



BULLETIN OF INFORMATION

Updated January 31, 2016

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36

COMVEX Bulletin of Information 2016

All candidates are required to read and be familiar with the contents of this Bulletin of Information prior to registering for and scheduling a COMVEX examination.

The policies, rules, procedures and obligations of candidates set forth in this Bulletin of Information are legally binding upon all candidates and will be applied and interpreted by the NBOME at its sole discretion. A decision by the NBOME regarding the application or interpretation of these rules and procedures is final. The NBOME may amend, modify and/or supplement these policies, rules, procedures and obligations of candidates at any time and from time to time without the consent of any candidate. All candidates will be legally bound to all changes published on the NBOME website.

Inquiries should be directed to:

National Board of Osteopathic Medical Examiners, Inc.

Client Services

Toll-free: (866) 479-6828

Hours: 7:00 am – 7:00 pm (EasternTime) Monday – Friday

This Bulletin of Information is published at the NBOME website at www.nbome.org and can be downloaded from the NBOME home page.

Candidates may e-mail requests for additional information to clientservices@nbome.org.

Registration and scheduling can be completed online in accordance with the requirements set out in this Bulletin of Information.

1
2
3
4
5
6
7
8
9
10
11
12
13
14

COMVEX Bulletin of Information

INTRODUCTION

Purpose

7 The Comprehensive Osteopathic Medical Variable Purpose Examination for the United States
8 of America (COMVEX) was developed for osteopathic physicians who hold or have held a
9 valid license to practice osteopathic medicine in the United States. The purpose of COMVEX
10 is to assist state licensing boards by providing an evaluation examination for examinees
11 required or sponsored by a state medical board to demonstrate current medical knowledge
12 under standardized conditions. For example, the COMVEX may be appropriate under any of
13 the following circumstances:

- 15 • An osteopathic physician was originally licensed by an examination devoid of osteopathic
16 content and is now applying for a license in a state that requires that an osteopathic
17 physician take an osteopathic examination.
- 18 • An osteopathic physician is applying for licensure in a state that imposes a time limit
19 (such as being examined within ten years) and has not been tested by a licensing board
20 or a certifying board within that time.
- 21 • An osteopathic physician is requesting reinstatement of a license following an
22 interruption in his or her career.
- 23 • A tenured osteopathic physician must demonstrate basic osteopathic medical
24 competence.

25
26 The COMVEX examination may only be taken if a state licensing board or other
27 governmental licensing authority (state board) requests that the examinee be administered
28 the examination or sponsors the examinee to take the examination.

History and Overview

30 The COMVEX examination was created by the National Board of Osteopathic Medical
31 Examiners, Inc. (NBOME), and was first administered in 1998. The first computer-based
32 version of this examination was available in September of 2006.

34
35 COMVEX is integrated into the COMLEX-USA licensing series by incorporating a similar
36 examination design that focuses on the actual practice patterns of the generalist osteopathic
37 physician. The examination is structured and coordinated along two axes, or dimensions.
38 Dimension 1 lists different types of patient encounters – based upon the various reasons
39 patients present to physicians (e.g., symptoms, signs, physical disturbances). Dimension 2
40 details six general physician skill areas that frame physician/patient encounters in the health
41 care setting. Using the COMVEX outline as a coordinate system, each test item can be
42 plotted by its intersection on the two axes (Dimensions 1 and 2).

43
44 The blueprint and outline, and sample test item types, for the COMVEX examination are
45 described below under EXAMINATION CONTENT.

46
47 The members of the COMVEX construction and review committees are practicing osteopathic
48 clinicians and/or osteopathic medical school faculty members. The COMVEX committee
49 members are chosen for their expertise in their respective fields of medical practice.

1 All items on the COMVEX exams are carefully selected, reviewed, and pre-tested for their
2 appropriateness and discrimination ability. All test materials associated with COMVEX
3 examinations are copyrighted and are the property of the NBOME. The COMVEX test
4 materials may not be reproduced, distributed, or used in any manner or form without prior
5 express written authorization of the NBOME.

6 7 8 GENERAL INFORMATION

9 10 **Eligibility**

11 Eligibility to take a COMVEX examination is determined by the state board requesting or
12 sponsoring the examinee taking the examination. Individual state boards may provide
13 different criteria under which COMVEX may be used. Please refer to the web site of the
14 Federation of State Medical Boards, www.fsmb.org (State Medical Information – Board
15 Directory), for a listing of all osteopathic and composite boards in the United States and
16 Guam.

17
18 An application for the COMVEX is available at the NBOME website, www.nbome.org, along
19 with fee structures and other information.

20
21 COMVEX is administered only at the direction of the state boards. Interested applicants must
22 contact the appropriate state board directly to begin the application process. After the
23 examinee has obtained the approval of a state board requesting or sponsoring the
24 examination and the name and contact information for that state board, the examinee may
25 download a COMVEX application form from the NBOME.

26 27 **Test Accommodation Requests**

28 The Americans with Disabilities Act as amended (ADA) requires the NBOME to provide
29 appropriate and reasonable accommodations for “persons with disabilities” as that term is
30 defined by law.

31
32 If the examinee is a “person with disabilities” defined by law, he or she should contact the
33 requesting or sponsoring state board for approval of a reasonable test accommodation in
34 connection with the administration of the COMVEX examination.

35 The term “persons with disabilities” for purposes of the ADA includes a person who has a
36 physical or mental impairment that substantially limits one or more major life activities of
37 that individual, as compared to most people in the general population.

38 39 **Testing Dates/Sites**

40 COMVEX examinations are delivered at more than 300 test centers located within all 50
41 states of the United States. The exact location of test centers and availability of the sites for
42 the test dates can be viewed after registering for the examination.

43 44 **Re-examination**

45 A COMVEX examination will not be administered to the same examinee more than once
46 within any 90-day period.

47 48 **Score/Status Reporting**

49 COMVEX scores are released to the state board approximately 15 business days following
50 the examination administration. Although the passing requirements for COMVEX are
51 established by the requesting or sponsoring state board and are subject to variation, the

1 NBOME will report whether the examinee passed or failed the COMVEX examination based
2 upon a minimum passing score recommended by the NBOME. An examinee profile
3 graphically depicting the examinee's performance will also be supplied to the state board or
4 authorized designee with the COMVEX results.

6 **Examination Conduct/Confidentiality**

7 Any conduct of an examinee in connection with the administration of a COMVEX examination
8 deemed irregular conduct by the NBOME is taken very seriously, and may result in the
9 examination being voided and not being scored, prohibition of the examinee from taking any
10 further examination administered by the NBOME, and/or civil or other action against the
11 examinee to the fullest extent permitted by law.

12
13 The examinee must also maintain in strict confidence all test items and other confidential
14 information included in the COMVEX examination, both during and after the administration
15 of the examination. Failure to maintain the confidentiality of the examination may
16 compromise the integrity and security of the COMVEX examination and will be considered
17 irregular conduct and will subject the examinee to appropriate sanctions and/or damages.

18
19 Irregular conduct includes any behavior on the part of any examinee whose conduct violates
20 the integrity or security of the examination or who exhibits behavior that is disruptive to the
21 administration of the examination. Verbal or physical abuse of the proctor, any agent of the
22 NBOME or other examinees, and refusal to provide proper ID or permit photo documentation
23 for ID verification during the check-in is considered irregular conduct. Examinees must abide
24 by all policies of the NBOME and the testing vendor, and failure to do so may be considered
25 irregular conduct.

26
27 Examinees may not bring into the testing area any notes, texts, or other items of personal
28 property relating in any manner to the examination or its content. Violation of this
29 prohibition is considered irregular conduct. Examinees must place all such personal property
30 in the secure lockers provided at the test centers. Likewise, removing scrap paper or the
31 white board provided by the test center from the testing area would constitute irregular
32 conduct. Examinees are also advised that copying, reproducing, discussing, reporting or
33 recording test items or test content, in addition to being a violation of security that may
34 compromise the integrity of the examination and result in the imposition of sanctions or
35 damage, may result in violation of copyright laws.

36
37 Examinees are under both proctor and electronic surveillance during the administration of all
38 NBOME-administered examinations.

39
40 Any report of irregular conduct will be investigated by the NBOME. Whether irregular
41 conduct occurred in a particular situation is to be determined by the NBOME in its sole
42 discretion, and all decisions of the NBOME are final and binding upon the examinee and the
43 requesting or sponsoring state board.

44 **Contact Information**

45 Inquiries regarding COMVEX should be directed to:

46
47
48 National Board of Osteopathic Medical Examiners, Inc.
49 Attn: Client Services
50 8765 W. Higgins Road, Suite 200
51 Chicago, IL 60631-4174

1 Phone (866) 479-6828

2 Fax (773) 714-0631

3
4 Office hours are 7:00 a.m. – 7:00 p.m. (Eastern Time) Monday through Friday.

5
6 The NBOME home page is located at www.nbome.org.

7
8 Examinees may contact the NBOME at clientservices@nbome.org for further information
9 regarding the COMVEX examination.

10 11 12 REGISTRATION INFORMATION

13 14 **How to Register**

15 An eligible examinee must register and schedule the COMVEX examination through the
16 NBOME’s Client Services department. After being approved by a state board, an examinee
17 may download an application form from the NBOME website at www.nbome.org. Examinee
18 applicants are normally contacted with 10 business days upon receipt of the completed
19 application.

20
21 An examinee should select and schedule a specific examination date and test center location
22 at least 90 days before a specific test date in order to increase the likelihood that he or she
23 will obtain the date and test site where the examinee desires to test.

24
25 A COMVEX examination must be scheduled for testing more than five days before the
26 scheduled test date. **An examinee will not be permitted to schedule or reschedule a
27 COMVEX examination within five days before a desired test date.**

28 29 **Scheduling Confirmation**

30 After selection of an examination date, the examinee will receive a confirmation page via
31 email. The confirmation page includes a confirmation number for confirming the scheduled
32 examination on the test vendor website, and if needed, rescheduling the examination.

33 34 **Canceled or Missed Scheduled Examination**

35 An examinee may cancel and reschedule a scheduled COMVEX examination online at the
36 NBOME website (www.nbome.org) only in accordance with the following:

37
38 Canceling at Least 30 Days Before Scheduled Date An examinee may cancel and/or
39 reschedule a scheduled examination at least 30 days before the scheduled
40 examination without incurring any rescheduling fee to reschedule the examination.

41
42 Canceling Less Than 30 Days and 5 Days or More Days Before Scheduled Date An
43 examinee may cancel and/or reschedule a scheduled examination within 30 days but
44 more than five days before a scheduled examination but must pay a rescheduling fee
45 of \$125.00 to reschedule the examination.

46 Canceling Less Than 5 Days Before Scheduled Date An examinee may cancel a
47 scheduled examination within five days before a scheduled examination (but no later
48 than noon of the day before the start of the scheduled examination) but must pay a
49 rescheduling fee of \$250.00 to reschedule the examination.*

50

1 Failure to Timely Cancel or Show for Examination If a examinee fails to show at the
2 scheduled time and place for an examination (or to cancel his or her scheduled
3 examination at least by noon of the day before the scheduled test date), the
4 examinee may reschedule the examination but must pay a rescheduling fee of
5 \$350.00.*
6

7 *An examinee who cancels an examination within the 5-day period before the
8 scheduled examination or fails to show for his or her scheduled examination may not
9 reschedule a new test date until after the missed scheduled examination is
10 administered by the NBOME.
11

12
13 The rescheduling fee must be paid when the canceled or missed examination is rescheduled.
14

15 **The examinee must contact the NBOME Client Services department to reschedule**
16 **a canceled or missed examination no later than 30 days following the**
17 **administration of the canceled or missed examination. If an examinee chooses**
18 **not to reschedule the canceled or missed examination or does not act to**
19 **reschedule that examination prior to 30 days following the canceled or missed**
20 **examination, all fees paid by or for the examinee for the canceled or missed**
21 **examination will be forfeited and the full registration fee must be paid to**
22 **reschedule the canceled or missed examination.**
23

24 A cancellation or rescheduling is not effective until received in writing. Rescheduling of an
25 examination is subject to the availability of the testing center.
26

27 If a examinee cancels and reschedules a scheduled examination, and submits to the NBOME
28 a written request for waiver of the rescheduling fee no later than 30 days following the
29 administration of the canceled examination, the NBOME in its sole discretion, for good cause
30 shown, may waive up to 50% of the rescheduling fee. The examinee shall include with any
31 such request for waiver a written statement of the reasons for the request and shall provide
32 to the NBOME all documentation requested by the NBOME before any such request will be
33 considered. When rescheduling the new examination date the examinee must pay the entire
34 rescheduling fee. Any portion of the rescheduling fee waived by the NBOME shall be credited
35 to the examinee's NBOME account for future examinations, if any.
36

37 38 TEST DAY

39 **Arrival Time**

40 On the scheduled examination date, examinees should arrive at the test center at least 30
41 minutes prior to the start of the examination. Examinees should check their confirmation
42 page for accurate start times. Start times at the test centers may vary.
43

44 **What to Bring to the Test Center**

45 Examinees must bring with them a government-issued picture ID, such as a license or
46 passport. Examinees should dress comfortably, as the testing may take the full day.
47 Examinees should bring corrective lenses or hearing aids if they are required for test taking.
48

49 Examinees are not permitted to bring food or drink into the testing area of the center. If an
50 examinee requires food or drink during the testing period, he or she may request an
51 unscheduled break. However, no additional time will be given for any unscheduled break.

1
2 Due to security regulations, examinees are not permitted to bring any personal property into
3 the testing area relating to the examination. During the check-in process, proctors will ask
4 examinees to place all such personal property in secure lockers, for which they will be given
5 keys. Items such as calculators, PDAs, cell phones, pagers, notebooks, reference materials,
6 and DVD and CD players are not permitted in the testing area and should be placed in the
7 secure lockers provided at the center. Examinees will be provided a pen or pencil and scrap
8 paper or a white board. Scrap paper used during the test will be collected and shredded.
9 Under no circumstance may any scrap paper or white board be removed from the testing
10 area.

11 **Computer Based Test/Allotted Time**

12 The COMVEX is a computer based test ("CBT") and consists of 400 items divided into eight
13 50-item sections. There is a morning and an afternoon test session, each consisting of four
14 sections. Examinees are allotted four hours for each four-section session.
15

16 **Break**

17 Following the 4-hour period allotted for the four sections of the morning test session,
18 examinees will be given a 40-minute break. The test time will stop and examinees will be
19 required to leave the testing area for the break period, if they choose to take the break. The
20 afternoon test session will begin promptly 40 minutes after the scheduled end time of the
21 morning test session.
22

23 Food will not be provided during the optional 40-minute break. Examinees are advised to
24 either bring their own food or be prepared to purchase food at restaurants in the proximity
25 of the test center. Examinees should check with the test center about the availability of food
26 services in their vicinity.
27

28 Snacks and drinks are not permitted in the testing area of the test center due to the risk of
29 equipment damage and the possibility of disturbing other examinees.
30

31 The 40-minute break is the only period during which the test time will stop. Any other break
32 will not result in additional test time. The examinee may take two additional 10-minute
33 breaks, one between sections 2 and 3 and one between sections 6 and 7. However, the test
34 time will continue to run during these optional 10-minute breaks.
35

36 TEST-TAKING EXPERIENCE

37 **The Waiting Room**

38 Typically the COMVEX testing experience begins when the examinee enters the waiting area
39 of a Prometric Testing Center. Examinees should be at the center and sign in at least 30
40 minutes in advance of the scheduled test time. The proctor will call the examinee when it is
41 time to begin the test.
42

43 **Check-in**

44 When the examinee is called by the proctor, the check-in process will begin. First, the
45 proctor will check the test taker's ID. Examinees are required to show two pieces of ID,
46 including either a driver's license or other government-issued picture IDs. As part of the
47 registration process, the COMVEX examinee will have had a digital image captured and sent
48 to the NBOME to verify the identity of the examinee. In addition, a biometric (finger print)
49 may be made at the time of check-in.
50

1 **The Testing Experience**

2 Examinees will be escorted to their designated workstation. Due to the length of the
3 COMVEX examination, examinees are provided with a scheduled mid-examination break of
4 40 minutes. During the scheduled break, the test time will stop. If an examinee must take a
5 break during the test, other than the scheduled break, the test time will continue.

6
7 Breaks are normally authorized to allow examinees to visit the restrooms or to provide an
8 opportunity to eat. Should an examinee have a question during the examination or require
9 an unscheduled break, he or she should simply raise a hand to attract the attention of the
10 proctor.

11
12 Examinees are reminded that the test has a 4-hour morning session and a 4-hour afternoon
13 session.

14
15
16 EXAMINATION CONTENT

17
18 **Blueprint of COMVEX Examination**

19 The blueprint for the COMVEX examination is the following:

20
21
22 Dimension 1

Topic	Percentage
Population Health Concepts and Patients with Presentations Related to Health Promotion, Chronic Disease Management, & Human Development	8-16%
Patients with Presentations Related to Digestion and Metabolism	4-10%
Patients with Presentations Related to Cognition, Behavior, Sensory & Central Nervous Systems, Substance Abuse, and Visceral and Sensory Pain	28-38%
Patients with Presentations Related to the Musculoskeletal System, including Somatic Pain	6-12%
Patients with Presentations Related to the Genitourinary System and Human Sexuality	3-8%
Patients with Presentations Related to Circulation and the Respiratory System	8-16%
Patients with Presentations Related to Thermoregulation	2-6%
Patients with Presentations Related to Trauma, Masses, Edema, Discharge, and the Skin, Hair, and Nails	8-16%
Patients with Presentations Related to Pregnancy, the Peripartum, and the Neonatal Period	3-8%

23
24
25 Dimension 2

Topic	Percentage
Health Promotion/Disease Prevention	3-6%
History & Physical Examination	22-26%

Diagnostic Technologies	13-17%
Management	35-43%
Scientific Understanding of Health & Disease Mechanisms	3-6%
Health Care Delivery Issues	8-12%

According to this two-dimensional structure, each test item measures a physician's capability to apply one of the six physician tasks to the resolution of a specific patient problem.

The structural/osteopathic component is integrated within the fabric of the entire examination. Osteopathic principles and practices (OPP) in the examination are not considered only applicable to musculoskeletal problems, but are applicable to human problems in all body systems with various symptoms. Approximately 15-20% of the exam is specifically OPP-related, with additional OPP content included within distractors throughout the exam.

Outline of Possible Examination Topics

The following is an outline of the topics that may be included in the COMVEX (*Note that the topics listed in the following outline are neither comprehensive nor mandatory*):

Dimension 1 – Patient Presentation

Population Health Concepts and Patients with Presentations Related to Health Promotion, Chronic Disease Management, and Human Development

Abnormal Findings

- Anemia
- Bacteriuria
- ECG Abnormalities
- Electrolyte Abnormalities
- Heart Sound Abnormalities
- Hepatitis
- Hyperlipidemia
- Hyperuricemia
- Lead Poisoning
- Proteinuria

Disease Detection & Monitoring

- AIDS/HIV
- Anemia
- Axial/Appendicular Skeletal Somatic Dysfunction
- Breast Cancer
- Cardiac/Ischemic Disease
- Colon Cancer
- Diabetes
- Gallbladder Dysfunction
- Gynecologic Cancer
- Hepatitis
- Hyperlipidemia
- Hypertension
- Immunologic Disorders
- Mental Retardation

- 1 Obesity
- 2 Osteoporosis
- 3 Other Cancer
- 4 Prostate Cancer
- 5 Scoliosis
- 6 Sexually Transmitted Disease, Known Contact
- 7 Substance Abuse
- 8 Tuberculosis
- 9 General Concepts
- 10 Anatomical Facts
- 11 Ethical Principles
- 12 Public Health Principles
- 13 Physiologic Processes
- 14 Aging Physiology
- 15 Developmental Milestones
- 16 Sexual Development
- 17 Services Rendered
- 18 Contraception
- 19 Exercise/Sports Work-Up
- 20 Genetic Screening
- 21 Physical Examination
- 22 Pre & Postoperative Care
- 23 Vaccinations Against Specific Diseases

24

25 **Patients with Presentations Related to Digestion and Metabolism**

- 26 Constipation
- 27 Diarrhea
- 28 Dysphagia/Feeding Problems/Odynophagia
- 29 Encopresis
- 30 Nausea & Vomiting
- 31 Weight Gain/Obesity
- 32 Weight Loss

33

34 **Patients with Presentations Related to Cognition, Behavior, Sensory & Central Nervous Systems, Substance Abuse, and Visceral and Sensory Pain**

- 35 Cognitive Difficulties
- 36 Anxiety
- 37 Behavioral Disturbances
- 38 Confusion/Disorientation
- 39 Dementia
- 40 Depression
- 41 Eating Disorders
- 42 Learning Difficulties
- 43 Life Adjustment
- 44 Suicidal Ideation
- 45
- 46 Consciousness Alterations
- 47 Amnesia
- 48 Brain Concussion
- 49 Coma
- 50 Delirium
- 51

- 1 Sleep Disturbances
- 2 Syncope
- 3 Fatigue & Weakness
- 4 Fatigue
- 5 Weakness
- 6 Sensory & CNS Difficulties
- 7 Dizziness/Vertigo
- 8 Hearing Disorders
- 9 Olfactory Disorders
- 10 Paralysis/Paresis
- 11 Paresthesia
- 12 Seizures
- 13 Speech Disorders
- 14 Tactile Disorders
- 15 Taste Disorders
- 16 Visual Disorders
- 17 Voluntary & Involuntary Abnormal Movements
- 18 Sensory Pain
- 19 Abdominal/Pelvic Pain
- 20 Anesthesia
- 21 Chest Pain
- 22 Ear Pain
- 23 Extremity Pain
- 24 Eye Pain
- 25 Face Pain
- 26 Genital Pain
- 27 Head Pain
- 28 Mouth Pain
- 29 Rectal Pain
- 30 Throat Pain
- 31 Substance Abuse
- 32 Alcohol Abuse
- 33 Controlled Substance Abuse
- 34 Non-Controlled Drug Abuse
- 35 Tobacco Abuse

Patients with Presentations Related to the Musculoskeletal System, including Somatic Pain

- 39 Muscular Pain
- 40 Back Pain
- 41 Joint Pain
- 42 Neck Pain
- 43 Musculoskeletal Difficulties
- 44 Fasciculations
- 45 Gait Disturbance/Falls
- 46 Muscle Spasms
- 47 Muscular Atrophy
- 48 Myofascial Pain
- 49 Spinal Deformities

1 **Patients with Presentations Related to the Genitourinary System and Human**
2 **Sexuality**

3 Anuria
4 Dyspareunia
5 Dysuria
6 Enuresis/Incontinence
7 Erectile Dysfunction
8 Infertility
9 Menstrual Disorders
10 Oliguria
11 Polyuria
12 Priapism
13 Pyuria, Non-Infectious

14 Urinary Hesitancy

15
16 **Patients with Presentations Related to Circulation and the Respiratory System**

17 Bleeding

18 Hematemesis
19 Hematochezia/Melena
20 Hematuria
21 Hemoptysis
22 Nasal Bleeding
23 Systemic Or Non-Defined
24 Transfusion Practices
25 Vaginal (Abnormal)

26 Respiratory Difficulties

27 Airway Obstruction
28 Cough
29 Dyspnea
30 Rate/Rhythm Abnormalities

31
32 **Patients with Presentations Related to Thermoregulation**

33 Fever
34 Hypothermia

35
36 **Patients with Presentations Related to Trauma, Masses, Edema, Discharge,**
37 **and the Skin, Hair, and Nails**

38 Discharge

39 Anal Discharge
40 Ear Discharge
41 Eye Discharge
42 Nasal Discharge
43 Nipple Discharge
44 Penile Discharge
45 Urethral Discharge
46 Vaginal Discharge

47 Masses & Edema

48 Abdominal Masses
49 Axillary Masses
50 Breast Masses
51 Chest/Lung Masses

- 1 Edema
- 2 Extremity Masses/Swelling
- 3 Head/Neck Masses/Swelling
- 4 Joint Masses/Swelling
- 5 Pelvic Masses
- 6 Rectal Masses/Swelling
- 7 Scrotal/Testicular Masses/Swelling
- 8 Skin, Nail & Hair Disorders
- 9 Alopecia
- 10 Cyanosis/Pallor/Pigmentation Disturbance
- 11 Gangrene
- 12 Jaundice
- 13 Lesions
- 14 Nail Disorders
- 15 Pruritus
- 16 Rash
- 17 Trauma
- 18 Burns
- 19 Child Abuse
- 20 Crush Injury/Syndrome
- 21 Domestic Abuse
- 22 Elder Abuse
- 23 Motor Vehicle Collisions
- 24 Multiple Trauma
- 25 Poisoning
- 26 Rape
- 27 Shock
- 28 Wounds

Patients with Presentations Related to Pregnancy, the Peripartum, and the Neonatal Period

- 32 Bleeding In Pregnancy
- 33 Labor & Delivery Process
- 34 Lactation
- 35 Neonatal Assessment
- 36 Neonatal Complications
- 37 Normal Obstetrics
- 38 Postpartum Infections
- 39 Pregnancy Complications

- 40
- 41
- 42
- 43
- 44
- 45
- 46

Dimension 2 – Physician Tasks

Health Promotion & Disease Prevention

- 48 Biostatistics & Epidemiology
- 49 Clinical Prevention
- 50 Disease Transmission Processes

1	Occupational & Environmental Medicine
2	
3	History & Physical Examination
4	Examination & Recognition
5	Gathering Patient Information
6	
7	Diagnostic Technologies
8	Electrophysiologic
9	Imaging
10	Laboratory
11	
12	Management
13	Complementary & Alternative Medicine
14	Consultation
15	End of Life
16	Inter-Disciplinary Teams
17	Osteopathic Manipulative Treatment (Common OMT techniques include
18	counterstrain, muscle energy, myofascial release, high velocity low amplitude
19	thrust, soft tissue, lymphatic technique, osteopathy in the cranial field,
20	articulatory techniques, balanced ligamentous tension, ligamentous articular
21	strain, facilitated positional release, Still technique, visceral technique,
22	Chapman reflexes, and trigger points)
23	Non-Pharmacological Medical
24	Pharmacological
25	Psychosocial
26	Rehabilitation
27	Surgical
28	
29	Scientific Understanding of Health & Disease Mechanisms
30	Anatomy
31	Biochemistry
32	Genetics
33	Immunology
34	Microbiology
35	Molecular & Cell Biology
36	Pathology
37	Pharmacology
38	Physiology
39	Health Care Delivery Issues
40	Health Care System Overview
41	Information Management & Technology
42	Medical Ethics
43	Medical Jurisprudence
44	Medical Management
45	
46	Patient Confidentiality
47	Physician-Patient Communication
48	Population-Based Care
49	Practice Management
50	Quality Measurement & Improvement

1 Teamwork & Collaboration

2
3 **Sample Item Types**

4
5 The following are sample test item types. Some items will be accompanied by pictorial
6 material (e.g., charts, graphs, slides, monitor strips, radiographs). Instructions on what type
7 of information to interpret from each visual will be included with each item accompanied by
8 such material.

9
10 "One-Best-Answer" Test Item Type

11
12 One-Best-Answer multiple-choice formats comprise the majority of the COMVEX exams. This
13 item type expresses an incomplete statement or asks a question. The item is followed by
14 five answer options, only one of which is most appropriate.

15
16 There are two types of one-best-answer items. One type is a single stand-alone item. The
17 other type uses two or more one-best-answer items following a case history. Examples of
18 both of these types follow:

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46

One-Best-Answer
(single item)

A 35-year-old female who underwent a cholecystectomy developed nausea and vomiting postoperatively due to a protracted ileus. Prior to surgery, her weight was normal for her age and height. She was basically in good health except for cholecystitis. Six days postoperatively, the patient remains unable to eat. Which of the following forms of nutritional support is most appropriate?

- (A) trace elements
- (B) nasogastric feeding tube
- (C) peripheral hyperalimentation
- (D) central hyperalimentation
- (E) fat-free enteral diet

KEY: C

One-Best-Answer
(case)

A 40-year-old male presents with the sudden onset of a severe headache localized toward the occiput and neck. There is an associated defect in vision along with unilateral numbness and weakness. Oral temperature is 37.5°C (99.5°F), the neck is stiff when bending forward, and Kernig and Brudzinski signs are present.

Which of the following should be performed first?

- (A) cerebral arteriography
- (B) CT scan of the head
- (C) complete skull radiographs
- (D) lumbar puncture
- (E) electroencephalography

KEY: B

The most likely diagnosis is

- (A) occipital brain tumor
- (B) subdural hematoma
- (C) cerebral aneurysm with hemorrhage
- (D) conversion reaction
- (E) vertebrobasilar insufficiency

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47

KEY: C

“Matching Sets” Test Item Type

This test item type consists of a list of entities (e.g., laboratory data, diseases, management options) followed by several statements or phrases. The options in the matching set precede the actual items, unlike the one-best-answer multiple-choice items. Only one answer can be correct for any given item. Any number of items may follow the lettered headings. The number of lettered headings ranges from five to nine. A sample matching set follows:

Matching Sets

For each numbered item (**patient scenario**), select the one lettered heading (**surgical procedure**) most closely associated with it. Each lettered heading may be selected once, more than once, or not at all.

- (A) abdominoperineal resection with end colostomy
- (B) laser vaporization ablation
- (C) left hemicolectomy with primary anastomosis
- (D) sigmoid resection with diverting colostomy
- (E) total colectomy with ileostomy

A 32-year-old female with ulcerative colitis and bleeding that has been unresponsive to conservative therapy

KEY: E

A 65-year-old male with a pelvic abscess due to sigmoid diverticular disease

KEY: D

A 54-year-old female with adenocarcinoma 4 cm from the anal verge

KEY: A

An 89-year-old male with a 3-cm villous adenoma extending from the anus

KEY: B

A 75-year-old female with a 3-cm well-differentiated adenocarcinoma of the sigmoid colon

KEY: C

1 COMVEX CBT PRACTICE EXAM

2 A COMVEX Practice examination can be found at: [https://www.nbome.org/exams-assessments/](https://www.nbome.org/exams-assessments/comvex/)

3 [comvex/](https://www.nbome.org/exams-assessments/comvex/).

4