



## RECOMMENDATIONS FROM THE SPECIAL COMMISSION ON OSTEOPATHIC MEDICAL LICENSURE ASSESSMENT – FOR PUBLIC COMMENTARY

These recommendations are presented from the [membership](#) of the Special Commission on Osteopathic Medical Licensure Assessment to stakeholders of the COMLEX-USA series, the licensure examination for osteopathic physicians in the United States and international jurisdictions. They are available for public commentary through May 4, 2022.

They are intended to fulfill the charge of the commission, namely, to review the COMLEX-USA examination program, evaluate defensible alternative pathways for verification or assessment of fundamental clinical skills and other competencies, and assure that the COMLEX-USA licensure examination pathway continues to evolve with the rapidly changing practice of osteopathic medicine, osteopathic medical education and health care.

In conducting its work from February 2021–April 2022, the Special Commission solicited and considered input from all stakeholder groups, including students, educators, licensing authorities, professional organizations and public members and patient representatives.

With each theme, the Special Commission has included a brief summary related to development of the associated recommendations. A full report will be presented to the National Board of Osteopathic Medical Examiners in June 2022 and outcomes will be published in July 2022.

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Public commentary will be collected through May 4, 2022 by [form](#).

## THEME

# Long-term solutions to assess clinical skills competencies for osteopathic medicine in the COMLEX-USA program: Class of 2024 and beyond

## 01

**Establish COM-based COMLEX-USA national standardized assessment which includes an in-person, hands-on evaluation of fundamental osteopathic clinical skills including interpersonal and communications skills and OMT, with quality assurance.**

Following the indefinite suspension of the COMLEX-USA Level 2-PE, stakeholder feedback to the Special Commission on Osteopathic Medical Licensure Assessment strongly supported that the assessment of osteopathic clinical skills (including communication and interpersonal skills and the performance of osteopathic manipulative medicine) remains an essential element of licensure assessment for DOs and integral to the profession, and should remain as part of the licensure assessment. Multiple stakeholder representatives were called upon by the Special Commission to provide testimony to support this, including staff from other national testing organizations, hospital administrators, risk management professionals, patient safety spokespersons, osteopathic medical students, and patients themselves.

The Evidence for Clinical Skills Inventory results established that the colleges of osteopathic medicine (COMs) could play an important role in this assessment. Discussions with members of the AACOM Leadership, the Board of Deans, and the AOA Commission on Osteopathic College Accreditation were helpful in developing this recommendation.

For the purpose of licensure assessment, it is important to have a performance standard to which each individual is held, regardless of the osteopathic college attended. Therefore, the Special Commission recommends that the NBOME begin working with the COMs to provide an assessment that allows for the standardized measurement of osteopathic clinical skills at the COMs with appropriate national oversight and defined national performance standards.

## THEME

### Diversity, Equity, and Inclusion in Assessment (DEI)

**02** Reflect diversity of skin tone within images and diversity of characteristics such as ethnicity, gender identity, and sexual orientation within patient descriptions.

**03** Use person-centered language that is unbiased, non-discriminatory, and non-derogatory in examinations and publications.

**04** Maintain examination item fairness.

**05** Commit to a National Faculty that is broadly representative of population diversity and practicing DOs.

This theme reflects the Special Commission's commitment to diversity, equity, and inclusion. The Special Commission recognizes that the NBOME has already undertaken DEI initiatives to sustain best practice, defensibility, and continuous quality improvement in assessment and, within these recommendations, highlights those steps that the Commissioners hold to be most vital at this time. The Special Commission recommends that the NBOME continue its work to ensure diversity is reflected in reviewing the image bank and patient descriptions with the aim of widely-representative and unbiased patient portrayal throughout NBOME assessments. We also recommend that the NBOME maintain item fairness through psychometric analysis and through insistence that all items be evidence-based. Additionally, the Special Commission holds that inclusive, person-centered language, by not allowing a diagnosis or other circumstance to define a person, reflects osteopathic philosophy by putting the patient first and looking at the whole person. The Special Commission, while recognizing that the National Faculty relies on the available pool of trained subject matter experts, also recommends that the NBOME commit to the goal of a National Faculty that is broadly representative of population diversity as well as of practicing DOs.

## THEME

### Emerging competencies and new test content in COMLEX-USA

06

Ensure the content and competencies assessed make the COMLEX-USA series align with the distinctive education and practice of osteopathic medicine.

07

Regular review of the COMLEX-USA series to ensure it continues to reflect current practice of osteopathic medicine.

08

Consider expansion of assessment content in the areas of public health, evidence based medicine, and social determinants of health in COMLEX-USA.

This theme emphasizes the importance of regular systematic review of the COMLEX-USA program in light of the changing practice of osteopathic medicine. The COVID-19 pandemic not only necessitated changes to NBOME assessments but also impacted how and why patients present to osteopathic physicians and how DOs care for patients.

The Special Commission on Osteopathic Medical Licensure Assessment considered organizational factors such as the indefinite suspension of the COMLEX-USA Level 2-PE, ensuring important competencies would still be measured, the emphasis on diversity, equity, and inclusion in the content in COMLEX-USA, and emerging technologies in assessment. Structural factors discussed included blueprint review, job analysis, and the assessment of clinical skills in computer-based examinations.

## THEME

# Technology and test delivery advances

# 09

**Determine if new technology would expand or improve assessment of competencies required for the practice of osteopathic medicine.**

# 10

**Explore test delivery advances that may improve efficiency, convenience, or accuracy in testing without sacrificing security and rigor.**

The Special Commission discussed how technology could expand and/or improve the assessment of competencies required for the practice of osteopathic medicine. While some sort of virtual assessment of clinical skills may be possible in the future, the applicable technology, the validity of the measures, and cost/benefit of this approach would need to be studied.

There may also be technologies that can improve the assessment of some competencies. The use of natural language processing (NLP) to score written components of examinations may improve the accuracy and reliability of the scores and decrease the cost of scoring. Employing automatic item generation (AIG) to develop multiple choice questions could expand the test bank, limiting item exposure, and minimizing some potential threats to validity. The Special Commission also discussed the use of computer case simulations and virtual reality to measure some clinical skill competencies. For computer-based assessments, technology can expand what is being measured by incorporating images, videos and item types that do not center on picking a correct answer from a list of options (e.g., pointing to an area on an image, ordering tasks, drawing a picture, drag and drop).

The Special Commission discussed how test delivery could be more convenient. At present, for various psychometric reasons, the COMLEX-USA series is offered on a fixed schedule at vendor-based centers throughout the United States and Canada. At the beginning of the COVID-19 pandemic, with the closing of vendor sites, some COMs were able to temporarily offer test administrations of COMLEX-USA, indicating that it is possible to make the administration of these assessments more accessible. Additionally, many testing organizations offer remote-proctoring for their assessments. Here, the candidate can take an examination at home as long as they meet environmental (closed room, no windows) and computer software/hardware requirements. At present, the Comprehensive Osteopathic Medical Achievement Tests (COMAT), a lower stakes formative examination series offered by the NBOME, allows for a remote-proctored administration option. The viability of remote proctoring for the higher stakes COMLEX-USA licensure series needs to be studied.

The Special Commission also discussed the applicability of progress testing for making competency decisions. Technology could provide a platform for storing and aggregating student work and performance measures over time. There was general consensus, however, that evidence was lacking as to whether this strategy would yield results that were comparable to the current licensing examination series.