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I doubt that I could have begun my chairmanship at a more exciting time, as we celebrated the many accomplishments of the decades – our foundation – which allow us to move toward an even brighter future of further growth and development that will help us fulfill the NBOME’s mission and vision.

This annual report provides a detailed summary of the NBOME’s 2009 activities and achievements, so I will take the opportunity to focus on the dedicated people who made those achievements possible.

The past year saw the retirement on July 1st of the NBOME’s first full-time physician President and CEO, Frederick. G. Meoli, D.O., whose leadership was instrumental in the advancement of the NBOME in critical areas. Dr. Meoli can be credited with leading the NBOME from times of significant tensions in the late 1990s, to a time of tremendous growth and credibility. Under his tenure, the addition in 2004 of a clinical skills examination (COMLEX-USA Level 2-Performance Evaluation) to augment the COMLEX-USA examination series helped to bring the NBOME into the era of competency-based medical education and testing. Moving the innovative COMLEX-USA examinations into the computer-based testing arena in 2004-2005 was another of the NBOME’s great accomplishments under Dr. Meoli’s guidance, as was the engagement of the NBOME into the international arena of physician testing and regulation. Dr. Meoli’s strong leadership, led by the wisdom and dedication of a committed NBOME Board of Directors, helped tremendously to shape the organization’s promising future. Most appropriately, Dr. Meoli partnered with freelance author Betty Burnett, Ph.D., to capture many of the stories of NBOME history in its 75th anniversary history book, entitled “In the Public Trust: The National Board of Osteopathic Medical Examiners 1934-2009.” It was released at the NBOME’s anniversary celebration in December 2009.

The experienced leadership provided by William F. Ranieri, D.O., Immediate Past Chair of NBOME’s Board of Directors (2007-2009), was
likewise critical to the success of the NBOME. Dr. Ranieri can be credited with moving the organization forward in its outreach to residency program directors and The Association of Osteopathic Directors and Medical Educators (AODME), as well as into the international arena.

Dr. Meoli was succeeded as President & CEO by John R. Gimpel, D.O., M.Ed., who took over in July 2009. Dr. Gimpel had a long association with the NBOME prior to becoming President. He began as an item writer in 1992 and was elected to the Board in 1995. He served as Director of Performance Testing from 1996 to 2004, when he joined the full-time staff as NBOME’s first Vice President for Clinical Skills Testing, a role he held for four years. He became the Dean of the University of New England’s College of Osteopathic Medicine in 2008, and held that role until his return in 2009 to the NBOME. Dr. Gimpel was formerly Director for Ambulatory Medicine at Philadelphia College of Osteopathic Medicine, and Director of Predoctoral Education at Georgetown University School of Medicine, where he maintains a faculty appointment as Associate Professor of Family Medicine. I anticipate great success for the NBOME under Dr. Gimpel’s leadership.

The achievements of the past year would not have been possible without the contributions of Board members, committee members past and present, item and case writers, and of course, the NBOME staff. Special thanks to the many NBOME employees who have given so much over the years to achieve our mission: Shirley Bodett, Senior Testing Consultant, celebrated 25 years as an NBOME staff member in 2009; Joseph Smoley, Ph.D., Vice President for Administration, has been with the organization for more than 20 years; and Linjun Shen, Ph.D., Vice President for Cognitive Testing and Research, will reach the 20-year milestone in 2010.

Finally, it was with profound sadness that the NBOME mourned the passing in October 2009 of Frederic Wilson, the first public member of the NBOME Board. Heartfelt sympathies were conveyed to Mr. Wilson’s family, and a contribution was made in his honor to the University of Michigan’s Comprehensive Cancer Center.

I hope that you enjoy reading about the NBOME’s many accomplishments in 2009, and join me in thanking and acknowledging the many people contributing to our bright future.

John E. Thornburg, D.O., Ph.D.
Chair, NBOME

MISSION
The National Board of Osteopathic Medical Examiners (NBOME) protects the public by providing the means to assess competencies for osteopathic medicine and related health care professions. That is our mission.
Message from John R. Gimpel, D.O., M.Ed.

The National Board of Osteopathic Medical Examiners truly had a banner year in 2009. The NBOME celebrated its 75th anniversary and its longstanding commitment to our mission of protecting the public by providing the means to assess competencies for osteopathic medicine and related health care professions.

Throughout the year, the NBOME enjoyed prominent recognition of its 75-year history. At numerous venues, such as the Annual Meeting of the Federation of State Medical Boards (FSMB) of the United States, and the Annual Meeting and House of Delegates of the American Osteopathic Association (AOA), the NBOME’s legacy was honored. Eugene Oliveri, D.O., former NBOME Board member and former President of the AOA, detailed the storied history of the NBOME to a captivated audience of more than 600 delegates and guests at the AOA House of Delegates in July (see page 12). It was a wonderful opportunity to celebrate our strong foundation and our longstanding commitment to our mission. At the same time, in 2009 the NBOME outlined its plan for the future with a stated vision to be the testing organization for the entire osteopathic profession. Hence, “Building a bright future on a strong foundation” is an appropriate theme for the NBOME’s 2009 Annual Report.

As noted in the message from Board Chair, John E. Thornburg, D.O., Ph.D., in 2009 William F. Ranieri, D.O., concluded his two-year term as Board Chair and Frederick G. Meoli, D.O., retired from his position as NBOME President & CEO. Words can hardly do justice to the contributions of these two gentlemen to the successes of the NBOME and the osteopathic profession. Most certainly, the NBOME’s “bright future” will be built on the legacy and contributions of Drs. Ranieri and Meoli.

Dr. Thornburg was installed as the NBOME Chair in December, the first physician to be elected to that post after serving as COMLEX-USA Level 1 Coordinator. Dr. Thornburg was instrumental in the implementation of COMLEX-USA Level 1, and also as Chair of the Product Committee and a member of the Clinical Skills Testing Advisory Committee during the launch of COMLEX-USA Level 2-Performance Evaluation. Dr. Thornburg serves as Professor of Pharmacology and Toxicology as well as Professor of Family Medicine at Michigan State University College of Osteopathic Medicine. He takes up the Chair
position after 20 years of service to the NBOME.

On a personal note, I sincerely appreciate the mentorship Drs. Meoli, Ranieri and Thornburg have provided me over the past decade, as well as the assistance provided by them, other members of the NBOME Board, the NBOME Vice Presidents and the entire NBOME staff as I rejoined the organization in July of 2009.

In 2009, the NBOME added significant office space and a number of key staff positions, actions taken to ensure the future growth and development of the organization. NBOME’s National Center for Clinical Skills Testing in suburban Philadelphia (Conshohocken, PA) expanded to almost 20,000 square feet, adding a second 12-station, state-of-the-art clinical testing pod to accommodate the increasing numbers of examinees. A new Innovations in Testing Department was created, with staff dedicated to competency assessment for initial licensure as well as for a variety of other assessment needs.

A total of 10 new full-time staff positions were created, including additional psychometric and research staff, information systems/database development staff, and the organization’s first Director for Communications. An Executive Office Suite was constructed on the second floor of the office building in the NBOME’s Philadelphia area location, providing space for a Board Room and staff offices. Plans are underway for further expansion in 2010-2011 for NBOME’s Corporate Offices and Department of Cognitive Testing in Chicago, along with further modifications to the Executive Offices to provide the ability to better meet the needs of our many stakeholders.

Led by Dr. Thornburg as the newly installed Chair, the NBOME Board Retreat in December 2009 declared “Staying Ahead of the Curve” as its overall theme, with daily session topics of “Embracing Change” and “The Next Wave” encouraging Board members to engage in shaping a vision for NBOME’s future.

I reported to the Board a focus on the following five key areas that have been my priorities since taking on my new role as President:

1. **STAFF DEVELOPMENT:** The NBOME senior leadership team, which consists of the president and four vice presidents, seeks ways to inspire and motivate staff, and is committed to leading by example. In 2009, we worked on creating a staff structure that supported the organization’s goals, objectives and priorities, and on supporting the personal and professional growth and development of existing staff. We conducted an assessment of existing committees and their functions with respect to the objectives outlined in the NBOME strategic plan, and as a result, implemented a restructuring of operational committees as well as the Level Coordinators and Vice Coordinators in the Cognitive Testing Division. We placed a great deal of emphasis on promoting a united organizational culture that reflects the organization’s values, encourages good performance, rewards productivity, and ensures compensation and a work environment that will attract and retain qualified staff. We also began to outline a plan to update our corporate offices in Chicago to better reflect the organization’s image and bolster staff morale.

2. **BRANDING & COMMUNICATIONS:** We began to ask the question: “What do our stakeholders say about us when we leave the room?” and we outlined a plan to allow our new Director for Communications to assist us in defining the NBOME

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1 Joseph Smoley, Ph.D. (left) and Frederick G. Meoli, D.O.
2 John E. Thornburg, D.O., Ph.D. (left) and William F. Ranieri, D.O.
3 (left to right) Brian F. Fulton, D.O.; Geraldine T. O’Shea, D.O.; Dana C. Shaffer, D.O.
brand. The disciplined communication of that brand and messages to our key stakeholders, including our staff and Board, were identified as important processes. In particular, an emphasis on strategy to communicate better and more regularly with residency program directors, both from AOA-approved graduate medical education programs as well as those residency programs accredited by the ACGME, was solidified.

3. EXAMINATION PRODUCTS: We renewed efforts to ensure the quality, efficiency, and effectiveness of all of our examination products. With the Board's direction to move to a competency-based, two-decision-point model for COMLEX-USA over the next 5-10 years, we began to create a more specific timeline for an enhanced COMLEX-USA that might even better meet our mission, and further our commitment to continuous quality improvement. New paradigms in test item quality, item writing and test development were explored, and a comprehensive plan for enhanced subject examinations, the Comprehensive Osteopathic Medical Achievement Tests (COMAT), was coordinated with input from colleges of osteopathic medicine. The NBOME also began initial work on redesigning the Comprehensive Osteopathic Variable Purpose Examination (COMVEX), and other assessment tools that could be customized for use by individual physicians, graduate medical education programs, specialty societies or state medical or osteopathic medical licensing boards for competency assurance in the future.

4. BOARD DEVELOPMENT: Senior staff worked to assist the NBOME Board in adopting best practices to allow Board Officers, Board Members and the Board as a whole to optimize its effectiveness. This approach attempts to allow the Board to focus its collective wisdom and perspectives on governance, identifying stakeholders and understanding their interests, formulating a vision and formulating key goals. Short-term changes included more efficient meetings and planned opportunities for Board fellowship. We outlined a plan to host meetings of our Executive Committee at NBOME Offices in Philadelphia and Chicago in 2010. Four new Board members were elected in 2009, broadening our representation of the profession, and they began their tenure with a formal Board orientation and mentorship program.

5. STRONG FINANCIAL MANAGEMENT: In partnership with the Secretary-Treasurer of the Board and the Chair of the NBOME Finance Committee and Audit Committee, the Vice President for Finance and Human Resources/CFO and the President/CEO are ultimately responsible for exercising responsible financial stewardship. The CFO and staff are committed to making sound day-to-day and month-to-month financial decisions within parameters set forth by the Board, and sound internal and external financial controls are in place. We began moving away from a primarily short-term focus to include a longer planning horizon. Examining trends from the last three to five years enables more informed future planning. We introduced three-year budgeting forecasts and longer trend analysis, allowing the NBOME to maximize its resources and more carefully predict its expenses in order to minimize increases in examination fees for candidates.

Thank you to the many individuals who have contributed to NBOME’s 75 years of protecting the public and this very special anniversary year. The numbers are too large to mention everyone who has played a role. In closing, however, I would like to reiterate my sincere gratitude to Dr. Meoli and Dr. Ranieri for their collective 45 years of service to NBOME, to the Board, and to the staff of the NBOME, whose dedication ensures fulfillment of the NBOME’s mission.

Together, the NBOME Board and staff are indeed building a bright future on a very strong foundation. Looking ahead, the NBOME’s heritage will be honored through our committed efforts to meet the public’s expectations and continue to earn their trust by ensuring the competencies of those practicing osteopathic medicine.

John R. Gimpel, D.O., M.Ed.
President & Chief Executive Officer
NBOME 2009 Timeline
JANUARY

› COMLEX-USA cognitive examinations became available in Canada through Prometric test sites, where candidates can take computer-delivered examinations.
› Board Chair Dr. William Ranieri represented the NBOME at the Annual Osteopathic Medical Education Leadership Conference.
› Plans continued for the year-long celebration of NBOME’s 75th anniversary, to culminate in a gala celebration in December, in conjunction with the NBOME Board Retreat and Annual Meeting.
› NBOME participated in the American Association of Osteopathic Examiners’ Summit.
› Detailed construction planning began for new clinical skills testing pod to be constructed at the National Center for Clinical Skills Testing in Conshohocken, PA. Addition of the pod would double clinical skills testing capacity.

FEBRUARY

› NBOME representatives participated in the meeting of the National Alliance for Physician Competence.
› NBOME Board Chair, William Ranieri, D.O., represented the NBOME at the American Osteopathic Association’s February (mid-academic year) meeting, where he provided an update on NBOME activities.
› Contractors began demolition of office space adjacent to the National Center for Clinical Skills Testing – a key milestone in construction of a second clinical skills testing pod.
› Betty Burnett, Ph.D., was contracted to research and write the history of the NBOME as part of our 75th anniversary commemoration.

MARCH

› The document: “The Fundamental Osteopathic Competencies: Guidelines for Osteopathic Medical Licensure and the Practice of Osteopathic Medicine,” was drafted as an outcome of the March meeting of the Competency and Evidence-based Medicine Sub-committee.
› Standard setting panel meetings for Level 2-Cognitive Evaluation were held at the NBOME’s Corporate Offices in Chicago.
› NBOME participated in the International Association of Medical Regulatory Agencies (IAMRA) Workgroup’s international teleconference, which addressed a summary document delineating requirements of examinations used for regulatory jurisdictions worldwide.
› The NBOME Board approved three new operational positions: Director for Communications, Director for Innovations in Testing and Executive Assistant to the President.
› The NBOME Board approved a proposal to reengineer and modernize the NBOME’s IT system to improve services for candidates, colleges/deans and staff.

APRIL

› NBOME representatives attended the Annual Meeting of the Federation of State Medical Boards (FSMB); during the meeting, the NBOME proudly exhibited its 75th anniversary commemorative display. Each day at the morning plenary sessions, FSMB Chair Regina Benjamin, M.D., announced the NBOME’s 75th anniversary. Dr. Benjamin would be confirmed later in the year as the U.S. Surgeon General.
› After completion of a national search and multiple rounds of interviews, the NBOME announced that John R. Gimpel, D.O., M.Ed., had accepted the position of President and CEO, to replace Dr. Frederick Meoli, D.O., NBOME’s first full-time physician President and CEO. Dr. Gimpel would take over for Dr. Meoli on July 1.
› NBOME representatives attended the annual meeting of the American Association of Osteopathic Examiners, held in conjunction with the FSMB meeting.
Leaders from the NBOME and the American Osteopathic Association met at the AOA's Chicago headquarters to discuss priorities, plans and activities.

NBOME Board member, John Becher, D.O., was nominated to the Federation of State Medical Boards’ Maintenance of Licensure Committee.

The annual mid-year NBOME Board meeting was held in Toronto, Canada.

The NBOME Board adopted a plan for continuous quality improvement for COMLEX-USA after three years of research and consideration. The model will move COMLEX-USA to a two-decision-point approach: the first decision point would be at the time of entry into graduate medical education (supervised practice), and the second would be at the time of entry into independent practice (unsupervised practice). The plan will likely take 5-10 years to further research and fully implement.

New standards were finalized and implemented for COMLEX Level 2-Cognitive Evaluation.

NBOME President Frederick Meoli, D.O., officially retired on July 1, after announcing his intentions to do so in September 2009. Dr. Meoli was the first full-time President and CEO of the NBOME, and served in that capacity since 2002.

John R. Gimpel, D.O., M.Ed., was sworn in as the second President and CEO of the NBOME during the mid-year NBOME Board meeting and began his tenure on July 1st. Dr. Gimpel has been associated with the NBOME since 1992. He was previously a Board member (1995-2000 and 2008-2009) and served as the first Vice President for Clinical Skills Testing from 2004 until 2008.

Board Chair William Ranieri, D.O., Vice Chair John Thornburg D.O., Ph.D, and Dr. John Gimpel participated in the Annual Meeting of the American Osteopathic Association and its House of Delegates. The NBOME provided an update on strategic planning and activities. Dr. Frederick Meoli was honored by the AOA during the meeting on the occasion of his retirement as NBOME President & CEO.

Eugene Oliveri, D.O., NBOME Board member, paid tribute to the NBOME’s 75th anniversary during the A.T. Still Memorial Lecture, which he was honored to deliver during the AOA’s House of Delegates at its Annual Meeting. On the floor of the AOA House of Delegates, all delegates and attendees received a copy of NBOME’s 2008 annual report.

Construction of the second clinical skills testing pod was completed at the national Center for Clinical Skills Testing in Conshohocken, PA, and pilot testing got underway.
AUGUST

› The new clinical skills testing pod at the National Center for Clinical Skills Testing in Conshohocken, PA hosted its first COMLEX Level 2-Performance Evaluation examination on August 26th.
› The NBOME Board approved a proposal to establish new Executive Offices in Conshohocken, PA to house offices for the NBOME President, the Executive Assistant to the president and the Director for Communications, as well as a state-of-the-art board room.
› Two graduate students completed the first NBOME summer psychometric internship program. The program, which was conducted in the NBOME’s Corporate Office in Chicago, lasted eight weeks. The interns worked with Linjun Shen Ph.D., Vice President for Cognitive Testing & Research, on research topics of importance to the NBOME.

SEPTEMBER

› On September 14th, the two clinical skills testing pods at the National Center for Clinical Skills Testing in Conshohocken, PA hosted COMLEX Level 2-Performance Evaluation examinations simultaneously.
› The COMLEX Level 3 standard setting committee met at NBOME Corporate Offices in Chicago to propose new pass/fail standards for the examination.
› Construction began on the NBOME Executive Offices in Conshohocken, PA, and Taunya Cossetti accepted the position as Executive Assistant to the President. Ms. Cossetti had been with the NBOME since 2000 serving in administrative roles related to the development and scoring of the COMLEX-USA Level 2-Performance Evaluation examination.
› The NBOME Executive Committee approved a proposal for a completely reconstructed series of subject examinations, the Comprehensive Osteopathic Medical Achievement Tests (COMAT). They would be ready for piloting in the summer of 2010, and complete implementation for seven (7) core clinical disciplines would occur by July 2011. These osteopathically distinctive, discipline-based examinations would allow for Internet-based testing of students at the end of clinical rotations, or for other school-based assessment needs.

OCTOBER

› NBOME President & CEO, John R. Gimpel, D.O., M.Ed., represented the NBOME at the meeting of the Osteopathic International Alliance in Sydney, Australia.
› The NBOME family was deeply saddened by the passing of Fred Wilson, the first public member of the NBOME Board. Heartfelt sympathies were conveyed to Mr. Wilson’s family, and a contribution was made in his honor to the University of Michigan’s Comprehensive Cancer Center.
› The NBOME senior staff members gathered for their annual retreat.
› The NBOME’s first Director for Communications, Mary Coyle, joined the NBOME staff.
› The longest-serving NBOME staff member, Shirley Bodett, celebrated 25 years of employment.
NBOME representatives participated in the American Osteopathic Association’s (AOA) annual Osteopathic Medical Conference and Exposition (OMED), taking the opportunity to meet and collaborate with many members of the osteopathic family.

During OMED, Frederick G. Meoli, D.O., recently retired NBOME President & CEO, was honored with the AOA’s Distinguished Service Certificate, its highest award. In addition, NBOME Leaders presented to the AOA’s Council of Interns and Residents (CIR) and the AACOM’s Council of Student Government Presidents (COSGP).

NBOME’s Vice President for Administration, Joseph Smoley Ph.D., NBOME legal counsel Sydney Steele, Esq., and Dr. John Gimpel attended a national forum on disabilities and high-stakes testing in Princeton, New Jersey.

The year-long recognition of the NBOME’s 75th anniversary wrapped up with the December Annual Board Meeting, Board Retreat and an anniversary gala. Ten previous Board Presidents and/or Chairs of the Board were in attendance, along with leaders from the American Osteopathic Association, the Federation of State Medical Boards, the American Association of Osteopathic Examiners and the American Association of Colleges of Osteopathic Medicine.

During the December Annual Board Meeting, John Thornburg, D.O., Ph.D. of Okemos, Michigan, was installed as new Chair of the Board, replacing Board Chair, William F. Ranieri, D.O. of Philadelphia, Pennsylvania. Others installed included Vice Chair, Janice Knebl, D.O., MBA of Fort Worth, Texas and Secretary/Treasurer, John Becher, D.O. of Newtown Square, Pennsylvania. In addition, three new members of the board were installed: Ronald R. Burns, D.O. of Winter Park, Florida; Millicent Channell, D.O., MA, of Philadelphia, Pennsylvania; and Geraldine T. O’Shea, D.O. of Jackson, California. Jim Andriole, D.O. of Tallahassee, Florida, who had previously been appointed to the NBOME Board, was installed as an elected Board member. The outgoing Board members were also honored at an earlier awards luncheon. They were: Sheryl Busman, D.O., Immediate Past Chair, and Board members Eugene Oliveri, D.O., Frederick Schaller, D.O. and George Thomas, D.O.

The inaugural Santucci Award was given during the Gala activities. It is an honor awarded on a periodic basis for outstanding contributions to the mission of the NBOME. The first recipient of the award was Thomas F. Santucci, Jr., D.O., who was President & Chair of the Board from 1985 to 1987.

Updates were provided to AACOM leadership and the deans of the colleges of osteopathic medicine regarding the consequences of the new passing standards for the COMLEX-USA Level 2-Cognitive Evaluation implemented in June 2010.

Construction of the NBOME Executive Offices in Conshohocken was completed and occupied by the President, Executive Assistant to the President and the Director for Communications.
John E. Thornburg, D.O., Ph.D.  
Okemos, Michigan  
Executive Committee Member,  
Board Chair (installed Dec. 2009)

Janice Knebl, D.O., MBA  
Fort Worth, Texas  
Executive Committee Member,  
Vice Chair (installed Dec. 2009)

John W. Becher, D.O.  
Newtown Square, Pennsylvania  
Executive Committee Member,  
Secretary/Treasurer (installed Dec. 2009)

William F. Ranieri, D.O.  
Philadelphia, Pennsylvania  
Executive Committee Member,  
Immediate Past Chair

William G. Anderson, D.O.  
Detroit, Michigan  
Executive Committee Member

Wayne R. Carlsten, D.O.  
Athens, Ohio  
Executive Committee Member

Deborah Pierce, D.O.  
Fort Washington, Pennsylvania  
Executive Committee Member

Eugene Oliveri, D.O.  
(outgoing in Dec. 2009)  
Milford, Michigan  
Executive Committee Member

James M. Andriole, D.O.  
Tallahassee, Florida

Ronald R. Burns, D.O.  
Winter Park, Florida

Sheryl A. Bushman, D.O.  
(outgoing in Dec. 2009)  
St. Louis, Missouri

Millicent Channell, D.O., MA  
Philadelphia, Pennsylvania

Carman A. Ciervo, D.O.  
Stratford, New Jersey

Gary Clark  
Jefferson City, Missouri

Craig J. Lenz, D.O.  
Harrogate, Tennessee

Michael K. Murphy, D.O.  
Hattiesburg, Mississippi

Geraldine T. O’Shea, D.O.  
Jackson, California

Frederick Schaller, D.O.  
Henderson, Nevada

Dana C. Shaffer, D.O.  
Des Moines, Iowa

Stephen C. Shannon, D.O., MPH  
Chevy Chase, Maryland

Gary L. Slick, D.O., MA  
Tulsa, Oklahoma

George Thomas, D.O.  
(outgoing in Dec. 2009)  
Bentleyville, Ohio

Frederic Wilson*  
Loveland, Ohio

*Deceased
Eugene Oliveri, D.O., NBOME Board and Executive Committee member, paid tribute to the NBOME’s 75th anniversary during the A.T. Still Memorial Lecture, which he was honored to deliver during the American Osteopathic Association’s House of Delegates at its 2009 Annual Meeting.

There are three distinct eras of the NBOME, each lasting about a quarter of a century. The first was characterized by development, formation and implementation of this new board. The second era was seen to be one of evolution and some of revolution – internally and externally. And finally the third period – the one we are ending now – one of maturation and great distinction.

Join me now in wishing the NBOME a very happy and successful 75th anniversary!

It is apparent that the National Board of Osteopathic Medical Examiners is inextricably woven into the tapestry of the licensing process for osteopathic physicians, and inextricably woven into the dedication to this osteopathic profession. The NBOME cherishes its status within the whole of the osteopathic family and its mutual respect for all its stakeholders.

Today it can be said that the National Board of Osteopathic Medical Examiners is moving into yet another era, through expansion of new products and technological methodologies.

The NBOME has successfully become the preeminent license testing organization for the osteopathic medical profession, accomplishing this by diligently expressing our values of quality, integrity, accountability and commitment to the osteopathic profession and public safety.
COMPLEX-USA

COMLEX-USA is the NBOME’s examination series that provides the pathway to licensure for osteopathic physicians in the United States. It is also recognized in many international jurisdictions. The development and administration of the COMLEX-USA series requires the expertise, hard work, intellect and dedication of the many NBOME staff members, as well as hundreds of external partners, such as committee members, item writers, raters, etc. The COMLEX-USA examination series encompasses both cognitive testing and clinical skills testing.

Cognitive testing is delivered via computer by the NBOME’s testing partner, Prometric, at hundreds of testing sites around the United States and in Canada. Clinical Skills Testing is conducted at the NBOME's National Center for Clinical Skills Testing. This section of the annual report summarizes the key data and developments related to the COMLEX-USA series in 2009.

**COMLEX-USA Cognitive Examinations**

The chart below represents candidate performance on the COMPLEX-USA cognitive examinations. These are COMLEX-USA Level 1, Level 2-Cognitive Evaluation and Level 3. The information presented represents complete testing cycles, which run mid-year to mid-year. The 2009-2010 results will be reported in the 2010 NBOME annual report.

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**CANDIDATE PERFORMANCE ON COMPUTER-DELIVERED COMLEX-USA COGNITIVE EXAMINATIONS**

<table>
<thead>
<tr>
<th>YEAR</th>
<th>N 1st Timer/Total</th>
<th>PASSING RATE 1st Timer</th>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2006-2007</td>
<td>3434/4157</td>
<td>88.5%</td>
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<tr>
<td>2007-2008</td>
<td>3655/4235</td>
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<td>85.0%</td>
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<td><strong>LEVEL 2</strong></td>
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<tr>
<td>2005-2006</td>
<td>2785/3322</td>
<td>87.0%</td>
<td>82.9%</td>
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<td>2006-2007</td>
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<td>2008-2009</td>
<td>3369/3805</td>
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<td>88.9%</td>
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<tr>
<td><strong>LEVEL 3</strong></td>
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<td>2005-2006</td>
<td>2434/2817</td>
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<td>85.1%</td>
</tr>
<tr>
<td>2006-2007</td>
<td>3173/3770</td>
<td>87.7%</td>
<td>84.2%</td>
</tr>
<tr>
<td>Dec. 2007-Jan.2009*</td>
<td>3798/4340</td>
<td>91.1%</td>
<td>88.4%</td>
</tr>
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</table>

*A 14-MONTH PERIOD IS LISTED AS A RESULT OF A CHANGE IN THE TESTING CYCLE*
COMLEX-USA Level 2-Performance Evaluation

The data shown below includes historical information as a means to illustrate trends. More detailed statistical data can be found in the Journal of the American Osteopathic Association: Five-Year Summary of COMLEX-USA Level 2-PE Examinee Performance and Survey Data Langenau et al. (Journal of the American Osteopathic Association March 2010; 110: 114-125.)

The total number of candidates that took the COMLEX-USA Level 2-Performance Evaluation for each of the five testing cycles from 2005-2009 is shown in the chart below.

The number of candidates tested increased with each testing cycle. This cohort includes both first-time takers and repeaters. For each testing cycle, there was an increase in both the number of students taking the test for the first time and the number of repeaters.

**NUMBER OF CANDIDATES TESTED ACROSS TESTING CYCLES 2004-05 THROUGH 2008-09**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number Tested</td>
<td>2742</td>
<td>3005</td>
<td>3261</td>
<td>3751</td>
<td>4698</td>
</tr>
</tbody>
</table>

* A 13-MONTH PERIOD IS LISTED AS A RESULT OF A CHANGE IN THE TESTING CYCLE
The 2008-2009 testing cycle began and ended in June. As shown in the graph below, the most active months of testing are trending toward the early part of the testing cycle. This is particularly evident in the 2008-09 testing cycle. However, there was a large number of candidates who tested as late as May and June 2009.

Trends of first-time takers shown in the graph below suggest that the majority of candidates test early to take advantage of the opportunity to reschedule prior to graduation in the event they do not pass.

Yearly trends in the number of first-time takers by testing cycle and month are shown in the graph above.
The COMLEX Level 2-Performance Evaluation consists of two domains: humanistic (physician-patient communication, interpersonal skills, and professionalism) and biomedical (osteopathic principles and/or osteopathic manipulative treatment, history-taking and physical examination skills, integrated differential diagnosis and clinical problem-solving, written communication and synthesis of clinical findings). The table below shows the pass/fail rate for first-time takers by testing cycle, with additional data on each of the domains.

<table>
<thead>
<tr>
<th>COMLEX LEVEL 2-PERFORMANCE EVALUATION</th>
<th>N</th>
<th>%A</th>
<th>%B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2004-2005</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FAIL</td>
<td>107</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Humanistic Domain</td>
<td>20</td>
<td>18.7</td>
<td>3.9</td>
</tr>
<tr>
<td>Biomedical Domain</td>
<td>83</td>
<td>77.6</td>
<td>3.1</td>
</tr>
<tr>
<td>Both Domains</td>
<td>4</td>
<td>3.7</td>
<td>0.1</td>
</tr>
<tr>
<td>PASS</td>
<td>2613</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GRAND TOTAL</td>
<td>2720</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2005-2006</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FAIL</td>
<td>135</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Humanistic Domain</td>
<td>15</td>
<td>11.1</td>
<td>0.5</td>
</tr>
<tr>
<td>Biomedical Domain</td>
<td>113</td>
<td>83.7</td>
<td>4.0</td>
</tr>
<tr>
<td>Both Domains</td>
<td>7</td>
<td>5.2</td>
<td>0.2</td>
</tr>
<tr>
<td>PASS</td>
<td>2721</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GRAND TOTAL</td>
<td>2856</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2006-2007</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FAIL</td>
<td>203</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Humanistic Domain</td>
<td>55</td>
<td>27.1</td>
<td>1.8</td>
</tr>
<tr>
<td>Biomedical Domain</td>
<td>126</td>
<td>62.1</td>
<td>4.1</td>
</tr>
<tr>
<td>Both Domains</td>
<td>22</td>
<td>10.8</td>
<td>0.7</td>
</tr>
<tr>
<td>PASS</td>
<td>2896</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GRAND TOTAL</td>
<td>3099</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2007-2008</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FAIL</td>
<td>227</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Humanistic Domain</td>
<td>121</td>
<td>53.3</td>
<td>3.5</td>
</tr>
<tr>
<td>Biomedical Domain</td>
<td>83</td>
<td>36.6</td>
<td>2.4</td>
</tr>
<tr>
<td>Both Domains</td>
<td>23</td>
<td>10.1</td>
<td>0.7</td>
</tr>
<tr>
<td>PASS</td>
<td>3249</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GRAND TOTAL</td>
<td>3476</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2008-2009</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FAIL</td>
<td>229</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Humanistic Domain</td>
<td>115</td>
<td>50.2</td>
<td>2.6</td>
</tr>
<tr>
<td>Biomedical Domain</td>
<td>81</td>
<td>35.4</td>
<td>1.9</td>
</tr>
<tr>
<td>Both Domains</td>
<td>33</td>
<td>14.4</td>
<td>0.8</td>
</tr>
<tr>
<td>PASS</td>
<td>4124</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GRAND TOTAL</td>
<td>4353</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A Total fail rate is the base for calculating percentages.  
B Grand Total is the base for calculating percentages.  
*A 13-MONTH PERIOD IS LISTED AS A RESULT OF A CHANGE IN THE TESTING CYCLE
COMLEX Standard Setting in 2009

Consistent with many other national high-stakes examinations for physician licensure worldwide, the NBOME follows industry standard best practices in determining pass/fail standards for its COMLEX-USA examinations, and for periodic resetting of the standards.

In 2009, the COMLEX Level 2-Cognitive Evaluation (CE) and COMLEX Level 3 standard setting committees met to review the existing pass/fail standards. A new COMLEX Level 2-CE standard was recommended and subsequently approved by the NBOME Executive Committee for the 2009-2010 testing cycle. It went into effect in June 2009. A new pass/fail standard for COMLEX Level 3 was recommended in 2009, and after NBOME Executive Committee approval, was implemented in February 2010.

Periodic review and resetting of the pass/fail standards for COMLEX examinations ensures the standards of osteopathic medical licensure assessment reflect current medical education and medical practice. The process is consistent with the NBOME’s mission of protecting the public by assessing competencies for osteopathic medicine and related health professionals.

A process of triangulation is used to establish the pass/fail standard. This process is widely used for high-stakes examinations for physician licensure around the world. Triangulation includes standard-setting surveys, standard-setting panel meetings, and a comprehensive final review. In addition, the NBOME uses modifications of Angoff methodology, along with the addition of item-mapping and Hofstee methods, for its multiple choice examinations.

The NBOME’s COMLEX Level 2-CE Standard Setting Committee consisted of current clinical sciences faculty members recommended by osteopathic medical school deans. Membership reflected a broad representation of discipline, gender, school, race, and geographic characteristics. The COMLEX Level 3 Standard Setting Committee was comprised mainly of current senior-level resident trainers, including Directors of Medical Education. The COMLEX Level 3 Standard Setting Committee also had good discipline, gender, school, race, and geographic representation.

Enhancing COMLEX-USA

In June 2009, the NBOME Board adopted a plan for continuous quality improvement for the COMLEX-USA examination series, after three years of research and consideration. The model will move to a two-decision point approach: the first decision point would be at the time of entry into graduate medical education (supervised practice), and the second would be at the time of entry into independent practice (unsupervised practice). The Board approved the creation of a Blue Ribbon Panel that would meet beginning in May 2010. The plan will likely take 5-10 years to further research and fully implement.
The NBOME Cognitive Testing & Research Department is responsible for developing, publishing, scoring and reporting computer-delivered cognitive examinations, including the COMLEX-USA series (for initial licensure), COMVEX (for osteopathic physicians who need to demonstrate current osteopathic medical knowledge), COMSAE (a self-assessment tool used in preparation for COMLEX) and COMAT (subject examinations). The department also provides test development and psychometric services for other osteopathic and health-related testing programs, and conducts research to support NBOME examinations and services.

The Cognitive Testing & Research Department made major research efforts in 2009 to restructure the computer-delivered COMLEX-USA cognitive examinations and improve their efficiency. In 2009, it also continued its research and development efforts to produce multimedia items for COMLEX-USA.

To fulfill NBOME’s vision of becoming the testing organization for the entire osteopathic profession, in 2009 the Cognitive Testing & Research Department provided testing services to a broader base of clients. In addition to the existing testing programs the Department supports, it collaborated with the American Osteopathic Board of Pediatrics (AOBP) to computerize AOBP’s certification and recertification examinations. The Department also helped American College of Osteopathic Surgeons (ACOS) to launch the first web-delivered in-service examination in the profession.

The current NBOME client examinations include:
1. American Osteopathic Board of Emergency Medicine (AOBEM) computer-delivered certification examinations
2. AOBEM computer-delivered recertification examinations
3. AOBP computer-delivered certification examinations
4. AOBP computer-delivered recertification examinations
5. ACOS Web-delivered in-service examinations
6. American College of Osteopathic Family Physicians in-service examinations
7. American College of Osteopathic Emergency Physicians in-service examinations
8. American Academy of Pediatric Dentistry in-service examinations

The Department was active in research for new product development, existing product improvement, and validity and reliability studies. Select results were submitted for presentation and publication. (Please see page 26.)

Additional human resources helped the Department better fulfill its mission in 2009. In January, the newly created full-time position of psychometrician was filled by Feiming Li, Ph.D., a graduate of the University of Georgia. In addition, the Department hosted the first NBOME Summer Internship for Educational Testing and Measurement. Two Ph.D. students in educational measurement programs successfully completed the internship. They submitted research reports to the NBOME at the end of the program and also submitted the results of their research during the internship to national conferences.

Comprehensive Osteopathic Medical Achievement Tests
In 2009, the Cognitive Testing & Research Department released new forms of several subject examinations (surgery, OB/GYN, psychiatry, pediatrics and internal medicine), paving the way for the robust and comprehensive approach to further development of the Comprehensive Osteopathic Medical Achievement Test (COMAT) series of examinations.
The COMAT series will significantly enhance the assessment tools the NBOME can offer to the colleges of osteopathic medicine and others that use subject examinations, such as residency programs.

**Comprehensive Osteopathic Medical Self-Assessment Examination**

The NBOME’s Cognitive Testing & Research Department introduced Phase 1 of the Comprehensive Osteopathic Medical Self-Assessment Examination (COMSAE) in early 2008, Phase 2 in June 2008 and Phase 3 in October 2008. (Note: Phases 1, 2 and 3 roughly correspond to COMLEX Levels 1, 2-CE and 3.) By May 2009, both Phase 1 and Phase 2 had two forms.

This self-assessment instrument has been well-received by osteopathic students and schools, and the number of candidates using the tool has increased substantially year over year, as illustrated in the chart below. Since its launch, 6,277 COMSAEs were completed. In 2010, additional forms will be added for both Phase 1 and Phase 2.

### INCREASE IN NUMBER OF CANDIDATES TAKING THE COMSAE – 2008 TO 2009

<table>
<thead>
<tr>
<th>Phase</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase 1</td>
<td>1373</td>
<td>2496</td>
</tr>
<tr>
<td>Phase 2</td>
<td>543</td>
<td>1464</td>
</tr>
<tr>
<td>Phase 3</td>
<td>112</td>
<td>415</td>
</tr>
</tbody>
</table>
Clinical skills examinations, like the COMLEX Level 2-Performance Evaluation (COMLEX Level 2-PE), are an important tool in assessing competencies for osteopathic physicians. COMLEX Level 2-PE provides candidates with an opportunity to demonstrate their clinical skills, augments the information provided by the NBOME to state medical licensing boards to assist them in making more informed licensure decisions, and provides opportunities for assessment of medical competencies beyond medical knowledge.

In the 2008-09 cycle, 4,698 candidates were tested at the NBOME’s National Center for Clinical Skills Testing (NCCST). Our ability to accommodate the increasing number of osteopathic medical students entering the profession was made possible by the expansion of the testing center in 2009. A second clinical skills testing pod was planned, constructed and opened in August. The first testing session held in the new space was on August 26, and on September 14, the NCCST hosted its first “double session,” running simultaneous sessions in both testing pods. Thanks to NBOME staff’s dedication, attention to detail, and flexibility, we were able to move into a beautiful new space and accommodate more candidates for testing.

On March 20 and September 16, the NCCST again opened its doors to interested visitors during its annual Visitation Days. The sessions give key stakeholders the opportunity to tour NBOME’s state-of-the-art testing center, observe an administration of a clinical skills examination and learn about clinical skills testing and assessment. NBOME Visitation Days continue to be a valuable resource for school and residency faculty, and licensing bodies, to learn more about the COMLEX Level 2-PE and clinical skills testing in general.

We were pleased to publish candidate performance and survey data in the Journal of the American Osteopathic Association after five years of the COMLEX Level 2-PE. The article, entitled “Five-year summary of COMLEX-USA Level 2-PE examinee performance and survey data,” was submitted to the Journal in 2009 and scheduled for publication in March 2010. Congratulations to my co-authors, Caitlyn Dyer, William Roberts Ed.D., Crystal Wilson and Dr. John R. Gimpel on this accomplishment. Not only is the article a comprehensive summary of the COMLEX Level 2-PE, it also demonstrates how satisfied students are with their experience at the NCCST.

Student satisfaction is due in large part to the dedicated staff of the NCCST. Many functions are necessary to ensure the successful administration of the COMLEX Level 2-PE, including standardized patients (SPs), SP training, case development, psychometrics and research, technology support, physician training, physician examiners, case development, exam review and rating, proctoring and administrative support. I would like to thank all NCCST staff for their hard work and dedication, which continues to deliver impressive results for the candidates.

Over the next several years, we look forward to collaborating with our stakeholders and developing research initiatives. In particular, we are excited to explore future testing opportunities, such as the use of human simulators, partial human simulators, and integrated cognitive testing. In conjunction with the NBOME’s Research Advisory and Innovations In Testing Committees, we are exploring the possibility of assessing competency-specific clinical skills and clinical skills of candidates during postgraduate medical training. The opportunities for research, development and testing are exciting. As our research progresses, we look forward to enhancing our current clinical skills testing format and developing additional clinical skills assessments for the future.
REPORTS FROM THE NBOME DEPARTMENTS

DEPARTMENT OF HUMAN RESOURCES & FINANCE

Dee Grimes
Vice President for Human Resources & Chief Financial Officer

HUMAN RESOURCES DEPARTMENT

In 2009, the Human Resources department was tasked with conducting a national search for a new President & CEO to replace the retiring Dr. Frederick Meoli D.O., whose leadership for nearly ten years resulted in the substantial growth and development of the NBOME. The role of the new President would be to take up where Dr. Meoli left off, and drive the organization to new heights. The HR department wishes to acknowledge and thank the volunteer members of the President & CEO Search Committee, who each spent many hours strategizing and determining the skills required of the successful candidate, in addition to reviewing curriculum vitae, interviewing multiple candidates multiple times, and providing valuable feedback.

After completion of the national search, the NBOME announced that John R. Gimpel, D.O., M.Ed., had accepted the position of President and CEO. Dr. Gimpel had a long association with the NBOME prior to becoming President. He began as an item writer in 1992 and was elected to the Board in 1995. He served as Director of Performance Testing from 1996 to 2004, when he joined the full-time staff as NBOME’s first Vice President for Clinical Skills Testing, a role he held for four years. He became the Dean of the University of New England’s College of Osteopathic Medicine in 2008, and held that role until his return in 2009 to the NBOME.

In 2009, the NBOME filled four open positions and created six new positions, the latter reflecting the growth and further development of the organization.

2009 NEW HIRES/NEW POSITIONS

- Xiaowei Chen, Application Database Developer, Administration Department
- Taunya Cossetti, Executive Assistant to the President (existing NBOME employee in new position)
- Mary C. Coyle, Director for Communications, Administration Department
- Cassie Dyer, Coordinator for Quality Assurance (existing NBOME employee in new position), National Center for Clinical Skills Testing
- Kristie Lang, Administrative Assistant, National Center for Clinical Skills Testing
- Feming Li, Ph.D., Psychometrician, Department of Cognitive Testing & Research
- Cara Ondik, Administrative Assistant/Exam Administrator, National Center for Clinical Skills Testing
- Gina Pugliano, Research Associate, National Center for Clinical Skill Testing
- Jon Witek, Office Support Clerk, Administration Department

Turnover at the NBOME remains below industry standards with more than 50% of our key staff in their positions for more than five years. And finally,
the Human Resources Department would like to acknowledge and congratulate Shirley Bodett, Senior Test Consultant in the Department of Cognitive Testing & Research, who celebrated her 25th anniversary as an employee in October 2009.

**FINANCE DEPARTMENT**

The primary financial objective outlined in the NBOME strategic plan is to promote the long-term financial stability of the organization by auditing fiscal reports and procedures at least annually, preserving and exploring new sources of revenue, and reviewing and implementing investment strategies. The Department of Finance works in close conjunction with the Finance Committee to achieve this goal. The Finance Department would like to acknowledge the volunteer members of the Finance Committee for their expert input, and the many hours spent reviewing budgets, financial statements, investment activities and required government forms.

The NBOME had a financially stable year in 2009. The increase in our asset base ensures that the enhancement of the NBOME E-Commerce Database and other capital projects are completed without outside financing. Additional funds will be used to expand NBOME’s office space for the growing staff.

A significant investment in 2009 was the approximately one million dollars used to expand testing capacity at the NBOME’s National Center for Clinical Skills Testing (NCCST). The NCCST staff is to be commended for delivering the project on time and below budget. In addition, NBOME Executive Offices were constructed in Conshohocken, Pennsylvania.

NBOME’s financial statements are reviewed annually by an external auditor. In 2008, Ahlbeck & Company was contracted to complete the audit and the IRS 990 form for NBOME. As in the past, the Finance Committee, along with the Board of Directors, reviews our asset mix and holding companies. During 2009, NBOME assets were safeguarded in numerous CDs with Morgan Stanley. Our operating assets and long-term investments are kept with Harris Bank.

In 2009, the Board of Directors followed best practices and approved the appointment of an audit committee to oversee the audit process. This was in response to guidelines outlined in the Sarbanes-Oxley (SOX) Act that calls for greater financial transparency. SOX, which has generally been applied to publically traded companies, has important implications for non-profit organizations as well. The Audit Committee will be responsible to review the annual financial audit conducted by an external consultant. This function was previously handled by the Finance Committee. The separation of these duties ensures finance decisions and audit decisions will be made independently of one another. The Audit Committee will report directly to the Board.
The Department for Administration lends assistance to the overall NBOME Strategic Plan through support staff within Client Services, Communications, and Information Services. The Department for Administration marked a number of significant milestones in 2009.

› Client Services, under the management of Manager Margaret Wong, enhanced outreach to candidates and clients with a more robust solution response to inquiries. By year’s end, plans were being developed to further improve procedures and implement continuous quality enhancement wherever necessary.

› Communications activities were greatly enhanced through establishment of a new department in late October and its management by the first-ever Director for Communications, Mary Coyle. Although only the last two months of 2009 had direct influence from new management, much was accomplished in a short time. The department began direct contact with students, schools, residency program directors, staff and others, as well as development of a comprehensive strategic communications plan. Outreach strategies begun in 2009 will see full implementation throughout 2010.

› Information Services (IS), which provides the infrastructure and technology support to NBOME operations, is headed by Director for IS, Michael Kastler. At the start of 2009, the IS department launched an enhanced NBOME website, which provided all stakeholders a portal for up-to-date information about NBOME’s products and services. Throughout 2009, a more comprehensive information system review was undertaken with the aim of improving services both internally for staff and externally for candidates, colleges of osteopathic medicine, state licensing boards, directors of medical education, residency program directors and others interested in osteopathic medical assessment. Implementation was begun in late 2009 with release of the reengineered system expected by summer 2010.

The Administration Department was also instrumental in the planning and execution of the NBOME’s year-long celebration of its 75th anniversary. In addition to a large number of special events held, the Department created a special 75th anniversary conference display that was used at key stakeholder meetings throughout the year. Throughout the year at conferences, meetings, and in one-on-one interactions, the NBOME’s past accomplishments and future vision were celebrated. Finally, the NBOME’s 75 years of support and leadership within the osteopathic profession was memorialized in a history book written to mark the occasion. Board members, committee members, staff and others joined in to produce “In the Public Trust, The NBOME 1934-2009.” The Administration Department was a proud contributor to this effort.
Supporting the Community

One of the important ways the NBOME demonstrates commitment to our values — particularly those of integrity, accountability and commitment to the osteopathic profession — is through the support we lend to the communities in which we operate and to members of the osteopathic community.

LOCAL COMMUNITY ACTIVITIES:
› Through the Adopt a Family program in Conshohocken, Pennsylvania, staff at the National Center for Clinical Skills Testing (NCCST) raised and donated more than $300 in presents for needy children and grocery gift cards for their families.
› Through the American Cancer Society’s Denim Day, NCCST staff collected and made a donation to help fund local cancer research projects.
› Staff members at the NBOME’s Corporate Offices in Chicago participated in the Christmas “Toys for Tots” drive sponsored by the office building’s management group. Toys for Tots provides gifts for needy children.

SUPPORT FOR MEMBERS OF THE OSTEOPATHIC COMMUNITY:
› The NBOME was the proud sponsor of a participant luncheon at the annual meeting of the American Association of Colleges of Osteopathic Medicine.
› The NBOME committed to five years of in-kind support of the American Association of Colleges of Osteopathic Medicine for a Health Resources & Services Administration Grant Application for Faculty Development for Osteopathic Educators.
› Following the devastating earthquake in Haiti, the NBOME made a charitable donation to D.O. Care International, a medical outreach organization dedicated to providing much-needed healthcare to indigent and isolated people in remote areas around the world.
› In the wake of damage caused by tornados in Kirksville, MO in May 2009, the NBOME made a charitable donation to the AT Still University Student Fund, which offered support to impacted students.
› The NBOME also made a memorial contribution to the University of Michigan Comprehensive Cancer Center in honor of Fred Wilson, the first public member of the NBOME Board, who passed away in October 2009.
› The NBOME made a donation to the New Jersey Institute for Successful Aging at the University of Medicine & Dentistry of NJ’s School of Osteopathic Medicine (UMDNJ-SOM). The memorial donation was in honor of Mrs. Mary Cavalieri, the late mother of Dr. Thomas Cavalieri, former NBOME chairman and Dean of the UMDNJ-SOM.
Research

Research is an important part of the development, administration and continuous quality improvement of the COMLEX-USA series of examinations, and other assessment tools developed by the NBOME. The NBOME research structure is divided into three parts:

1. **RESEARCH ADVISORY COMMITTEE**
This committee is comprised of both staff and expert researchers from around the country, with areas of expertise including cognitive, clinical skills, evidence-based medicine, competency, and practice assessments. Under the direction, of Tom Hardie, RN, Ed.D., Committee Chair, the Research Advisory Committee exists to stimulate, encourage and support intramural and extramural research. It also seeks to evaluate internal research with the advice and counsel of an advisory panel of experts, and provides an internal sounding board for external research presentations. The Committee sets standards and policy for research involving internal and external research projects and assures that guidelines are established and followed regarding the safety and confidentiality of subjects and investigators.

2. **nBOME RESEARCH TEAM**
Under the direction of Erik Langenau, D.O., nBOME’s Vice President for Clinical Skills Testing, the global nBOME Research Team is comprised of staff from both the cognitive and clinical testing areas whose job duties involve research. The group’s task is to share research experiences between the cognitive and clinical testing areas, and collaborate on various research projects.

3. **NATIONAL CENTER FOR CLINICAL SKILLS TESTING (NCCST) AND COGNITIVE TESTING RESEARCH TEAMS**
These teams develop and conduct research projects specific to their respective areas – clinical skills and cognitive testing. Bill Roberts, Ed.D., Director for Psychometrics & Research, heads the NCCST Research team, and Feiming Li, Ph.D, Psychometrician, heads the Cognitive Testing Research team.

Collaboration between these areas is quite strong, resulting in quality research projects, presentations and publications that promote the NBOME, our clinical and cognitive testing expertise, and the osteopathic profession as a whole.

The opportunities for research, development and testing – including projects with external stakeholders – are exciting. As the NBOME’s research progresses, we look forward to enhancing our current cognitive and clinical skills testing formats, as well as developing new assessments for the future.

BELOW IS A LIST OF ARTICLES, PAPERS AND PRESENTATIONS GIVEN OR SUBMITTED BY NBOME STAFF IN 2009.

**COGNITIVE TESTING & RESEARCH DEPARTMENT**

**RESEARCH ARTICLES**

**PRESENTATIONS**
- Li, F. (2009, paper accepted). Detecting item parameter drift by item response and item response time in a computer-based exam. To be presented at the NCME 2010 Annual Conference.
RESEARCH


CLINICAL SKILLS TESTING DEPARTMENT

JOURNAL/BOOK PUBLICATIONS

CONFERENCE PAPERS/PRESENTATIONS


SYMPOSIA AND WORKSHOPS PRESENTED:


Solomon M, Roberts WL, Langenau EE. Test of construct validity for a measure of humanistic clinical skills: a multitrait-multimethod matrix investigation. (Oral presentation at the International Conference on Communication in Healthcare, Miami Beach, FL, October 2009)
In 2009, the NBOME Board conducted an assessment of its existing committees and their functions, with respect to the objectives outlined in the NBOME strategic plan. As a result, a number of committees were reconstituted, new committees were established and others were discontinued. The following list represents the new committee structure and membership implemented at the end of 2009. The NBOME wishes to thank the individuals listed below, as well as all those who have previously served on its committees, for their valuable contributions.

**BOARD COMMITTEES**

**EXECUTIVE COMMITTEE**
- John E. Thornburg, D.O., Ph.D.* MSUCOM
- Janice A. Knebl, D.O., MBA UNTHSC/TCOM
- John W. Becher, D.O. Atlanticare/PCOM
- William F. Ranieri, D.O. Philadelphia, PA
- William G. Anderson, D.O. Sinai-Grace Hospital
- Wayne R. Carlsen, D.O. OUCOM
- Deborah Pierce, D.O. Fort Washington, PA

**AUDIT COMMITTEE**
- James M. Andriole, D.O. Tallahassee, FL
- John W. Becher, D.O.* Atlanticare/PCOM
- Gary Slick, D.O., MA OSU-COM

**FINANCE COMMITTEE**
- John W. Becher, D.O. Atlanticare/PCOM
- Donald Black, CPA Troutman, NC
- Wayne R. Carlsen, D.O.* OUCOM
- Carman A. Ciervo, D.O. UMDNJ-SOM
- Gary Clark Jefferson City, MO
- John R. Gimpel, D.O., M.Ed. NBOME
- Dee Grimes, MA NBOME
- Jake Jacobson Bedford, TX
- Glenn Smith, D.O. Associated Orthopedics

**LIAISON COMMITTEE**
- William G. Anderson, D.O. Sinai-Grace Hospital
- John R. Gimpel, D.O., M.Ed. NBOME
- Dee Grimes, MA NBOME
- Janice A. Knebl, D.O., MBA UNTHSC/TCOM
- Representative - AACOM
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**Case Writer of the Year, COMLEX Level 2-Performance Evaluation:**
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**Note:** The information is extracted from the National Board of Osteopathic Medical Examiners Annual Report 2009.
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**A Glossary of School Acronyms**

ATSU/KCOM: A.T. Still University of Health Sciences/Kirksville College of Osteopathic Medicine
ATSU/SOMA: A.T. Still University of Health Sciences/School of Osteopathic Medicine – Arizona
AZCOM: Arizona College of Osteopathic Medicine of Midwestern University
CCOM: Chicago College of Osteopathic Medicine of Midwestern University
DMU-COM: Des Moines University – College of Osteopathic Medicine
GA-PCOM: Georgia Campus – Philadelphia College of Osteopathic Medicine
KCUMB-COM: Kansas City University of Medicine and Biosciences College of Osteopathic Medicine
LECOM: Lake Erie College of Osteopathic Medicine
LECOM – Bradenton: LECOM- Bradenton Campus
LMU-DCOM: Lincoln Memorial University-DeBusk College of Osteopathic Medicine
MSUCOM: Michigan State University College of Osteopathic Medicine
NSU-COM: Nova Southeastern University – College of Osteopathic Medicine
NYCOM/NYIT: New York College of Osteopathic Medicine of New York Institute of Technology
OSU-COM: Oklahoma State University Center for Health Sciences – College of Osteopathic Medicine
OUCOM: Ohio University College of Osteopathic Medicine
PNWU-COM: Pacific Northwest University of Health Sciences College of Osteopathic Medicine
PCOM: Philadelphia College of Osteopathic Medicine
PCSOM: Pikeville College of Osteopathic Medicine; RVUCOM: Rocky Vista University College of Osteopathic Medicine
RVUCOM: Rocky Vista University College of Osteopathic Medicine
TOUROCOM-NY: Touro College of Osteopathic Medicine – New York
TOUROCOM-CA: Touro University College of Medicine
TUNCOM-NV: Touro University of Nevada College of Osteopathic Medicine – Nevada Campus
UMDNJ-SOM: University of Medicine and Dentistry of New Jersey - School of Osteopathic Medicine
UNECOM: University of New England College of Osteopathic Medicine
UNTHSC/TCOM: University of North Texas Health Science Center at Fort Worth/Texas College of Osteopathic Medicine
VCOM: Edward Via Virginia College of Osteopathic Medicine
Western U/COMP: Western University of Health Sciences/College of Osteopathic Medicine of the Pacific
WVSOM: West Virginia School of Osteopathic Medicine
WCU-COM: William Carey University College of Osteopathic Medicine
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