsDoingGood: A Life of Practicing, Teaching, Leading, and Giving Back

## Dr. Gary Slick Retires After Nearly Four Decades

by Gina Kilker



For nearly 40 years, ACOI Past President, Gary Slick, DO, MACOI, balanced his love for medicine and academia, and along the way, made his mark as a leader in the osteopathic internal medicine profession. His deep involvement in both education and clinical practice benefited both the osteopathic

internal medicine residents that he mentored and his colleagues that he worked alongside as his involvement grew throughout the years within both worlds.

In December, Dr. Slick retired after serving most recently in various positions at Oklahoma State University, including as Medical Director and Chief Academic Officer for the Osteopathic Medical Education Consortium of Oklahoma (OMECO) and Professor of Medicine for the Oklahoma State University College of Osteopathic Medicine. His tenure at OSU began in 2005 when he was appointed Vice President for Academic Affairs/Senior Associate Dean for OSU's Center for Health Sciences.

### Influencing the Direction of Osteopathic Internal Medicine Education

Over the years, Dr. Slick's name has become synonymous with the American Osteopathic Board of Internal Medicine (AOBIM). During his tenure, his influence as the leader for the premiere organization for certification for internists and sub-specialists dramatically shaped the organization.

He was appointed Executive Director of the AOBIM in 1988 and went on to lead the organization for 28 years.

Throughout his career, Dr. Slick exuded a pattern of personal commitment wherever he became involved. He spent over four decades with the National Board of Osteopathic Medical Examiners (NBOME), an independent, not-for-profit organization that provides competency assessments for osteopathic medical licensure and related health care professions. He served as committee chair of numerous NBOME Board and testing committees, including as the inaugural Chair of the COMAT internal medicine examination, assessments, a clerkship evaluation used at nearly every college of osteopathic medicine in the nation. He was a member of the NBOME Board of Directors since 2005 and was installed as Board Chair in 2015.

In 1980 he was the first recipient of the Medical Residents' Award for Outstanding Teaching from the Detroit Osteopathic Hospital. Since then, his career has been dotted with recognitions ranging from organizations, including the Chicago College of Osteopathic Medicine, the American Association Colleges of Osteopathic Medicine, the American Osteopathic Association, the American College of Physicians, and the ACOI.

## A Timeline of Service to the ACOI

From serving on committees and the board to speaking at ACOI meetings, Dr. Slick dedicated time to the ACOI for nearly 40 years. Thank you, Dr. Slick, for a lifetime of service.

**1979-1982** — Chairman, Nephrology Section

**1982-1988** — Council on Education & Evaluation, Executive Committee Member

**1983-1987** — Credentials Committee

**1987-1995** — Board of Directors, Executive Committee

**1998-1991** - Constitution and Bylaws Committee

**1991-1992** — Secretary-Treasurer

**1992-1993** — President Elect

**1993-1994** — President

**1994-1995** — Past President

**2000-2014** — Council on Education and Evaluation

**2002-2020** — Honors and Awards Committee

Continued





# #DOsDoingGood: A Life of Practicing, Teaching, Leading, and Giving Back

(Continued)

For his service, in 2019, he received the highest award granted by the National Board of Osteopathic Examiners, the NBOME Santucci Award. According to the NBOME, it is “awarded only to an individual who has distinguished him or herself by their sustained outstanding contributions to the mission of the NBOME, protecting the public via competency assessment.”

As a nephrologist he practiced at the Detroit Osteopathic Hospital, the Oklahoma Osteopathic Hospital in Tulsa, and St. James Hospital & Health Centers in Olympia Fields, Illinois. Yet, even as he retires, many still think of him as one of the most influential people to shape osteopathic education. He said that for him, it was not just about the career fulfillment he received from being able to dually dip his toe in the waters of academia and clinical work, but also being the son of an osteopathic internist gave him the distinctive ability to be up close and personal to observe the profession from an early age.

## Dr. Slick's Awards & Distinctions from the ACOI

**1985** - Fellow (FACOI)

**1986** - Distinguished Service Award

**1999** - Internist of the Year

**2001** - Master Fellow (MACOI)

**2016** - Presidential Citation for Lifelong Service

“What I enjoyed the most during my career, and felt the most rewards from, was working in the trenches as a teaching attending physician in the Nephrology Division of the Department of Internal Medicine at the Detroit Osteopathic Hospital. I fondly and very vividly recall the outstanding years of being around the house staff rounding with interns and residents during my eight years there,” he said.

His love of working with the interns and residents extended to his work for the Accreditation Council for Graduate Medical Education as is evidenced by his instrumental involvement on the Board of Directors from 2014 through 2021. He concurrently served on the Finance Committee, the Committee on Requirements, the Policies and Procedures Advisory Committee, the ACGME Underserved Work Group and the Awards Committee. In 2021, even as he was preparing for retirement, he served on the Pediatric Cardiac Anesthesiology Ad Hoc Committee.

His advice for young residents and physicians? “Follow the path that is there for you. And if you choose to get involved with organizations above and beyond your daily work just participating counts! It’s surprising that of the various committees and councils that I was on, I feel that although I didn’t do anything extra, people recognized my participation. It taught me that just by being an active participant, the rewards will come!”

He agrees that physicians today may find it harder to volunteer outside of their normal career responsibilities because of the non-patient care demands that eat into physicians’ days.

Yet, he argues that regardless of the additional load, the satisfaction of the profession remains unchanged. “If one can just not be distracted by all the external things and just stick to the goal of providing the best quality care, young physicians are going to continue to do well.”

## Reflecting on the ACOI

“I am very thankful that I’ve had a lot of people who have supported me over the years and for the friendships that I’ve developed through the ACOI. I always looked forward to attending the ACOI Convention each year, mainly for two purposes. First, I am always impressed by the high quality of the program. Secondly, the greatest satisfaction of attending is the privilege of renewing acquaintances with former residents.”

“I still am a firm believer in the personal, non-monetary rewards of building relationships with your patients and gaining the satisfaction of knowing that patients appreciate what you do for them. If you put forward that your primary objective is that of serving them, your patients will see that their safety and well-being come first.”





# A Letter from the Wellness Committee

by Angela J. De Hamer, DO, FACOI



When considering wellness as we start the year, let's consider our purpose, our calling, what propelled us into medicine, and caring for others in the first place. What does that place feel like for you? What are the smells, sounds, and sights?

As an exercise, imagine a crisp spring wind over delicate six-year-old cheeks. A child sits excitedly on a flexible rubberized platform. Hands are tightly grasping chains, legs pumping. Each pump giving way to even greater and greater heights. "Lean forward. Pull legs in. Soaring, lean back, and thrust legs out." This mantra is repeated over and over to soar higher and higher. You've known that feeling—that place in the rhythm of swinging, just before gravity takes over the mass of our bodies and the rubber seat just below. It is that place of purity, of excitement, of elation, and "top of the world" soaring. We feel that sense of anticipation swirling in our stomachs with overwhelming elation. This is a place where time stands still, where fullness of heart, soul, and body experience are actualized.

Maybe we had this awareness of purpose and elation with our first patient encounter, our first scrub in, getting that diagnosis correct, or supporting a family. Whatever that moment was for each of us, it is known and clear and, if we allow ourselves, teleports us to the place where the calling and purpose of medicine returns to its unadulterated state.

We return to that place of clarity as a means of pushing ourselves over and over, mustering through and along the arduous trail of medical training, fueling us through the sacrifices felt and known deeply by the journey of caring for others. This is the place of calling and purpose, which moves our proverbial needle forward, sustaining us.

The beauty of this space of purpose, refueling, and healing is not confined to medical care. How we do one thing is how we do all things, and I would challenge each of us to explore, know, and pursue these other spaces of calling and "top of the world" soaring. For me, it is making things with my hands. My earliest memories are making, painting, building, and creating little worlds. Where is this place for you? Hint: it is the place where time isn't perceived, our purest knowing is realized, our cups are full, and the swing seats are at their fulcrum of height and tension. The only realization of time is the number of marks scrawled across paper and soreness from sitting in a worn wooden chair—five minutes as five hours and five hours as five minutes. Studies have explored this place of high performance and joy without perceiving time. Diving into our joy and purpose allows gratitude and optimism to increase, and anxiety and worries are minimized. Gratitude and fear are not able to exist simultaneously on fMRI or in our realities. Our neurobiology and neurochemistry simply do not allow for this.

The place of opportunity to explore our calling once again, where some of our stressors do not overwhelm, is that place of joy and purpose. This is a place where we perform with high clarity and performance.

This is the place where we can love and see other's needs. Then, will we have the emotional bandwidth to begin to acknowledge the needs of others and possibly do something about some of those needs. Maybe, nurturing this part of ourselves, we may be able to nurture others, renewing our joy in our calling to medicine.

So, I ask you again—what is this place for you? Where is your place of encouragement, full-hearted activity, and awareness of beauty? How do you refuel, no matter the plight of the day? If this naming is a challenge, consider a study asking participants to categorize all the activities of the day into one of four categories: one: things we do and enjoy with or without pay, two: things we do and enjoy but must do, three: things we must do but we don't enjoy, or four: things we don't enjoy and don't even need to do. The fact that a fourth category exists, tells all of us, we do have time and space in our days to take back and enhance our joy and improve our emotional and mental bandwidth. I challenge each of us to consider how we are fueled and where our opportunities to shave energy depleting, unnecessary tasks from our lives will give way to being able to reorient ourselves with purpose. In doing so, maybe, just maybe, we can improve our mindfulness, increasing our mental and emotional flexibility. This place of flow will allow us to be more present for ourselves, our family and loved ones, our colleagues, and our patients. As we start 2023, I encourage each of us to soar "top of the world" in our calling and purpose; let's operate from a place of abundance in the coming year.



# Check out the Latest Docs off the Clock

## Leveraging Informatics to Improve Outcomes: A conversation with Charlene LePane, DO, FACOI, MSPH



In the latest ACOI podcast series, Docs off the Clock, Charlene LePane, DO, FACOI, MSPH, discusses healthcare informatics and its significance in collecting and utilizing data to improve patient outcomes. During the episode, Dr.

LePane, a specialist in gastroenterology, discusses

how healthcare informatics has emerged and evolved to become an essential ingredient in managing patient care today. She reviews how both the 2010 Affordable Care Act, and the 2009 Meaningful Use Act helped the field of healthcare informatics gain prominence and how its use today also plays a vital role in enabling telehealth.

According to Dr. LePane, there are many components that comprise healthcare informatics, such as health monitoring devices (glucometers, wearables, etc.), patient health portals, and electronic medical records (EMR) software. Dr. LePane explains that by linking information technology and communications with healthcare, physicians can gather better data to improve their understanding of their patients' healthcare profile.

Dr. LePane explains why it is important for physicians to gain an understanding of healthcare informatics since it not only has potential to positively impact patients and their providers, but also the entire healthcare system.

She believes that once physicians understand how to leverage technology and data, the more efficient they become and the more capable they are in recognizing errors.

Tune in to Dr. LePane's podcast to find out how to get more information on using healthcare informatics as an essential care tool to improve patient outcomes.



### What is Docs off the Clock?

Discover the ACOI's podcast series where our members and other experts share their knowledge on a variety of topics relevant for physicians today. Made for busy doctors who may only have a few minutes to listen in the car, on a jog, or even on a lunch break between patients, each podcast episode is designed to enrich members with information especially for them. Spend a few minutes with and get some quick tips from our guests who share their thoughts on subjects like practice management, physician wellness, specialty medicine geared toward internists, updates on the COVID-19 pandemic, CME attainment, and more. It will soon become your favorite podcast!



# ACOI Member News



## ACOI Banner Reaches New Heights

Patrick J. Allen, DO, recently completed one of the world's most iconic high-altitude treks to Everest Base Camp at 17,500 feet. He proudly displayed the ACOI banner upon arrival. The trek took approximately two weeks and covered 80 miles of trails

in the Himalayas escorted by a Sherpa guide. The trek begins in Kathmandu with a 45-minute flight to Lukla. From there, it was all on foot through the villages of Phakding, Monjo, Namche Bazaar, Tengboche, Dingboche, Lobuche, Gorak Shep, and then arriving at the Everest Base Camp. Dr. Allen reports that it was a truly awe-inspiring journey.

## Geraldine T. O'Shea, DO, Honored with NBOME Santucci Award

The National Board of Osteopathic Medical Examiners (NBOME) honored Geraldine T. O'Shea, DO, with its highest honor, the Santucci Award. "Dr. O'Shea served her tenure at the helm of the NBOME Board of Directors almost entirely during the worst period of the COVID-19 pandemic," said Richard J. LaBaere II, DO, MPH, board chair. "Her professionalism, sense of humor, and wisdom were instrumental to Board members and Staff during such unprecedented circumstances." Congratulations Dr. O'Shea!



## ACOI Member Takes on New Leadership Role

Shawn Cannon, DO, FACOI, recently started a new role as Founding Dean of the proposed D'Youville University College of Osteopathic Medicine seeking accreditation, in Buffalo, New York. Congratulations!

## In Memoriam

David F. Hitzeman, DO, MACOI, 75, passed away peacefully on December 14th surrounded by his wife and family. Dr. Hitzeman began his practice in general medicine in Wellington, Kansas. It didn't take long for him to realize that he wanted more than general medicine. After one year he began residency at Oklahoma Osteopathic Hospital, where he continued to practice internal medicine for over 40 years until he retired. Dr. Hitzeman served on the ACOI Board of Directors and on many committees. He was named ACOI's Internist of the Year in 2012 and received ACOI's highest honor, the Distinguished Service Award, in recognition of a lifetime of service and exemplary dedication to the profession in 2022.



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## Upcoming ACOI Events

Save the Date!

### ACOI 2023 Virtual Spring Meetings

#### 2023 Internal Medicine Board Review Course

May 9-13, 2023

Virtual

[Add to Outlook](#) | [Add to Apple Calendar](#) | [Add to Google Calendar](#)

#### 2023 Clinical Challenges in Hospital Medicine

May 10-13, 2023

Virtual

[Add to Outlook](#) | [Add to Apple Calendar](#) | [Add to Google Calendar](#)

#### 2023 Subspecialty Focused Meeting

May 11-13, 2023

Virtual

[Add to Outlook](#) | [Add to Apple Calendar](#) | [Add to Google Calendar](#)

### ACOI 2023 October 11-15 Tampa, FL

#### 2023 Annual Convention & Scientific Sessions

October 11-15

Tampa Marriott Waterside Hotel, Tampa, FL

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#### 2024 Annual Convention & Scientific Sessions

October 30-November 3

Kierland Resort, Scottsdale, AZ

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#### 2025 Annual Convention & Scientific Sessions

October 8-12

JW Marriott Marco Island Resort, Marco Island, FL

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## 2023 Certifying Examination

### Dates & Deadlines

#### AOBIM Initial Certification Exam - Early Entry

Remote Online Proctoring

March 1-3, 2023

Application Deadline: Feb. 1, 2022

#### AOBIM Initial Certification Exam

Remote Online Proctoring

September 20-22, 2023

First Application Deadline: July 20, 2023

Final Application Deadline: August 20, 2023

Application materials are available on the AOBIM's [website](#). Contact the AOBIM at [admin@aobim.org](mailto:admin@aobim.org) for additional information.

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

Information on any meeting listed here may be obtained from our website at [acoi.org](http://acoi.org).



The ACOI wishes to thank all Members for their annual support for the College. Their generous support is of the utmost importance as we seek to maintain an osteopathic approach to internal medicine for future generations of patients.

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Osteopathic internists are practicing Principle-Centered Medicine™ and thriving in their personal and professional lives.

## Mission

As the premier community for osteopathic internists, ACOI provides leadership, networking, and education to help our members be successful and stay true to why they pursued medicine.

[Visit our website](#) to learn more.

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