



American Osteopathic Board of Nuclear Medicine

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May 18, 2006

Mr. Thomas Essig
Chief, Materials Safety and Inspection Branch
MS T8F3
U.S. Nuclear Regulatory Commission
11545 Rockville Pike
Rockville, Maryland 20852

Dear Mr. Essig,

The American Osteopathic Board of Nuclear Medicine (AOBNM) is writing you for the purpose of ensuring its recognition by the NRC of its certification processes under the board recognition requirements that are outlined in 10 CFR 35.290.

The AOBNM has been offering certification of osteopathic physicians under the auspices of the American Osteopathic Association (AOA) continuously since 1974 with the capacity to offer certification in nuclear medicine to osteopathic physicians.

As you review this letter, please be aware of the following:

- The AOBNM is the only avenue for osteopathically trained physicians to achieve certification and recertification in nuclear medicine.
- While all physicians are alike in the requirement that they practice the principles of medicine and science, osteopathically trained physicians bring a unique environmental experience and medical perspective. The AOBNM received NRC recognition on December 28, 1988 (*Appendix A*) as a certifying board in nuclear medicine by licensed DOs.
- As of May 18, 2006, the AOBNM has updated its requirements to meet all of the training and experience requirements described in 10 CFR 35.290 (a)(1) and the specific examination requirements described in 10 CFR 35.290 (a)(2).

REQUIREMENTS FOR CERTIFICATION

The requirements for certification of a doctor of osteopathic medicine (DO) by the ABNM are:

Section 1.

To be eligible to receive certification from the American Osteopathic Board of Nuclear Medicine, the applicant must meet the following minimum requirements:

1. Be a graduate of an AOA-accredited college of osteopathic medicine or an accredited College of Medicine.
2. Be licensed to practice in the state or territory where his/her practice is conducted.

3. Be able to show evidence of conformity to the standards set by the AOA.
4. Be a member in good standing of the AOA or the Canadian Osteopathic Association for the two years immediately prior to the date of certification. The applicant is encouraged to maintain membership in the divisional society of the AOA of the state or province in which he/she practices.
5. Have satisfactorily completed an AOA-approved internship.
6. Have completed one of the following combinations of training and experience:
 - a) Certification by the AOA in internal medicine, pathology or radiology, and one year AOA-approved residency training in nuclear medicine.
 - b) Two years of AOA-approved residency training in nuclear medicine following an AOA-approved internship.
 - c) Other combinations of training and experience may be approved on an individual basis after review by the Board and with the approval of the AOA, only after ensuring satisfaction of the requirements outlined in 10 CFR 35.290(a).

Section 2.

Following satisfactory compliance with the requirements in Section 1 above, and the NRC regulations described in 10 CFR 35.290, the applicant must be required to pass appropriate examinations. This plan will evaluate his/her understanding of the scientific basis of the problems involved in the specialty, identify familiarity with the current advances, recognize the candidate's possession of sound judgment and his/her degree of skill in diagnostic procedures involved in the practice of this specialty. The applicant must present evidence that they have completed 700 hours of total training and experience required under 10 CFR 35.290 (a)(1). 80 of these hours will be classroom and laboratory-based. The training and work experience must be obtained under the supervision of an authorized user who has met the requirements of 10 CFR 35.290 or equivalent agreement state requirements.

Please see Appendix B, "Handbook of the Bureau of Osteopathic Specialists," for more information.

- 1) The assessment of a candidate's knowledge and competence will include areas in radiation safety, radionuclide handling, and quality control as required in 10 CFR 35.290(a)(2).
- 2) Oral, written, and clinical examinations shall be conducted in the case of each applicant. The members of this Board shall perform the grading of each written examination, or through the contracted use of the American Board of Nuclear Medicine examination.
- 3) A candidate's application for certification should, in addition to setting forth the applicant's qualification as stated in Section 1, also require the candidate to indicate specifically how/where/when the various requirements in 10 CFR 35.290(a)(1) and 10 CFR 35.290(a)(2) were fulfilled. The AOBNM staff will require documentation from the candidate's approved users/mentors at least 30 days prior to the examination.

Please see Appendix C, "Constitution & By-Laws / Rules & Regulations," for more information.

Section 3.

Subject to the recommendation of the Bureau of Osteopathic Specialists and the approval of the AOA Board of Trustees, the Board may require further training in each of the fields coming under its jurisdiction. Additional requirements for each field must be clearly set forth in the Regulations and Requirements of this Board. Additions to the requirements shall go into effect one year subsequent to the announcement of such change.

RECERTIFICATION

Certificants of the AOBNM holding time-limited certificates must take and pass the appropriate recertification exam to retain certified status.

CERTIFICATE LONGEVITY

Certification by the AOA through the American Osteopathic Board of Nuclear Medicine is valid for ten (10) years, beginning with certificates issued after January 1, 1995.

Please see Appendix D, "Approval Letter from Bureau of Osteopathic Specialists," for more information.

Please see Appendix E, "Copy of Diploma," for more information.

Please note that Appendix C refers to the Pediatrics certification, but serves as a template for all persons who pass Board examinations.

The following assurances are in place to ensure that certificants have complied with certification requirements:

- An outside vendor known to the NRC, specifically the ABNM (American Board of Nuclear Medicine) administers a psychometrically validated examination.
- Examination processes are validated by the AOA Board of Specialists (BOS), which meets twice a year for the purpose of overseeing the certification processes used by AOA certification boards and ensuring that they are both appropriate and defensible.
- Certificants are evaluated by the AOBNM (including training requirements in 35.290(a)(1)) to ascertain whether they have met the criteria for certification, and then the AOA BOS reviews the provided documentation and evidence submitted before conferring certification or recertification on any applicant.

An overview of the section of the certification examination for imaging and localization studies follows:

BASIC SCIENCE AND REGULATORY

A. Physical science 24 ABNM Content Manual (includes PET) (Revised 7/26/2004) 2003 A13NM

1. The structure of matter
2. Radioactive decay
3. Interaction of radiation with matter
4. Basic principles of non-nuclear medicine imaging procedures

B. Instrumentation

1. Principles of radiation detection
 - a. Scatter
 - b. Attenuation
2. Imaging devices
 - a. Gamma scintillation camera
 - b. Single photon emission computed tomography
 - c. Positron Emission Tomography (PET)
 - d. Dual X-ray Absorptiometry (DEXA)
3. Collimation for the various types of radiation detectors and their response to point, line, and plane sources
 - a. Parallel-hole
 - b. Diverging and converging
 - c. Slant-hole
 - d. Pinhole
 - e. Fan-beam
 - f. Cone-beam
4. Electronics
 - a. Pulse amplifiers
 - b. Pulse-height analyzers
 - c. Scalers
 - d. Count rate meters
5. Image production and display technology
 - a. Photographic principles
 - b. Sensitivity
 - c. Resolution
 - d. Contrast
 - e. Latitude
6. Non-imaging radiation detectors: design and operation
 - a. Whole-body counter
 - b. Ganuna well counter
 - c. Scintillation probe
 - d. Liquid scintillation counter

- e. Radiation monitoring devices
- f. Dose calibrator
- g. Gamma/Beta surgical probes

C. Mathematics and statistics

- 1. Fundamental concepts of mathematics
- 2. Fundamental concepts of statistics 24 ABNM Content (includes PET) (Revised 7/26/2004) 2003 ABNM
- 3. Medical decision making including Bayes' theorem, co of diagnostic tests and effectiveness of therapeutic procedural principles of clinical study design and analysis
- 4. Counting statistics

D. Computer science

- 1. Basic aspects of computer structure, function, and programming
- 2. Image processing; filters, etc.
- 3. Principles of data transport and storage, picture archiving and communication systems

E. Radiation biology and protection

- 1. Biological effects of radiation exposure
 - a. Deterministic
 - b. Stochastic
- 2. Calculation of radiation dose from internally administered radio nuclides; dosimetry; biodistribution
- 3. Diagnosis, evaluation, clinical management, and treatment of patients experiencing radiation overexposure in any form; radiation accidents
- 4. Radiation protection
- 5. Risk estimation
- 6. Radiation units
- 7. Safe handling of radioisotopes with instructions and training to include all aspects described in 35.290(a)(2)

F. Radiopharmaceutical production, biochemistry, and quality control

- 1. Production of radio nuclides
 - a. Reactors
 - b. Cyclotrons
 - c. Other particle accelerators
 - d. Radio nuclide generators
- 2. Formulation of radio pharmaceuticals considering chemical properties and quality control including sterility and pyrogenicity testing
- 3. Biochemistry

G. Clinical physiology

- 1. Mathematical models of physiologic systems
- 2. Physiology and pharmacokinetics of radiopharmaceuticals

H. Quality Control

- 1. Camera
- 2. Radiopharmaceutical
- 3. Artifacts

I. Regulatory

1. License requirements
2. Patient release criteria
3. NRC vs. agreement states, etc.
4. Regulations regarding limits of radiation exposure, handling of radioactive patients, and disposal of radioactive wastes
 - a. ALARA concept
5. Regulations applicable to the use of radiopharmaceuticals in nuclear medicine practice and research

While the AOBNM does not have a continuing competency CME assessment program in place at this time, it has a commitment to pursue placement of such a program. Furthermore, AOBNM seeks to implement recertification testing, because it is required for holders of time-limited certificates, and encouraged for those who hold lifetime certificates.

Fraternally,



Michael Blend, PhD, DO
Vice Chair, American Osteopathic Board of Nuclear Medicine

MJB:rn

cc: Ronald Zelac, PhD (via email)



UNITED STATES
NUCLEAR REGULATORY COMMISSION
WASHINGTON, D. C. 20555

DEC 28 1988

American Osteopathic
Board of Nuclear Medicine
ATTN: George T. Caleel, D. O.
Secretary-Treasurer
5200 South Ellis Avenue
Chicago, Illinois 60615

Appendix A

Dear Dr. Caleel,

The U.S. Nuclear Regulatory Commission (NRC) has decided to accept certification by the American Osteopathic Board of Nuclear Medicine (AOBNM) as a demonstration of training and experience sufficient to qualify as an authorized user of byproduct material for medical use for uptake, dilution, excretion, imaging, and localization clinical procedures authorized by an NRC license. This decision is in response to your request dated December 1, 1987, on behalf of the AOBNM requesting recognition of its diplomates in a manner similar to those diplomates of the American Board of Radiology (ABR), the American Board of Nuclear Medicine (ABNM) and the American Osteopathic Board of Radiology (AOBR).

Presently, diplomates of the ABR, the ABNM, and the AOBR are recognized in our medical use regulations, 10 CFR Part 35, Medical Use of Byproduct Material. The staff is developing certain other minor changes to various sections of the regulation to be included in 10 CFR Part 35 at a time in the future. Inclusion of AOBNM's credentialing process in the medical use regulations will occur at that time.

To grant diplomates of your organization immediate recognition, however, we are including the latest list of your diplomates in our Policy and Guidance Directives given to our regional offices. This will direct our regional licensing reviewers to identify AOBNM's diplomates as authorized users for diagnostic nuclear medicine on NRC medical use licenses.

I have requested our State Agreement Program to transmit this information to the Agreement States for their use.

If there are further questions regarding this issue, please contact Jim Myers at (301) 492-0637.

Sincerely,

Richard E. Cunningham, Director
Division of Industrial and Medical
Nuclear Safety
Office of Nuclear Material
Safety and Safeguards

cc: T. Bryson Struse, D. O., Chairman, AOBNM



HANDBOOK OF THE
BUREAU OF OSTEOPATHIC
SPECIALISTS

American Osteopathic Association

Bureau of Osteopathic Specialists

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Revised, October 2004

(Printed on April 22, 2005)

HANDBOOK OF THE BUREAU OF OSTEOPATHIC SPECIALISTS.....	5
PREFACE	5
RULES OF ORGANIZATION AND PROCEDURE OF THE BUREAU OF OSTEOPATHIC SPECIALISTS	8
ARTICLE I - AUTHORITY	8
ARTICLE II - PURPOSES	8
ARTICLE III - PROTOCOL FOR ESTABLISHING CERTIFYING BOARDS, CHANGING JURISDICTION, ESTABLISHING CONJOINT CERTIFICATION PROGRAMS, AND WITHDRAWAL AND/OR DISSOLUTION OF CONJOINT CERTIFICATION PROGRAMS	9
<i>Section 1. - Protocol for establishing new boards.....</i>	<i>9</i>
<i>Section 2. - Protocol for requesting an assignment of jurisdiction by a specialty board.....</i>	<i>10</i>
<i>Section 3. - Protocol for placing exam jurisdictions into dormant status (voluntary and mandatory) and for reactivating dormant exam jurisdictions from such status.....</i>	<i>12</i>
<i>Section 4. Relinquishing jurisdiction in a specialty field when an examination has never been administered or when there are no certificants in that specialty field.....</i>	<i>15</i>
<i>Section 5. - protocol for establishing a conjoint examination in an area of added qualifications</i>	<i>16</i>
<i>Section 6. - protocol for withdrawal and/or dissolution of conjoint certification exams.....</i>	<i>17</i>
ARTICLE IV - DUTIES	18
ARTICLE V - MEMBERSHIP	18
<i>Section 1. - Chair and Vice Chair.....</i>	<i>19</i>
<i>Section 2. - Public Member</i>	<i>19</i>
<i>Section 3. - Representatives from certifying boards.....</i>	<i>19</i>
<i>Section 4. - COPT representatives may observe</i>	<i>20</i>
<i>Section 5. - Secretary</i>	<i>20</i>
ARTICLE VI - COMMITTEES	21
<i>Section 1. - Executive Committee.....</i>	<i>21</i>
<i>Section 2. - Appeal Committee.....</i>	<i>22</i>
<i>Section 3. - Committee on Basic Documents.....</i>	<i>24</i>
<i>Section 4. - Jurisdiction Committee</i>	<i>25</i>
<i>Section 5. - Committee on Administrative and Boards' Financial Matters</i>	<i>25</i>
<i>Section 6. - Standards Review Committee.....</i>	<i>26</i>
ARTICLE VII - BASIC DOCUMENTS	29
<i>Section 1. - Certifying Boards.....</i>	<i>29</i>
<i>Section 2. - Bureau of Osteopathic Specialists.....</i>	<i>29</i>
<i>Section 3. - Requirements for Certification, Recertification or Certification of Added Qualifications</i>	<i>29</i>
ARTICLE VIII - MEETINGS AND REPORTS	30
<i>Section 1. - Meetings.....</i>	<i>30</i>
<i>Section 2. - Reports to the AOA Board of Trustees</i>	<i>30</i>
ARTICLE IX - AMENDMENTS	31
RULES OF PROCEDURE FOR CERTIFYING BOARDS	31
ARTICLE I - MEMBERSHIP	31
<i>Section 1. - Elections by AOA Board of Trustees</i>	<i>31</i>
<i>Section 2. - Term of Office.....</i>	<i>31</i>
<i>Section 3. - Nominations to Conjoint committee.....</i>	<i>32</i>
ARTICLE II - DUTIES OF OFFICERS	32
<i>Section 1. - Chair and Vice Chair.....</i>	<i>32</i>
<i>Section 2. - Secretary-Treasurer</i>	<i>32</i>
ARTICLE III - GENERAL PROCEDURES	33
<i>Section 1. - Bureau reviews prior to AOA Board.....</i>	<i>33</i>
<i>Section 2. - Certification recommendation approval is with Bureau's Executive Committee.....</i>	<i>33</i>
<i>Section 3. - Penalties for non-compliance.....</i>	<i>34</i>
<i>Section 4. - Services that Boards must provide</i>	<i>34</i>

Section 5. –Submission deadlines for Bureau Meetings.....	35
Section 6. – Required compliance with this document.....	35
Section 7. – Dates of approval required on documents, revisions	35
Section 8. – Amendments to Basic Documents.....	35
Section 9. – Statements of requirements for applicants	36
Section 10. –Distribution list for official correspondence	36
Section 11. –Scheduling of meetings.....	36
Section 12. – Queries about certification status.....	36
ARTICLE IV - ADMINISTRATION OF REGULATIONS AND REQUIREMENTS.....	36
Section 1. – Required bylaws statements on examination conduct	37
Section 2. – Requirements for special practice.....	39
Section 3. – AOA-approved internship is required for examination	40
Section 4. –One-Year prior notification of requirements.....	40
Section 5. –Two years of AOA membership required by certification date.....	40
Section 6. – Knowledge of AOA Code of Ethics is required	40
Section 7. –Membership in practice affiliate shall not be required	40
Section 8. –Use of Osteopathic concepts is required in examinations.....	40
ARTICLE V - TRAINING PROGRAMS	41
Section 1. – Minimum requirements must be stated.....	41
Section 2. –COPT is responsible for approving training programs.....	41
ARTICLE VI - BOARD ELIGIBILITY	41
Section 1. - Definition	41
Section 2. - Registration.....	41
Section 3. - Termination of Board Eligible Status.....	43
Section 4. - Maintenance of Board Eligible Records	43
Section 5. - Reentry into Certification Process	43
ARTICLE VII - NOTICE TO APPLICANT OF EXAMINATION RESULTS.....	44
Section 1. – Applicants to be notified in 30 days.....	44
Section 2. –Use of approved format (Appendix D) is required	44
Section 3. – Petition to review examination performance.....	44
ARTICLE VIII - CERTIFICATES OF CERTIFICATION.....	45
Section 1. – Required format for physician's name	45
Section 2. – Date of issuance: General Certifications Are For 10 Years Or Less, CAQs are for 10 years or less.	46
Section 3. – Required listing for certifying board.....	46
Section 4. - Issuance of Certificates	46
Section 5. - Certification in More Than One Field	47
Section 6. - Recording of multiple certificates	47
Section 7. - Annual Registration: Fee and Requirements	48
Section 8. – Inactivation, Reinstatement and Reactivation of Certificates.....	49
Section 10. – Specialty practice is required to maintain certification	51
ARTICLE IX - RECERTIFICATION PROCESS	51
ARTICLE X - CERTIFICATION OF ADDED QUALIFICATIONS	52
APPENDICES	53
APPENDIX A.....	53
ARTICLE I - NAME.....	53
ARTICLE II - PURPOSES.....	53
ARTICLE III - DEFINITION.....	54
ARTICLE IV - ORGANIZATION.....	54
ARTICLE V - AMENDMENTS	55
APPENDIX B	56
ARTICLE I - DUTIES.....	56
ARTICLE II - MEMBERS	57
ARTICLE III - OFFICERS.....	58
ARTICLE IV - COMMITTEES	59

ARTICLE V - BUREAU REPRESENTATIVES	60
ARTICLE VI - MEETINGS	60
ARTICLE VII - REQUIREMENTS FOR CERTIFICATION	61
ARTICLE VIII -CERTIFICATES	62
ARTICLE IX - AMENDMENTS	64
APPENDIX C	65
MODEL	65
REGULATIONS AND REQUIREMENTS	65
AMERICAN OSTEOPATHIC ASSOCIATION	65
ARTICLE I - PROCEDURES	65
ARTICLE II - MEETINGS.....	65
Section 1. - Annual Meeting.....	65
Section 2. - Special Meetings	65
Section 3. - Quorum	65
Section 4. - Governing Rules.....	65
Section 5. - Orders of Business	65
ARTICLE III - FUNDS	66
ARTICLE IV - COMMITTEES	66
ARTICLE V - MEMBERSHIP.....	66
Section 1. - Election of Members	66
Section 2. - Term of Membership	66
Section 3. - Officers.....	66
ARTICLE VI - BOARD ELIGIBILITY	66
Section 1. - Definition.....	66
Section 2. - Registration.....	67
Section 3. - Termination of Board Eligible Status.....	68
ARTICLE VII - REQUIREMENTS FOR CERTIFICATION	68
ARTICLE VIII - EXAMINATION FEES	69
ARTICLE IX - RULES FOR THE CONDUCT OF EXAMINATIONS	69
ARTICLE X - REENTRY INTO THE CERTIFICATION PROCESS.....	69
ARTICLE XI - CERTIFICATES.....	69
ARTICLE XII - AMENDMENTS	70
APPENDIX D: MODEL FORMS	71
APPENDIX E: MODEL APPEAL PETITION / GUIDELINES FOR CONDUCT OF AN APPEAL	72
APPENDIX F: MODEL RESOLUTIONS	76
APPENDIX G: MINIMUM STANDARDS	77
APPENDIX H: AOA SPECIALTY CERTIFICATION TERMINOLOGY	78
APPENDIX I: APPLICANT STATEMENT	79

HANDBOOK OF THE BUREAU OF OSTEOPATHIC SPECIALISTS

PREFACE

The Bureau of Osteopathic Specialists (hereinafter also referred to as the Bureau) was organized in 1939 as the Advisory Board for Osteopathic Specialists to meet the needs resulting from the growth of specialization in the osteopathic profession. It was thought at that time that there should be standardization of postdoctoral education and regulations for certification in the various specialties or fields of practice. Therefore, the Board of Trustees of the American Osteopathic Association, through its agency, the Advisory Board for Osteopathic Specialists, became the certifying body.

BOS MISSION STATEMENT

The AOA Bureau of Osteopathic Specialists (BOS) is the certifying body for the approved specialty boards of the American Osteopathic Association and is dedicated to establishing and maintaining high standards for certification of Osteopathic Physicians. The AOA Bureau of Osteopathic Specialists seeks to ensure that the Osteopathic Physicians it certifies demonstrate expertise and competence in their respective areas of specialization. The AOA Bureau of Osteopathic Specialists is deeply committed to delivery of quality healthcare to all patients by working with all its approved specialty boards in the enhancement and continuous improvement of its certification process. (B-2/02)

The certifying boards came into existence as follows:

American Osteopathic Board of Radiology	1939
American Osteopathic Board of Surgery	1940
American Osteopathic Boards of Ophthalmology and Otolaryngology- Head and Neck Surgery (Formerly the American Osteopathic Board of Ophthalmology and Otorhinolaryngology, (1940-1996)	1940
American Osteopathic Board of Pediatrics	1940
American Osteopathic Board of Proctology	1941
American Osteopathic Board of Neurology and Psychiatry	1941
American Osteopathic Board of Internal Medicine	1942
American Osteopathic Board of Obstetrics and Gynecology	1942
American Osteopathic Board of Pathology	1943
American Osteopathic Board of Dermatology	1945
American Osteopathic Board of Rehabilitation Medicine	1954
American Osteopathic Board of Anesthesiology (formerly under the Board of Surgery)	1956
American Osteopathic Board of Family Physicians (formerly the American Osteopathic Board of General Practice, 1972-1993)	1972
American Osteopathic Board of Nuclear Medicine	1974
American Osteopathic Board of Special Proficiency in Osteopathic Manipulative Medicine (formerly the American Osteopathic Board on Fellowship of the American Academy of Osteopathy, 1977-1990)	1977
American Osteopathic Board of Orthopedic Surgery (formerly under the Board of Surgery)	1978
American Osteopathic Board of Emergency Medicine	1980
American Osteopathic Board of Preventive Medicine (formerly The American Osteopathic Board of Public	

Health and Preventive Medicine, 1982-1983) 1982

Examination committees for certificates of competence and earned fellowships came into existence as follows:

Select Committee on certificate of competence of the
American Osteopathic Academy of Sports Medicine 1989

In the early development of the various specialty groups in the osteopathic profession, the certifying boards not only served as examining bodies for their candidates, but also were responsible for the development of the various types of postdoctoral educational programs, including residencies, preceptorships and subspecialty residencies (formerly known as assistantships or fellowships).

Until 1948, the Advisory Board was the clearing house and the final agency for recommending directly to the AOA Board of Trustees regarding specialty education and certification of candidates. In December, 1948, the Committee on Accreditation of Postgraduate Training was established to evaluate training programs in the specialties other than for hospital residencies. The Bureau of Hospitals had largely taken over the approval of residencies in the specialty fields existing at that time by 1943. In many instances, the Bureau of Hospitals actually set up the training regulations for residencies.

As the specialty organizations developed, the various practice affiliates, beginning with the American College of Osteopathic Surgeons, became responsible for the development of educational formats in their specialty fields. At the present time, these practice affiliates are responsible for educational programs through their evaluating committees, and the certifying boards are responsible for the examination of candidates for certification.

In January, 1968, the Committee on Postdoctoral Training (COPT) replaced the Bureau of Hospitals for purposes of approval of postdoctoral training. In 1993, the Committee was renamed the Council on Postdoctoral Training (COPT).

In March, 1989, the AOA Board of Trustees provided the Advisory Board with the authority to review the appropriate documents of any AOA practice affiliate proposing a certificate of competence or an earned fellowship. In July, 1991, the Board of Trustees changed the terminology to "certificate of special recognition," and in July, 1992, to "certificate of added qualifications." In February, 1994, the term was modified to "certification of added qualifications." Thus, certificates of special recognition or competence are no longer issued.

In 1993, the Board of Trustees changed the name of this body from the Advisory Board to the Bureau.

RULES OF ORGANIZATION AND PROCEDURE OF THE BUREAU OF OSTEOPATHIC SPECIALISTS

ARTICLE I - AUTHORITY

Section 1. – The Bureau of Osteopathic Specialists shall function under the auspices of the AOA Board of Trustees which it serves as an action and advisory body and from which it receives its purposes.

Section 2. – The Bureau shall take final action on specialty board recommendations for certification, recertification, and certification of added qualifications subject to appeal, and report these actions to the Board of Trustees for information only. (B-2/94) (Recommendations on policy and document revisions shall be reported to the Board of Trustees for final action. (B-7/93)

Section 3 – The Bureau of Osteopathic Specialists has procedural safeguards in place to assure that each pathway to osteopathic specialty board certification results in recognition of a terminal level of educational achievement for the respective specialty. Each BOS approved pathway leading to certification has been judged as equivalent. (B-2/99)

ARTICLE II - PURPOSES

The Bureau is charged by the AOA Board of Trustees with providing recommendations concerning the creation of new certifying boards and the assignment or change of specialty, subspecialty, and/or added qualifications jurisdiction. The AOA Board of Trustees is the final decision making body concerning such questions.

Notification of the submission of a petition for establishing a new certifying board and/or requesting an assignment or change of jurisdiction shall be sent to each AOA practice affiliate and certifying board by the secretary of the Bureau prior to consideration and recommendation by the Bureau.

The Bureau may not waive any of the following protocols. All final determinations regarding such petitions are the prerogative of the Board of Trustees.

Submission of the required documentation does not necessarily guarantee the establishment of a new board and/or the granting of jurisdiction or the establishment of a conjoint certification program with jurisdiction in a certification of added qualifications area. (B-7/85;7/89)

The AOA, through the Bureau, will:

- 1) monitor the certification, recertification and certification of added qualifications processes;
- 2) provide a mechanism to evaluate the validity and reliability of all certification examinations conducted by AOA boards;
- 3) assess examination failure rates, and ensure notification to practice affiliate residency evaluation committees of failure rates using summary data by program of graduation. Individual physician examination results will remain confidential to the certifying board only.
- 4) provide a mechanism through which all practice affiliates and certifying boards will make available remedial courses and training for candidates who fail certification, recertification and certification of added qualifications examinations. (B-7/92;2/98)

ARTICLE III - PROTOCOL FOR ESTABLISHING CERTIFYING BOARDS, CHANGING JURISDICTION, ESTABLISHING CONJOINT CERTIFICATION PROGRAMS, AND WITHDRAWAL AND/OR DISSOLUTION OF CONJOINT CERTIFICATION PROGRAMS

Section 1. – Protocol for establishing new boards

Protocol for establishing new certifying boards with jurisdiction over new specialty(s)/subspecialty(s) and/or areas of added qualification(s).

- A. Petitions to establish new certifying boards with jurisdiction in defined specialties, subspecialties and/or areas of added qualification(s) may only be submitted by AOA-approved practice affiliates to the Bureau for study and recommendation. Forty (40) copies of such petitions must be submitted to the secretary of the Bureau sixty (60) days prior to the date of the Bureau meeting.
- B. Petitions to establish new certifying boards must include the following documentation:
 - 1) The name of the proposed board.

- 2) A list of a minimum of 20 physicians, who are members of the petitioning practice affiliate, interested in the establishment of the new board.
 - 3) A written study conducted by the petitioning group that justifies the need for the proposed new board and its interrelations with established boards.
 - 4) A list of the specialty(s)/subspecialty(s) and/or areas of added qualification(s) over which the new board is seeking jurisdiction.
 - 5) A copy of the AOA-approved or proposed basic standards for residency training in each specialty/subspecialty and/or areas of added qualification(s).
 - 6) A draft of the proposed Constitution, Bylaws and Regulations and Requirements for the new board. These documents must conform to the Handbook of the Bureau and must include:
 - a. The definition of each specialty/ subspecialty and/or areas of added qualification(s) and
 - b. The requirements for certification in each specialty/subspecialty and/or areas of added qualification(s).
- C. To be accepted as a certifiable field, the specialty(s)/ subspecialty(s)/ and/or areas of added qualification(s) must meet the requirements for certification as defined in the Handbook of the Bureau.

Section 2. - Protocol for requesting an assignment of jurisdiction by a specialty board.

- A. Petitions requesting jurisdiction over a new specialty field must first be submitted by an existing certifying board of the Bureau for study and recommendation. Petitions requesting jurisdiction over new specialty(s)/ subspecialty(s)/ and/or areas of added qualification(s) (new specialty field) follow a two-step process, where the first step of the petition involves defining the new field, demonstrating the necessity of the new field and demonstrating that the board has the appropriate resources to create and maintain a valid exam. The jurisdiction committee will review the first step petition, and recommendation for approval or denial of the first step petition will be forwarded to the full Bureau for action. If the full Bureau approves the first-step of the petition, the board receives preliminary jurisdiction and may begin to develop their second step petition. The first step and second steps of the petition cannot be submitted concurrently. In the second step of the process, the board must submit a full, completed standards report form. Both steps of the petition must be approved by the full BOS before the board receives full jurisdiction in the new specialty field and can examine candidates.

B. Step 1

For the first step petition, forty (40) copies of such petitions must be submitted to the secretary of the bureau sixty (60) days prior to the date of the bureau meeting. First step petitions requesting assignment of jurisdiction must include:

1. A definition of the new specialty field.
 - a) Submit a list of the specialty(s)/subspecialty(s) and/or areas of added qualification(s) over which the board has current jurisdiction and the transfer or jurisdiction being requested
 - b) Describe the tentative specialty field definition and exam rationale.
 - c) Describe a detailed plan for completing a job analysis to further define the exam.
2. A demonstration of the necessity for the new specialty field.
 - a) Submit a listing of existing residency programs in the new specialty field and the number of residents in each program and describe if the program is an AOA or ACGME program. Also, describe the total number of osteopathic physicians that have completed training in this new specialty field within the last seven years.
 - b) Include a listing of osteopathic physicians that have requested to take the exam that have AOA-approved or ACGME training in the new specialty field. Please include their name, AOA number, other certifications as well as the dates and locations of all their residencies.
 - c) If a practice pathway is included as an option in your documents, the board must state an expiration date for the pathway five (5) years or less after jurisdiction is awarded. Also, please include a listing of osteopathic physicians that have requested to take the exam that do not have AOA-approved or ACGME training in the new specialty field. Please include their name, AOA number, certifications as well as the dates and locations of all their residencies as well as date on which the practice pathway is supposed to close. Also include the percent of the physician's practice that is spent working in this new specialty field.
 - d) Attach a copy of the AOA-approved basic standards for residency training in the new specialty field.
 - e) Include the requirements for certification in the new specialty field being considered and any proposed changes in other basic documents of the board.(B-07/03)
3. A demonstration that the board has the resources to create and maintain a valid certification exam.
 - a) Subject-matter experts. Include a listing of at least five qualified subject matter experts in the new specialty field that have committed to serving on the exam committee for this new area of jurisdiction. Please include their name, AOA number, certifications as well as the dates and

locations of all their residencies. Also include the percent of the physician's practice that is spent working in this new specialty field. A letter of commitment from each subject matter expert must be submitted.

- b) Financial resources. The board must include a business plan that details how the board will fund the development and administration of the exam. Costs and demonstration of funds should be detailed for the following major exam development areas: job analysis/table of specifications; item writing; exam scoring; standard setting. Costs and demonstration of funds should be detailed for the following major exam administration areas: item collection/item banking; exam creation/printing; exam proctoring.
(B-07/03)

c. Step 2.

For the second step petition, twenty (20) copies of such petitions must be submitted to the secretary of the bureau ninety (90) days prior to the date of the bureau meeting. Second step petitions requesting assignment of jurisdiction must include a full, completed standards report form for each new specialty field. The standards review committee will first evaluate the standards report form and may request to meet with board representatives for further description of the proposed exam. The standards review committee will make a recommendation to the jurisdiction committee on whether or not the exam is in compliance with the guidelines for AOA certification standards. The jurisdiction committee will then review the second step petition, and recommendation for approval or denial will be forwarded to the full Bureau for action. (B-07/03)

Section 3. –Protocol for placing exams into dormant status (voluntary and mandatory) and for reactivating dormant exams from such status.

For specialty field jurisdictions approved as dormant, (initial) certification exams cannot be offered and (initial) certification exams are not evaluated through the BOS' standards review committee. The dormant status does not affect the offering of the recertification exam or the evaluation of the recertification exam by the BOS' standards review committee. (B-07/03)

A. Placing exams into dormant status for exams never administered, or when there are no active certificants.

1. Voluntary requests for dormant status. Petitions requesting placement of exams in a specialty(s)/ subspecialty(s)/ and/or areas of added qualification(s) into dormant status, for exams that have never been administered, or when there are no certificants, must be submitted to the Bureau for study and recommendation of the Jurisdiction Committee. Exams that fall in this category and are approved to be placed in dormant status will not be evaluated by the Standards Review Committee unless the Board requests to “re-activate” the exam. The board must submit the following information with its request:
 - a) A rationale for placing the exam into dormant status must be provided.
 - b) A description of the lack of activity in the specialty field in order to ensure any residents in those programs are not negatively impacted by the “dormancy” of jurisdiction request. This description must include: the year in which original jurisdiction was granted; the number of osteopathic residency programs existing in the last seven years; the number of residents in osteopathic programs within the last seven years. The request must include the proposed date for the placement of the exam into dormant status and a plan for notifying constituents of the status change.
(B-07/03)

B. Placing exams into “dormant status” in areas in which the exam has been administered and has active certificants.(B-07/03)

1. Voluntary request for dormant status. Petitions requesting placement of a jurisdiction over a specialty(s)/ subspecialty(s)/ and/or areas of added qualification(s) into dormant status, for exams that have already been administered and have certificants must first be submitted by an existing certifying board of the Bureau for study and recommendation of the jurisdiction committee. Exams that fall in this category and are approved to be placed in dormant status will not be evaluated by the Standards Review Committee unless the Board requests to “re-activate” the exam. A recertification mechanism must be described for diplomates in areas for which the board is no longer offering the initial certification exam. The dormant status of the initial certification exam will not exempt the recertification exam from being evaluated by the Standards Review Committee to assess the validity of such an exam. The Board must submit the following information with its request:
 - a) A rationale for placing the exam into dormant status must be provided.
 - b) A description of the lack of activity in the specialty field in order to ensure any residents in those programs are not negatively impacted by the “dormancy” of jurisdiction request. This description must include: the year in which original jurisdiction was granted; the number of osteopathic residency programs existing in the last seven

years; the number of residents in osteopathic programs within the last seven years; the number of osteopathic physicians that are certified in the area, broken down by time-limited and lifetime diplomates; as well as the number of physicians that have taken the exam in the last five years. The request must include the proposed date for the placement of an exam into dormant status and a plan for notifying constituents of the jurisdictional change.

- c) A description of the plan for recertification must be included.

C: Mandatory placement of an exam into "dormant" status.

At its discretion, the BOS, on the recommendation of the SRC, may mandate dormant status for an exam that has not met SRC standards. (B-02/04)

D. Reactivating exams from dormant status (voluntary) (B-07/03)

Boards that wish to reactivate jurisdictions from dormant status must take the follow steps to do so:

1. Submit a detailed rationale for reactivating a dormant exam and demonstrate the need to reactivate the exam. This should include:
 - a) A listing of existing residency programs in the specialty field and the number of residents in each program and describe if the program is an AOA or acgme program. Also, describe the total number of osteopathic physicians that have completed training in this specialty field within the last seven years.
 - b) A listing of osteopathic physicians that have requested to take the exam that have AOA-approved or ACGME training in the specialty field. Please include their name, AOA number, certifications as well as the dates and locations of all their residencies.
2. A demonstration that the Board has the resources to create and maintain a valid certification exam.
 - a) Subject-matter experts. Include a listing of at least five qualified subject matter experts in the specialty field that have committed to serving on the exam committee for this new area of jurisdiction. This must include their name, AOA number, certifications as well as the dates and locations of all their residencies. It must also include the percent of the physician's practice that is spent working in this new specialty field. A letter of commitment from each subject matter expert must be submitted.
 - b) Financial resources. The Board must include a business plan that details how the Board will fund the development and administration of the exam. Costs and demonstration of funds should be detailed for the following major exam development areas: job analysis/table of specifications; item writing; exam scoring; standard setting. Costs and demonstration of funds should be detailed for the

following major exam administration areas: item collection/item banking; exam creation/printing; exam proctoring.

3. Submit 20 copies of the full, completed standards report form for the exam to the secretary of the bureau ninety (90) days prior to the date of the bureau meeting. The Standards Review Committee will first evaluate the standards report form and may request to meet with Board representatives for further description of the proposed exam. The Standards Review committee will make a recommendation to the jurisdiction committee on whether or not the exam is in compliance with the guidelines for AOA certification standards. The jurisdiction committee will then review all the information and make a recommendation for approval or denial, which will be forwarded to the full Bureau for action.

E. Reconsideration process for Boards denied reactivation of a dormant exam. (B-07/03)

Boards whose requests for reactivating a dormant exam are declined may first ask for reconsideration by the BOS jurisdiction committee and subsequently by the AOA board of trustees. The Board asking for reconsideration must submit a detailed rationale for its resubmitted request at least 90 days prior to either the midyear or annual meetings of the Bureau. A representative must be readily available to answer questions on the day of the appeal in order for the request to be considered.

Section 4. Relinquishing jurisdiction in a specialty field when an examination has never been administered or when there are no certificants in that specialty field. (B-07/03)

A. Petitions requesting relinquishment of a jurisdiction over a specialty(s)/ subspecialty(s)/ and/or areas of added qualification(s), for exams that have never been administered, or when there are no certificants, must be submitted to the bureau for study and recommendation of the Jurisdiction committee. Relinquishment of jurisdiction is permanent, and the jurisdiction area will no longer be included as an area of jurisdiction for the board. The board must submit the following information with its request:

1. A rationale for relinquishing the exam jurisdiction must be provided.
2. A description of the lack of activity in the specialty field in order to ensure any residents in those programs are not negatively impacted by the relinquishment of jurisdiction request. This description must include: the year in which original jurisdiction was granted; the number of osteopathic residency programs existing in the last five years; the number of residents in osteopathic programs within the last five years.

3. The request must include the proposed date for the relinquishment of jurisdiction and a plan for notifying constituents of the jurisdictional change.

Section 5. –protocol for establishing a conjoint examination in an area of added qualifications

Protocol for development of a single pathway certification program in an area of added qualifications, which includes more than one specialty field. The petition of all interested Boards will be reviewed by the Jurisdiction Committee, and recommendation for approval or denial to form a conjoint examination program will be forwarded to the full Bureau for action. Note that the approval to form a conjoint examination program does not imply awarding of jurisdiction.

- A. When a first-step petition for jurisdiction in an area of certification of added qualifications is filed by a certifying board that overlaps into other specialty fields and has an identifiable body of knowledge and training program common to those specialty fields, a conjoint examination committee may be developed by the participating boards. This certification program should include the following procedures:
 1. Establishment of board participation: certifying boards who are members of the bureau of osteopathic specialists may petition by letter of intent to the bureau to participate in the certification process in this area. This petition should support the board's position that this is an area of practice that qualifies as an added qualification in its respective general specialty/subspecialty.
 2. After receiving BOS approval to form a conjoint examination program, the conjoint examination committee must go through the process of requesting jurisdiction of certification of added qualification as detailed in section 2 of this document. Additionally, the following criteria must be the same for all boards participating in the conjoint examination:
 - a. Criteria for eligibility
 - b. Policies and procedures for the certification program
 - c. The certifying examination
- B. Once approved and formed, the conjoint examination committee must abide by the following:
 1. Each board will be allowed one voting member on the conjoint examination committee.
 2. When an AOA practice affiliate is deemed by the bureau to be an integral part of a conjoint certification program, it must be awarded representation on the conjoint examination committee with one vote.

3. Finances for administration of the examination program will be shared, as determined by each conjoint examination committee.
 4. A clinical practice pathway eligibility may be developed and must expire five (5) years or less after jurisdiction is awarded.
 5. Every candidate must have general certification and must be a diplomate of a participating board (i.e. hold general certification).
 6. All certification of added qualification certificates will be time-limited to 10 years or less. [b-7/96r]
- C. Should the jurisdictional request submitted by the conjoint examination committee be approved by the bureau, each board participating in the conjoint examination committee would be awarded jurisdiction in the area of certification of added qualifications. Each participating board would be responsible for exam development and administration and for maintaining the validity of the examination process

Section 6. - protocol for withdrawal and/or dissolution of conjoint certification exams.

- A. Any member board of a conjoint examination committee may request termination of participation in the conjoint program. A termination of participation by one board does not in any way affect the jurisdiction in this specialty field for the boards remaining in the conjoint examination committee. The withdrawing board must submit its written request to place the exam jurisdiction into dormant status, following the procedures outlined in section 3 of this document. Also, the board must submit a written request to terminate participation in the conjoint examination program and the board must include justification for this action. In addition, the board must describe a plan to provide for the recertification of candidates of their specialty board who have received certification through the conjoint process. The request will be reviewed by the jurisdiction committee of the BOS and a recommendation for approval/denial will be forwarded to the full bureau for action. [b-2/98] the request for dormant status of a conjoint examination from one board, if approved, only places the exam in dormant status for the board that has requested withdrawal from the conjoint process.
- B. If a request to withdraw from the conjoint certification exam program is approved and the board wishes to independently administer a caq exam similar to this area, they must apply to the jurisdiction committee using the full protocol described in section 2 of this document. The board must also redefine their area of jurisdiction (or new body of knowledge) and demonstrate that the new AOA-approved basic standards for residency training and the certification exam in the specialty area are significantly different from that of the conjoint certification exam program. [B-2/98]

ARTICLE IV - DUTIES

The Bureau shall:

1. Advise certifying boards with reference to defining and determining the scope of the specialty(s), subspecialty(s) and/or area of added qualification(s) coming under the boards' jurisdiction.
2. Establish procedures to determine the qualifications of the applicants for certification, recertification and certification of added qualifications.
3. Receive from certifying boards amendments to their basic documents and transmit such amendments, with appropriate recommendations, to the AOA Board of Trustees.
4. Review and approve candidates presented for certification, recertification, and certification of added qualifications by certifying boards.
5. Maintain contact with the activities of the certifying boards to ascertain conformity to the standards and procedures adopted, and to advise them, where indicated, regarding corrections in their procedures. If necessary, the Bureau shall make appropriate recommendations to the AOA Board of Trustees when any certifying board fails to conduct its affairs in an acceptable manner.
6. Keep a record of all meetings, transactions and actions of the Bureau.
7. Report action recommendations dealing with resident training programs to the Bureau of Professional Education. (B-3/91)
- 8.. Provide recommendations to the Board of Trustees concerning the assignment or change of specialty, subspecialty and/or added qualifications jurisdiction.
- 9.. Provide recommendations to the Board of Trustees concerning the creation of new specialty boards.
10. Provide a mechanism to evaluate the validity and reliability of all certification examinations conducted by AOA boards.

ARTICLE V – MEMBERSHIP

The membership of the Bureau shall consist of 21 members as follows. Appointments are staggered and limited to no more than three (3) three-year terms (lifetime of nine years): (B-3/93; 2/94)

Section 1. - Chair and Vice Chair

- A. A chair and vice chair appointed as members at large by the president of the AOA with the approval of the AOA Board of Trustees. Members of the Bureau representing certifying boards may be included as candidates for appointment as vice chair. Both the chair and vice chair must have commitment to and experience in postdoctoral training and certification. Terms shall be for two (2) years with appointments in alternate years.
The chair cannot be from the same practice affiliate as the vice-chair or the immediate past chair. The vice-chair cannot be from the same practice affiliate as the chair or the immediate past vice-chair. Both must be certified osteopathic specialists. The chair may serve a maximum of three (3) two-year terms within the limitation of three (3) three-year terms as a Bureau member.
- B. In the event of a vacancy in the office of chair or vice chair, the senior member of the Executive Committee of the Bureau, shall act as chair or vice chair until the next regular meeting. (B-7/93)
- C. If for any reason a certifying board ceases to function, the chair shall assume temporary chairmanship of that certifying board with restricted powers to maintain its operating continuity until the next meeting of the Bureau. In this capacity he/she shall arrange for the evaluation of candidates' credentials and for their examination, but shall not himself/herself evaluate or examine. (B-12/57)

Section 2. -Public Member

One public member shall be appointed for a three-year term by the AOA president (B-2/97r).

Section 3. - Representatives from certifying boards

Representatives from certifying boards and practice affiliate representatives to conjoint examination committees

- A. There shall be one (1) representative and one (1) alternate representative recommended by and from the membership of each certifying board. These recommendations shall be made during the annual meeting of the certifying boards and submitted as soon as possible to the Secretary of the Bureau and the Executive Director of the AOA.
- B. The alternate representative shall be empowered to act for the regular representative, if unable to attend. (B-1/63)

- C. There shall be one (1) representative and one (1) alternate representative recommended annually by and from the membership of each recognized practice affiliate serving on a conjoint examination committees. These recommendations shall be made during the annual meeting of the affiliate and submitted as soon as possible to the secretary of the Bureau and the Executive Director of the AOA. The representative shall attend meetings of the Bureau without vote, but with voice on matters germane to the certification of added qualifications. (B-7/89; 2/98)

Section 4. – COPT representatives may observe

The chair of the Council on Postdoctoral Training or his/her representative may attend meetings without vote.

Section 5. - Secretary

- A. The secretary of the Bureau shall be provided by the Executive Director of the AOA from the Central Office staff.
- A. The secretary shall:
- 1) Keep a record of all meetings, transactions and actions of the Bureau and assist the chair in such other duties as are appropriate to this office. (B-7/58)
 - 2) Maintain a file of all current basic documents and amendments pertaining thereto of the certifying boards and the Bureau.
 - 3) Check "Individual Summary Sheets" for candidates recommended for certification, recertification or certification of added qualifications and notify the appropriate certifying board and the chair of the Executive Committee if there is a problem that would defer certification, recertification or certification of added qualifications of a candidate. (B-7/92)
 - 4) Serve as consultant to and assist the Committee on Basic Documents in its responsibilities as follows:
 - a) Upon receipt of the annual or midyear reports of the certifying boards extract those amendments and recommendations for referral to the Committee on Basic Documents.
 - b) Research and include all pertinent data (current procedures and policies) on each item and forward to members of the Committee on Basic Documents for review prior to the meeting of the Bureau.

- 5) Retain "Individual Summary Sheets" and "Examination Summaries" used by the Executive Committee, for one (1) year from the date of the meeting.
- 6) Maintain and revise the Handbook of the Bureau of Osteopathic Specialists when necessary.
- 7) Update the Requirements for Certification and Added Qualification section of the annual AOA Yearbook and Directory and distribute reprints when requested. (B-1/93)
- 8) Prepare the minutes of each meeting of the Bureau for distribution to its members.

ARTICLE VI - COMMITTEES

Section 1. - Executive Committee

- A. The Executive Committee shall be composed of seven (7) members from within the membership of the full Bureau, one of whom shall be the chair, three of whom shall be appointed by the president of the AOA following consultation with affiliates and three of whom shall be elected by the Bureau from its membership via ballot.
- B. Members of the Executive Committee shall serve staggered three-year terms corresponding to their terms on the Bureau. If a member of the Executive Committee does not retain his/her appointment to the Bureau, a replacement shall be chosen as stated in Section A, above.
- C. The Executive Committee will have final authority to approve osteopathic specialty certification, recertification and certification of added qualifications. Such approval will indicate the approval of the AOA, and these actions will be reported to the full Bureau and to the Board of Trustees.
- D. The Executive Committee will have final authority on denial of certification, recertification and certification of added qualifications, subject to the appeal process. The Executive Committee shall act for the Bureau between meetings on the call of the chair. (B-7/64; 7/93)
- E. The Executive Committee shall review the examination summaries of candidates being presented for certification, recertification and certification of added qualifications. (B-7/85, 7/92)
- F. The Executive Committee will verify, to the satisfaction of the Committee, that the representative of each certifying board and presenting candidates for certification has attested to the following questions:

- 1) Are the files of the candidates being presented complete and satisfactory in every way and in compliance with your Constitution, Bylaws and Regulations and Requirements?
 - 2) Do you affirm that program directors have not participated directly in the examination of candidates who were their trainees?
 - 3) Were the examinations conducted in a fashion which made them impartial and free from collusion between examiners?
 - 4) Do you recommend these candidates, without reservation, for certification, recertification or certification of added qualifications?
- G. Statistical information on the number of candidates passing and those failing the required examinations shall be provided by the certifying boards to the Bureau.
- H. Each member of the Executive Committee shall review and endorse candidates for certification, recertification, and certification of added qualifications presented via mail ballot and return the required form(s) to the secretary of the Bureau.
- I. The Executive Committee shall investigate and report to the Bureau any failures which are not completely justified by the recommendation of the certifying board involved. (B-1/66)

Section 2. - Appeal Committee

- A. The Appeal Committee shall be composed of three (3) members and three (3) alternates, appointed by the Bureau Chair from within the membership of the Bureau who are not on the Executive Committee and who are of different specialties. (B-07/04) One member shall be designated as chair of the Committee. An alternate shall serve as a regular member on the Committee if one of the regular members is a representative of the certifying board involved in the appeal. No member of the Appeal Committee may vote in any appeal where that member has previously acted on the appellant's case.
- B. The Appeal Committee will provide adjudication of any charges by an applicant for certification, recertification or certification of added qualifications, which meet the requirements as contained in paragraph C. below, which in general would consist of allegations of unfairness, discrimination or improper conduct of the affairs of the Executive Committee of the Bureau or the conduct of affairs, including the examination, of any certifying board.
- C. An appeal hearing shall be granted to determine the facts, which, if the prospective appellant's allegations are found to be true, would constitute unequal application of the regulations and requirements or standards, unwarranted

discrimination, prejudice, unfairness or improper conduct of all or any part of an examination conducted by any certifying board or action by the Executive Committee of the Bureau. The Appeal Committee is not expected to have expertise as to the technical aspects of specialty examination and, therefore, is to function as a reviewer of whether there were irregularities in the conduct of examinations or on the part of the Executive Committee. (B-7/76)

- D. All requests for an appeal shall be filed with the chair of the Bureau within two years of the alleged grievance. The chair of the Bureau shall determine whether sufficient grounds have been alleged, in accordance with paragraph C. above, and if so he/she shall notify the prospective appellant, the certifying board involved (or Executive Committee) and the chair of the Appeal Committee that the appeal will be heard. Appeals shall be scheduled in conjunction with one of the regular meetings of the Bureau. Special hearings may be called by the Chair of the Appeal Committee. Either party to an issue shall have the right to appeal. (B-3/93)
- E. The appellant and certifying board involved (or Executive Committee) shall be advised that all documentary material necessary for proper adjudication of the case shall be submitted to the chair of the Appeal Committee not later than sixty (60) days prior to the date scheduled for the hearing.
- F. Under no circumstances will a hearing be conducted without the actual presence of the appellant. One representative of the certifying board involved (or the chair of the Executive Committee, or his/her designee) should also be present at the hearing to present the position of the board (or Executive Committee). The parties shall be given the opportunity to object to the participation of particular members of the Appeal Committee. The chair shall decide if such objections have merit and if such members shall be excluded as a result thereof. Stenotyped minutes of the entire proceedings of all appeal hearings shall be made. The minutes shall be confidential, but may be made available to authorized representatives of the appellant and the certifying board or Executive Committee, members of the Bureau, members of the AOA Board of Trustees and their respective counsel. The minutes shall be kept in the permanent files of the Secretary of the Bureau. (B-7/76)
- G. The appellant shall be allowed a reasonable period of time to present his/her case and the certifying board or Executive Committee representative shall be given a like period of time. Each party shall then be allowed a brief period for rebuttal. If necessary, the Appeal Committee shall have a reasonable period of time to examine any documentary materials which have been submitted. Each Committee member shall have the opportunity to address questions to the parties or their respective representatives. The parties shall then be excused, but shall be advised to remain for further questions if necessary. (B-7/76)

- H. The foregoing format may be modified according to the allegations contained in the petition. For instance, facts may be alleged in the petition which would require the calling of witnesses. The Appeal Committee itself may wish to arrange for the presence of such witnesses. If the parties produce witnesses, calling such witnesses would be solely at the discretion of the Committee. It shall also be entirely at the discretion of the Committee as to whether the parties should be allowed to question witnesses or whether the witnesses should be questioned only by the Committee members. In the absence of the Appeal Committee itself taking the affirmative action of calling witnesses or seeking other evidence, the burden of going forward with the evidence and the burden of proof lie with the appellant. (B-7/76)
- I. After hearing and considering the presentation of the appellant and the response of the certifying board representative or the chair of the Executive Committee, as the case may be, and after making any additional investigation as it deems fit, the Appeal Committee shall report its decision and recommendations regarding the case to the Bureau. The Bureau shall in turn, report the decision to the AOA Board of Trustees for information only. All parties are afforded the right to appeal the action of the Bureau's Appeal Committee to the Board of Trustees.
- J. The appellant and the certifying board or the Executive Committee shall be notified of the decision and recommendations of the Appeal Committee at approximately the same time as it is communicated to the Bureau. Both parties shall be advised that they have the right of further appeal to and a hearing before the AOA Board of Trustees, but that such hearing is entirely within the discretion of the Board of Trustees. If a request for a further appeal to the Board of Trustees is received by the AOA Executive Director, such request shall be presented to the AOA Executive Committee to determine whether a hearing shall be granted. (B-7/76;3/93)

Section 3. - Committee on Basic Documents

- A. The Committee on Basic Documents shall consist of three (3) members appointed by the chair. The chair of the Committee shall be designated by the chair of the Bureau.
- B. The duties of the Committee shall be to:
 - 1) Review proposed amendments to the basic documents of the certifying boards to establish conformity with the AOA "Rules of Procedure for Certifying Boards", the "Standard Constitution and Bylaws" and "Model Regulations and Requirements" (see Handbook of the Bureau of Osteopathic Specialists and Appendices A, B, and C), and forward its recommendations to the Bureau.

- 2) Review the policies and procedures as approved by the Bureau and/or the AOA Board of Trustees and, where required, submit recommendations and/or amendments to the AOA "Rules of Procedures for Certifying Boards", the "Standard Constitution and Bylaws" and "Model Regulations and Requirements" (see Handbook of the Bureau of Osteopathic Specialists and Appendices A, B, and C), in accordance with those policies and procedures.
- C. For purposes of this Committee, the "basic documents" shall be defined as the Constitution and Bylaws, and the Regulations and Requirements of the certifying boards and the Handbook of the Bureau of Osteopathic Specialists.
- D. The secretary of the Bureau shall serve as consultant to the Committee and upon receipt of amendments to the basic documents of certifying boards or the Handbook, or revised documents or new documents, shall research and include all pertinent data (current procedures and policies) on each item and forward this to members of the Committee for review prior to the meeting of the Bureau. (B-7/76)

Section 4. - Jurisdiction Committee

- A. Make recommendations to the Bureau concerning any petitions for the establishment of new specialty boards or for the assignment or transfer of jurisdiction over a specialty/subspecialty/and/or area of added qualifications. (B-3/88)

Section 5. - Committee on Administrative and Boards' Financial Matters

- A. The Committee shall be composed of (3) members appointed by the Bureau Chair from the regular Bureau Membership.
- B. The Committee's main functions will be:

Administrative

- 1) Review concerns regarding administrative problems affecting candidates for certification and administrative operations at the Board and AOA levels.
- 2) Make recommendation and report to the BOS Executive Committee for action and resolution of problems.

Financial

- 1) Review financial statements of the Specialty Boards to ensure these are being submitted to the AOA Department of Finance.
- 2) Review such financial statements for determination of potential financial problems or insolvency by AOA Boards (boards at risk) or whether they are marginally close to being at risk.

- 3) Report and make recommendations to the BOS Executive Committee on what steps can be taken to ensure board viability. (B-02/04)

Section 6. - Standards Review Committee

- A. The Standards Review Committee shall be composed of six (6) elected members plus the BOS public member and two alternate members elected from within the membership of the Bureau. The AOA psychometrician will serve as a non-voting member of the committee. The chair of the committee shall be designated by the Chair of the Bureau. (B-03/01)
- B. Elected members of the Standards Review Committee shall serve three-year terms corresponding to their terms on the Bureau. If a member of the Standards Review Committee does not retain his/her appointment to the Bureau, an interim committee member shall be appointed by the BOS Chair until a replacement is be elected in accordance with Bureau procedures. (B-7/98, B-03/01)
- C. The duties of the committee shall be to:
 1. Assess examination failure rates, and ensure notification to practice affiliate residency evaluation committees of failure rates using summary data by program of graduation. Individual physician examination results will remain confidential to the certifying board only. (B-2/98, B-7/98)
 2. Maintain contact with the activities of the certifying boards to ascertain conformity to the standards and procedures adopted, and to advise them, where indicated, regarding corrections in their procedures.
 3. Provide a mechanism to evaluate the validity and reliability of all certification examinations conducted by AOA certifying boards. This mechanism will assess board compliance with the AOA certification exam standards. The BOS, upon recommendation by the committee and subject to appeal, shall take final action on a certifying board's compliance with the standards. These actions will be reported to the Board of Trustees.
 - A. The format of review will be self-study with completion of a standards review report. The report will be completed by the certifying board and submitted to the Standards Review Committee for review and action. The report will ask the boards to provide written evidence that they have met the requirements set forth in the standards. (B-03/01)

- B. The Committee will meet in conjunction with the BOS meetings (January and June) starting in June 2000; the second review cycle start in January 2009 and begin every five years after that. At each meeting, three certifying boards will be reviewed. (B-07/03)
- C. The committee will review the report from each board to assess if the board's examination activities are in compliance with he standards. After review and discussion within the committee, the committee will meet in person with the board representative to clarify any issues. It is required that representatives from the boards (including at least one physician board member) being reviewed make themselves available for the committee meeting. (B-03/01, B-07/03)
- D. After Committee review and discussion, the committee must either:
 - 1) Recommend to the BOS that the Board is in compliance with the standards. If a recommendation of compliance is made, the BOS may then take action on that recommendation. (B-03/01, B-07/03)
 - 2) Defer making any recommendations regarding compliance to the BOS.
 - 3) Recommend to the BOS that an exam jurisdiction be placed into a "dormant" status. (B-07/03)
- E. Within 30 days of this committee meeting, the committee will send the board a written evaluation. This evaluation will relate the committee findings, may request supplemental information to verify compliance and will report activities that are not in compliance with the standards. Examination activities found not in compliance with the standards will be clearly described to the board. (B-03/01)
- F. Submission of the Board Response and Action Plans
 - 1) For the first review cycle, the certifying board will have 120 days from the date of the written evaluation to respond to the evaluation in writing. The response should include any board comments regarding the evaluation and any supplemental information requested from the committee. If any exam activities are not in compliance, the response must also include a written action plan. At the next committee meeting after submission of the response, its supplemental information and the action plan will be examined. The committee will accept any recommendations and

forward their response to the board. The committee may make a recommendation to the BOS at this time. (B-03/01, B-07/03)

2). For second and later review cycles, the submission of a board response or action plan is not required. (B-07/03)

G. If any exam activities were found not to be in compliance with the standards, the board must submit an updated report.

1). For the first review cycle, within one year from the committee's acceptance of the board's action plan, the board must submit an updated report to the committee along with acceptable evidence that shows that all the exam activities are in compliance with the standards. Areas designated as not in compliance from the evaluation will only be reviewed. (B-07/03)

2) For the second and later review cycles, within one year of the review, the Board must submit an updated report to the Committee along with acceptable evidence that shows that all the exam activities are in compliance with the standards. Areas designated as not in compliance from this evaluations will only be reviewed. The Board must submit its updated report at least 45 days before the Committee meets to study the board's updated report. (B-07/03)

H. At the next committee meeting after submission of the updated report, the committee will review the updated report. The committee may request to meet in person with the board representative(s) to clarify any issues. The Committee must make a recommendation to the BOS for action. The committee may recommend too the BOS that the board is in compliance with the standards or that the board is not in compliance with the standards. (B-03/01) The Committee may also recommend to the BOS that an exam jurisdiction be placed in "dormant" status. (B-07/03)

I. If the BOS action finds the board not in compliance, the BOS may impose a one-year probation period by the end of the period the board must demonstrate compliance with the standards. The practice affiliate will also be notified of the board's probationary status. Board failure to comply with the standards will result in a BOS recommendation to the Board of Trustees that the certifying board's directors and/or members may be replaced and certification activities may be suspended until the board demonstrates compliance with the standards. Using the same

procedure now applied to selecting new board members, certifying board members will be nominated by the practice affiliate and approved by the Board of Trustees. At the end of this probation/suspension period, the board must demonstrate compliance with the standards.(B-07/03)

- J. Certifying board appeals of BOS actions are presented initially to the BOS appeals committee for reconsideration. The resulting action may later be appealed to the AOA Board of Trustees.

ARTICLE VII - BASIC DOCUMENTS

Section 1. - Certifying Boards

- A. The basic documents of the certifying boards shall be the Constitution, Bylaws, and the Regulations and Requirements, compiled and issued by each certifying board in accordance with the AOA "Rules of Procedure for Certifying Boards" and the "Standard Constitution and Bylaws", and "Model Regulations and Requirements," as approved by the Bureau and the AOA Board of Trustees (see Handbook of the Bureau of Osteopathic Specialists and Appendices A, B, and C).
- B. The AOA Committee on Basic Documents of Affiliated Organizations shall review all recommendations concerning the basic documents of certifying boards and report its recommendations to the AOA Board of Trustees. (B-7/79)

Section 2. - Bureau of Osteopathic Specialists

- A. The procedures and directives, as adopted by the Bureau and the AOA Board of Trustees, shall be compiled and issued as the Handbook of the Bureau of Osteopathic Specialists. This Handbook shall contain the following basic documents:
 - 1) "Rules of Organization and Procedure of the Bureau"
 - 2) "Rules of Procedure for Certifying Boards"
 - 3) "Standard Constitution and Standard Bylaws of Certifying Boards"
 - 4) "Model Regulations and Requirements for Certifying Boards"
- B. The Handbook shall be maintained by the secretary of the Bureau and revised regularly in consultation with the Committee on Basic Documents.

Section 3. - Requirements for Certification, Recertification or Certification of Added Qualifications

- A. The requirements for certification, recertification or certification of added qualifications shall be published annually. The fees charged by the certifying boards shall be omitted. (B-7/92)

- B. The requirements for certification, recertification or certification of added qualifications shall be updated annually by the secretary of the Bureau for publication. (B-7/92)
- C. Reprints of the requirements for certification, recertification or certification of added qualifications shall be made available for distribution. (B-1/93)

ARTICLE VIII - MEETINGS AND REPORTS

Section 1. - Meetings

- A. There shall be a midyear and an annual meeting of the Bureau.
- B. The Executive Committee shall meet quarterly to ensure that certification takes no more than four months. (B-3/93)
- C. The official call of each Bureau meeting shall be issued not less than thirty (30) days prior to the opening session.
- D. A quorum at any session of any regular Bureau meeting shall consist of a majority of the designated membership of the Bureau.
- E. Robert's Rules of Order, Newly Revised shall be followed except where they conflict with these rules of procedure. (B-7/64)
- F. A quorum at any session of any regular Executive Committee meeting shall consist of a majority of the designated membership of the Executive Committee.

Section 2. - Reports to the AOA Board of Trustees

- A. The midyear report of the Bureau to the AOA Board of Trustees shall contain the following information:
 - 1) Candidates awarded certification or recertification.
 - 2) Candidates awarded certification of added qualifications. (B-3/93; 2/98)
 - 3) Amendments to the documents of certifying boards
 - 4) Reinstatement of certificates of certification, recertification and certification of added qualifications.
 - 5) Any other recommendations from the Bureau and/or its Executive Committee which require action of the Board of Trustees.
- B. The annual report of the Bureau to the AOA Board of Trustees shall contain the following information:

- 1) Candidates awarded certification or recertification.
 - 2) Candidates awarded certification of added qualifications.
 - 3) Nominations for membership on certifying boards.
 - 4) Amendments to the documents of certifying boards.
 - 5) Amendments to basic documents. (B-7/76)
 - 6) Termination of board eligibility. (B-7/76)
 - 7) Reinstatement of certificates of certification, recertification or certification of added qualifications.
 - 8) Any other recommendations from the Bureau and/or its Executive Committee which require action of the Board of Trustees. (B-7/76)
- C. Both reports to the Board of Trustees shall contain statistical information relative to the number of applicants who have passed the required examinations and those who failed, as reported to the Bureau by the Executive Committee. (B-7/54; 7/66)

ARTICLE IX - AMENDMENTS

Amendments to the Handbook of the Bureau of Osteopathic Specialists may be adopted for submission to the AOA Board of Trustees for approval by the vote of a majority of the members of the Bureau registered with the secretary as present at the annual or midyear meeting, provided the proposed amendments have been submitted in printed form to each member present, and that they have been considered by the Committee on Basic Documents. (B-7/64)

RULES OF PROCEDURE FOR CERTIFYING BOARDS

ARTICLE I - MEMBERSHIP

Section 1. -Elections by AOA Board of Trustees

Members of certifying boards are elected by the AOA Board of Trustees at its annual meeting from nominees submitted by the appropriate practice affiliates. Nominees are submitted by the affiliates, after their annual meetings, through the certifying board to the Bureau at its annual meeting and the AOA Board of Trustees. Each member shall be a diplomate of the certifying board in good standing. (B-3/84)

Section 2. -Term of Office

After a practice affiliate nominates members to a certifying board, the secretary of the affiliate shall immediately transmit, by letter, the names of the nominees to the secretary

of the appropriate certifying board. Copies of this letter shall be sent to the secretary of the Bureau (AOA Department of Education) and the AOA Executive Director. A certifying board member's term is effective the date that he/she is elected to that position by the AOA Board of Trustees. (B-3/84)

Section 3. – Nominations to Conjoint committee

In the case of a conjoint examination committee, special procedures for nomination of members may be established with the approval of the Bureau and the AOA Board of Trustees. (B-7/76)

ARTICLE II - DUTIES OF OFFICERS

Certifying board officers shall be alert to the fact that modification of existing Constitution, Bylaws and Regulations and Requirements may be needed from time to time and shall give prompt attention to amending their organization papers as directed by the AOA Board of Trustees. Officers of certifying boards shall cooperate with the Committee of Basic Documents of the Bureau to insure uniformity of amendments. (B-7/49)

Section 1. - Chair and Vice Chair

- A. Following election, the chair and vice chair shall familiarize themselves promptly with the status of the board's activities by conference with retiring officers. The chair shall make the appointments (committees and representatives to the Bureau) designated in the statement of his/her duties in the Bylaws.
- B. The chair of each board shall set up a schedule of the prescribed activities of the board and maintain an appropriate system to assure adequate reminders of necessary action.
- C. The vice chair shall preside at all meetings of the board in the absence of the chair and assist the chair in the discharge of the duties of that office.

Section 2. - Secretary-Treasurer

The secretary-treasurer of the certifying board shall:

- A. Fulfill the duties of the office as described in the Bylaws of the Board and observe the procedures, as stated in this document, regarding the issuance of certificates, annual registration fee and changes in certification status.

- B. Immediately after the annual meeting of the certifying board notify the secretary of the Bureau, in writing, of the officers of the board and its representatives to the Bureau. Any subsequent change in personnel should be reported immediately in the same manner.
- C. Inform the secretary of the Bureau, in writing of the dates and places of all examinations. Examinations shall be scheduled early enough so that the dates may be published not later than four (4) months prior to the date specified, except in the case of individually arranged clinical examinations.
- D. Prepare an annual and midyear report for presentation to the Bureau. The report forms are distributed by the secretary of the Bureau and must be completed and returned to the Bureau secretary at least thirty (30) days before the date of the Bureau meeting. Instructions for submission of reports shall be noted on the forms. The secretary-treasurer may present changes in these reports and recommendations as addenda by submitting the required number of typed copies to the secretary of the Bureau for distribution to the members of the Bureau at the time of its meeting.
- E. Prepare the "Individual Summary Sheet" and "Examination Summaries for candidates being presented for certification" which are distributed by the secretary of the Bureau. Instructions for submission of these forms are noted on each form.
- F. Prepare the "Statistical Summary of candidates examined for certification" and submit with the board's annual report to the Bureau.
- G. Prepare a financial statement for submission to the AOA in accordance with established AOA guidelines.

ARTICLE III - GENERAL PROCEDURES

Section 1. -Bureau reviews prior to AOA Board

All recommendations concerning certifying boards or the Bureau must be presented to the Bureau before being presented to the AOA Board of Trustees for approval.

Section 2. -Certification recommendation approval is with Bureau's Executive Committee.

All actions of the certifying boards relating to policies and documents are subject to the recommendation of the Bureau and approval of the AOA Board of Trustees. (B-7/64)
Certification recommendations of the certifying boards are subject to the final approval of the Executive Committee of the Bureau of Osteopathic Specialists. (B-3/93)

Section 3. – Penalties for non-compliance

Failure of any certifying board to cooperate, to a reasonable degree, with the Bureau and the officials of the American Osteopathic Association in the prescribed manner, may be cause for the Bureau to recommend to the AOA Board of Trustees termination of approval of such certifying board. (B-7/64)

Section 4. – Services that Boards must provide

To enable certifying boards and their officers to fulfill the several functions assigned to them, each board shall promptly adopt, provide and maintain the following:

- A. Application blanks approved by the officers of the Bureau and the AOA Executive Director.
- B. A system of recording permanently the proceedings, transactions and rulings of the certifying board.
- C. A filing system designed to preserve adequately all essential data regarding each applicant for certification (statement of credentials, board eligible status, record of examination and results) and diplomate of the board (issuance of certificate, annual registration fee, changes in certification status).
- D. An accurate register of certificates issued, showing their numbers, date of issuance, diplomate's name and names of the officers signing.
- E. A brochure of information for applicants, setting forth the requirements and procedures for certification, recertification and certification of added qualifications.
- F. A manual for those serving as examiners, describing the exact procedure for conducting and reporting examinations.
- G. Certificates, the wording and form of which are approved by the Bureau and the AOA Board of Trustees.
- H. Appropriate stationery for the board's business correspondence.
- I. A file of all old and current basic documents and amendments pertaining thereto of the certifying board and the Bureau.
- J. Provide adequate staffing to forward application materials, respond to applicant questions, letters and e-mails within commonly acceptable standards of customer service (24-48 hours). (B-02/04)

Section 10. – Statements of requirements for applicants

Statements of the requirements made to applicants for examination and certification must be made in writing and must be in conformity to the Bylaws and Regulations and Requirements of the issuing certifying board as they stand approved at that time. Additions to training and/or practice requirements shall go into effect one (1) year subsequent to the announcement of such change. (B-7/64)

Section 11. –Distribution list for official correspondence

Copies of all official correspondence should be supplied promptly to each officer of the certifying board (preferably each member), and to the chair and secretary of the Bureau and to the Executive Director of the AOA.

Section 12. –Scheduling of meetings

Certifying board meetings shall be scheduled at a time which shall not interfere with the full attendance of the board's representative at all sessions of the Bureau meeting. (B-12/48)

Section 13. – Queries about certification status

All inquiries regarding certification status shall be referred to the American Osteopathic Information Association (AOIA) so that an AOA Physician Profile can be generated. (B-07/04) If the individual inquiring is a prospective patient, and not a credentialer, hospital or health plan, the only information that will be divulged at that time will be whether or not an individual is certified. (B-03/01) Inquiries regarding board eligibility status shall be referred to the individual specialty board(s). The only information that will be divulged at that time will be whether or not an individual is board eligible or currently in the certification process. The inquirer will be told that all other information is confidential. It will be AOA policy that requests or demands for further information will be referred to the AOA legal counsel and that such further information shall only be divulged upon counsel being satisfied that the individual involved does not object, and that there is no possible liability which may be imposed upon the AOA, its members, and particularly the members and personnel of the affected certifying board. (B-7/76)

ARTICLE IV - ADMINISTRATION OF REGULATIONS AND REQUIREMENTS

Section 1. – Required bylaws statements on examination conduct

The proper administration of requirements for certification and the proper conduct of examinations shall be guided by the following statements which shall be included as worded herein in the appropriate section of each certifying board's bylaws.

- A. Each certifying board shall establish its individual eligibility requirements for examination for certification.
- B. Each certifying board shall verify AOA approval of the completed residency of each candidate prior to submission of the candidate for certification. Verification must include:
 - 1) Osteopathic residents: A copy of the hospital resident certificate and a statement from the evaluating committee of the appropriate practice affiliate that the program has been approved as being complete.
 - 2) ACGME residents: A copy of the AOA Board of Trustees or Council on Postdoctoral Training letter granting approval of the training as being complete. (B-4/85)
 - 3) ABMS-certified DOs seeking AOA certification: (B-07/04)
 - A) Evidence via primary source verification of ABMS certification will be accepted as completion and approval of the ACGME residency program.
 - b) The candidate must be certified by the ABMS and completed residency training at least five (5) years prior to submitting an application or where allowed by specific AOA specialty boards, ABMS-certified osteopathic physicians who participated in a clinical pathway to achieve ABMS certification may be allowed to enter the certification process under the following conditions:
 - 1) The pathway must have been completed prior to 1995 and
 - 2) The candidate must meet any additional requirements set by the specialty board for certification.
 - c) AOA membership will be required by the physician

(applicant) at the time of the application process.

- d) Osteopathic physicians certified through an approved board of the American Board of Medical Specialists (ABMS) and who have received approval from the AOA will be able to enter the AOA certification process.
- e) Dedicated AOA staff, under the Department of Education, will receive all applications; the AOA will then work with the appropriate specialty college and certifying boards to verify credentials for entry into the AOA certification process.
- f) The AOA will notify the appropriate specialty college and certifying board of this approval.
- g) The applicant will maintain CME hours to fulfill AOA requirements.
- H) The applicant, if not a current aoa member, will pay the full dues amount at the time of application.
- i) The physician applicant will not be required to Have state or specialty college membership at the time of the application.
- j) Applicants will be subject to fees as designated by the certifying boards.
- k) Applicants may be subject to additional requirements set by the specialty board and specialty colleges.
- l) Existing resolutions will be maintained and Monitored annually by the task force. When the task force completed its charge outlined in resolution 67, responsibility to maintain and monitor these resolutions, as well as the process of certifying acgme graduates will be charged to the aoa, bureau of osteopathic specialists.
- m) The resolution for re-entry pathway will sunset in October 2005. The task force will request from the BOT that this resolution be extended through october 2008.
- n) The COPT, with the AOA, will monitor the ACGME basic standards for residency training. (B-07/04)

- C. The applicant shall be required to pass appropriate examinations planned to evaluate an understanding of the scientific bases of the problems involved in the specialty, subspecialty, and/or certification of added qualifications familiarity with current advances in the specialty, subspecialty and/or certification of added qualifications, the possession of sound judgment and of a high degree of skill in the diagnostic and therapeutic procedures involved in the specialty, subspecialty and/or certification of added qualifications.
 - 1) Examinations shall be conducted and required in the case of each applicant. The method(s) and content of the examination procedure shall be determined by the individual board and shall be subject to the approval of the AOA Board of Trustees. Where applicable, the final portion of the examination shall be conducted only after the required years of practice have been completed. (B-2/86)
 - 2) Where applicable, the members of the board shall personally supervise the conduct of the oral examination, preferably with the board meeting as a whole, and also personally supervise, if not perform, the grading of each written examination.
 - 3) Where applicable, the conduct of the clinical examination may be delegated to committees of not fewer than two (2) individuals maturely qualified in the specialty or field of practice. (B-7/71; 2/86)
- D. A full description of the method of conducting the examination shall be formulated in each board's regulations and requirements and provision for reexamination shall be made.
- E. Applicants desiring examination for certification are required to file an application which shall set forth the applicant's qualifications. The procedure for filing applications shall be formulated in each board's regulations and requirements.
- F. Signed applications and all material submitted by an applicant to a certifying board, even though the applicant may withdraw as an applicant for certification, shall remain the property of the board. (B-7/53)
- G. Candidates must fulfill all requirements prior to certification.

Section 2. – Requirements for special practice

The percentage of specialty practice necessary during the required years of practice as provided for in the bylaws will be left to the discretion of each board, but affidavits should be required from each applicant.

Section 3. – AOA-approved internship is required for examination

Applicants for examination must have satisfactorily completed an AOA-approved internship.

Section 4. –One-Year prior notification of requirements

Any training and/or practice requirements which were not announced one (1) year prior to the beginning of the candidate's residency training shall not be made applicable to that candidate. Certifying boards may not impose any requirements on applicants or any plans of conduct which do not conform to their bylaws as approved by the AOA.

Section 5. –Two years of AOA membership required by certification date

Certifying boards must submit the names of applicants for examination to the AOA Membership Department for a report on their ethical standing and AOA membership before examining the applicants. The secretary of the Bureau must resubmit the names of candidates for certification to the Membership Department thirty (30) days prior to their presentation to the Executive Committee of the Bureau for verification that each candidate, on the date of certification, will have been an AOA member for at least the immediately preceding two (2) years. (B-7/64; 7/76; 7/79)

Section 6. – Knowledge of AOA Code of Ethics is required

In examining candidates for certification, recertification and certification of added qualifications, certifying boards shall satisfy themselves that each candidate has a good knowledge of the Code of Ethics of the AOA.

Section 7. –Membership in practice affiliate shall not be required

The applicant for certification, recertification and certification of added qualifications shall not be required to be a member of a practice affiliate or other similar society. (B-7/53)

Section 8. –Use of Osteopathic concepts is required in examinations

Certifying boards shall determine by examination, the applicant's ability to use the osteopathic concept in the practice of his/her specialty, subspecialty and/or area of added qualifications. (B-12/48)

ARTICLE V - TRAINING PROGRAMS

Section 1. – Minimum requirements must be stated

Certifying boards are required to formulate in specific terms the minimum requirements leading to certification. (B-1/63)

Section 2. –COPT is responsible for approving training programs

Certifying boards shall send all recommendations, complaints or comments regarding resident training programs to the Council on Postdoctoral Training and not direct such matters to individuals or hospitals. The responsibility of making recommendations and requirements relative to training programs designated as approved residencies as defined by the AOA Board of Trustees is, and shall be, that of the Council on Postdoctoral Training. (B-12/48)

ARTICLE VI - BOARD ELIGIBILITY

Section 1. - Definition

Board eligibility is defined as that status granted candidates who:

- A. Have documented the satisfactory completion of an AOA-approved residency or preceptorship program or, if applicable,
- B. Have documented the satisfactory completion of an AOA-approved internship and the completion of the practice requirement.
- C. Are and remain members, in good standing, of the American Osteopathic Association or the Canadian Osteopathic Association.
- D. Have met all the requirements as established by the appropriate specialty board.
- E. Have applied to and have been accepted as a registrant by the appropriate specialty board.

Section 2. - Registration

To be registered as "board eligible", a candidate must apply for such status upon completion of residency training. All residents and preceptees in AOA-approved programs shall be notified by the AOA that, upon completion of their AOA-approved training, it shall be necessary to formally

apply to the secretary of the appropriate specialty board for board eligible status. Such notification shall be included with the AOA annual report form sent to residents and preceptees.

Board eligible status is not granted automatically. A candidate shall not be designated as "board eligible" if he/she applies later than six (6) years following completion of residency training or completion of the practice requirement, if applicable.

- A. A candidate who wishes to register for board eligible status shall request a standard AOA application form from the secretary of the specialty board.
- B. The candidate shall complete the application and return all copies to the secretary of the board along with the following documentation:
 - 1) A copy of the institutional certificate indicating the satisfactory completion of the residency training program, and
 - 2) A letter(s) of recommendation from the program director(s) or, if applicable,
 - 3) A copy of the hospital certificate indicating satisfactory completion of an internship and adequate documentation, as determined by the board, of having met the practice requirement.
- C. The secretary of the board shall verify AOA approval of the applicant's training as being complete prior to registration of the applicant. Verification shall include:
 - 1) Osteopathic residents: A statement from the evaluating committee of the appropriate practice affiliate that the training has been approved as being complete.
 - 2) ACGME residents: A copy of the AOA Board of Trustees or Council on Postdoctoral Training letter granting approval of the training as being complete.
- D. After review and acceptance of the board eligible application, the board shall establish the date of registration as the date of completion of residency training or the date of completion of the practice requirement, if applicable.
- E. The secretary of the board shall complete the bottom portion of the registration application and return the "Applicant Copy" to the candidate along with a statement that board eligible status is limited to a maximum of six (6) consecutive years. Effective January 1, 2001, AOA Specialty Boards are no longer required to submit copies of board eligible applications to the AOA Department of Education as the AOA does not verify nor enter board eligible status into its system.(B-03/01)

- F. The specialty boards may grant board eligibility status to individuals who have received AOA approval of ACGME residency training completed prior to July 1, 1989. Such board eligibility status is to be limited to three (3) years from the date of approval by the AOA Board of Trustees. (B-7/91)

Section 3. - Termination of Board Eligible Status

- A. Board eligible status shall terminate on December 31, of the sixth year following the year eligibility was established. (This policy becomes effective the date of action of the AOA Board of Trustees). (B-7/89)
- B. In view of a candidate's right to appeal the results of an examination, board eligibility shall not be terminated due to failure of examinations.
- C. If a candidate does not initiate examination within the period of board eligibility, then board eligibility status will be automatically lost and so recorded by the AOA and appropriate specialty board.
- D. The Secretary of the board will notify the candidate in writing by registered, return receipt mail, a minimum of one (1) year prior to termination of board eligible status. (B-07/02) The notice shall include a statement that the candidate has the right to appeal to the Bureau or may reenter the examination process, if eligible (See Section 5. of this article).

In the event of extenuating circumstances, a specialty board may approve the extension of a candidate's board eligibility termination date (two (2) years shall be the maximum extension). The secretary of the Bureau shall be notified, in writing, of any such extension.

Section 4. - Maintenance of Board Eligible Records

- A. The secretary of the specialty board shall maintain a verified and permanent list of candidates determined to be board eligible.
- B. The secretary of the board shall provide the Bureau with a list of board eligible candidates, indicating their registration and termination dates, on an annual basis.

Section 5. - Reentry into Certification Process

- A. A candidate whose board eligibility status has been terminated cannot re-register for this status, but may be eligible to petition the appropriate specialty board for reentry into the certification process.
- B. Upon approval of such petition, the specialty board shall provide the candidate with a written list of deficiencies, if applicable, and cooperate with the evaluating committee of the corresponding practice affiliate in developing a training program designed to meet the individual's needs.

- 1) Such programs shall be reviewed and approved by the evaluating committee of the practice affiliate.
- 2) The practice affiliate shall provide verification to the board that the program was conducted and satisfactorily completed.
- 3) Upon receipt of verification from the practice affiliate, the board shall permit the candidate to continue the certification process.

ARTICLE VII - NOTICE TO APPLICANT OF EXAMINATION RESULTS

Section 1. – Applicants to be notified in 30 days

The secretary-treasurer of each certifying board shall, within thirty (30) days of the final action of the certifying board, notify the applicant examined for certification of the results of his/her examination.

Section 2. –Use of approved format (Appendix D) is required

For those physicians who have passed all of the prescribed examinations, a form letter shall be used (See Appendix D) in conformity to the direction of the AOA Board of Trustees, so that the applicant will understand that the passing of the examination does not complete the requirements for certification.

Section 3. – Petition to review examination performance

Procedure for applicants that failed and are foreclosed from further examination or choose to petition rather than be reexamined

- A. The applicant should be sent a letter stating that he/she has the right to petition the Appeal Committee of the Bureau for a hearing. Such a letter should state that the hearing is for the sole purpose of ascertaining the truthfulness of allegations which, if found to be true, would constitute an unequal application of rules, regulations or standards, or unwarranted discrimination, prejudice, unfairness or improper conduct of all or any part of an examination conducted by the certifying board, or such similar action by the Executive Committee of the Bureau. The letter should further state that such an appeal must be filed with the chair of the Bureau within two (2) years of the alleged grievance. It should further be stated that the chair of the Bureau shall determine whether sufficient grounds have been alleged in the petition to warrant hearing the appeal. The appellant should be further advised that the appeal will be scheduled on a timely basis, either at the time of full meetings of the Bureau, or on an interim schedule.
- B. In order to appeal with sufficient detailed facts which would establish unfairness, discrimination, prejudice or other improper conduct in connection with the conduct of the examination, an appellant must have had the opportunity to generally review the results of the examination in an oral discussion in the same manner as those who are entitled to reexamination. However, the details of the examination itself need not be reviewed in such discussion, but rather broader questions such as the examiners making judgments as to clinical techniques without sufficient observation of those techniques, conclusions as to the preparation and maintenance of charts and records without reviewing a sufficient number of such documents, or extrinsic evidence that the particular examiners had reason to be and were prejudicial toward the appellant.
- C. Even though the appellant seeks a review of the examination performance for the purpose of preparing an appeal petition, the appellant should not be allowed to obtain a copy of the written examination and the charts and other records reviewed with a view to arguing in the petition on a point by point basis that the examiners erred in their findings. If the appellant is informed that the failure stemmed largely from a failure to maintain proper patient charts, and the appellant has reason to believe that this conclusion is in error, without knowing the specific charts or the items in such charts, the appellant can make such a charge. It is solely within the discretion of the Appeal Committee to call for those charts and review them in executive session. If the appellant makes requests or demands for documents through legal counsel, these requests or demands should be referred to the AOA general counsel. (B-7/76)

ARTICLE VIII - CERTIFICATES OF CERTIFICATION

Section 1. – Required format for physician's name

Certificates issued by certifying boards shall carry the name of the individual as "John Smith, D.O." not "Dr. John Smith".

**Section 2. – Date of issuance: General Certifications Are For 10 Years Or Less,
CAOs are for 10 years or less.**

- 1) The date carried by general certification shall correspond with the date on which verification of successful completion of all specialty board requirements by the respective specialty board occurred. All general certifications issued after January 1, 2004 will be time-limited to 10 years or less. Lifetime general certifications, which were issued prior to this date without a time limit, will remain in effect. (B-2/00)
- 2) The date carried by the certificate shall correspond with the date on which verification of successful completion of all specialty board requirements by the respective specialty boards occurred. All certification of added qualifications certificates will be time-limited to 10 years or less. (B-7/96r)

Section 3. – Required listing for certifying board

The certified physician shall be identified as a diplomate of the appropriate certifying board.

Section 4. - Issuance of Certificates

- A. The secretary-treasurer of the certifying board, upon receipt of notification from the secretary of the Bureau that certification of a candidate has been approved by the Bureau, shall immediately notify the candidate of the approval of certification. The secretary of the certifying board shall then have the certificate prepared and numbered, so that it can be forwarded to the diplomate within sixty (60) days from the date of notification of approval of certification. The secretary of the certifying board shall record the certificate on the certifying board's register. After signing the certificate, the secretary shall forward it to the chair of the certifying board for signature.
- B. After the chair has signed the certificate it shall be forwarded to the secretary of the Bureau, AOA Department of Education, for verification and signature of the AOA Executive Director. After the Executive Director has signed the certificate it shall be recorded on the certification register at the Central Office by the Bureau secretary.
- C. The secretary of the specialty board shall prepare, in duplicate, a "Receipt of Certificate of Certification" for each diplomate. This "Receipt" is returned with each certificate to the secretary of the appropriate certifying board, with instructions to retain the copy for the board's files and send the original to the diplomate with his/her certificate. The diplomate shall be advised by the

certifying board secretary to sign the original "Receipt" and return it to the certifying board secretary.

- D. The diplomate shall be notified, in writing, of the requirements for maintaining certification, recertification, and certification of added qualifications.
- E. The term "Certification" is to be used for certification in a specialty or subspecialty, and the only other term used by the AOA and the Bureau for Osteopathic Specialists is "certification of added qualifications". (B-7/91; 7/92; 2/98r)

Section 5. - Certification in More Than One Field

An osteopathic physician may hold certification in more than one specialty, subspecialty and/or area of added qualifications either under the same certifying board or under different certifying boards. In such a case, the physician is to be listed under each of the specialties, subspecialties and/or area of added qualifications in the roster of certified physicians which appears in the AOA Yearbook and Directory, and each of the specialties, subspecialties and/or areas of added qualifications are to be indicated by the proper certification symbol, in the physician's listing in the geographic section of the AOA Yearbook and Directory.

The term "subspecialty" is to refer to areas eligible for certification, and the term "field of interest" is to be used regarding interest or training in areas leading to certification of added qualifications. (B-7/91;2/98)

Section 6. - Recording of multiple certificates

- A. The diplomate is assigned a number for life under each certifying board. Successive certificates issued to the same diplomate by the same board retain the initial certificate number assigned to the diplomate.
- B. The diplomate is billed according to each number.
- C. Successive certificates are listed after the diplomate's name on the record by date of their approval.
- D. The diplomate retains certificates as acquired, for his/her archives and personal satisfaction.
- E. The diplomate is listed or known to the certifying board as being certified in each category.
- F. The diplomate must maintain general certification when certification of added qualifications is awarded. (B-7/92)

Section 7. - Annual Registration: Fee and Requirements

A. Active Diplomates

- 1) AOA dues notices mailed to active diplomates shall include a charge of \$65.00 for each of the certifying boards under which the diplomate holds a certificate(s), for the annual registration of the certificate(s). Fifteen dollars (\$15.00) of this fee shall be forwarded by the AOA controller to the respective certifying board for continuation of their work. Five dollars (\$5.00) of the remaining fee will be allocated to the Dale Dodson Fund and \$15 will be allocated to the corresponding specialty college evaluation committee. The remaining thirty dollars (\$30.00) shall be retained by the AOA to cover costs for processing applications and other ancillary expenses incurred with keeping the certification registration up to date. (B-7/76;B-3/90;B-2/98, B-2/02)
- 2) Membership cards for those who have paid the current certification registration fee are to designate what specialty board(s) the diplomate has been certified in.
- 3) Physicians certified for the first time shall not be required to pay the annual certification registration fee during the fiscal year in which the Executive Committee of the Bureau approved their certification. They are to be billed for the fee beginning with the next fiscal year. (B-7/66)

B. Inactive Diplomates

- 1) Diplomates who are classified as inactive shall not be required to pay the annual certification registration fee. Inactive diplomates may retain the possession of their certificate(s) and their names shall appear in the official registry of certified physicians with a designation of inactive status. Inactive diplomates shall have their certification designated in their individual listing in the geographic section of the AOA Yearbook and Directory. A diplomate shall be classified as inactive for one of the following reasons:
 - a) The diplomate is unable to practice the specialty, subspecialty and/or certification of added qualifications in which he/she is certified because of health or age.
 - b) The diplomate has voluntarily requested that a lifetime, non-time dated, certification be inactivated with the right to request reactivation at a future time. (B-02/00)

C. Retired members

- 1) The diplomate is permanently retired and not gainfully employed in any phase of professional activity, and his/her practice status designation in the AOA yearbook and directory so indicates. All certification information will be retained and shown on the AOA physician profile when the certification status is retired by reason of membership retirement status. (B-03/01)
- 2) Certification will be listed as "retired" when the diplomate is permanently retired and not gainfully employed in any phase of professional activity, and his/her practice status designation in the AOA yearbook and directory so indicates. Retired diplomates may retain the possession of their certificate(s) and their names shall appear in the official registry of certified physicians with a designation of retired status. All certification information will be retained and shown on the AOA physician profile when the certification status is retired by reason of membership retirement status. (B-03/01)
- 3) If a retired diplomate holds a time-dated certification and chooses to become "active" after his/her certification has expired, he/she must re-enter the certification process in accordance with the Bylaws of his/her respective specialty board. (B-03/01)

D. Diplomates Holding More Than One Certificate

- 1) If the diplomate is certified in more than one specialty, subspecialty and/or certification of added qualifications under the same certifying board, only one annual certification registration fee shall be required.
- 2) If the diplomate is certified in more than one specialty, subspecialty and/or certification of added qualifications under different certifying boards, and elects to retain more than one certificate, an annual registration fee for each of the certifying boards under which certification is held shall be required. If the diplomate does not elect to retain more than one specialty, subspecialty and/or certification of added qualifications the earliest certificate issued shall be automatically revoked.

Section 8. – Inactivation, Reinstatement and Reactivation of Certificates

A. In order to maintain his/her certificate, a diplomate must:

- 1) Be a member of the American Osteopathic Association or the Canadian Osteopathic Association, and

- 2) Pay the annual certification registration fee, unless classified as inactive, and
 - 3) Maintain a minimum of 50 hours of category I or II CME in their specialty during the three-year CME cycle and sufficient hours to fulfill the AOA CME membership requirement.
(B-2/86, B-07/03)
- B. In the event that a diplomate does not meet the above requirements, his/her certificate will be inactivated according to procedures developed by the BOS and the AOA department of membership. The procedures will give the diplomate ample opportunity and notice to comply with any requirement deficiencies for maintaining AOA certification. (B-2/02)
- C. Reinstatement of a certificate which was inactivated when the diplomate was dropped from AOA membership for nonpayment of dues, or for nonpayment of the annual registration fee, will be automatic upon reinstatement of the diplomate's AOA membership and/or payment of the registration fee. (B-2/02)
- D. Reactivation of a certificate which has been voluntarily inactivated by request as described in section 7. (B)(1)(c) above, shall require compliance with the requirements of paragraph a. above, as well as approval of the appropriate certifying board and the Bureau. Reactivation will also require payment of any back AOA membership dues, up to a maximum period of two (2) years. Reactivation will also require payment of any back AOA certification registration fees, up to a maximum period of two (2) years. (B-02/00)
- E. If a physician requests reinstatement of his/her certificate in the same AOA fiscal year as the year in which the certification registration fee was not paid, the physician shall be required to pay the registration fee for that year, as well as for the current fiscal year.

Section 9. – Revocation of a certificate

- A. A certifying board shall have the power to recommend to the Bureau the revocation of the certificate of any diplomate whose certificate was obtained by fraud or misrepresentation, who exploits the certificate, violates the AOA code of ethics or is otherwise disqualified. (B-1/71, B-2/02)

- B. Upon official action revoking a certification, a diplomate's name will be removed from the certification register of the AOA. The Secretary of the Bureau will notify the diplomate and the Secretary of the appropriate certifying board of any such revocation. (B-2/02)
- C. Reinstatement of a certificate which has been revoked for any other reason than that stated in Section 8C above, shall require compliance with the requirements of paragraph section 8A. above, as well as approval of the appropriate certifying board and the Bureau. (B-2/02)

Section 10. – Specialty practice is required to maintain certification

A diplomate is not eligible for annual certification registration of his/her certificate if it is determined by the certifying board involved that diplomate does not qualify within reason as a practicing physician in the particular specialty, subspecialty and/or areas of added qualifications under the regulations and requirements of that certifying board. The certifying board shall notify the secretary of the Bureau of any such disqualified diplomate so that appropriate action may be taken. (B-7/53;2/98)

ARTICLE IX - RECERTIFICATION PROCESS

Each certifying board must offer a recertification process, as approved by the Bureau and the AOA Board of Trustees, no later than January 1, 1995. (B-7/92) The guidelines to be followed are:

- A. That the recertification process for the physician be voluntary for those specialty boards offering lifetime certification. Recertification is required for physicians holding time-dated certification. [B-2/97]
- B. That the recertifying process shall be at no greater intervals than ten (10) years.
- C. That failure in the recertifying process will in no way result in the loss of certification for physicians holding lifetime certification. For physicians holding time-dated certification, failure to successfully complete the recertification process will result in the loss of certification at such time as the current time-dated certificate expires. [B-2/97]
- D. That the recertification process may not be solely done by take-home examination. the recertification method rests with the individual certifying boards; however, it is suggested that the following be considered :
 - 1. Bibliography with examination
 - 2. Syllabus with bibliography and examination. (B-7/02)

- E. Individual specialty boards must establish a reentry mechanism for recertification of expired time-dated certificates. (B-7/02)
- F. The results of the recertification process shall be recorded in the American Osteopathic Association Central Office and be valid for no greater than ten (10) years. (B-7/76, B-7/02)

ARTICLE X - CERTIFICATION OF ADDED QUALIFICATIONS

One or more certifying boards may request jurisdiction to offer certification of added qualifications in a field of interest category. Such a request must be submitted to the Bureau for review and recommendation to the AOA Board of Trustees. The request must include the following information which would be incorporated in the board's basic documents. (B-7/76; 7/92)

- A. Definition
- B. Qualifications of the candidate
 - 1. Training/Practice requirements
 - 2. General certification (required)
 - 3. Scientific paper (if applicable)
 - 4. Letter(s) of recommendation (if applicable)
- C. Examination
 - 1. Fee
 - 2. Rules of conduct and format
 - 3. Reexamination
- D. A candidate receiving approval under this section will receive "certification of added qualifications". All certification of added qualifications certificates will be time-limited to 10 years or less. (B-7/92; 7/96r)
- E. Where fields of interest cross different existing certification disciplines, there shall be a cooperative effort in designing the qualifications, training/practice requirements, and testing, such that conflict in these areas between the disciplines does not exist.

APPENDICES

APPENDIX A

STANDARD CONSTITUTION OF CERTIFYING BOARDS OF THE AMERICAN OSTEOPATHIC ASSOCIATION

ARTICLE I - NAME

The name of this organization shall be the American Osteopathic Board of (hereinafter also referred to as the Board).

ARTICLE II - PURPOSES

The purposes of the American Osteopathic Board of _____ are to:

1. Define the qualifications required of osteopathic physicians for certification in the field(s) of _____ and any other specialty, subspecialty and/or certification of added qualifications that may be assigned to this Board.
2. Determine the qualifications of osteopathic physicians for certification in the field(s) of _____ and of any other specialty, subspecialty and/or certification of added qualifications that may be assigned to this Board.
3. Conduct examinations in conformity with the Bylaws of this Board.
4. Issue certificates, subject to the approval of the Bureau of Osteopathic Specialists of the American Osteopathic Association (hereinafter referred to as the Bureau), to those osteopathic physicians who are found qualified.
5. Recommend revocation of certificates for cause.
6. Use every means possible to maintain a high standard of practice within the osteopathic profession.
7. Offer a recertification process, as approved by the Bureau and the AOA Board of Trustees, no later than January 1, 1995. Issue certificates, subject to the approval

of the Bureau, of recertification to candidates who successfully complete the recertification process. (B-7/92)

ARTICLE III - DEFINITION

For the purpose of the operation of the American Osteopathic Board of _____, the following division(s) of practice is (are) defined:

1. The practice of _____ shall consist of and include
2. The practice of _____ etc.

ARTICLE IV - ORGANIZATION

Section 1. - Membership

The American Osteopathic Board of _____ shall consist of (#) members elected by the Board of Trustees of the American Osteopathic Association as provided for by the Bylaws of this Board in conformity with the Standard Bylaws of Certifying Boards of the AOA.

Section 2. - Officers

The officers of the Board shall be a chair, vice chair and secretary-treasurer, whose powers and duties are as described in the Bylaws of this Board in conformity with the Standard Bylaws of Certifying Boards of the AOA.

Section 3. - Committees

The standing committees of the Board shall be a Credentials Committee, Examination Committee and such other committees as may from time to time be authorized and provided for by the Bylaws of the Board.

Section 4. - Bureau Representatives

The Bureau representatives shall consist of the representative and one alternate representative.

Section 5. - Meetings

The Board shall hold an annual meeting and such other meetings as provided for by the Bylaws of the Board.

Section 6. - Authority

The actions of the Board regarding recommendations of certification are subject to the approval of the Bureau. Actions of the Board regarding policy and other matters are subject to the recommendations of the Bureau and the approval of the Board of Trustees of the American Osteopathic Association.

ARTICLE V - AMENDMENTS

Subject to the review and recommendation of the Bureau and the approval of the Board of Trustees of the American Osteopathic Association, this Constitution may be amended by a vote of two-thirds (2/3) of the total membership of this Board at any annual meeting following notification given at any previous meeting of such intention.

APPENDIX B
STANDARD BYLAWS
OF
CERTIFYING BOARDS
OF THE
AMERICAN OSTEOPATHIC ASSOCIATION

ARTICLE I - DUTIES

The duties of the American Osteopathic Board of _____
are to:

1. Define the qualifications for and to serve as an advisory board for all applicants for certification in the specialty(s) of _____ and any other subspecialty and/or certification of added qualifications which may be assigned to its jurisdiction.
2. Determine, in accordance with the provisions of these Bylaws, the standards of education, formal training and practice required for certification in the specialty(s) of _____ and of any other subspecialty and/or certification of added qualifications which may be assigned to its jurisdiction, subject to the recommendation of the Bureau of Osteopathic Specialists (hereinafter "the Bureau") and the approval of the Board of Trustees of the American Osteopathic Association (AOA).
3. Establish procedures, in accordance with the provisions of these Bylaws for the conduct of examinations 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. File with the Bureau, at the time specified by the Bureau, its recommendations concerning each applicant for certification, together with any pertinent information required by the Bureau.
5. Provide and issue certificates in all fields assigned to this Board, in accordance with the provisions of these Bylaws.
6. Recommend to the Bureau the revocation of a certificate in accordance with the provisions of these Bylaws.
7. Record and keep permanently on file all applications submitted, complete records of examination results, and maintain a registry of diplomates.

8. Determine and collect the application and examination fees, in accordance with the provisions of these Bylaws and provide for the funds necessary to finance the operation of the Board.
9. Arrange for all meetings necessary for this Board to carry out its functions as provided for in these Bylaws.
10. Recommend a member of the Board to act as representative on the Bureau. In case of the inability of the regular representative to attend the sessions of the Bureau, an alternate shall be recommended, as provided in the AOA "Rules of Organization and Procedure of the Bureau for Osteopathic Specialists".
11. Conduct its activities in relation to the officers of the American Osteopathic Association, the Bureau, other certifying boards and applicants for certification, in accordance with the AOA "Rules of Procedure for Certifying Boards".
12. Establish, in conformance with the Constitution and Bylaws, all necessary rules and procedures governing the activities of the Board which are not provided by the Bureau and the AOA Board of Trustees.
13. Report all recommendations regarding candidates for certification to the Bureau for approval, and all other actions, recommendations and activities through the Bureau to the AOA Board of Trustees for approval.
14. Establish a recertification process, as approved by the Bureau and the AOA Board of Trustees, and offer a recertification process no later than January 1, 1995. Issue certificates of recertification to candidates who successfully complete the recertification process. (B-7/92)

ARTICLE II - MEMBERS

The American Osteopathic Board of _____ shall consist of __ (#) members elected by the Board of Trustees of the American Osteopathic Association at its annual meeting from nominees submitted by the (practice affiliate) at its annual meeting, through this Board to the Bureau at its annual meeting and the AOA Board of Trustees. Each member shall be an AOA certified physician in good standing. Insofar as practical, membership shall include a representative from each area of (specialty, subspecialty and/or area of added qualifications) and a representative from each of the time divisions of the United States. (B-3/84; 7/93;2/98)

Section 1. - Election

- A. The governing body or voting membership (designate which) of the (practice affiliate) shall select annually, one (1) candidate for each expiring term on the Board.
- B. Should a nominee submitted, fail to be approved by the Bureau or the AOA Board of Trustees, then the (practice affiliate) shall submit the name(s) of a different qualified individual(s). Said new nominee shall be submitted at the next meeting of the Bureau, which

follows the date when the (practice affiliate) was officially notified of the action of the Bureau or the AOA Board of Trustees.

- C. In the event a new nominee(s) has not been submitted by the time and in the manner set forth above, then the chair of the Bureau shall recommend to the AOA Board of Trustees a qualified candidate(s) to fill the vacancy on the Board. The nominee's term shall be for the balance of the unexpired term.

Section 2. - Term of Office

- A. Members shall be elected for terms of ____ (#) years. The terms shall be staggered so that the new members elected in any year shall not constitute a majority of this Board.
- B. Whenever a vacancy occurs on this Board due to the death or resignation of a member whose term has not expired, the procedure outlined above shall be followed. If it is deemed urgent that the approval of the nominee be considered prior to the next annual meeting of the AOA Board of Trustees, a nominee may be submitted, according to established procedure, to the Board of Trustees at its next scheduled meeting. If approved, the nominee's term shall run until July of the year it expires.
- C. Members shall continue to serve until their successors are elected.

ARTICLE III - OFFICERS

The officers of the American Osteopathic Board of _____ shall be a chair, vice chair and secretary-treasurer. The officers shall be elected by this Board during its annual meeting and shall serve for a term of one (1) year or until such time as their successors are elected.

Section 1. - Chair

The chair shall preside at all meetings, appoint all committees, schedule all meetings of the Board, supervise all examinations and sign all certificates issued by the Board. The chair shall be chair of the Examination Committee, may be a Bureau representative and shall be an ex-officio member of all other committees.

Section 2. - Vice Chair

The vice chair shall preside at all meetings of the Board in the absence of the chair and assist the chair in the discharge of the duties of that office.

Section 3. - Secretary-Treasurer

The secretary-treasurer shall:

- A. Serve as a Bureau representative, if so designated.

- B. In cooperation with the AOA Central Office, keep a permanent record of all proceedings, transactions and rulings of this Board, and keep on file all examination papers and case records for at least three (3) years. Keep a permanent record of all old and current basic documents.
- C. Maintain a record of all diplomates of the Board.
- D. Have printed and distributed all certificates, application forms and circulars of information authorized by the Board and necessary for the proper functioning of the Board.
- E. Provide all applicants with the requirements for examination and certification in written form.
- F. Sign all certificates issued by the Board.
- G. Prepare the complete files and other pertinent information in support of recommendations for certification for presentation to the Executive Committee of the Bureau.
- H. Prepare the annual and midyear report for the Bureau in accordance with the AOA "Rules of Procedure for Certifying Boards".
- I. Notify the chair and Secretary of the Bureau and the AOA Executive Director of the officers elected by the Board and of the appointments of Bureau representatives.
- J. Receive, protect and disburse the funds of the Board, and issue an accounting of all funds at the annual meetings or at such other times as requested by the chair of the Board.
- K. Prepare a financial statement for submission to the AOA in accordance with established AOA guidelines.

ARTICLE IV - COMMITTEES

Committees shall be appointed by the chair, the duties of which are herein prescribed:

Section 1. - Credentials Committee

The Credentials Committee shall consist of ____ (#) members. Insofar as practical, the members shall represent different geographical districts. The Committee shall:

- A. Review all completed applications as submitted by the secretary-treasurer.
- B. Conduct a comprehensive investigation of each applicant in accordance with the rules governing applications.

- C. Prepare a complete report, with recommendations for each applicant, for presentation to the Board at its next annual meeting.

Section 2. - Examination Committee

The Examination Committee shall consist of a chair and not less than two (2) members of the Board. The chair of the Board shall be the chair of the Examination Committee. The Committee shall:

- A. Plan and prepare for the conduct of examinations in the specialty(ies), subspecialty(ies) and/or added qualifications under the jurisdiction of this Board in accordance with the rules stated in these Bylaws and the Regulations and Requirements of this Board.
- B. Report the results of the examinations to this Board.

ARTICLE V - BUREAU REPRESENTATIVES

Section 1. - A Bureau representative shall be recommended from and by the membership of this Board to represent the Board on the Bureau and in all matters where such representation is required.

Section 2. - An alternate representative shall be recommended annually from and by the membership of this Board. The alternate shall be empowered to act for regular representative in his/her absence.

Section 3. - The Bureau representative shall:

- A. Transmit from the Board all information attesting to the adequacy of the examination.
- B. Have available, files and records of all candidates being recommended for certification and such other files as may be requested in advance.
- C. Report to the Bureau on the adequacy of the examinations and the recommendations of the Board on applicants who have completed the examinations.
- D. Report to the Board regarding actions and proceedings of the Bureau.

ARTICLE VI - MEETINGS

Section 1. - Annual Meeting

The American Osteopathic Board of _____ shall hold a regular annual meeting to transact business and to conduct examinations.

Section 2. - Special Meetings

Special meetings of this Board which are deemed necessary for the transaction of business, may be called by the chair of the Board or by a majority vote of the total membership of this Board. Notice of the meeting shall be mailed to each member by the secretary-treasurer not less than thirty (30) days prior to the proposed meeting date.

Section 3. - Quorum

For the transaction of business at any meeting of the Board, (#) members shall constitute a quorum.

Section 4. - Governing Rules

Meetings of the Board shall be governed by Robert's Rules of Order, Newly Revised unless otherwise specified in these Bylaws.

ARTICLE VII - REQUIREMENTS FOR CERTIFICATION

Section 1. - To be eligible to receive certification from the AOA through the American Osteopathic Board of _____, the applicant must meet the following minimum requirements:

- A. The applicant must be a graduate of an AOA-accredited college of osteopathic medicine.
- B. The applicant must be licensed to practice in the state or territory where his/her practice is conducted.
- C. The applicant must be able to show evidence of conformity to the standards set forth in the Code in Ethics of the American Osteopathic Association.
- D. The applicant must have been a member in good standing of the American Osteopathic Association or the Canadian Osteopathic Association for the two (2) years immediately prior to the date of certification.
- E. The applicant must have satisfactorily completed an AOA-approved internship.
- F. A period of ____ (#) years of AOA-approved training in (specialty, subspecialty and/or added qualifications) shall be required, after the required internship.

G. (If applicable) The applicant must practice in (specialty, subspecialty, and/or added qualifications) for a period of ____ (#) years subsequent to the required ____ (#) years of AOA-approved training. Practice within each field under this Board shall be defined in Regulations and Requirements of this Board.

(Each certifying board shall establish its individual eligibility requirements for examination for certification)

H. Following satisfactory compliance with the prescribed requirements for examination, the applicant is required to pass appropriate examinations planned to evaluate an understanding of the scientific bases of the problems involved in (specialty, subspecialty and/or added qualifications), familiarity with the current advances in (specialty, subspecialty and/or added qualifications), possession of sound judgment and of a high degree of skill in the diagnostic and therapeutic procedures involved in the practice of (specialty, subspecialty and/or added qualifications).

1) Examinations shall be conducted and required in the case of each applicant. (The method(s) and content of the examination procedure shall be determined by the individual board and shall be subject to the approval of the AOA Board of Trustees. Where applicable, the final portion of the examination shall be conducted only after the required years of practice have been completed.) (B-7/86)

2) (Where applicable, the members of the Board shall personally supervise the conduct of the oral examination, preferably with the Board meeting as a whole, and also personally supervise, if not perform, the grading of each written examination.) (B-7/86)

I. A full description of the method of conducting the examination is formulated in this Board's Regulations and Requirements, and provision for reexamination is made.

J. Applicants for examination for certification are required to file an application which shall set forth their qualifications for examination as stated in paragraphs A through G in Section 1 of this article. The procedure for filing applications is set forth in the Regulations and Requirements of this Board.

Section 2. - Subject to the recommendation of the Bureau and to the approval of the AOA Board of Trustees, the Board may require such further training and/or practice in each of the fields coming under its jurisdiction as, in its judgment, such field may require, provided that the additional requirement for each field is clearly set forth in the Regulations and Requirements of this Board. Additions to training and/or practice requirements shall go into effect one year subsequent to the announcement of such change.

ARTICLE VIII -CERTIFICATES

Section 1. - Issuance

A. Certificates are issued by the American Osteopathic Board of

_____ to applicants who have conformed to all requirements for certification described in Article VII of these Bylaws and who have received the approval of the Bureau.

B. Each certificate shall be signed by the chair and the secretary-treasurer of this Board. No certificate is valid until it has been signed by the Executive Director of the American Osteopathic Association.

C. The date carried by general certification shall correspond with the date on which verification of successful completion of all specialty board requirements by the respective specialty boards occurred. All general certifications issued after 2004 will be time-limited to 10 years or less. Life-time general certifications, which were issued prior to this date without a time limit, will remain in effect.

(B-02/00)

D. The date carried by CAQ certificates shall correspond with the date on which verification of successful completion of all specialty board requirements by the respective specialty boards occurred. All certification of added qualifications certificates will be time-limited to 10 years or less. (B-02/00)

Section 2. – Inactivation, Reinstatement And Reactivation. (B-2/02)

A. Immediately following official notification that a diplomate no longer meets any one of the following requirements for maintaining certification status with the American Osteopathic Association, his/her certificate will be inactivated according to procedures developed by the BOS and the AOA Department of Membership. The procedures will give the diplomate ample opportunity and notice to comply with any requirement deficiencies for maintaining AOA certification: (B-2/02)

- 1) The diplomate must be a member of the AOA or the Canadian Osteopathic Association.
- 2) The diplomate must pay the annual certification registration fee, unless classified as inactive.
- 3) The diplomate must maintain a minimum of 50 hours of category I or II CME in their specialty during the three-year CME cycle and sufficient hours to fulfill the AOA CME membership requirement. (B-2/86, B-07/03)

B. Reinstatement of a certificate which was inactivated when the diplomate was dropped from AOA membership for nonpayment of dues, or for nonpayment of the annual registration fee, will be automatic upon reinstatement of the diplomate's AOA membership and/or payment of the registration fee.

- C. Reactivation of a certificate of lifetime, non-dated certification, which has been voluntarily inactivated by request, shall require compliance with the requirements of paragraph a. above, as well as approval of the appropriate certifying board and the Bureau. Reactivation will also require payment of any back AOA membership dues, up to a maximum period of two (2) years. Reactivation will also require payment of any back AOA certification registration fees, up to a maximum period of two (2) years. (B-02/00, B-2/02)

Section 3 – Revocation of a certificate

The board shall have the power to recommend to the bureau the revocation of the certificate of any diplomate whose certificate was obtained by fraud or misrepresentation, who exploits the certificate, violates the AOA code of ethics or is otherwise disqualified. (B-2/02)

- A. Reinstatement of a certificate which was revoked for any other reason than that stated in section 2B above, shall require compliance with the requirements of section 2A above, as well as approval of this Board, and the Bureau. (B-2/02)

Section 4 - Recertification

Certificates of recertification are issued to candidates who successfully complete the recertification process and who are approved by the Bureau. This process must be available by January 1, 1995, and be approved by the Bureau and the AOA Board of Trustees. (B-7/92)

ARTICLE IX - AMENDMENTS

Subject to the review and recommendation of the Bureau and to the approval of the AOA Board of Trustees, these Bylaws may be amended by a two-thirds (2/3) vote of the total membership of this Board at any meeting provided each member has been notified at least thirty (30) days prior to the date of the meeting, of its being called and of the intention to amend.

APPENDIX C

MODEL REGULATIONS AND REQUIREMENTS FOR CERTIFYING BOARDS OF THE AMERICAN OSTEOPATHIC ASSOCIATION

ARTICLE I - PROCEDURES

To expedite and direct its activities, the American Osteopathic Board of _____ shall place into effect this set of Regulations and Requirements. This document is in addition to, but based on, the AOA "Rules of Procedure for Certifying Boards" and the Constitution and Bylaws of this Board.

ARTICLE II - MEETINGS

Section 1. - Annual Meeting

The American Osteopathic Board of _____ shall hold a regular annual meeting to transact business (and to conduct examinations).

Section 2. - Special Meetings

Special meetings of this Board which are deemed necessary for the transaction of business, may be called by the chair of the Board or by a majority vote of the total membership of this Board. Notice of the meeting shall be mailed to each member by the secretary-treasurer not less than thirty (30) days prior to the proposed meeting date.

Section 3. - Quorum

For the transaction of business at any meeting of the Board, (#) members shall constitute a quorum.

Section 4. - Governing Rules

Meetings of the Board shall be governed by Robert's Rules of Order, Newly Revised unless otherwise specified.

Section 5. - Orders of Business

(for example)

- A. Call to Order
- B. Roll Call

- C. Report of Secretary-Treasurer
- D. Communications
- E. Report of Credentials Committee
- F. Report of Examination Committee
- G. Reports of Special Committees
- H. Old Business
- I. New business
- J. Adjournment

ARTICLE III - FUNDS

(Deposit, signature on checks, annual audit, bond of secretary-treasurer, etc.)

ARTICLE IV - COMMITTEES

(Detailed description of committees including membership and duties)

ARTICLE V - MEMBERSHIP

Section 1. - Election of Members

(Describe procedure, qualifications, etc.; see section in Bylaws)

Section 2. - Term of Membership

(Length and provision for death or resignation, see section in Bylaws)

Section 3. - Officers

(List, giving term of office; see section in Bylaws)

Section 4. - Bureau Representatives

(Recommendation; see section in Bylaws)

ARTICLE VI - BOARD ELIGIBILITY

Section 1. – Definition

Board eligibility is defined as that status granted candidates who:

- A. Have documented the satisfactory completion of an AOA-approved residency or preceptorship program or, if applicable,

- B. Have documented the satisfactory completion of an AOA-approved internship and the completion of the practice requirement.
- C. Are and remain members, in good standing, of the American Osteopathic Association or the Canadian Osteopathic Association.
- D. Have met all the requirements as established by this Board.
- E. Have applied to and have been accepted as a registrant by this Board.

Section 2. - Registration

To be registered as "board eligible", a candidate must apply for such status upon completion of residency training. All residents and preceptees in AOA approved programs shall be notified by the AOA that, upon completion of their AOA-approved training, it shall be necessary to formally apply to the secretary of the appropriate specialty board for board eligible status. Such notification shall be included with the AOA annual report form sent to residents and preceptees.

Board eligible status is not granted automatically. A candidate shall not be designated as "board eligible" if he/she applies later than six (6) years following completion of residency training or completion of the practice requirement, if applicable.

- A. A candidate who wishes to register for board eligible status shall request a standard AOA application form from the secretary of this Board.
- B. The candidate shall complete the application and return all copies to the secretary of this Board along with the following documentation:
 - 1) A copy of the institutional certificate indicating the satisfactory completion of the residency training program, and
 - 2) A letter(s) of recommendation from the program director(s) or, if applicable,
 - 3) A copy of the hospital certificate and AOA approval letter indicating satisfactory completion of an internship and adequate documentation, as determined by this Board, of having met the practice requirement.
- C. The secretary of this Board shall verify AOA approval of the applicant's training as being complete prior to registration of the applicant. Verification shall include:
 - 1) Osteopathic residents: A statement from the evaluating committee of the (appropriate practice affiliate) that the training has been approved as being complete.

- 2) ACGME residents: A copy of the AOA Board of Trustees or Council on Postdoctoral Training letter granting approval of the training as being complete.
- D. After review and acceptance of the board eligible application, the Board shall establish the date of registration as the date of completion of residency training or the date of completion of the practice requirement, if applicable.
- E. The secretary of the Board shall complete the bottom portion of the registration application and return the "Applicant Copy" to the candidate along with a statement that board eligible status is limited to a maximum of six (6) consecutive years.

Section 3. - Termination of Board Eligible Status

- A. Board eligible status shall terminate on December 31, of the sixth year following the year eligibility was established. (This policy becomes effective the date of action of the AOA Board of Trustees). (B-7/89)
- B. In view of a candidate's right to appeal the results of an examination, board eligibility shall not be terminated due to failure of examinations.
- C. If a candidate does not initiate examination within the period of board eligibility, then board eligibility status will be automatically lost and so recorded by the AOA and this Board.
- D. The Secretary of the board will notify the candidate in writing by registered, return receipt mail, a minimum of one year prior to termination of board eligible status. (B-7/02) The notice shall include a statement that the candidate has the right to appeal to the Bureau or may reenter the examination process, if eligible (See Article X of this document).

In the event of extenuating circumstances, this Board may approve the extension of a candidate's board eligibility termination date (two (2) year shall be the maximum extension). The secretary of the Bureau shall be notified, in writing, of any such extension.

ARTICLE VII - REQUIREMENTS FOR CERTIFICATION

Section 1. - The minimum requirements to be eligible to receive certification from the AOA through the American Osteopathic Board of _____ are as follows. The applicant must:

(Insert appropriate section from the Board's Bylaws and add any additional requirements which might include years of specialty practice, case records, scientific paper(s), published article(s) and any modification of requirements. Subspecialty certification requirements, if applicable, must be detailed.)

ARTICLE VIII - EXAMINATION FEES

(This article should include amount, when payable, reexamination fees, elapsed time, board eligibility registration fee, if applicable, etc.)

ARTICLE IX - RULES FOR THE CONDUCT OF EXAMINATIONS

(Detail the procedures for all portions of the examination: when, where, how and by whom, subjects to be covered, passing grades, average, if applicable; reexamination conditions, further study requirements; notification to the applicant and length of time (as determined by the board) that must elapse before an item writer/reviewer can sit for examination. Include a section on appeal mechanism: see below.) (B-7/99)

- A. If a candidate feels that the actions of this Board, with regard to any part of the examination, constitute unequal application of the regulations and requirements or standards, unwarranted discrimination, prejudice, unfairness or improper conduct of the examination, he/she has the right to appeal to the Board.
- B. If the candidate is not satisfied with the result of an appeal before this Board, he/she has the right to further appeal to the Bureau of Osteopathic Specialists and the AOA Board of Trustees.

ARTICLE X - REENTRY INTO THE CERTIFICATION PROCESS

- A. A candidate whose board eligibility status has been terminated cannot re-register for this status, but may be eligible to petition this Board for reentry into the certification process.
- B. Upon approval of such petition, this Board shall provide the candidate with a written list of deficiencies, if applicable, and cooperate with the evaluating committee of the (corresponding practice affiliate) in developing a training program designed to meet the individual's needs.
 - 1) Such programs shall be reviewed and approved by the evaluating committee of the (practice affiliate).
 - 2) The (practice affiliate) shall provide verification to the board that the program was conducted and satisfactorily completed.
 - 3) Upon receipt of verification from the (practice affiliate), this Board shall permit the candidate to continue the certification process.

ARTICLE XI – CERTIFICATES

(Insert appropriate section from the Board's Bylaws; issuance, revocation, reinstatement, recertification)

ARTICLE XII – AMENDMENTS

Subject to the review and recommendation of the Bureau and to the approval of the AOA Board of Trustees, these Regulations and Requirements may be amended by a two-thirds (2/3) vote of the total membership of this Board at any meeting.

APPENDIX D: MODEL FORMS
Notification Sent to Candidates
By Certifying Boards
When They Have Successfully Completed Examination

Dear Doctor (insert name here):

We are pleased to inform you that you have successfully completed and passed the examination for certification in (insert designation of specialty, subspecialty and/or added qualifications).

Your credentials will be (or, have been) transmitted to the Bureau of Osteopathic Specialists of the American Osteopathic Association with the recommendation for its approval of your certification at its next meeting.

After approval of your certification is received from the Bureau of Osteopathic Specialists, your certificate will be printed and registered here and in the AOA Central Office. You should then receive your certificate within approximately sixty (60) days.

Sincerely yours,

Secretary
Certifying Board

APPENDIX E: MODEL APPEAL PETITION / Guidelines for conduct of an Appeal

To: American Osteopathic Association
Bureau of Osteopathic Specialists
C/O Department of Education
142 E. Ontario
Chicago, Illinois 60611

I have been advised that an appeal hearing in the matter of my application for certification has been scheduled for _____ (a.m./pm.), 199_, at (state address here)

- I. I hereby acknowledge that this Appeal Petition form sets forth the following rules with regard to the conduct of the hearing:
1. An appeal hearing is granted to determine the facts, which, if the appellant's allegations are found to be true, would constitute unequal application of regulations and requirements or standards, unwarranted discrimination, prejudice, unfairness, or improper conduct of all or any part of the examination in question.
 2. Both appellant and a representative of the certifying board must be present.
 3. Appellant has the right to be accompanied by counsel; if appellant contemplates, at this time, that counsel shall be present, counsel's name and address is:

otherwise, the Bureau must be notified no later than thirty (30) days prior to the date of the hearing that counsel will attend and counsel's name and address.
 4. All documentary material necessary for adjudication of the appeal must be forwarded to the chair of the Appeal Committee not later than sixty (60) days prior to the hearing.
 5. The hearing will be conducted by first allowing the appellant or the appellant's representative a reasonable period of time (twenty (20) minutes unless there are compelling reasons for a longer period) to make appellant's presentation and the certifying board representative shall have a like period of time. Each party shall then be allowed a brief period for rebuttal. The Appeal Committee may examine documentary material and shall have the opportunity to address questions to the parties and their respective representatives.
 6. Guidelines for the Conduct of an Appeal are attached hereto.

7. It is entirely within the discretion of the Appeal Committee whether to call for and review patient charts in response to fact allegations contained herein. Such review would take place in executive session.
8. The calling of witnesses other than the appellant and the representative of the certifying board is solely within the discretion of the Appeal Committee. It is also within the discretion of the Appeal Committee as to whether the parties may examine witnesses or if such examination will be conducted by the Appeal Committee alone.
9. If the appellant is contemplating calling a witness(es), the names(s) must be submitted to the secretary of the Bureau along with a general statement as to the anticipated testimony, no later than thirty (30) days prior to the date of the hearing.

II. My petition is based on the following facts:

Date

Appellant

**AMERICAN OSTEOPATHIC ASSOCIATION
BUREAU OF OSTEOPATHIC SPECIALISTS**

Appeal Committee

GUIDELINES FOR THE CONDUCT OF AN APPEAL

The Appeal Committee of the Bureau of Osteopathic Specialists is composed of three (3) members. An appeal hearing is granted to determine the facts, which, if the appellant's allegations are found to be true, would constitute 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 any certifying board or action by the Executive Committee of the Bureau.

Each member of the Appeal Committee must be a representative from a different certifying board. If a member of the Committee is a representative from the same certifying board that the appellant is challenging, that member shall be excused and the alternate member will be called.

The appellant and certifying board involved (or Executive Committee) shall be advised that all documentary material necessary for proper adjudication of the case shall be submitted to the chair of the Appeal Committee not later than sixty (60) days prior to the date scheduled for the hearing. The chair of the Appeal Committee shall then refer the materials to the secretary of the Bureau for distribution to all of the members of the Appeal Committee, the appellant and the certifying board involved in the appeal.

Both the appellant and a representative from the certifying board must be present at the hearing. The appellant has the right to be accompanied by counsel. If the appellant will be accompanied by counsel, the secretary of the Bureau must be notified no later than thirty (30) days prior to the scheduled hearing. If the appellant is accompanied by counsel, the AOA counsel will also be present.

Hearings before the Appeal Committee are conducted in accordance with established procedure. Both the appellant and the representative from the certifying board are given twenty (20) minutes in which to present their case. Following these presentations, time is allotted for rebuttal by both the appellant and the certifying board representative. Further time is then allotted for each Appeal Committee member to ask questions of the appellant and the certifying board representative.

The Appeal Committee will then discuss the situation in executive session. As soon as the Appeal Committee reaches a decision, it will be reported to the Executive Committee of the Bureau at its next meeting for ratification. This decision will also be reported to the appellant and the certifying board at approximately the same time. The Bureau will then report the decision to the AOA Board of Trustees.

Stenotyped minutes will be made of all hearings and will be available from the secretary of the Bureau at cost to both the appellant and/or the certifying board.

Both the appellant and the certifying board have the right to further appeal the decision of the Appeal Committee to the AOA Board of Trustees.

APPENDIX F: MODEL RESOLUTIONS
Establishment of a New Specialty Board
Assignment/Transfer of Specialty Jurisdiction

For the Establishment of a New Specialty Board

RESOLVED, that the petition of the (practice affiliate) for the establishment of an American Osteopathic Board of _____ with jurisdiction over the examination for certification in (specialty/subspecialty and/or added qualifications) be approved.

RESOLVED, that the proposed Constitution, Bylaws and Regulations and Requirements for the proposed American Osteopathic Board of _____, submitted by the (practice affiliate) be approved.

For Requesting Assignment of Jurisdiction by an Existing Specialty Board

RESOLVED, that the request of the American Osteopathic Board of _____ for jurisdiction over the examination for certification in (specialty/subspecialty/ and/or added qualifications) be approved.

For Requesting the Transfer of Jurisdiction Over a Recognized Specialty/Subspecialty

RESOLVED, that the request of the American Osteopathic Board of _____ for the transfer of jurisdiction over the examination for certification in (specialty/subspecialty/ and/or added qualifications), currently under the jurisdiction of the American Osteopathic Board of _____, be approved.

APPENDIX G: MINIMUM STANDARDS

Format for Specialty Board Certificates

In 1989 the Bureau (then the Advisory Board for Osteopathic Specialists) established the following minimum standards for the format of specialty board certificates of certification:

1. Indication of certification by the American Osteopathic Association
2. Date of approval by the AOA
3. Seal of the specialty board
4. Signatures of specialty board chair and secretary
5. Signature of AOA executive director
6. Aesthetically acceptable
7. Wording to indicate that the physician has pursued an accepted course of study and has satisfactorily completed the required examinations.
8. Certificates should be consecutively numbered
9. No abbreviations
10. Correct gender identification
11. Criteria should be developed for the issuance of duplicate certificates
12. The AOA shall maintain a file of the current original certificate of each specialty board
13. Time dated certificates must indicate the start and end date for which the certificate is issued. [B-7/96]

APPENDIX H: AOA SPECIALTY CERTIFICATION TERMINOLOGY

Certificates of certification in the following categories may be issued by certifying boards approved by the Board of Trustees of the AOA:

1. **General Certification:** The primary certification conferred on diplomates who meet the requirements in a specified field of medical practice under the jurisdiction of a certifying Board. General certification represents a distinct and well defined field of osteopathic medical practice. Certificates read, "Certified in (general field)."
2. **Certification of Special Qualifications:** Subspecialty certification conferred by a certifying Board in a specific subspecialty area of the field to which that Board certifies. It requires prior attainment of general certification. Certificates read, "Certified in (subspecialty field)."

Certification of Special Qualifications indicates the possession of knowledge, skill, training and successful examination in a subspecialty field over and above that required for general certification. Certification of special qualifications designates additional abilities in **limited areas** of the general specialty field represented by that Board. For example, Cardiology is a limited area within the field of Internal Medicine for which physicians may earn special qualifications.

3. **Certification of Added Qualifications:** Constitutes a modification of a general certificate or certificate of special qualifications to reflect additional training of at least one year in length 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 specialty. For example, a physician can hold general certification in Family Practice, with added qualifications in Geriatric Medicine.

When the identifiable body of knowledge for certification of added qualifications overlaps more than one specialty or subspecialty area, a conjoint examination program may be developed by the corresponding certifying Boards. Certification of added qualifications requires maintenance of valid general or special qualifications certification from which the added qualification was modified.

4. **Recertification in areas of added qualification** requires maintenance of valid general or special qualifications certification from which the added qualification was modified. (B-2/94)

APPENDIX I: APPLICANT STATEMENT

I hereby make application to the American Osteopathic Board of _____ for examination leading to certification in _____. This action is made in accordance with and subject to the constitution, bylaws, regulations and requirements of AOB _____ and the American Osteopathic Association (AOA). I understand that the certifying examination is a proprietary document of the AOB _____ and the AOA and that I do not and will not have the right to review the examination or any examination questions at any time prior to or following the administration of the examination.

I agree to disqualification from examination or from issuance of certification or to the surrender of such certification as directed by the AOB _____ and/or the AOA in the event that any of the statements made by me in this application are false or in the event that any of the bylaws, rules, regulations and requirements governing such examinations are violated by me or in the event that i did not comply with any of the provisions of the constitution, bylaws, regulations and requirements of the AOB _____ and/or the AOA.

I agree that my professional qualifications, including my moral and ethical standing in the osteopathic medical profession and my competence in clinical skills, will be evaluated by the board and that the board may make inquiry of the persons named in my application and of other persons, such as authorities of licensing bodies, hospitals, program directors or other institutions as the board may deem appropriate with respect to such matters; and

I agree that the sources and all information furnished to the board in connection with its inquiry shall be confidential and not subject to disclosure, through legal process or otherwise, to me or to any person acting on my behalf. I agree that the board and the American Osteopathic Association shall be the sole judges of my credentials and qualifications for admission to the examination and for certification.

I hereby release, discharge, exonerate and agree to hold harmless the American Osteopathic Association, the American Osteopathic Board of _____, their members, examiners, trustees, officers, representatives and agents and free from any action, suit, obligation, damage, expense, claim, demand or complaint by reason of any action they or any one of them may take in connection with this application, such certifying examinations, the grade or grades given with respect to any certifying examination and/or the failure of the AOB _____ to recommend issuance to me of such certification, or the revocation of any certification issued pursuant to this application. It is understood that the decision as to whether my performance on any certification examination qualifies me for certification rests solely and exclusively with the AOB _____ and the AOA, and that their decision is final.

In the event that any dispute shall arise concerning the certifying examination's content and/or administration, or any other issue relating to the certification process, I understand that the AOA

has an administrative appeal process available and I agree to first pursue all available administrative appeals and internal reviews before pursuing any other forms of relief.

I further agree that Illinois law shall apply to the resolution of any dispute that i may have with the AOB _____ or the AOA.

I have this day carefully read and agreed to full compliance with the foregoing.

I have hereunto set my hands this _____ day of _____, 19 ____.

Signature

Print

Appendix C

AMERICAN OSTEOPATHIC BOARD OF NUCLEAR MEDICINE

CONSTITUTION AND BYLAWS

REGULATIONS AND REQUIREMENTS

American Osteopathic Association

CONTENTS

Foreword.....	i
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CONSTITUTION AND BYLAWS

REGULATIONS AND REQUIREMENTS

CONSTITUTION

I	Name.....	1
II	Purposes.....	1
III	Definition.....	1
IV	Organization.....	2
V	Amendments.....	3

BYLAWS

I	Duties.....	4
II	Members.....	5
III	Officers.....	7
IV	Committees.....	8
V	Bureau for Osteopathic Specialists Representatives.....	9
VI	Meetings.....	10
VII	Requirements for Certification.....	10
VIII	Board Eligibility.....	12
IX	Certificates.....	14
X	Amendments.....	15

REGULATIONS AND REQUIREMENTS

I	Meetings.....	16
II	Disposition of Funds.....	17
III	Committees.....	17

CONTENTS (cont'd)

REGULATIONS AND REQUIREMENTS (cont'd)

IV	Bureau for Osteopathic Specialists Representatives.....	18
V	Election of Members.....	18
VI	Officers.....	18
VII	Requirements for Certification.....	19
VIII	Fees.....	20
IX	Rules for the Conduct of Examinations.....	20
X	Issuance of Certificates.....	23
XI	Revocation of Certificate.....	24
XII	Amendments.....	24

FOREWORD

The American Osteopathic Board of Nuclear Medicine was established in 1974 upon approval by the Board of Trustees of the American Osteopathic Association of the Constitution, Bylaws and Regulations and Requirements.

This booklet contains the revised Constitution, Bylaws and Regulations and Requirements of the Board of Nuclear Medicine as approved by the Board of Trustees of the American Osteopathic Association in July, 1983.

CONSTITUTION

ARTICLE I - NAME

The name of this organization is the American Osteopathic Board of Nuclear Medicine, (hereinafter also referred to as the Board).

ARTICLE II - PURPOSES

The purposes of this Board are to:

1. Define the qualifications required of osteopathic physicians seeking certification in the field of nuclear medicine and of any other specialty or field of practice that may be assigned to this Board;
2. Evaluate the qualifications of those osteopathic physicians who may apply for certification in various disciplines of diagnostic and therapeutic nuclear medicine and of any other specialty or field of practice that may be assigned to it;
3. Conduct examinations in conformity with the Bylaws of this Board;
4. Recommend the issuing of certificates in the various disciplines of diagnostic and therapeutic nuclear medicine through the Bureau for Osteopathic Specialists (hereinafter referred to as the Bureau) and to the approval of the Board of Trustees of the American Osteopathic Association, to those osteopathic physicians who are found qualified;
5. Recommend revocation of certificates for cause after due and legal process;
6. Use every means possible to maintain a high standard of practice within the osteopathic profession.

ARTICLE III - DEFINITION

For the purpose of the operation of the Board the following division of practice is defined: The practice of nuclear medicine shall consist of and include those fields of diagnostic and therapeutic medicine which utilize radionuclides, excluding therapy with sealed sources. To provide a comprehensive evaluation the candidate may be examined in any one or all of the following categories:

CONSTITUTION: Article III (cont'd)

1. Diagnostic and therapeutic nuclear medicine comprising the entire scope of practice.
2. Diagnostic invivo and invitro analysis of body fluids.
3. Nuclear cardiology.
4. Nuclear imaging.

ARTICLE IV - ORGANIZATION

Section 1. - Membership

The American Osteopathic Board of Nuclear Medicine shall consist of six (6) members elected by the Board of Trustees of the American Osteopathic Association as provided for in the Bylaws of this Board.

Section 2. - Officers

- A. The officers of the Board shall be a chairman, vice chairman and secretary-treasurer whose powers and duties are as described in the Bylaws of this Board.
- B. These officers shall be elected by this Board for a term of one (1) year at its annual meeting.
- C. Officers shall continue to hold office until their successors are elected.

Section 3. - Committees

- A. There shall be two (2) standing committees of this Board and such other committees as may from time to time be authorized. The chairman shall appoint all committees unless otherwise provided.
- B. The standing committees shall be:
 1. Credentials Committee
 2. Examination Committee

Section 4. - Bureau for Osteopathic Specialists Representatives

- A. There shall be a representative to the Bureau appointed by and from the membership of this Board.

CONSTITUTION: Article IV; Section 4. (cont'd)

- B. There shall be an alternate appointed by and from the membership of this Board empowered to act for the duly appointed representative in his/her absence.

Section 5. - Meetings

The Board shall hold an annual meeting and such other meetings as provided for by the Bylaws of the Board.

Section 6. - Authority

The actions of the Board are subject to the recommendations of the Bureau and the approval of the Board of Trustees of the American Osteopathic Association.

ARTICLE V - AMENDMENTS

Subject to the review and recommendation of the Bureau and the approval of the Board of Trustees of the American Osteopathic Association, this Constitution may be amended by a vote of two-thirds (2/3) of the total membership of this Board at any meeting, provided each member has been notified at least fifteen (15) days prior to the date of the meeting of the intention to amend.

BYLAWS

ARTICLE I - DUTIES

Section 1. - This Board shall serve as an advisory body for all applicants for certification in the specialty of nuclear medicine and of any other specialty or field of practice which may be assigned to its jurisdiction.

Section 2. - This Board shall determine, in accordance with the provisions of these Bylaws, the appropriate standards of education, training and practice required for certification in the specialty of nuclear medicine and of any other specialty or field of practice which may be assigned to its jurisdiction, subject to the recommendation of the Bureau and the approval of the Board of Trustees of the American Osteopathic Association.

Section 3. - This Board shall establish detailed rules for conducting all examinations, in accordance with the provisions of these Bylaws and shall provide for the conduct of examinations at least once a year, in accordance with its Regulations and Requirements.

Section 4. - This Board shall file with the Bureau, at the time specified by the Bureau, its recommendations concerning each applicant for certification, together with any pertinent information required by the Bureau.

Section 5. - This Board shall provide and recommend the issuing of certificates in all fields assigned to this Board in accordance with the provisions of these Bylaws.

Section 6. - This Board shall recommend to the Bureau and to the AOA Board of Trustees, the revocation of certificates in accordance with the provisions of these Bylaws.

Section 7. - This Board shall provide permanent files for all records. It shall record and keep permanently on file all applications submitted to it and complete records of examination results and shall maintain a registry of diplomates. All examination papers shall be kept on file for a period of five (5) years, after completion of the applicant's examination.

Section 8. - This Board shall determine and collect application and examination fees in accordance with its Regulations and Requirements.

BYLAWS: Article I (cont'd)

Section 9. - This Board shall arrange for all meetings necessary for this Board to carry out its functions as provided for in these Bylaws.

Section 10. - This Board shall appoint two (2) members from the Board, one of which shall function as a representative and the other as an alternate to the Bureau. One of the two members may be the secretary-treasurer. In case of the inability of the regular representative or alternate to attend the sessions of the Bureau, the chairman of this Board shall appoint alternates as provided in the AOA "Rules of Organization and Procedure of the Bureau for Osteopathic Specialists".

Section 11. - This Board shall conduct its activities in relation to the officers of the American Osteopathic Association, the Bureau and other certifying boards and applicants for certification as provided in the "Rules of Procedure for Certifying Boards" compiled by the Bureau and approved by the AOA Board of Trustees.

Section 12. - This Board shall make, in conformity to its Constitution and Bylaws, all necessary regulations and requirements to govern its activities which are not provided by the Bureau and the AOA Board of Trustees.

Section 13. - This Board shall report all actions, recommendations and activities through the Bureau to the AOA Board of Trustees for approval.

ARTICLE II - MEMBERS

Section 1. - This Board shall consist of six (6) members elected by the AOA Board of Trustees from nominees recommended by this Board to the appropriate College Board and then to the Bureau and the AOA Board of Trustees.

Section 2. - Each member shall be a physician in good standing, certified by this Board. Insofar as practical, membership shall include a representative from each area within a given specialty or field of practice and a representative from each of the time divisions of the United States.

BYLAWS: Article II (cont'd)

Section 3. - Election

- A. The governing body of this Board through the appropriate College Board shall nominate one (1) candidate for each expiring term. These candidates shall be nominated so as to maintain the balance of one (1) certified internist, one (1) certified pathologist and one (1) certified radiologist. There will be three (3) members at large with no discipline having more than three members serving on the Board at any one given time. Each nominee to the board must also be certified in nuclear medicine by the American Osteopathic Association. The nominees shall be submitted through this Board to the Bureau and to the AOA Board of Trustees.
- B. Should a nominee submitted by this Board through the appropriate College Board fail to be approved by the Bureau or the AOA Board of Trustees, this Board through the appropriate College Board shall submit the name(s) of a different qualified individual(s). Said new nominee shall be submitted at the next meeting of the Bureau, which follows the date when the College was officially notified of the action by the Bureau or the AOA Board of Trustees.
- C. In the event a new nominee(s) has not been submitted by the time and in the manner set forth above, the chairman of the Bureau shall recommend to the AOA Board of Trustees a qualified nominee(s) to fill the vacancy on this Board. The nominee(s) term shall be for the balance of the unexpired term.

Section 4. - Term of Office

- A. The term of office as a member of the Board is for three (3) years.
- B. Incumbent members of the Board shall serve until their successors are elected and seated.
- C. Whenever a vacancy occurs on the Board due to the death or resignation of a member whose term has not expired, nominations shall be recommended by this Board through the appropriate College Board. If it is deemed urgent that the approval of the nominee is considered prior to the next regularly scheduled meeting of the AOA Board of Trustees, the AOA executive director shall refer the matter to the Executive Committee of the AOA for its immediate action.

BYLAWS (cont'd)

ARTICLE III - OFFICERS

The officers of the American Osteopathic Board of Nuclear Medicine shall be chairman, vice chairman and secretary-treasurer. The officers shall be elected by this Board during its annual meeting and shall serve for a term of one (1) year or until such time as their successors are elected.

Section 1. - The duties of the chairman are to:

- A. Preside at all meetings;
- B. Appoint all committees;
- C. Schedule meetings of this Board at such times and places as necessary to carry out the business of this Board;
- D. Supervise all examinations;
- E. Act as an ex-officio member of all committees;
- F. Sign all certificates issued by this Board.

Section 2. - The duties of the vice chairman are to:

- A. Assume the duties of the chairman when the latter is absent or otherwise unable to fulfill them.
- B. Assist the chairman in the discharge of the duties of that office.

Section 3. - The duties of the secretary-treasurer are to:

- A. Keep a permanent file of records of all proceedings, transactions and rulings of this Board, and to keep on file all applications, examination papers and case records for a period of five (5) years.
- B. Have printed and distributed all certificates, application forms, circulars of information, etc. authorized by this Board and necessary for the proper functioning of this Board.
- C. Maintain in proper place and form the monies of this Board and to issue an accounting of all funds at annual meetings or at such times as requested by the chairman of the Board.

BYLAWS: Article III; Section 3. (cont'd)

- D. Maintain a record of all diplomates in good standing and to supply upon request to governmental agencies, hospitals, physicians, schools and other entitled to such information, a list of diplomates in good standing.
- E. Have prepared in appropriate and complete form for presentation to the Review Committee of the Bureau in support of the recommendation for certification of each candidate: the application, the examination records (written, oral and clinical) and other pertinent information requested.
- F. Serve as the representative of this Board to the Bureau, if so designated.
- G. Sign all certificates issued by this Board as provided in Article IX of these Bylaws.
- H. Prepare an annual report in keeping with AOA "Rules of Procedure for Certifying Boards", of the work done by this Board including a list of all applicants and results of their examinations and a resume of this Board's finances. This report is to be presented at the annual meeting of the Bureau and copies are to be supplied to the chairman and secretary of the Bureau and to the executive director of the American Osteopathic Association.
- I. Cooperate with the executive director of the AOA in all matters pertaining to the annual registration of diplomates.
- J. Notify the executive director of the AOA and the chairman and secretary of the Bureau of members and officers elected to this Board and of appointments to the Bureau.

ARTICLE IV - COMMITTEES

Committees shall be appointed by the chairman, the duties of which shall be as herein prescribed.

Section 1. - Credentials Committee

The Credentials Committee shall consist of three (3) members. Insofar as practical, the members shall represent different geographical districts. The Committee shall:

- A. Review all completed applications as submitted by the secretary- treasurer.

BYLAWS: Article IV; Section 1. (cont'd)

- B. Conduct a comprehensive investigation of each applicant in accordance with the rules governing applications.
- C. Prepare a complete report, with recommendations for each applicant, for presentation to the Board at

its next annual meeting.

Section 2. - Examination Committee

The Examination Committee shall consist of the chairman of the Board and not less than two (2) members of the Board. The chairman of the Board may be the chairman of the Examination Committee. The Committee shall:

- A. Plan and prepare for the conduct of examinations in the fields of practice under the jurisdiction of this Board in accordance with the rules stated in these Bylaws and the Regulations and Requirements of this Board.
- B. Report the results of the examinations to this Board.

ARTICLE V - BUREAU FOR OSTEOPATHIC SPECIALISTS REPRESENTATIVES

Section 1. - The Bureau representative shall be appointed annually from and by the membership of the Board to represent the Board on the Bureau and in all matters where such representation is required.

Section 2. - The alternate representative to the Bureau shall be appointed annually from and by the membership of the Board. The alternate shall be empowered to act for the duly appointed representative in his/her absence.

Section 3. - The Bureau representative shall:

- A. Transmit from the Board all information certifying to the adequacy of the examination.
- B. Have available, files and records of all candidates being recommended for certification and such other files as may be requested in advance.
- C. Report to the Bureau on the adequacy of the examinations and the recommendations of the Board on applicants who have completed the examinations.
- D. Report to the Board regarding actions and proceedings of the Bureau.

BYLAWS (cont'd)

ARTICLE VI - MEETINGS

Section 1. - The annual meeting of the American Osteopathic Board of Nuclear Medicine shall be held at such time and place as is determined by the majority action of the Board. However, this meeting, which has for one of its purposes examination of candidates for certification shall be in proper time sequence with meetings of the Bureau and AOA Board of Trustees to insure proper continuity of applicant evaluation and disposition. Proper and due notice of the annual meeting shall be forwarded to each member of the Board not later than sixty (60) days prior to the meeting.

Section 2. - Special meetings of the Board which are deemed necessary for transaction of business may be called by the chairman or by written request of no less than three (3) members of the Board, notice of which meeting shall be received not less than fifteen (15) days prior to the date of the meeting. The time and place of the special meeting shall be at the discretion of the chairman.

Section 3. - Quorum

For the transaction of business at any meeting of the Board, four (4) members shall constitute a quorum.

Section 4. - Governing Rules

The meetings of the Board shall be governed by Robert's Rules of Order, Newly Revised unless otherwise specified in these Bylaws.

ARTICLE VII - REQUIREMENTS FOR CERTIFICATION

Section 1. - To be eligible to receive certification from the American Osteopathic Board of Nuclear Medicine, the applicant must meet the following minimum requirements. The applicant must:

- A. Be a graduate of an AOA accredited college of osteopathic medicine
- B. Be licensed to practice in the state or territory where his/her practice is conducted.
- C. Be able to show evidence of conformity to the standards set in the Code of Ethics of the American Osteopathic Association.

BYLAWS: Article VII; Section 1. (cont'd)

- D. Be a member in good standing of the American Osteopathic Association or the Canadian Osteopathic Association for two (2) years immediately prior to the date of certification, and is encouraged to maintain membership in the divisional society of the AOA of the state or province in which he/she practices.
- E. Have satisfactorily completed an internship of at least one (1) year in a hospital approved for intern training by the American Osteopathic Association.
- F. Have completed one of the following combinations of training and experience.
 - 1. For full certification in nuclear medicine.
 - a) Certification by the American Osteopathic Association in internal medicine, pathology or radiology and one (1) year of AOA approved residency training in nuclear medicine.
 - b) Two (2) years of AOA approved residency training in nuclear medicine following an AOA approved internship.
 - 2. Special Training Requirements
 - a) To receive a certificate of added qualifications in nuclear cardiology a period of not less than 500 hours of clinical training and 200 hours of didactic training are required. In addition the individual must have AOA certification in at least one of the following: internal medicine, pathology, radiology or a subspecialty certificate in cardiology.
 - b) To receive a certificate of added qualifications in nuclear imaging and therapy a period of not less than 1,000 hours of clinical training and 200 hours of didactic training are required. Certification in internal medicine, pathology or radiology are required.
 - c) To receive a certificate of added qualifications in invivo and invitro nuclear medicine a period of not less than 500 hours of clinical training and 200 hours of didactic training are required. The individual must be certified in internal medicine, pathology or radiology.
 - 3. Training shall include basic radiation biology, radiation physics, instrumentation, radiation protection, mathematics pertaining to the use and measurement of radioactivity, radiopharmaceutical chemistry and principles of radiation safety.

BYLAW: Article VII; Section 1.F.3 (cont'd)

Each candidate for board certification in nuclear medicine must comply with the requirements of the Nuclear Regulatory Commission regulations, Title 10-CFR part 35 Medical Use of By-product Material effective date 4-1-87 and any future revisions as they relate to the subsections 35.920 Training for Imaging and Localization Studies, section 35.21 Radiation Safety Officer and section 35.22 Radiation Safety Committee. In addition the candidate should have had experience with or knowledge of quality assurance programs as they pertain to the human uses of by-product material.

Section 2. - Following satisfactory compliance with the prescribed requirements, stated in Section 1. above, the applicant shall be required to pass appropriate examinations planned to evaluate an understanding of the scientific bases of the problems involved in the specialty, familiarity with the current advances in the specialty, the possession of sound judgment and a high degree of skill in the diagnostic and therapeutic procedures involved in the practice of the specialty.

- A. Oral, written and clinical examinations shall be conducted and required in the case of each applicant. The members of this Board shall personally review, if not perform, the grading of each written examination.
- B. Applicants desiring examination for certification shall be required to file an application which shall set forth the applicant's qualifications as stated in Section 1. The procedure for filing applications shall be set forth in the Regulations and Requirements.

Section 3. - Subject to the recommendations of the Bureau and the approval of the AOA Board of Trustees, the Board may require such further training in each of the fields coming under the jurisdiction as in its judgment such field may require, provided that the additional requirements for each field are clearly set forth in the Regulations and Requirements of this Board. Additions to requirements shall go into effect one (1) year subsequent to the announcement of such change.

ARTICLE VIII - BOARD ELIGIBILITY

Section 1. - Definition

Board eligibility is defined as the status granted candidates who:

- A. Have documented the satisfactory completion of and AOA approved residency or preceptorship.

BYLAWS: Article VIII; Section 1. (cont'd)

- B. Have met all the requirements as established by this Board.
- C. Have applied to and been accepted as a registrant by this Board.
- D. Are and remain members in good standing of the American Osteopathic Association or the Canadian Osteopathic Association.

Section 2. - Registration

- A. After a trainee enters the last three months of the AOA approved residency training program, he/she may submit an application for Board eligibility status to the secretary of this Board. Upon satisfactory completion of the residency program, the Board will establish the date of registration of board eligibility status for the candidate.
- B. Registration shall be on a standard multiple-part form (which may be obtained from the secretary of the Board) and shall include:
 - 1. A letter indicating the anticipated satisfactory completion of the program (notarized or certified) or a photostatic copy of the certificate issued (if program is completed), and
 - 2. A letter(s) of recommendation from his/her program director(s).
- C. All copies of the registration form, along with the required documentation, shall be returned by the candidate to the secretary of the Board.
- D. A candidate who has applied for board eligibility and who meets all AOA and certifying board requirements shall be considered and listed as board eligible. Such eligibility shall be maintained throughout the certifying process and shall terminate six (6) years from the time the candidate is eligible to take the final portion of the initial certifying examination. The date of recognition as board eligible shall be established by the Board.
- E. The Board shall maintain a verified and permanent list of candidates determined to be board eligible.
- F. The Board shall, on an annual basis, provide the Bureau with a verified list of candidates who are determined to be board eligible.

BYLAWS: Article VIII; Section 2. (cont'd)

- G. The Board shall, upon determination that the candidate is board eligible, notify the candidate in writing. The notice shall include a statement that the status is limited to a maximum of six (6) consecutive years after the candidate has met all requirements to take the final portion of the initial certifying examination. Such notice must be transmitted by certified mail.
- H. A candidate may lose board eligibility status by:
 - 1. Failure to take the certifying examination within the period of board eligibility.
 - 2. Failure to successfully complete the examination within the period of board eligibility.
- I. The Board shall, upon termination of board eligibility status, notify the candidate in writing. The notice must include the reason(s) for loss of status. Copies of each notice shall be filed with the secretary of the Bureau. The candidate receiving such notice has the right to appeal to the Bureau.

Section 3. - Reentry to the Certification Process

- A. A candidate who has lost board eligibility status and who wishes to reenter the certification process may submit, by individual petition, a request for such reentry. The petition must be made to the Board. If such petition is approved by the Board, the individual shall not be identified as board eligible.
- B. The Board must provide such candidate with a written list of deficiencies and, further, cooperate with the evaluating committee of the American Osteopathic College of Nuclear Medicine in developing a training program designed to the individual's needs.
- C. Upon documented completion of the approved program, the candidate may take the certifying examination.

ARTICLE IX - CERTIFICATES

Section 1. - Issuance

- A. Certificates shall be issued by the American Osteopathic Board of Nuclear Medicine to applicants who have conformed to all requirements for certification described in Article VII of these Bylaws, and who have received the recommendation of the Bureau and the approval of the AOA Board of Trustees.

BYLAWS: Article IX; Section 1. (cont'd)

- B. Each such certificate shall be signed by the chairman and the secretary-treasurer of this Board. No certificate is valid until it has been signed by the executive director of the American Osteopathic Association.

Section 2. - Revocation and Reinstatement

- A. Immediately following official notification that a diplomate no longer meets any one of the following requirements for maintaining certification status with the AOA, such certificate shall be automatically revoked and removed from the Certification Register of the AOA:
1. Payment of dues of the AOA or the Canadian Osteopathic Association.
 2. Payment of the annual certification registration fee, unless classified as inactive.
- B. The Board shall have the power to recommend to the Bureau and the Board of Trustees of the American Osteopathic Association the revocation of the certificate of any diplomate whose certificate was obtained by fraud or misrepresentation, who exploits the certificate, violates the Code of Ethics of the AOA or is otherwise disqualified.
- C. Reinstatement of a certificate that has been revoked must first be approved by the Board, the Bureau and the AOA Board of Trustees.

Section 3. - Annual Registration

To remain in good standing the diplomate shall pay an annual certification registration fee to the AOA as provided in the AOA "Rules of Procedure for Certifying Boards".

ARTICLE X - AMENDMENTS

Subject to the review and recommendation of the Bureau and the approval of the AOA Board of Trustees, these Bylaws may be amended by a two-thirds (2/3) vote of the total membership of this Board at any meeting provided each member has been notified at least thirty (30) days prior to the date of the meeting, of its being called and of the intention to amend.

REGULATIONS AND REQUIREMENTS

To expedite and direct the activities of the American Osteopathic Board of Nuclear Medicine and its conduct of the certification program, the following Regulations and Requirements are hereby placed in effect.

ARTICLE I - MEETINGS

Section 1. - Stated Meetings

The American Osteopathic Board of Nuclear Medicine shall hold a regular annual meeting to transact business at such time and place as the Board may decide.

Section 2. - Special Meetings

Special or called meetings may be held at a time and place as the Board may decide. Notices of the meeting shall be mailed to each member not less than fifteen (15) days prior to the proposed meeting date. Meetings may be called by the chairman or by written request of no less than three (3) members of the Board.

Section 3. - Order of Business

The chairman shall prepare an agenda to be distributed to all members before each regular meeting. The order of business of the annual meeting shall be:

- A. Call to Order
- B. Roll Call
- C. Report of the Secretary-Treasurer
- D. Communications
- E. Report of Credentials Committee
- F. Report of Examination Committee
- G. Reports of Special Committees
- H. Old Business
- I. New Business
- J. Adjournment

Section 4. - Quorum

For the transaction of business at any meeting of the Board, four (4) members shall constitute a quorum.

Section 5. - Governing Rules

The meeting of the Board shall be governed by Robert's Rules of Order, Newly Revised unless otherwise specified.

REGULATIONS AND REQUIREMENT (cont'd)

ARTICLE II - DISPOSITION OF FUNDS

Section 1. - A legally recognized bank is the repository of all funds of this Board. It may be chosen for the convenience of the secretary-treasurer.

Section 2. - The checks may be signed by the secretary-treasurer or the chairman of the Board.

Section 3. - An annual audit is required. The presentation of the invoices shall become an integral part of the record of the secretary-treasurer.

ARTICLE III - COMMITTEES

Section 1. - Credentials Committee

The Credentials Committee shall:

- A. Review all completed applications as submitted by the secretary- treasurer.
- B. Conduct a comprehensive investigation of each applicant in accordance with the rules governing applications.
- C. Prepare a complete report, with recommendations for each applicant, for presentation to the Board at its next annual meeting.

Section 2. - Examination Committee

The Examination Committee shall:

- A. During the course of the fiscal year between annual meetings, collect, secure, identify, tabulate and otherwise arrange all materials which the Committee will require to give a proper examination of the candidate.
- B. During the course of the fiscal year between annual meetings, prepare an examination in nuclear medicine following the basic concepts described in Article IX of these Regulations and Requirements.

REGULATIONS AND REQUIREMENTS (cont'd)

ARTICLE IV - BUREAU FOR OSTEOPATHIC SPECIALISTS REPRESENTATIVES

Section 1. - The representative to the Bureau shall be appointed from and by the membership of this Board.

Section 2. - The alternate shall be appointed from and by the membership of this Board. The alternate shall be empowered to act for the duly appointed representative in his/her absence.

Section 3. - The representative shall fulfill the duty of representing the Board in all matters where such representation is required.

ARTICLE V - ELECTION OF MEMBERS

Section 1. - The American Osteopathic Board of Nuclear Medicine shall consist of six (6) members, recommended by this Board to the appropriate College Board, in accordance with Article II, Section 1 of the Bylaws of this Board, to the Bureau and to the AOA Board of Trustees for approval. Insofar as possible, there shall be a representative from each geographical time division of the United States on this Board.

Section 2. - Members shall be elected for terms of three (3) years. The terms shall be staggered so that the new members elected in any year shall not constitute a majority of this Board. Members may be resubmitted for appointment.

Section 3. - Members shall continue to serve until their successors are elected.

ARTICLE VI - OFFICERS

Section 1. - The officers of the American Osteopathic Board of Nuclear Medicine shall be a chairman, vice chairman and a secretary-treasurer.

Section 2. - The officers shall be elected by this Board for a term of one (1) year at its annual meeting.

REGULATIONS AND REQUIREMENTS: Article VI (cont'd)

Section 3. - Officers shall serve until their successors are elected.

ARTICLE VII - REQUIREMENTS FOR CERTIFICATION

Section 1. - The practice of nuclear medicine is defined as consisting of and including those fields of diagnostic and therapeutic medicine which utilize radionuclides but excluding therapy with sealed sources. The divisions include: 1) diagnostic and therapeutic nuclear medicine comprising the entire scope of practice 2) nuclear cardiology 3) nuclear imaging 4) invivo and invitro analysis of body fluids. To be eligible to receive certification from the American Osteopathic Board of Nuclear Medicine, the applicant must meet the following minimum requirements. The applicant must:

- A. Be a graduate of an AOA accredited college of osteopathic medicine.
- B. Be licensed to practice in the state or territory where his/her practice is conducted.
- C. Be able to show evidence of conformity to the standards set in the Code of Ethics of the American Osteopathic Association.
- D. Be a member in good standing of the American Osteopathic Association or the Canadian Osteopathic Association for the two (2) years immediately prior to the date of certification, and is encouraged to maintain membership in the divisional society of the AOA of the state or province in which he/she practices.
- E. Have satisfactorily completed an internship of at least one (1) year in a hospital approved for intern training by the American Osteopathic Association.
- F. Have completed one of the following combinations of training and experience.
 - 1. For full certification in nuclear medicine
 - a) Certification by the American Osteopathic Association in internal medicine, pathology or radiology and one (1) year of AOA approved residency training in nuclear medicine.
 - b) Two (2) years of AOA approved residency training in nuclear medicine following an AOA approved internship.

REGULATIONS AND REQUIREMENTS: Article VII; Section 1.F.2. (cont'd)

- 2. Special Training Requirements
 - a) To receive a certificate of added qualifications in nuclear cardiology a period of not less than 500 hours of clinical training and 200 hours of didactic training are required. In addition the individual must have AOA certification in at least one of the following: internal medicine, pathology, radiology or a subspecialty certification

in cardiology.

- b) To receive a certificate of added qualifications in nuclear imaging and therapy a period of not less than 1,000 hours of clinical training and 200 hours of didactic training are required. Certification in internal medicine, pathology or radiology are required.
 - c) To receive a certificate of added qualifications in invivo and invitro nuclear medicine a period of not less than 500 hours of clinical training and 200 hours of didactic training are required. The individual must be certified in internal medicine, pathology or radiology.
3. Training shall include basic radiation biology, radiation physics, instrumentation, radiation protection, mathematics pertaining to the use and measurement of radioactivity, radiopharmaceutical chemistry and principles of radiation safety.

Each candidate for board certification in nuclear medicine must comply with the requirements of the Nuclear Regulatory Commission regulations, Title 10-CFR part 35 Medical Use of By-product Material effective date 4-1-87 and any future revisions as they relate to the subsections 35.920 Training for Imaging and Localization Studies, section 35.21 Radiation Safety Officer and section 35.22 Radiation Safety Committee. In addition the candidate should have had experience with or knowledge of quality assurance programs as they pertain to the human uses of by-product material.

- G. Submit letters of recommendation from two osteopathic physicians certified in nuclear medicine.
- H. Submit documentation of the satisfactory completion of an AOA approved internship, residency and any other training.

REGULATIONS AND REQUIREMENTS: Article VII (cont'd)

Section 2. - Following satisfactory compliance with the prescribed requirements, stated in Section 1. above, the applicant shall be required to pass appropriate examinations planned to evaluate an understanding of the scientific bases of the problems involved in the specialty, familiarity with the current advances in the specialty, the possession of sound judgment and a high degree of skill in the diagnostic and therapeutic procedures involved in the practice of the specialty.

ARTICLE VIII - FEES

Section 1. - A nonrefundable fee for board eligibility shall be determined by the Board.

Section 2. - An additional fee as determined by the Board is required before the examination is given, payable immediately upon notification of acceptance of the application. This constitutes the examination fee and is not refundable to the applicant.

Section 3. - Reexamination will require a fee as determined by the Board for each reexamination.

ARTICLE IX - RULES FOR THE CONDUCT OF EXAMINATIONS

Section 1. - The applications for examination, which are obtained from the secretary-treasurer of this Board, shall be signed by the applicant and filed with the secretary-treasurer of the Board thirty (30) days prior to the examination.

Section 2. - The applicant will be notified by the secretary-treasurer of the Board as to the time and place of examination. The applicant will be assigned a number to be used in place of his/her name on the examination book and answer sheets.

Section 3. - The examination shall be in two (2) parts, the academic part and the practical part.

A. The academic examination shall include but not be limited to:

1. An oral examination conducted by at least four (4) members of the Board on the subject material of the examination being taken. The examination shall be conducted so as to assist in determining the candidate's qualifications as a specialist in nuclear medicine.

REGULATIONS AND REQUIREMENTS: Article IX; Section 3.A. (cont'd)

2. A written examination as prepared by the Examination Committee or other agency as determined by the Board. The examination shall consist of a set of written questions with the rules governing examination questions and procedures and will be so designed, conducted and constructed so as to be comprehensive in covering the field of nuclear medicine.

B. The practical examination shall include, but not be limited to:

1. Interpretation of scans, correlation of laboratory nuclear medicine data and basic nuclear medicine.
2. Evaluation of clinical, nuclear medicine and laboratory data for the purpose of rendering diagnoses.

Section 4. - The scope, length and breadth of each examination shall be at the discretion of the Examination Committee and the Board, within the limits established by the Bureau. Each examination shall be of sufficient breadth and comprehensiveness to adequately evaluate each candidate so as to qualify him/her as a specialist in nuclear medicine.

Section 5. - Examination shall be proctored by the secretary-treasurer of the Board or his/her designee. The examination shall be given at a time and place as designated by the Board.

Section 6. - The Examination Committee shall provide the examination questions and answers and complete information about the time and place of the examination to the secretary of this Board.

Section 7. - The Examination Committee shall use an assigned number for each applicant, designated by the secretary-treasurer of this Board. This identifying number will be used in lieu of the applicant's name. The applicant's name will not appear anywhere in the examination book, answer sheets and/or score sheets, except on individual score sheets provided for the oral examination.

Section 8. - The examination in nuclear medicine shall be graded as follows:

- A. The average grade of the practical examination shall constitute 50% of the final grade. The average of the combined oral and written examinations shall constitute 50% of the final grade. The average of these two (2) grades shall be the final grade and must be 75% or greater.

REGULATIONS AND REQUIREMENTS: Article IX; Section 8. (cont'd)

- B. There shall be a single final grade. The maximum score that can be achieved is 100%. A score of less than 75% (raw score) shall be considered failure and the candidate will not be recommended for certification.
- C. The final grade shall be determined by the Board in keeping with the policies and directives of the Bureau.
- D. A record of each examination must be signed and dated by the examiner upon issuing the grade of the examination, but in no instance is the individual examiner's record to be placed upon the examination book or papers, except for the oral score sheet.
- E. At least three (3) examiner's grades must be utilized to compute the final grade average.

Section 9. - Examination

Failure to achieve a final passing grade (75%) shall require the applicant to be reexamined in all categories (written, oral and practical), as provided below.

- A. Reexamination may not be taken at any other time than that of the regular annual examination.
- B. Reexamination may not be taken within a period of less than one (1) year from the preceding examination.

- C. A candidate may be reexamined two (2) additional times. If he/she should be unsuccessful after a total of three (3) attempts, he/she must show evidence of further study and/or training acceptable to the Board.

Section 10. - Rights of Appeal

- A. All candidates have the right to appeal the decisions of the Board.
- B. An appeal to the Board may be made in writing by the applicant, to the secretary of the Board, stating the reasons for appealing.
- C. Further appeal may also be made to the Bureau and the AOA Board of Trustees, using methods approved by the American Osteopathic Association.

REGULATIONS AND REQUIREMENTS (cont'd)

ARTICLE X - ISSUANCE OF CERTIFICATES

- A. The secretary-treasurer of the Board, upon receipt of notification from the AOA executive director that recommendation for certification of the applicant has been approved by the AOA Board of Trustees, shall within sixty (60) days have the certificate prepared, numbered and signed by the chairman and the secretary-treasurer of this Board and record in the register. The certificate shall then be forwarded to the AOA executive director for signature.
- B. After the executive director of the AOA has signed the certificate, the secretary of the Bureau shall forward it to the secretary-treasurer of the Board who shall then forward the certificate to the diplomate together with an appropriate letter of transmittal and the original copy of the "receipt" which the diplomate shall sign and return to the secretary of this Board.

ARTICLE XI - REVOCATION OF CERTIFICATE

Section 1. - To remain in good standing, a diplomate must continue to be a member of the American Osteopathic Association or the Canadian Osteopathic Association.

Section 2. - The diplomate shall also pay an annual registration fee, unless classified as inactive. Notice of annual registration will be mailed with the annual dues notice of the American Osteopathic Association.

ARTICLE XII - AMENDMENTS

These Regulations and Requirements may be amended at any stated or called meeting by a majority vote of the membership of the Board subject to the approval of the Bureau and the AOA Board of Trustees.



AMERICAN OSTEOPATHIC ASSOCIATION

142 East Ontario Street, Chicago, IL 60611-2864 ph 312 202 8000 | 800 621 1773

January 30, 2006

Appendix D

Dear Dr. [REDACTED]

I am pleased to advise you that the Executive Committee of the Bureau of Osteopathic Specialists of the American Osteopathic Association APPROVED the recommendation of the American Osteopathic Board of Pediatrics to certify you as follows:

Pediatrics; Certificate Number [REDACTED]
Effective Date of Certification - 12/15/2005 through 12/31/2012

Your effective date of certification coincides with the date on which you were notified by the American Osteopathic Board of Pediatrics of completion of all requirements for certification, and is verified by this letter. The American Osteopathic Board of Pediatrics is presently preparing a certificate. As soon as it has been lettered and signed by the appropriate officers, the secretary of the specialty board will mail it to you.

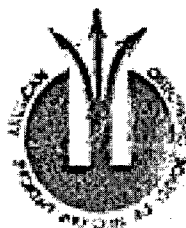
Congratulations on your accomplishment. If you have any questions about your certificate, please contact the American Osteopathic Board of Pediatrics at (312) 202-8267.

Sincerely Yours,

Armando F. Ramirez, Secretary

AFR/eb
cc: Specialty Board
Specialty College
Division of Certification
BOS Ref:01/14/2006

American Osteopathic Board of Nuclear Medicine



This Certifies that

Ferdinand E. Manilo, D.O.

has met the requirements of this Board and is
hereby Certified in Nuclear Medicine.

In testimony whereof we hereunto affix our
signatures this eighteenth day of July, 2002

American Osteopathic Board of Nuclear Medicine

Approved by order of the
Board of Trustees of the
American Osteopathic Association

Chairman

Executive Director

Secretary

No. 28

Certificate valid from 7/18/02—12/31/12