

DEPARTMENT OF EDUCATIONAL AFFAIRS

John W. Becher, DO, Chair

Joel B. Cooperman, DO, Vice Chair

**BUREAU OF OSTEOPATHIC EDUCATION – James M. Lally, DO, Chair**

The Bureau of Osteopathic Education (BOE) met September 6, 2008 and December 13, 2008 at the O'Hare Hilton in Chicago. In September, the BOE members reviewed resolutions submitted by the Council on Postdoctoral Training (COPT) and the Council on Osteopathic Postdoctoral Training Institutions (COPTI). In December, the Bureau reviewed resolutions from the COPT, COPTI and the Council on Continuing Medical Education (CCME). Kenneth Johnson, DO, Chair of the Task Force to Study the Impact of Admitting MDs into Osteopathic Graduate Medical Education presented an update to the BOE in December. A white paper is in development presenting outcomes and other considerations derived from the study. This study is a combined effort between the AOA BOE and the American Association of Colleges of Osteopathic Medicine (AACOM).

On September 6, 2008 the BOE Appeal Committee reviewed three Resolution 42 appeals from decisions made by the PTRC. The BOE agreed that the Appeal Committee may not review appeals if the appellant wants to provide additional or new information to the Appeal Committee. New information must be handled through a request for reconsideration to the originating Council where the decision was made. One of the appeals was referred back to the PTRC. On December 13, the Appeal Committee heard one appeal from a decision of the Council on Postdoctoral Training. On January 10, 2009 the Appeal Committee met in Florida immediately following the Osteopathic Medical Education Leadership Conference to hear an appeal from a decision of the PTRC. Appeals from programs, specialty colleges and OPTIs must be held within 60 days of receipt of the appeal request according to the BOE Handbook. Mark Bailey, DO, PhD was elected as a new member of the BOE Appeal Committee and James Lally, DO was elected as the third alternate.

**COUNCIL ON POSTDOCTORAL TRAINING – Michael I. Opipari, DO, Chair**

There are 24 Resolutions submitted to the 2009 Midyear Board of Trustees meeting from the COPT and approved by the Bureau of Osteopathic Education at the September and December meetings. The COPT is requesting that the AOA eliminate the requirement for "special circumstances" for all requests for AOA approval of first year of training in allopathic programs. This change would make the requirements standard for all applicants. The AOA Chairs of the COPT, COPTI and PTRC and AOA staff visited Tulsa in October because officials at Oklahoma State University (OSU) and OSU Medical Center (OSUMC) reported the programs would close June 2009. At this time, efforts by the state and city legislatures and the AOA have resulted in preservation of all programs at OSUMC which includes 165 approved positions in a variety of specialties.

**PROGRAM AND TRAINEE REVIEW COUNCIL – Joseph P. Mc Nerney, DO, Chair**

The PTRC continues to approve new internship and residency programs, provide continuing approval to existing programs and increases in the number of positions in existing training programs. The graph following this paragraph shows the PTRC approvals for programs and positions in fiscal year 2008. There is a marked decrease in the number of continuing and new internship programs and positions, as expected, due to the restructuring of the internship.

PTRC Program and Position Approvals

	Internship – Continuing Approval	New Internship - Programs/Positions		Residency - Continuing approval	New Residency – Programs/Positions		Existing Residency – Increased Programs/ Positions	
April 2008	2	2	50	48	39	279	14	49
July 2008	0*	0*	0*	37	14	140	5	28
Nov 2008	3	1	6	46	17	133	9	29
Total	5	3	56	131	70	552	28	106

\*due to new restructuring

As of November 2008, Trainee Services had received 2,056 applications (compared to the August 2008 total of 2,013) from individuals seeking approval of their ACGME training through Resolution 42. There are 238 incomplete applications on file. Of the 2,056 applications received, 1,520 have been approved and 18 have been denied. An additional 270 applications are approved pending completion of training requirements. To date there have been ten applications withdrawn during the process.

**COUNCIL ON OSTEOPATHIC POSTDOCTORAL TRAINING INSTITUTIONS – D. Keith Watson, DO, Chair**

The Council on Osteopathic Postdoctoral Training Institutions (COPTI) presented three OPTI resolutions for approval to the BOE in December. Two were approved for with five years accreditation, the highest number of years that can be awarded. One resolution is presented to the Board of Trustees on policy *Multiple OPTI Membership*, which clarifies the designation of primary administrative oversight for OPTI partners when an institution selects more than one OPTI as a partner. Five OPTIs are scheduled for site visits in 2009.

**COUNCIL ON CONTINUING MEDICAL EDUCATION –Michael J. Feinstein, DO, Chair**

The CCME Administrative executive committee met in July to approve requests for category 1-A and 1-B CME. The CCME will hold its annual Category 1-A Sponsors Workshop in Scottsdale in conjunction with the Osteopathic Medical Education (OME) Leadership Conference January 10-12, 2008. In December, the BOE approved two resolutions to go forward to the Board of Trustees at the Midyear meeting. One resolution will require all Category 1 Sponsors to provide written documentation of their needs assessment that are tied to program objectives at the time the program is submitted for approval. In addition, the CCME is recommending that Category 1-B continuing medical education credit be granted to osteopathic physicians who participate in online Faculty Development modules.

**BUREAU OF OSTEOPATHIC SPECIALISTS -Ronald E. Ayres, DO, Chair**

This report covers the time period between June 2008 and December 2008. The Annual Meetings of the Bureau of Osteopathic Specialists (BOS) and its committees were held on November 7-9, 2008, at the O'Hare Hilton in Rosemont, Illinois.

**Certification Statistics**

Between June 2008 and December 2008, staff, under the direction of the BOS Executive Committee, activated 779 candidates for certification and recertification: 459 are new initial certifications and 320 are recertifications.

Candidates for certification were approved in the following areas: Preventive Med-Aerospace Med (1), Anesthesiology (14), Anesthesiology-Pain Management (2), Cardiology (3), Critical Care-Surgery (4), MOHS-Micrographic Surgery (2), Diagnostic Radiology (28), Emergency Medicine (68), Sports Medicine-Emergency Medicine (1), Family Practice and OMT (80), Sports Medicine- Family Practice (6), Gastroenterology (1),

Geriatric Medicine-Family Practice (5), General Vascular Surgery (3), Hand Surgery (2), Cardiac Electrophysiology (1), Internal Medicine (28), Sports Medicine-Internal Medicine (2), Laboratory Medicine (1), Maternal & Fetal Medicine (1), Neurology (7), Neuromusculoskeletal Medicine/OMM (10), Neuroradiology (3), Neurological Surgery (4), Obstetrics & Gynecology (56), Preventive Medicine-Occupational-Environmental Medicine (1), Otolaryngology & Facial Plastic Surgery (16), Ophthalmology (6), Orthopedic Surgery (29), Psychiatry (1), Pediatrics (18), Plastic & Reconstructive Surgery (1), Pediatric Radiology (2), Radiation Oncology (1), Surgery-General (45), Urological Surgery (6). Total number of candidates certified: **459**

Candidates for recertification were approved in the following areas: Addiction Medicine-Neurology and Psychiatry (1), Child Psychiatry (1), Diagnostic Radiology (4), Emergency Medicine (90), Emergency Medical Services (1), Sports Medicine-Emergency Medicine (8), Family Practice/OMT (3), Sports Medicine-Family Practice (8), General Vascular Surgery (1), Hand Surgery (3), Internal Medicine (90), Sports Medicine-Internal Medicine (1), Neurology (3), Nephrology (3), Obstetrics and Gynecology (25), Orthopedic Surgery (39), Psychiatry (13), Pediatrics (27), Pulmonary Diseases (1), Surgery-General (4), Urological Surgery (1). Total number of candidates recertified: **320**

### **Executive Committee**

The Executive Committee met on November 8, 2008. The BOS Assembly approved the recommendation of the Executive Committee to approve nominations for membership on specialty boards.

The Chair presented the revision of the document prepared for the Federation of State Medical Boards (FSMB) on “Good Medical Practice,” which defined a competent physician, for the BOS Assembly’s review. He asked that each Board review the document and respond with comments for the FSMB. In addition, the full BOS reviewed and updated the BOS Handbook.

The Chair directed a discussion of Core Competencies and the need to incorporate them into the certification process to maintain competitiveness in the certification marketplace. Members of the assembly pointed out the difficulty in using some of them within the certification assessment process.

The Vice Chair updated the assembly on the development of Osteopathic Continuous Certification (OCC). There was also discussion regarding how to administer OCC; the possible requirement of OCC for those with life-time certification; and administrative physicians not being able to accomplish a clinical portion due to them being non-practicing in the profession..

The Committee revisited the recently updated board eligibility policy. Board eligibility is to begin immediately after training is complete and is limited to six (6) years, under the updated policy, with the option of re-entry into the process if a candidate is unsuccessful. This updated policy will be advertised through the website, in newsletters and articles, and will be sent to specialty colleges, training programs and OPTIs.

There was a committee discussion regarding acceptable parameters for restricted license situations under the licensure requirement for certification. A document was prepared by AOA legal counsel to assist in determining which actions can lead to licensure loss and suspension. The committee agreed that the definitive body should be the specialty board in deciding if the licensure infraction is significant to the continuance of his or her certification.

The committee and full Bureau discussed specialty CME credit in depth and how hours are applied to the membership requirement, as well as how the role of the Board is significant in deciding which specialty hours will be used toward the specialty board certification requirement. The use of the Job Task Analysis (JTA) as a means of earning CME was also discussed, due to specialty boards applying to CME to obtain credit for this activity. These requests for JTA CME credit will no longer be accepted because participating in a JTA does not equate to a substantive educational activity.

The committee also participated in a presentation of Computer Based Testing (CBT) options for exam administration. Information was reviewed from two vendors and opinions were heard from Boards already involved in CBT. There was consensus regarding utilizing some form of CBT in the future; however, due to financial implications, it would be prohibitive as a global. The BOS Assembly approved the recommendations of this Committee.

#### **Committee on Administrative and Board Financial Matters**

The Committee on Administrative and Board Financial Matters met on November 8, 2008, to continue its work to assess the financial health, psychometric and administrative needs of AOA certifying boards. The Committee reviewed and recommended approval of BOS midyear certifying board reports from all 18 of the certifying boards.

The Committee reviewed and approved the final report from the Task Force for Conjoint Certification of Added Qualifications Examination Committees and has submitted the edited report to the Board of Trustees for its review.

The Committee continued its administrative self-studies designed to ensure AOA Certifying Boards are complying with AOA/BOS operational requirements, as well as to assist them in identifying areas for continuous improvement. Three administrative self-studies reviewed at this meeting were AOBIM, AOBNM, and AOBPM. Each Board will receive a customized report with the Committee's recommendations. The BOS Assembly approved the recommendations of this Committee.

#### **Committee on Basic Documents and Certificates**

The Committee on Basic Documents and Certificates met on November 8, 2008. The Committee reviewed and recommended approval of revisions to the Constitution and Bylaws, and/or Regulations and Requirements of the American Osteopathic Board of Emergency Medicine (AOBEM), the American Osteopathic Board of Family Practice (AOBFM), the American Osteopathic Board of Neuromusculoskeletal Medicine (AOBNMM), the American Osteopathic Board of Neurology and Psychiatry (AOBNP), the American Osteopathic Board of Obstetrics and Gynecology (AOBOG), the American Osteopathic Board of Pathology (AOBP<sub>a</sub>), the American Osteopathic Board of Pediatrics (AOBP), and the American Osteopathic Board of Surgery (AOBS).

#### **Standards Review Committee**

The Standards Review Committee met on November 7, 2008, to conduct standards review of board certification exams and finalize the schedule of third cycle reviews. The Committee also discussed its use as a clearinghouse for best practices, noting a need to streamline the review process and to utilize technology for review, reducing the amount of meeting time required.

The committee finalized the second cycle review of the American Osteopathic Board of Pediatrics (AOBP) and found it in compliance. The BOS Assembly concurred with the recommendations of the Committee. The Committee also reviewed and revised the third cycle review evaluation form, continuous compliance templates, and the security plan template.

The Committee also discussed osteopathic continuous compliance, including core competencies, cross disciplinary board teams, a template for core competencies and their incorporation into all aspects of the process: initial; recertification; and continuous certification, practice performance assessments. The committee also discussed authoring a series of peer-review journal articles relating to interpersonal communication skills.

### Appeals Committee

There was one appeal presented in November 2008 from a candidate from the American Osteopathic Board of Family Physicians (AOBFP)/Sports Medicine Conjoint Committee.

### Committee on Jurisdiction

The Committee on Jurisdiction met on November 8, 2008. The committee reviewed a request from the American Osteopathic Board of Anesthesiology for withdrawal from the Addiction Medicine Conjoint Committee. The Committee moved that this request be approved and BOS Assembly concurred with that recommendation.

The committee reviewed a request the American Osteopathic Boards of Ophthalmology/Otolaryngology-HNS (AOBOO) be added to the Sleep Medicine Conjoint Committee. The Committee moved that this request be approved and BOS Assembly concurred with that recommendation.

### **COMMISSION ON OSTEOPATHIC COLLEGE ACCREDITATION – John M. Ferretti, DO, Chair**

This report is for actions of the AOA Commission on Osteopathic College Accreditation (COCA) from the period September 1, 2008 through December 31, 2008.

The COCA held its summer meeting on September 6-7, 2008 at the O'Hare Hilton under the direction of the Chair. Accreditation action items from the agenda included:

- Reports from comprehensive on-site evaluations: 1 continuing accreditation report was accepted.
- Accreditation status actions: 1 continuing accreditation decision was approved.
- Reports from on-site evaluations for focused visitations: 4 reports were accepted.
- Substantive change / planned: 2 were approved for additional location; 3 were approved for class size increase; 1 was approved for change in form of governance; one deferral of class size increase was continued.
- Progress reports: 13 were accepted.
- One special report was presented with oral testimony.
- Eight (8) follow-up reports from the COM Annual Report review process were reviewed and accepted.

Policy discussion items for the agenda included:

- The President, National Board of Osteopathic Medical Examiners (NBOME) was present to give an update on the COM's experiences with the COMLEX Part 2-PE examination in the 2007-2008 academic year. He also spoke to possible future directions of the COMLEX examinations. The COCA agreed to circulate an NBOME survey to the COCA members.
- The COCA authorized circulation of the Draft Interim Policy Statement on International Accreditation of Colleges of Osteopathic Medicine for public comment.
- Revisions to The Evaluators' Manual, Appendix C: Telephone Interview and Questions for Affiliated Sites were approved.
- Seven (7) members and two (2) alternates were approved as members of the COM Accreditation Appeal Panel for the 2008-2009 year.
- Eight (8) nominees to the Evaluators' Registry were approved.
- One nominee to the Consultants listing was approved.

The COCA held its fall meeting on December 13-14, 2008 at the O'Hare Hilton under the direction of the Chair. Accreditation items from the agenda included:

- Reports from comprehensive on-site evaluations: 2 continuing accreditation reports were accepted.
- Accreditation status actions: 2 continuing accreditation decisions were approved.
- Substantive change / planned: 1 was approved for curriculum change; one was approved for class size increase and additional location; one deferral of class size increase was continued.
- Progress reports: 7 were accepted.
- One (1) reconsideration of an action from the September 2008 COCA was heard.
- Three special reports were presented, one in executive session.

Policy discussion items for the agenda included:

- The COCA reviewed public comments on the Draft Interim Policy Statement on International Accreditation of Colleges of Osteopathic Medicine and approved the document with amendment. The interim policy will form the basis for development of formal regulations needed to conduct accreditation outside the United States.
- The COCA reviewed public comments on proposed revisions to the COM accreditation standards and directed that the proposed revisions and comments be referred to the Standards Review Committee for further revision.
- Two (2) individuals were approved for the Consultant's list.
- Eight (8) individuals were approved for the Evaluator's Registry.
- Three (3) members of the Evaluators' Registry were approved as Team Chairs.
- The 2010 calendar year site visit schedule was approved as presented.
- The fall 2008 COM class survey report was accepted. There were no findings of unplanned class size increases.

Special Presentation:

Student/Doctor Bradford W. Landry, MSPT, OMS-IV, President, Council of Student Government Presidents (COSGP) was present to discuss the resolution entitled, "Updating of Anti-Discrimination Policies of Osteopathic Professional Organizations". The COCA referred the resolution to its Standards Review Committee (SRC) for reporting back at the Spring 2009 COCA meeting.

#### **COCA - Executive Committee (COCA – EC)**

The COCA-EC met by teleconference on October 17, 2008 in executive session. The COCA-EC reviewed one student complaint, one feasibility study, two requests for interpretation of COCA standards and procedures and a recommendation to retain the COCA Forum as an annual meeting. Recommendations of the COCA-EC regarding interpretation of COCA standards and procedures and retention of the forum were discussed and affirmed by the COCA. The recommendation on the student complaint was deliberated and voted upon by the COCA in Executive Session on December 13, 2008.

#### **Committee on College Accreditation Training (CCAT)**

The CCAT met by teleconference on September 25 to review the agenda for the workshop to be held on January 10, 2009 at the Hyatt Regency Pier 66 in Fort Lauderdale, FL. The program, directed at members of the Evaluators Registry, will focus on improving consistency in site visits. The keynote speaker, Patricia M. O'Brien, SND, Deputy Director, New England Association of Schools and Colleges – Commission on Institutions of Higher Education will present on "Writing Evidence-Based Reports". Three modules of breakout sessions will involve the evaluators based upon (1) experience, with a separate track for chairs; followed by (2) functional expertise; concluding with (3) a mock site visit review of a COM. The track for the team chairs will be facilitated by David Gensure, Director of Continuing Education, Nova Southeastern University-College of Osteopathic Medicine.

**Standards Review Committee (SRC)**

The SRC did not meet during this period.

**Annual Report Review Committee (ARC)**

The COCA ARC met by teleconference on October 20, 2008. The items for discussion were: (1) the COM Annual Supplemental Report; (2) new standard 1.1.1, the mid-cycle mission report; and (3) the AACOM Annual Report. The ARC decided to offer no recommendations for modification of the AACOM Annual Report at this time. The COCA affirmed the ARC's recommendations on the Annual Supplemental report and language to implement standard 1.1.1.

**COMMITTEE ON PROFESSIONAL PUBLICATIONS – Carol L. Monson, DO, MSCMH, Chair  
JAOA EDITORIAL ADVISORY BOARD – Gilbert E. D'Alonzo Jr, DO, Editor in Chief**

The Committee on Professional Publications (CPP) held a joint meeting with the Editorial Advisory Board (EAB) of *JAOA—The Journal of the American Osteopathic Association* on Oct. 28, 2008, during the AOA's annual convention in Las Vegas.

During the meeting, the CPP and the EAB reviewed a proposal from the AOA editor in chief and the *JAOA*'s two associate editors for establishing a task force to explore reorganizing the *JAOA*'s content around nine sections and departments. The proposal is designed to help the *JAOA* fulfill its new mission statement and goals, which were unveiled in June 2008.

The task force would be charged with realigning such traditional *JAOA* content as original research, research abstracts and medical education articles with content that has traditionally been sparse in THE JOURNAL, such as systematic reviews, articles on the clinical implications of basic science research, articles on medical ethics, news reports and analyses, historical pieces, poetry and prose. Integral to the task force's assignment would be enhancing the way in which THE JOURNAL's sections and departments advance the osteopathic medical profession.

In addition to determining how each section and department should be organized to highlight osteopathic principles and practice, the task force would study the number and types of editors, professional medical writers and other personnel who would be necessary to achieve the goals the task force sets for reorganizing the *JAOA*.

The CPP and the EAB agreed to request that AOA President Carlo J. DiMarco, DO, establish the task force. Dr. DiMarco, in turn, has submitted a resolution to that effect to the Board of Trustees for its consideration during its midyear meeting.

During their October meeting, the CPP and the EAB also considered a proposal from the publishing company Wolters Kluwer Health to provide production, online and editing services to the AOA's publications.

As part of its efforts to decrease the net loss of AOA publications, the Department of Publications entered into discussions with Wolters Kluwer Health early in 2008 to determine what services that journal and textbook publisher could offer AOA publications to achieve such goals as the following:

- increase revenues.
- decrease expenses.
- profitably expand into other markets.
- shorten the *JAOA*'s submission-to-publication time.
- improve the *JAOA*'s online submission capabilities.

- enhance the *JAOA's* presence and prestige in the United States and internationally.

Beyond assessing Wolters Kluwer's ability to aid the AOA in achieving the goals above, the CPP and the EAB viewed Wolters Kluwer's proposal as potentially providing some solutions to the resource limitations the AOA would face in reorganizing the *JAOA*. The CPP and the EAB instructed the Department of Publications to continue its discussions with Wolters Kluwer Health, to obtain proposals from other publishing companies, and to provide the CPP and the EAB with a document comparing the publishing companies' proposals.

Another matter that the CPP and the EAB considered during their October joint meeting was whether the AOA's publications should establish an affiliation with the American Medical Association's journal *Disaster Medicine and Public Health Preparedness (DMPHP)*.

*DMPHP* Editor in Chief James J. James, MD, DrPH, explained to the CPP and the EAB that the new journal was created to help establish disaster medicine and public health preparedness as a discipline that all physicians and other healthcare professionals should become trained in.

Dr. James requested that the AOA recommend *DMPHP* to AOA members as a reliable source of information on disaster medicine and public health preparedness. In turn, *DMPHP* would:

- offer AOA members a reduced subscription rate to *DMPHP* that would be equal to the reduced rate *DMPHP* offers AMA members.
- allow the AOA to promote the reduced subscription rate for *DMPHP* as a benefit of AOA membership.
- invite the AOA to nominate one member to serve on the *DMPHP* Editorial Board, with the AOA's candidate subject to the approval of *DMPHP's* editor in chief.
- recognize the AOA's endorsement of *DMPHP* on a special page in each print issue devoted to recognizing organizations affiliated with the journal.
- prominently feature the AOA's endorsement on *DMPHP's* Web site along with a link to the AOA's Web site.

The CPP and the EAB voted to submit a resolution to the Board of Trustees to accept *DMPHP's* proposal.

In addition, the AOA's editor in chief accepted an invitation from Dr. James to write an editorial for *DMPHP* to kick off the collaborative arrangement, should the AOA Board decide to endorse *DMPHP*.

#### **COM STANDARDS REVIEW COALITION (CSRC) – Robert S. Juhasz, DO, Chair**

The CSRC met in Las Vegas on October 28, 2008, the Chair reviewed the resolution and background was given to the members. The Chair explained that the College Accreditation Standards Task Force made up of AOA Board members discussed the proposed COCA revisions and felt that the following themes arose from the conversation: Responsible Growth, Educational Continuum, Standard Enforcements, Standard Enhancements and to give Responsible Feedback to COCA.

The Coalition reviewed the proposed standards changes from COCA. All proposed changes were acceptable with the exception of a proposed change on standard 6.11. All members agreed that the proposed 6.11 language was a little unclear and will offer a small/slight re-wording to COCA.

The CSRC gave recommendations to COCA on the proposed revision to standard 1.6 – MISSION and the proposed new standards: 1.7 – Mission, 6.9.1 – Curriculum, 6.9.2 – Curriculum, 6.10.1 – Curriculum, 6.11 – Curriculum.

The Coalition agreed to follow the proposed schedule to hold one face-to-face meeting and quarterly teleconference meetings.

**OGME DEVELOPMENT INITIATIVE ADVISORY COMMITTEE – Michael K. Murphy, DO, Chair**

The AOA launched the OGME Development Initiative (Initiative) to assist nonteaching hospitals that want to start osteopathic graduate medical education (OGME) programs. The Initiative is designed to work collaboratively with the OPTIs to provide peer-to-peer assistance and useful information to prospective teaching hospitals. Assistance from the Initiative also is available to allopathic teaching hospitals that want to establish dually accredited residency programs or to hospitals with osteopathic programs that are struggling.

The key to the Initiative is a corps of consultants knowledgeable about OGME and ready to work with prospective teaching hospitals interested in developing new OGME programs. These consultants include directors of medical education, other osteopathic medical educators, hospital chief executive officers, chief financial officers and other senior administrators. Working with the OPTIs, the consultants visit prospective teaching hospitals, work peer-to-peer with hospital and physician leadership, answer questions, and share their experience and detailed Initiative materials on all aspects of starting and operating an OGME program.

On January 10, the second “class” of Initiative consultants completed an intensive training seminar designed to introduce an AOA strategic framework for OGME development. During the seminar, experienced faculty led interactive sessions on the financial and strategic considerations involved in starting a new teaching program. Among these considerations are the value of medical education, identification of program champions, Medicare GME payment, resource requirements, hospital strategic goals and objectives, assessment of community and customer needs, and the AOA application and program approval processes.

An informational brochure has been developed for “marketing” the Initiative to prospective teaching hospitals, OPTIs, osteopathic specialty societies, state associations and others inside and outside the profession.

**CERTIFICATION FEE TASK FORCE – Robert S. Juhasz, DO, Chair**

The Certification Fee Task Force surveyed Specialty Colleges in the Fall 2008.

**DALE DODSON EDUCATION FUND COMMITTEE – Michael K. Murphy, DO, Chair**

This report is for the period from September 1, 2008 – December 31, 2008. There were no meetings of the Dale Dodson Educational Fund Committee (DDEF) Committee during this period.