

American Osteopathic Board of Ophthalmology and Otolaryngology-Head and Neck Surgery

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The objectives and purposes of the American Osteopathic Board of Ophthalmology and Otolaryngology-Head and Neck Surgery (AOBOO-HNS) are:

1. To define and determine the qualifications required of osteopathic physicians for certification in the specialty(s) of ophthalmology, otolaryngology/facial plastic surgery and any other specialty and/or certification of added qualifications which may be assigned to the jurisdiction of this Board.
2. To determine the standards of education, formal training and practice required for certification in the specialty(s) of ophthalmology, otolaryngology/facial plastic surgery and any other specialty and/or certification of added qualifications which may be assigned to the jurisdiction of this Board, subject to the recommendation of the Bureau of Osteopathic Specialists (BOS) and the approval of the Board of Trustees of the American Osteopathic Association (AOA).
3. To establish procedures for the conduct of examination at least once a year for general certification areas. Certification of special qualifications and certification of added qualification examinations must be made available at least once every two years.
4. To provide and issue certificates in all specialty(s) assigned to this Board, subject to the recommendation of the Bureau of Osteopathic Specialists, to those osteopathic physicians who are found qualified.
5. To recommend to the Bureau of Osteopathic Specialists the revocation of certificates for cause.
6. To use every means possible to maintain a high standard of practice within the osteopathic profession.
7. To offer an Osteopathic Continuous Certification (OCC) process, as approved by the BOS and the AOA Board of Trustees, and to issue certificates of renewal, subject to the approval of the BOS, to diplomates who successfully complete the OCC process.

SPECIALTY DEFINED

For the purpose of the operation of this Board, the following divisions of practice are defined:

1. The practice of ophthalmology shall consist of the diagnosis and treatment of the disorders and diseases of the eye and its adnexa, including refraction.
2. The practice of otolaryngology shall include the diagnosis and treatment of disorders and diseases of the ear, nose and throat, and may include such other subspecialties as have a definite relationship to otolaryngology.
3. The practice of otolaryngology/facial plastic surgery shall include the diagnosis and treatment of disorders and diseases of the ear, nose and throat, as well as the medical and surgical fields of facial plastic surgery.

REQUIREMENTS FOR CERTIFICATION

The American Osteopathic Board of Ophthalmology and Otolaryngology-Head and Neck Surgery (hereafter referred to as the "Board") will accept for examination for certification only osteopathic physicians who are specializing in one or more of the specialties under the jurisdiction of this Board. It shall be the policy of this Board to require the Credentials Committee to carefully scrutinize the scope of specialty practice represented in each candidate's report. Unless the candidate presents evidence that the scope of his/her specialty practice is sufficiently varied and of a major character, the Credentials Committee shall not recommend the candidate for certification.

The candidate for certification by the AOA through the American Osteopathic Board of Ophthalmology and Otolaryngology-Head and Neck Surgery must meet the following requirements:

1. The candidate must have graduated from an AOA-accredited College of Osteopathic Medicine.
2. The candidate must maintain an unrestricted license to practice in the state or territory where his/her practice is conducted.
3. The candidate must conform to the standards set forth in the AOA Code of Ethics.
4. **The candidate must maintain continuous and uninterrupted membership in the AOA or the Canadian Osteopathic Association throughout the certification process. Following the examination process, if a candidate is found to be delinquent in his/her maintenance of membership and payment of membership dues, certification may be delayed.**
5. The candidate must have satisfactorily completed an AOA-approved OGME-1 residency training year.
6. The candidate must have satisfactorily completed an AOA-approved residency training program in one of the specialties under the jurisdiction of this Board after the required OGME-1 residency training year. The training program must encompass all aspects of the particular specialty, including adequate training in the basic medical sciences, with emphasis on the osteopathic principles as related to the specialty. The required number of years of residency training in each specialty are as follows:
 - a. Ophthalmology: a minimum of three (3) years of AOA-approved residency training in ophthalmology after the required OGME-1 residency training year.
 - b. Otolaryngology/Facial Plastic Surgery: a minimum of four (4) years of AOA-approved residency training in otolaryngology/facial plastic surgery after the required OGME-1 residency training year.
7. Following satisfactory compliance with the prescribed requirements for examination, the candidate is required to pass appropriate examinations planned to evaluate an understanding of the scientific bases of the problems involved in ophthalmology and otolaryngology/facial plastic surgery, familiarity with the current advances in these specialties, and possession of sound judgment and high degree of skill in the diagnostic and therapeutic procedures involved in the practice of these specialties.
8. Candidates for examination for certification are required to file an application which shall set forth their qualifications for examination.
9. All candidates for certification will be issued time-dated certificates valid for a ten (10) year period starting in the year 2000 (ophthalmology) and 2002 (otolaryngology/facial plastic surgery), after which the diplomate must make application to the OCC process (see Appendix D for additional information). The Board will make available, beginning in the eighth year of certification, the opportunity to take the OCC written examination (formerly referred to as recertification).

REQUIREMENTS FOR CERTIFICATION OF ADDED QUALIFICATIONS

Certification of added qualifications (CAQ) constitutes a modification of a general certificate of special qualifications to reflect additional training and satisfactory completion of a certifying examination in that field. The training required for added qualifications must incorporate a specific and identifiable body of knowledge within the broader practice of the general subspecialty.

To be eligible to sit for an examination for an otolaryngic allergy CAQ, the applicant must meet the following minimum requirements:

1. The applicant must be certified by this Board in otolaryngology or otolaryngology/facial plastic surgery.
2. The applicant must have completed one (1) year of AOA or AOCOO-HNS-approved training in otolaryngic allergy (may consist of a two (2) or three (3) year interrupted post-residency fellowship).
3. The applicant must pass a written and oral examination. The written examination shall consist of multiple choice questions covering all aspects of otolaryngic allergy including basic science, immunology, clinical performance, testing, desensitization, etc. The oral examination shall consist of case studies as prescribed by this Board. Case studies must reflect techniques and methodologies that adhere to approved methods. They must adhere to accepted policies regarding set testing, in vitro testing and food testing. Cases must be from the past two (2) years and must include one (1) food allergy case. Treatment may consist of avoidance, chemotherapy and/or immunotherapy. Documentation must include diagnosis, therapy, protocol and response. Patients must have been followed for at least six (6) months.

BOARD ELIGIBILITY

Definition: The time frame when upon completion of an AOA-approved training program, osteopathic physicians and surgeons are eligible to begin the certification process and to declare their status as board eligible in their specialty.

Notification: All residents and fellows in AOA-approved programs shall be notified by the Board of the definition and deadline of board eligibility.

Time Frame: Board eligibility commences upon completion of the specialty training program and terminates on December 31 of the following sixth year.

1. Board eligibility status will automatically be terminated and so recorded by the AOA and the Board:
 - a. At the end of the board eligibility time frame, or
 - b. Following resolution of an appeal, or
 - c. Upon award of certification
2. In view of a candidate's right to appeal the results of a failed examination, if board eligibility would have terminated as a result of lapse of the six (6) year time frame, the designation of board eligible shall not terminate until the appeal has been resolved.
3. Candidates may not use the designation of board eligible at any time after the termination of board eligibility.

Certification Eligibility

1. Candidates are eligible to become certified at any time within the board eligibility time frame.
2. Candidates who have initiated the certification process in their specialty by sitting for an examination prior to July 1, 2009 may continue to pursue certification at any time (after the board eligibility time frame) based upon the Board's requirements prior to July 1, 2009.
3. Candidates who have not initiated the certification process by sitting for an examination in their specialty prior to July 1, 2009 may become certified only by successfully completing the certification examination pathway process.
4. Candidates who are not successful in becoming certified at the conclusion of the final pathway process are no longer eligible to become certified in their specialty.

Certification Examination Pathway Process

1. Initial Pathway

- a. Candidates must petition the Board for entry into the initial pathway process. Candidates will be automatically registered for the initial pathway upon completion of the Board's application process.
- b. The Board will accept all applicants who have met the entry requirements into the process.

- c. Upon acceptance into the process, the candidate must follow the pathway outlined below. Prior activity toward certification will not be recognized in the initial pathway process if applicable.
 - i. Candidates must enter at the beginning of the Board's certification process.
 - ii. Candidates must follow the process as outlined by the Board's requirements during the six (6) years of board eligibility.
 - iii. Candidates must complete certification during the six (6) year period of board eligibility.
 - iv. Candidates who have not completed certification during the six (6) year period of board eligibility, their ability to complete certification shall terminate and they then may reenter the certification process via the first reentry process.

2. First Re-Entry Process

- a. Candidates must petition the Board for entry into the certification process.
- b. Upon acceptance by the Board the candidate must follow the following process:
 - i. The candidate must start at the beginning of the certification process. Prior activity toward certification will not be recognized in the first re-entry process.
 - ii. Candidates must participate in the first available administration of the qualifying examination.
 - iii. The candidate will have two (2) attempts to pass each step of the examination process.
 - iv. If unsuccessful on a given administration, the candidate must participate in the next available examination administration.
 - v. Candidates who were not successful in becoming certified at the end of the first re-entry pathway process may pursue certification only by petitioning the certifying board for entry into the final pathway process.

3. Final Pathway

- a. Candidates must petition the Board for entry into the final pathway process.
- b. The Board is required to establish criteria that must be met prior to granting entry into the final pathway process.
 - i. These criteria must be approved by the Standards Review Committee of the AOA Bureau of Osteopathic Specialists (BOS).
 - ii. Upon notification of the criteria, the candidate must display efforts to conform and satisfy the requirements without delay.
- c. Upon completion of the requirements, the candidate must follow the pathway outlined below. Prior activity toward certification will not be recognized in the final pathway process.
 - i. Candidates must enter at the beginning of the Board's certification process.
 - ii. Candidates must participate in the first available administration of the qualifying examination.
 - iii. The candidate will have two (2) attempts to pass each step of the examination process.
 - iv. If unsuccessful on a given administration, the candidate must participate in the next available examination administration.
- d. Candidates who were not successful in becoming certified at the end of the final pathway have no further opportunity to become certified in their specialty.

APPLICATION FOR EXAMINATION

Eligibility for the written qualifying examination (first time candidate):

1. Candidate may be in his/her final year of residency training (senior resident).
2. Candidate must have all previous years of residency training reviewed and approved by the Specialty College.

The candidate shall:

1. Make written application on a form provided by the administrative secretary of the Board.
2. Provide the following documentation at the time the application is submitted:

Photostatic copies of:

- a. Diploma of graduation from AOA-approved College of Osteopathic Medicine
- b. Diploma of internship

- c. Diploma of residency (upon completion)
 - d. Certificate of unrestricted license or military jurisdiction
 - e. Verification of program complete status from Specialty College
 - f. Letter signed by the program director, testifying to the candidate's status as a resident, including the dates of the training program
3. Submit all documentation and other data referred to in this document to the Board by March 31 preceding the annual meeting of the Board. Failure of the candidate to submit all required data for the completion of his/her application on or before the deadline stated above may defer consideration of his/her application by the Credentials Committee in the current year.
 4. Submit the required fee(s) with the application. No part of the application fee shall be returned without candidate's written request and Board approval. A fee schedule shall either be provided with the application for examination or at the request of the candidate.

Eligibility for the oral certifying examination:

1. The candidate must have successfully completed the written qualifying examination.
2. The candidate must submit a letter of intent (samples are available on the Board website www.aoboo.org) to take the oral certifying examination and an oral examination application. The examination fee must accompany the letter and application.
3. The candidate shall demonstrate eligibility for the examination in any other manner required by the Board.
4. **In order to enter the final phase of certification, the candidate must have achieved program complete status from the Specialty College, and all the documentation requested at the time of original application submission MUST be in the candidate's file.**

RULES FOR THE CONDUCT OF EXAMINATIONS

Written Qualifying Examination

The written examination may be taken upon completion of the required number of years of residency training and in compliance with the requirements for certification. Questions on the examination shall be based on factual information relating to the science of the particular specialty. Subjects for the examination may include: basic science, clinical medicine and surgical management. The format of the written examination may include, but not be limited to, multiple choice and short essay.

On the day of examination, the candidate must register and show picture identification. The candidate will receive an envelope containing an exam ID number, file update form and any other applicable information and instructions. The candidate must place only this exam ID number on the examination score sheets and test booklet cover. The file update form is to be filled out and returned to the examination staff at the registration desk. The examination answer sheet(s) will be provided by the Board to a psychometric consultant for grading. On the day of the examination, none of the following items will be allowed in the examination area: cell phones, PDAs or other electronic devices, printed material relating to examination questions, handbags, briefcases, backpacks or suitcases. The examination team will not be responsible for the storage of an examinee's personal property. Violation of this requirement may result in termination of the examination.

In accordance with the AOA Bureau of Osteopathic Specialists Standards Review Committee, the written examination process is reviewed by a psychometrician who finds the examination process to be psychometrically sound and defensible and follows the rules of practice established in the APA/AERA National Standards for Education and Psychological Testing. Pass and fail decisions are based solely on the content mastery displayed by the candidate.

Oral Certifying Examination

In order to enter the final phase of certification (oral certifying examination), the candidate must have achieved program complete status from the Specialty College.

The oral certifying examination shall be given to the candidates individually. Clinical problems and clinical case presentations shall be presented within the range of the questions approved by the Board and in the manner

prescribed by the Board. Examiners will provide candidates with patient cases. Cases include presenting problems and statements made by the patient and may include laboratory reports and/or studies appropriate to the etiology of the condition. Candidates participate in the examination by offering initial/suspected possible diagnoses, interpretation of labs and imaging studies, differential diagnosis, proposed treatment options, case management and possible troubleshooting. The examination shall be designed to evaluate judgmental processes and the candidate's ability to solve clinical problems. At least one question shall embrace the osteopathic philosophy of disease as it pertains to the particular specialty.

On the day of examination, the candidate must register and show picture identification. The candidate will receive an envelope containing an ID number badge, file update form and any other applicable information and instructions. The file update form is to be filled out and returned to the examination staff at the registration desk immediately following the examination.

Candidates are expected to conduct themselves according to the honor system, respecting the integrity of the examination and protecting their fellow examinees. Under no circumstances should the candidate speak to other candidates about the examination questions or examination process. Failure to comply will result in invalidation of the examination and constitutes a failure, as well as an ethical violation, which will be stated in the candidate's official Board file and reported to the AOA. On the day of the examination, none of the following items will be allowed in the examination area: cell phones, PDAs or other electronic devices, printed material relating to examination questions, handbags, briefcases, backpacks or suitcases. The examination team will not be responsible for the storage of an examinee's personal property. Violation of this requirement may result in termination of the examination.

In accordance with the AOA Bureau of Osteopathic Specialists Standards Review Committee, the oral examination process is reviewed by a psychometrician who finds the examination process to be psychometrically sound and defensible and follows the rules of practice established in the APA/AERA National Standards for Education and Psychological Testing. Pass and fail decisions are based solely on the content mastery displayed by the candidate.

EXAMINATION GRADES

All examination records shall be submitted by the chairman of the Examination Committee to the Board, and the entire Board shall determine the final grade of each portion of the examination.

The Board sets passing standards for the written and oral examinations, using an acceptable measurement model known as "criterion-referenced standard setting." Using this model, the Board specifies the particular content and level of content difficulty necessary to be considered a passing candidate. Board members, who are themselves all certified, come from both practice and academic settings. The standard represents the minimal knowledge specified to be considered a successful ophthalmologist and/or otolaryngologist.

All examination results are reviewed and approved by the entire Board. Candidates will be notified **no later than 60 days** following the Board's decision. Candidates failing any part of the examination process will subsequently receive a deficiency report.

A passing grade in each portion (written and oral) of the examination process must be received for a candidate to be recommended for certification. After a candidate has met all requirements and successfully passed the examinations, the Board makes a recommendation to the AOA Bureau of Osteopathic Specialists for certification. The AOA will inform the candidate in writing of his/her certification and certificate number. The Board office is also notified, at which time the Board will order the certificate to be printed.

FAILURE OF AN EXAMINATION WITHIN THE CERTIFICATION ELIGIBILITY TIME FRAME

Following an initial or second failure in the written and/or oral examinations, the candidate may apply for reexamination and shall be required to pay an examination fee as determined by the Board. Applicants for reexamination shall be required to take the examination within a two (2) year period following the initial or second failure. If the candidate fails to take the examination within this period, the candidate's file shall be considered inactive. Any further application shall be considered as a new application at the discretion of the Board.

If the candidate fails three (3) successive examinations, he/she must provide documentation of a minimum of seventy-five (75) hours of current graduate study (continuing medical education) in the specialty in which he/she is seeking certification. Hours acceptable for submission for consideration must have been earned between the date of the most recent failure and the submission date. Following submission of this documentation (deadline

February 15), the Credentials Committee will convene to review it. Approval of this documentation by the Credentials Committee is required prior to retaking an examination.

APPEAL MECHANISM

If the candidate believes that the action of the Board constitutes unequal application of regulations and requirements or standards, unwarranted discrimination, prejudice, unfairness or improper conduct of all or any part of an examination conducted by the Board, the candidate has the right to appeal to the Appeal Committee of the Board.

Appeal policy for examinations in ophthalmology, otolaryngology/facial plastic surgery and otolaryngic allergy are:

1. Scope of Appeal
 - a. Appealable Issues: Candidates may appeal to the AOBOO-HNS to raise concerns relative to the examination's administration (i.e., alleged bias/prejudice of a member of an examination team or failure to follow established examination procedures).
 - b. Non-Appealable Issues: The AOBOO-HNS will not consider appeals based on examination content, sufficiency or accuracy of answers given to examination questions, scoring of the examination, scoring of answers to individual questions, and/or the determination of the minimum passing score.
2. Procedure for Appeal
 - a. Appeal Request Form: In order to appeal concerning the examination, a candidate must set forth the basis for the appeal on an appeal request form and submit the form to a member of the examination team. Appeal request forms will be provided to all certification candidates prior to the commencement of the examination. Additional copies of the appeal request form will be available upon request to the examination team. The appellant must submit the completed appeal request form to the examination team within **two (2) hours** following the completion of the examination.
 - b. Late Appeals: All appeals submitted after the two-hour deadline for submission of the appeal request form will be denied.
 - c. Evaluation of Appeal: Each appeal submitted on an appeal request form within two hours of completion of the examination will be considered by the AOBOO-HNS Appeal Committee. A majority vote of the committee will determine whether the AOBOO-HNS accepts or denies the appeal.
 - d. Notification of Candidates: Candidates will be advised by the AOBOO-HNS of the Appeal Committee's decision by certified mail.
3. Effect of Decision
 - a. Decision to Accept Appeal
 - i. No scoring or recording of examination: If the Appeal Committee accepts an appeal, then the candidate's examination will not be scored or recorded.
 - ii. Right to retake examination: A candidate whose appeal is accepted shall have the right to a new examination at the next scheduled examination date with no additional application or examination fee. All other fees incurred are the responsibility of the candidate. At that time, the examination will be conducted by a different examination team or in a manner that is determined by the Board to address the issues raised in the appeal request. The candidate's original log may be utilized to retake the clinical examination. Retake examinations will be conducted in accordance with the format for the current examination.
 - iii. Failure to retake the examination: If, for any reason, the candidate elects NOT to retake the examination at the next scheduled date, the appeal shall be considered null and void, and the candidate will be required to reapply for the certification examination. The application shall be considered in accordance with the criteria in effect at the time of the new application. Exceptions (for good cause) to this stipulation will be considered on an individual basis by the Executive Committee.
 - iv. Further Appeals: (a) Current examination: The candidate whose appeal is accepted shall NOT have the right to alter the original appeal of the current examination results, either within the AOBOO-HNS or to the AOA, and (b) Subsequent examination: The candidate whose appeal is accepted shall NOT have the right to appeal the next scheduled examination to the AOBOO-HNS under this policy. However, the candidate shall have the right to appeal to the AOA.
 - b. Decision to Deny Appeal: If an appeal is denied by the AOBOO-HNS Appeals Committee, the candidate shall have the right to appeal to the AOA.

Candidates interested in appealing to the AOA should contact the American Osteopathic Association, Department of Education, Division of Certification, 142 East Ontario Street, Chicago, IL 60611.

CERTIFICATES

Certificates are issued by the Board to candidates who have met all requirements for certification and who have received the approval of the Bureau of Osteopathic Specialists. Each certificate shall be signed by the chairman and vice chairman of the Board. No certificate is valid until it has been signed by the executive director of the AOA.

Inactivation and Reinstatement: Diplomates whose time-limited certification has been deemed inactive for any reason may petition the AOA BOS Certification Compliance Review (CCR) Committee to reactivate the certification. Physicians reentering the certification process within three (3) years of the expiration of inactivation of their certification may reenter the process by remediating or completing any outstanding certification or OCC requirements not fulfilled when the certification became inactive. The date of certification will be effective on the date that all requirements have been satisfied and valid for ten (10) years.

APPENDIX A

Upon completion of the official registration process, each candidate for primary certificate and each diplomate for OCC agrees:

- To disqualification from examination and forfeiture of fee or from issuance of a certification of specialization or to the surrender of such certificate of specialization as directed by the American Osteopathic Association (AOA) in the event that any foregoing statements made by the diplomate are false, or in the event that any of the rules, regulations and requirements governing such examinations are violated, or in the event that the diplomate does not comply with any of the Bylaws and Rules and Regulations of the American Osteopathic Board of Ophthalmology and Otolaryngology-Head and Neck Surgery (AOBOO-HNS).
- To hold the AOA, the AOBOO, its members, examiners, officers and agents free from any damages, expense, or complaint by reason of any action they or any one of them may take in connection with the application, or the failure of the AOBOO to recommend issuance of such certification of specialization, or the revocation of any certificate of specialization issued pursuant to the application.
- To abide by the Code of Ethics of the AOA, which has been formulated to guide its member physicians and surgeons in their professional lives. The standards presented are designed to address the osteopathic physician's and surgeon's ethical and professional responsibilities to patients, to society, to the AOA, to others involved in healthcare and to the diplomate. The AOA has adopted the position that physicians and surgeons should play a major role in the development and instruction of medical ethics.
- To pledge that, if recommended by the AOBOO and if certified by the AOA, that the Constitution and Bylaws of the AOA will be upheld, and further pledge that if any violation of ethical conduct occurs, particularly as it relates to hospital procedure or surgical practices, this shall be deemed cause for revocation of certification by the AOBOO and by the AOA.

APPENDIX B

Americans with Disabilities Act and Special Testing Accommodations

The American Osteopathic Board of Ophthalmology and Otolaryngology-Head and Neck Surgery is committed to a policy of compliance with federal, state and local laws and regulations. The AOBOO-HNS, in compliance with the Americans with Disabilities Acts (ADA), has adopted the following policy. Physicians who are eligible for examination may submit an application for accommodation of a disability by using an application form approved by the Board.

Definition of Disability

Under the ADA, a disability is defined as a physical or mental impairment that substantially limits one or more of the major life activities of the individual. An individual is not substantially limited in a major life activity if the limitation does not amount to a significant restriction when compared with the abilities of the average person.

Policy Statement

All qualified candidates for board certification who suffer from a disability as defined in the ADA may apply to a certifying board for accommodation of that disability. The AOBOO-HNS shall have the discretionary authority, subject to review by the BOS Appeals Committee and the AOA Board of Trustees, to determine if an accommodation is appropriate.

Procedure for Applying for Accommodation of Disability

1. Requests for accommodation of a disability must be submitted in writing to the AOBOO-HNS at least ninety (90) days prior to the examination date. The request must be supported by appropriate documentation of the diagnosis of disability and the need for accommodation, including the evaluation of the candidate by a qualified professional (see documentation requirements below).
2. Requests for accommodation must be complete and submitted on time. The AOBOO-HNS will not delay scheduled administrations of examinations due to a candidate's failure to submit a complete application.
3. The AOBOO-HNS must complete its review of requests for accommodation in a timely fashion and advise the candidate within thirty (30) days of its receipt of a request for accommodation: (a) the requested accommodation will be granted; (b) the requested accommodation will be granted in part; (c) additional information is required; or (d) the requested accommodation will be denied.
4. The AOBOO-HNS may request additional information, including requiring an applicant to secure a second opinion from an outside expert or submitting the applicant's documentation to an outside expert. The cost of review by an outside expert will be paid by the AOBOO-HNS.
5. In general, reapplication for special accommodation is not required for each examination administration. However, applicants seeking accommodation of a new disability or a different accommodation of the same disability must submit new applications.

Documentation Requirements

Requirements for accommodation must be supported by appropriate documentation of the disability and the need for the requested accommodation. At a minimum, the application should provide the certifying board with the following information and documentation, which is to be prepared and furnished at the applicant's expense:

- **Identification of the disability**
- **Identification of the requested accommodation(s)** for each identified disability
- **The name and current contact information** (address, telephone number, email address) of each professional providing a report(s) in support of the disability and/or requested accommodation
- **A verification and authorization form** signed by the certification candidate
- **An education and examination history**, including the following information: (a) the name, location and dates of attendance for all schools the candidate attended from elementary school to the present, (b) identify the schools which provided accommodations for the disability in examination settings and the nature of

accommodations made for the disability, (c) identify standardized tests completed in the course of the candidates education (e.g., ACT, SAT, MCAT, COMLEX/NBOME); (d) for each test identified, candidate to indicate whether he/she received an accommodation for the stated disability and identify the nature of the accommodation; (e) if the candidate sought an accommodation that has been denied, please explain the circumstances involved. If the candidate has never received an accommodation, please provide a detailed explanation as part of the neuropsychological evaluation discussed below concerning the reasons no accommodation was given in the past and the reason one is needed now.

- **For candidates seeking accommodation of a learning disability, a comprehensive neuropsychological evaluation report.** The report should be issued by a qualified professional (psychiatrist or licensed psychologist) who regularly practices neuropsychology. The report must be based upon examination of the applicant within the last five years. The report must be written on, or accompanied by a letter written on, the evaluating professional's letterhead. The requisite elements of a comprehensive evaluation are an intelligence test, an assessment of neuropsychological functions, an academic achievement test and psychiatric/psychological history. For candidates seeking accommodations on the basis of attention deficit disorder or hyperactivity disorder, the evaluation must include a behavioral index. The requirements for the neuropsychosocial report are identified and described in greater detail in Appendix B.

Evaluation of Accommodation Requests

The AOBOO-HNS will review requests for accommodation upon receipt of the information identified above. The review process will attempt to determine: (a) if a candidate is disabled and the nature of a disability, (b) whether the disability interferes with the candidate's ability to take the certifying examinations, (c) whether the requested accommodation is necessary to allow the candidate to take the examinations, (d) whether a different accommodation would better serve the purpose of the certifying exam while still allowing the candidate to take the examination.

Answers to these questions may not be clear from the documentation presented. Therefore, the certifying boards may request an opinion from an outside expert and either send the documentation submitted by the candidate to the expert for review or ask the candidate to be examined by an outside expert. Cost of consultation with an outside expert will be paid by the AOBOO-HNS.

Based on the review of all documentation, the AOBOO-HNS may decide to: (a) grant a request for accommodation, (b) grant a request for accommodation that is different than the requested accommodation, or (c) deny the request for accommodation. The AOBOO-HNS will notify the candidate in writing of its decision. If the AOBOO-HNS decides not to grant a requested accommodation because a requested accommodation is a fundamental alteration or an undue burden, the Board shall notify the candidate of any alternative methods of accommodation suggested by the expert which are acceptable to it or, if no such alternatives have been suggested, the AOBOO-HNS shall inform the candidate and invite the candidate to suggest alternative accommodations.

Appeals

If a request for accommodation has not been granted, a candidate may request that the Board reconsider its decision or appeal the Board's decision to the Appeal Committee of the Bureau of Osteopathic Specialists. Any appeal must be submitted to the secretary of the BOS president within sixty (60) days of the date of the AOBOO-HNS written decision concerning the request for accommodation.

Procedures for Examination Administration

Where possible, examinations for disabled persons will be proctored and will be given on the same day as other examinations. The location of the examination administration will be determined by the Board on the basis of feasibility of providing necessary services and convenience to the candidate. Where appropriate, to reduce the effect of the candidate's disability on his or her performance on the examination, the following accommodations may be provided: (a) disabled persons may be tested separately, (b) disabled persons may be given assistance in

reading or recording answers, (c) auxiliary aids and services can be offered, but only if they do not fundamentally alter the measurement of skills or knowledge the examination is intended to test and they would not result in an undue burden to the Board; and/or (d) time extensions may be granted to accommodate disabled candidates. Other accommodations will be made upon presentation of appropriate information and documentation supporting the requested documentation.

APPENDIX C

Required Elements of the Neuropsychosocial Report

1. **Intelligence Tests.** The Wechsler Adult Intelligence Scale-Revised is mandatory. The report may include other estimates of verbal and nonverbal intelligence deemed appropriate by the professional preparing the report, such as Peabody Picture Vocabulary Test, Raven's Progressive Matrices or Leiter International.
2. **Assessment of Neuropsychological Functions,** including: (a) a complete, integrated neuropsychological battery, such as the Halstead-Reitan Neuropsychological Battery or the Luria Nebraska Neuropsychological Battery; (b) memory assessments that utilize an age-normed, standardized instrument assessing both verbal and nonverbal memory such as the Wechsler Memory Scale-Revised; and (c) assessments of the specific cognitive and perceptual processes affected by the disability. Examples: in cases of auditory-verbal learning disabilities, include specific tests of phonemic processing. In cases of attention deficit disorder, include specific tests of sustained attentional resources, such as the Continuous Performance Test.
3. **Academic Achievement Test Results.** Standardized, comprehensive academic achievement test, appropriately normed for the candidate's age group, including assessment of spelling, arithmetic and reading comprehension.
4. **Psychological/Psychiatric History,** including (a) standardized psychometric assessment of personality and emotional functioning (MMPI-2 or MCMI-II); (b) standard diagnostic interview for presence of current psychiatric disorders; and (c) if the candidate has undergone treatment for a psychological or psychiatric condition within the past three years, provide a report, including diagnosis, from the treating mental health professional.
5. **Behavioral Indices (required only for candidates seeking accommodations on the basis of attention deficit disorder or hyperactivity disorder)** using standardized psychometric assessments of behavioral indices of attention deficit disorder, such as the Wender Scales or the Achenbach Scale.

The professional's report should address all appropriate elements relevant to the request for accommodation of disability. With respect to each element, the report should include the name of each test administered, its date, a description of the candidate's performance in each of the areas of the test battery, a summary of test scores, and a complete diagnostic formulation in standard DSM-IV terminology utilizing all diagnostic axes. Diagnostic formulations should integrate current testing findings with academic and psychiatric histories. Raw test data should be available upon request.

APPENDIX D

WHAT IS OCC?

Osteopathic Continuous Certification (OCC) is the process by which board-certified DOs maintain current status and demonstrate competency in their specialty area. The goals for OCC are to provide certified physicians and surgeons with a process by which they can continually assess and improve their skills and to assure patients and the public that certified physicians and surgeons are being assessed through reliable and valid measures.

OCC PROCESS

The OCC process is composed of five (5) documentation components, described in detail below:

1. Unrestricted state/jurisdictional military licensure
2. Lifelong learning (continuing medical education)
3. Cognitive assessment (written examination)
4. Practice performance assessment (clinical assessment, self-evaluation and demonstration of practice improvement)
5. Continuous (uninterrupted) AOA Membership

The OCC process is required to be completed over a ten (10) year cycle and repeated every ten (10) years, beginning January 1, 2013.

Who is required to participate in OCC? All diplomates with time-limited certification are required to participate in OCC.

How may I meet the OCC requirements if I am not providing patient care? Diplomates with time-limited certification, who are in an academic or administrative position and who are not clinically caring for patients, may request a clinically inactive status which allows diplomates to propose Component 4 activities that are applicable to their current role in osteopathic medicine. The Board must review and approve proposed Component 4 activities. All other OCC components must be satisfied, including the examination. The clinically inactive status applies to unemployed physicians and academic physicians who do not supervise residents providing patient care.

Should the diplomate decide to return to practice (part-time or full-time), he or she must submit proof of 25 hours of 1A CME in the specialty in the first year and take the written examination at the first available administration.

How may I meet the Component 4 requirement if I am not currently practicing in my field of certification? Diplomates who are in an academic or administrative position and who are not clinically caring for patients are required to complete non-patient care modules such as Communications, Ethics and/or Professionalism. Non-patient care modules will demonstrate that the diplomate is still maintaining knowledge of the basic competencies.

Will I remain certified if I don't participate in OCC? By choosing not to participate in OCC, you are voluntarily suspending the rights to your board certification as mandated by the American Osteopathic Association and Bureau of Osteopathic Specialists.

Who has the option of participating? If you hold a non-time-limited certification, participation in OCC is voluntary at this time; however, the AOBOO-HNS strongly encourages your participation. The Federation of State Medical Boards (FSMB) has agreed to accept OCC for Maintenance of Licensure (MOL). If you do not participate in OCC, you may have additional requirements for MOL as prescribed by the state(s) in which you are licensed. If a diplomate with a non-time-dated certification is required by a state licensing board or an outside entity (i.e., insurance provider) to participate in MOL/OCC, the diplomate will be required to complete all components of the OCC process.

Diplomates with non-time-limited certificates are still required to maintain their license to practice and to maintain AOA membership, which also includes meeting all CME requirements as outlined by the AOA.

Diplomates who hold a non-time-limited primary specialty certification and time-limited CAQ(s) must fully participate in the OCC process for the specialty area of the CAQ in order to maintain the CAQ and be deemed compliant with OCC. The OCC process remains voluntary for the primary specialty certification.

APPLICATION FOR OCC

An official OCC application is required at the beginning of each OCC cycle. The application is required to ensure that the AOBOO-HNS has the most current contact information for the diplomate. The OCC application is available on the AOBOO-HNS website at www.aoboo.org.

All OCC application and documentation materials remain on file with and remain the property of the AOBOO-HNS.

How do I start OCC for my specialty? Official letters of announcement are sent to all diplomates who are required to participate in OCC, with a registration deadline of April 30, 2013 for primary specialties and April 30, 2014 for CAQs. The AOBOO-HNS provides an OCC registration process for all diplomates with a time-limited certificate, as well as for those diplomates with a non-time-limited certificate who wish to participate voluntarily.

How can I track my progress regarding the continuous certification requirements? The AOA has developed an online platform that is accessed through www.osteopathic.org in order to track the progress of an OCC cycle.

Fellowship Exemption: AOA board-certified physicians who begin fellowship training are exempt from participation in OCC during the training period only.

OCC FEES

Each diplomate is required to pay an annual AOBOO OCC fee of \$150.00. Verification and compliance with the OCC process will be available through the Board Office upon written request from the diplomate.

OCC COMPONENTS

Component 1: Unrestricted State/Jurisdictional Military Licensure

Each diplomate is required to maintain a valid and unrestricted state license to practice medicine in one of the 50 states or Canada, or a valid and unrestricted jurisdictional military license. In addition, diplomates are required to adhere to the AOA Code of Ethics. The AOBOO-HNS requires that the diplomate provide proof of valid and unrestricted license annually. The AOBOO-HNS will conduct at least once every other year random verifications of 25% of the diplomates in the OCC process. If, at the time of licensure verification, a diplomate has a restricted license as defined by the AOA, the diplomate must submit an update every six (6) months until the restriction has been lifted.

What happens to my AOA board certification if I have a restricted license? The Certification Compliance Review (CCR) Committee, a sub-committee of the AOA Bureau of Osteopathic Specialists, will review all OCC files with license restrictions and monitor these suspensions on a case-by-case basis with the input of the individual certifying board.

Component 2: Lifelong Learning

During each three (3) year continuing medical education (CME) cycle, each diplomate must fulfill the AOA-required 120 hours, 30 hours of which must be Category 1A, and 50 hours of which must be Category 1 or 2 primary specialty credit hours as defined by the AOBOO-HNS. Diplomates holding one or more certificates of added qualifications (CAQs) must earn a minimum of 13 specialty credits in each subspecialty area of certification.

A list of AOBOO-HNS-approved specialty courses will be posted on the Board website at www.aoboo.org. The AOBOO-HNS strongly recommends that each diplomate attend at least one (1) AOBOO-HNS Annual Clinical Assembly in every three (3) year CME period. The AOBOO-HNS requires that the diplomate submit a copy of the AOA CME report at least once during every three (3) year CME cycle. Diplomates who do not fulfill the CME requirements as outlined above are required to submit in writing a corrective action plan, and they will be expected to fulfill the requirement within the first five (5) months of the next CME cycle as described in the AOA CME Guide.

Component 3: Cognitive Assessment

Each diplomate is required to take and pass a written examination before the expiration of the time-limited certificate. Components 1 and 5 must be verified prior to taking an examination.

When are the examinations offered? The written examinations are offered twice a year (spring and fall). Diplomates are eligible to take the examination three (3) years prior to the expiration date of their certification, thereby allowing six (6) opportunities to pass the examination.

Eligibility example: A diplomate whose original certificate was issued in May 2005 and will expire in May 2015 is eligible for the written examination as early as the spring of 2012 through the fall of 2014.

If the diplomate passes the written examination in a year prior to the year in which the certificate expires, the passing grade will be held and reported to the AOA in the year of expiration, thus maintaining the 10-year time period of certification. The new certificate will be valid for ten (10) years from the date of the expiring certificate.

Upon failure of the OCC written examination, and subsequent expiration of the diplomate's certification, the AOA will be notified, and the certification will be inactivated.

OCC Reentry Process: Diplomates whose time-limited certifications have been deemed inactive for any reason may petition the AOA BOS Certification Compliance Review (CCR) Committee to reactivate the certification. This process also applies to non-clinical and academic physicians reentering clinical practice and to former non-time-limited certificate holders who did not maintain their board certification as required.

1. Physicians reentering the certification process within three (3) years of the expiration or inactivation of their certification may reenter the process by remediating or satisfying any outstanding OCC requirements not fulfilled when the certification became inactive. The certification will be effective on the date that all requirements have been satisfied and valid for ten (10) years.
2. Physicians wishing to reenter the certification process more than three (3) years following the expiration or inactivation of their certification must take the Component 3 cognitive assessment examination at the next available administration and immediately begin the OCC process through participation in a Component 4 activity. Additional remedial activities such as training or continuing medical education may also be required.

Component 4: Practice Performance Assessment (PPA)

Each diplomate is required to participate in a practice performance assessment (PPA) process. The goal of the practice performance assessment is to demonstrate performance improvement in knowledge and skills. Diplomates are asked to demonstrate that they can assess the quality of care they provide as compared to peers and national benchmarks and then apply the best evidence or consensus recommendations to improve that care using follow-up assessments. Diplomates found to be deficient in the PPA process will be required to provide documentation of appropriate remediation of the deficiencies.

The AOBOO-HNS mechanism for practice performance assessment will be a case review and self-evaluation, including assessment activities of AOA-specific core competencies.

Case-specific PPA modules have been developed from a list of medical/surgical procedures most common to the ophthalmology and otolaryngology. The PPA modules must be completed prior to the end of the sixth year of the OCC process (December 31, 2018). This will allow the necessary time for the diplomate to demonstrate remediation and improvement.

PPA Module Collection Information: Diplomates are required to collect data from a minimum of ten (10) consecutive patient records extracted for a designated condition, disease or procedure. Data collected from the patient records submitted must be from patients treated by the diplomate and not by other physicians in a group practice. The AOBOO-HNS will provide samples of the PPA modules with instructions. Once the PPA data has been collected and the diplomate is ready to begin entering the data into the online platform, the PPA project must be completed within 90 days of the start date. PPA data is confidential. The AOBOO-HNS reserves the right to audit PPA activities; therefore, it is the responsibility of the diplomate to maintain the patient records in a format that is retrievable in the event of an audit. An attestation form signed by the diplomate must be submitted to the AOBOO-HNS.

The diplomate's data will be compared to accepted national benchmarks or established consensus guidelines. The Board will provide findings and comments to the diplomate. If the diplomate does not meet national benchmarks or established consensus guidelines, a remediation plan will be developed. Remediation must be completed, and appropriate evidence must be submitted, within the time frame established by the Board. After a specified time (6-12 months), the diplomate will again extract patient data from a minimum of ten (10) new consecutive records. An analysis of improvement or maintenance of national benchmarks or established consensus guidelines will be performed.

The online PPA modules are available online. Once a diplomate begins entering the required data, the diplomate will have no longer than 90 days to complete the PPA module. The AOBOO PPA online module is designed:

1. To create an osteopathic and specialty-specific module for the collection of data.
2. To make the entering and collection of data as straightforward and uncomplicated as possible.
3. To provide an online platform for the review of data entered by OCC participants.
4. To provide accessible data in order to create osteopathic surgical benchmarks.
5. To provide a confidential approach to a standardized platform for data to be analyzed.

Limited Scope: Diplomates who verify that 90% or more of their primary practice does not currently fall within the scope of their primary specialty board certification may propose an alternate Component 4 PPA project outside of those currently offered by the AOBOO-HNS. Projects must meet the requirements for Component 4 as outlined in the BOS Handbook (Article XII, Section 5) as outlined below.

BOS Handbook, Article XII. OCC Section 5. OCC Component 4: Practice Performance Assessment and Improvement

Diplomates must engage in continuous quality improvement through comparison of personal practice performance as measured against national benchmarks for the medical specialty or condition. The Standards Review Committee has set minimum standards for each practice performance assessment activity as follows:

- A. Minimum of 10 patient charts extracted for a designated condition, disease or procedure.
- B. All patient chart information submitted by the diplomate must be from patients treated by the diplomate, rather than from other physicians in a group practice.
- C. The diplomate provides the extracted patient data to his/her Specialty Certifying Board in a specified format.
- D. Diplomate data will be compared to accepted national benchmarks. These benchmarks must be identified and included with the Board's submission the Standards Review Committee.
- E. Benchmarks and associated criteria must be clearly defined prior to the diplomate engaging in the process. Some Specialty Certifying Boards must establish benchmarks based upon accepted standards of care, as national benchmarks may not exist for the specialty.
- F. Certifying Board provides the findings and comments to the diplomate.
- G. If the diplomate did not meet benchmarks, a remediation plan is developed.
 1. If remediation is necessary, the diplomate will engage in a remediation program as specified or approved by the Board. The remediation must be completed with appropriate evidence submitted within the time frame established by the Board.

2. After a specified period of time, the diplomate extracts patient data from a minimum of 10 new charts again.

H. An analysis of improvement or maintaining of benchmarks is performed.

I. All individual data are confidential. Only aggregate data may be made public and only with prior permission of the BOS and AOA.

J. Specialty Certifying Boards must own the data diplomates submit for OCC Component 4 and be the entity that provides the feedback report to the individual.

K. Specialty Certifying Boards may audit a given percentage of diplomates' Component 4 activities; chart data collected as part of each activity must be retrievable in the event of an audit.

The Standards Review Committee reviews each practice performance assessment activity for each of the boards to ensure that it meets the minimum criteria established by the BOS.

Dually-Certified Osteopathic Physicians (Two or More AOA Specialty Certifying Boards): Due to the unique nature of each specialty, diplomates holding two or more general certifications administered through the AOA must satisfy all criteria for both specialty certifying boards' OCC processes. However, CME credits earned will apply to both specialty certifying boards, with the exception of the special CME requirements for each specialty and/or subspecialty certification.

Dually-Certified Osteopathic Physicians (AOA and ABMS Certification): Diplomates participating in the Maintenance of Certification (MOC) process through one or more of the ABMS-recognized certifying boards may petition to submit their practice performance assessment activities completed through MOC and to apply them to their OCC Component 4 requirements. However, the specialty certifying board may also require an osteopathic component.

Component 5: Continuous AOA Membership

Each diplomate is required to maintain continuous and uninterrupted membership in the American Osteopathic Association (AOA) or the Canadian Osteopathic Association and to pay all applicable fees. The AOBOO-HNS will annually conduct random verifications of 50% of the diplomates in the OCC process. If, at the time of verification, a diplomate has allowed his or her AOA membership to lapse, he/she will not be permitted to proceed in the OCC process.

What if I miss a step and don't complete all of the requirements by the deadlines? The objective of the AOBOO-HNS is to stay in contact with all diplomates while they are in the OCC process, with the expectation that no one will miss a step. Ultimately, it is the responsibility of each diplomate in the OCC process to stay informed and up to date with all of the OCC requirements (see OCC Reentry Process on Pages 3 and 4).

WRITTEN EXAMINATION PROCESS

Each diplomate must submit an OCC written examination application, accompanied by a letter of intent and the \$2,000.00 examination fee, by March 1 for the spring examination or by August 1 for the fall examination.

On the day of the examination, the diplomate must register and show proper photo ID. The diplomate will receive an envelope containing an exam ID number, file update form and any other applicable information and instructions. The diplomate must place only this exam ID number on the examination score sheets and test booklet cover. The file update form is to be filled out and returned to the examination staff. The examination answer sheet(s) will be provided by the Board to a psychometric consultant for grading. On the day of the examination, NONE of the following items will be allowed in the examination area: cell phones, PDAs or other electronic devices, printed material relating to examination questions, hand bags, brief cases, backpacks or suitcases. The examination staff will not be responsible for storage of examinees' personal property. Violation of this requirement may result in termination of the examination.

In accordance with the AOA Bureau of Osteopathic Specialists Standards Review Committee, the written examination is reviewed by a psychometrician who finds the examination process to be psychometrically sound and defensible and who follows the rules of practice established in the APA/AERA National Standards for Education and Psychological Testing. Pass and fail decisions are based solely on the content mastery displayed by the diplomate.

EXAMINATION GRADES

All examination records shall be submitted by the chairman of the Examination Committee to the Board, and the entire Board shall determine the final results of the written examination.

The Board sets passing standards for the written examination, using an acceptable measurement model known as "criterion-referenced standard setting." Following this model, the Board specifies the particular content and level of content difficulty necessary for an examinee to be considered a passing diplomate. Board members, who are themselves all certified, come from both practice and academic settings. The standard represents the minimal knowledge specified to be considered a certified surgeon.

All examination results are reviewed and approved by the entire Board. Diplomates will be notified **no later than 60 days** following the Board's decision. Diplomates failing the written examination will subsequently receive a deficiency report.

CERTIFICATES

Certificates are issued by the Board to diplomates who have met all requirements of board certification and OCC and who have been reviewed and approved by the AOA Bureau of Osteopathic Specialists.

REVOCAION AND REINSTATEMENT

Immediately following official notification that a diplomate no longer meets any one of the OCC component requirements, the AOA will be notified, and the certificate will be inactivated according to procedures developed by the AOA Bureau of Osteopathic Specialists.

OCC Reentry Process: For diplomates whose time-limited certification has been deemed inactive for any reason may petition the AOA BOS Certification Compliance Review (CCR) Committee to reactivate the certification. This process also applies to non-clinical and academic physicians reentering clinical practice and to former non-time-limited certificate holders who did not maintain their board certification as required.

1. Physicians reentering the certification process within three (3) years of the expiration of inactivation of their certification may reenter the process by remediating or satisfying any outstanding OCC requirements not fulfilled when the certification became inactive. The date of certification will be effective on the date that all requirements have been satisfied and valid for ten (10) years.
2. Physicians wishing to reenter the certification process three (3) years or more following the expiration or inactivation of their certification must take the Component 3 cognitive assessment examination at the next available administration and immediately begin the OCC process through participation in a Component 4 activity. Additional remedial activities such as training or continuing medical education may also be required.

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