

Certification of osteopathic physicians

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As of November 1998, a total of 13,990 DOs are actively certified by the American Osteopathic Association (AOA), and hold a combined total of 16,363 certificates. To date in 1998, a total of 1,215 certificates were awarded in specialty and subspecialty areas (Table 1). In addition, 183 certificates of added qualifications were awarded.

Certification terminology

In February 1994, the AOA Board of Trustees adopted the following standardized definitions of certification and eliminated certificates of special recognition.

General Certification (formerly "Primary 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]."

Certification of Special Qualifications (formerly "Secondary Certification"): 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 qualification certification.

Certification of Added Qualifications (formerly "Certificate of Added Qualifications"): Constitutes a modification of a general certificate or certificate of special qualifications to reflect additional training of at least 1 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 (Table 2).

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 cor-

responding certifying Boards. Certification of added qualifications requires maintenance of valid general or special qualifications certification from which the added qualification was modified. Certification of added qualifications in Geriatrics is now independently offered through the American Osteopathic Board of Family Physicians and the American Osteopathic Board of Internal Medicine. In addition, physicians holding general certification through an AOA specialty board and who meet the established criteria are eligible to receive certification of added qualifications in Occupational Medicine or Medical Toxicology.

Recertification in areas of added qualifications requires maintenance of valid general or special qualifications certification from which the added qualification was modified.

Reentry into the certification process

In February 1994, the AOA Board of Trustees directed all certifying boards to establish a mechanism for re-entry into the certification process no later than January 1, 1995, for those physicians whose board eligibility has expired. Such a re-entry process may include, for example, the completion of a specified amount and type of continuing medical education credit before being allowed to sit for certification examination, and will differ by Board. This process will not re-establish board eligibility status, but simply allows physicians to meet the requirements for sitting for certification examination.

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Table 1
AOA Certification Awarded 1994 to 1998 (as of November 1, 1998)

Specialty	1994*	1995	1996	1997*	1998
Allergy and Immunology	0	0	1	0	2
Anatomic Pathology	5	0	1	1	1
Anatomic Pathology and Laboratory Medicine	0	0	0	0	0
Anesthesiology	50	36	20	21	43
Cardiology	14	1	24	14	12
Child Neurology	0	0	0	0	0
Child Psychiatry	3	0	4	0	2
Dermatology	10	25	16	14	14
Diagnostic Radiology	21	23	19	28	53
Emergency Medicine	78	60	76	65	45
Endocrinology	0	0	6	3	0
Facial Plastic Surgery	1	1	1	1	0
Family Practice†	552	856	716	677	610
Forensic Pathology	2	0	0	0	0
Gastroenterology	12	0	17	13	8
General Vascular Surgery	11	4	4	10	4
Gynecologic Oncology	0	0	2	1	1
Hematology	1	0	3	1	3
Infectious Diseases	5	0	1	3	3
Internal Medicine	97	110	107	92	93
Laboratory Medicine	0	0	0	0	3
Maternal and Fetal Medicine	0	1	0	0	3
Neonatology	4	0	1	2	0
Nephrology	2	0	7	2	4
Neurological Surgery	4	2	0	1	3
Neurology	11	0	14	0	15
Nuclear Medicine	0	0	0	0	3
Obstetrics and Gynecology	39	30	27	28	72
Oncology	5	0	5	2	1
Ophthalmology	22	30	8	10	23
Orthopedic Surgery	58	25	34	35	31
Otorhinolaryngology	2	7	1	1	0
Otorhinolaryngology and Facial Plastic Surgery	24	19	11	10	34
Pediatrics	14	9	12	8	4
Plastic and Reconstructive Surgery	5	2	1	2	2
Preventive Medicine /Aerospace Medicine	2	0	3	2	2
Preventive Medicine/ Public Health	0	0	5	4	1
Preventive Medicine /Occupational Medicine/Environmental Medicine	14	0	11	13	17
Proctology	1	1	1	1	1
Psychiatry	23	0	37	11	17
Pulmonary Diseases	9	1	11	7	6
Radiation Oncology	2	0	1	0	0
Radiology	...	...	...	...	...
Rehabilitation Medicine	9	13	14	11	11
Reproductive Endocrinology	1	0	1	1	1
Rheumatology	4	0	3	3	3
Special Proficiency in Osteopathic Manipulative Medicine	32	59	23	10	20
Surgery (General)	60	39	13	21	30
Thoracic/Cardiovascular Surgery	4	3	4	5	3
Urological Surgery	7	2	4	6	11
Total Certificates Awarded	1,220	1,359	1,270	1,140	1,215

† Before July 1993, certificates were issued as General Practice

* Revised figures

Conjoint examinations

In July 1993, the AOA Board of Trustees directed the AOA Executive Director, in conjunction with the Bureau of Osteopathic Specialists (the Bureau), to study the issue of creating a mechanism for the formation of conjoint boards in areas of overlapping specialties. This action was prompted by an application for the formation of a conjoint board of Sports Medicine.

In its discussions, the Bureau noted that over time, there likely will emerge new areas of overlapping jurisdiction in osteopathic medicine in addition to sports medicine, and that the formation of a new certifying board each time would not be practical. Instead, it was recommended that a mechanism for creating conjoint examinations be formed, which would allow all appropriate specialty boards to participate if they so desire. The Board of Trustees accepted this recommendation in February 1994 and approved the mechanism for creating conjoint examinations.

The conjoint mechanism allows diplomates (those holding general certification) from participating Boards to establish eligibility to sit for examination. To date, two conjoint examinations are offered, one in the area of Sports Medicine and Addiction Medicine.

Recertification

Effective January 1, 1995, every AOA certifying Board must offer a recertification mechanism to its diplomates. In conjunction with implementation of the recertification process, numerous Boards have instituted time-limiting of their certificates (that is, new certificates are issued with an expiration date). If a Board does not time-limit its certificates, then the certification is valid for life. Similarly, certificates issued before the implementation of time-limiting are valid for life. All diplomates are eligible to sit for recertification examinations, even if they hold a life certificate (*Table 3*).

Table 4 summarizes the current status of certificate time-limiting by the AOA boards.

Table 2
Certificates of Added Qualifications 1996 Through 1998*

Certificate of Added Qualification and Specialty Board	1996	1997	1998
Critical Care Medicine—Anesthesiology	0	0	0
Pain Management—Anesthesiology	16	6	23
Dermatopathology—Dermatology	...	2	1
MOHS Micrographic Surgery—Dermatology	5	0	0
Emergency Medical Services—Emergency Medicine	0	16	7
Sports Medicine—Emergency Medicine	...	1	0
Addiction Medicine—Family Physicians	...	11	0
Adolescent and Young Adult Medicine—Family Physicians	0	1	3
Geriatrics—Family Physicians	115	69	41
Sports Medicine—Family Physicians	93	9	5
Addiction Medicine—Internal Medicine	...	2	0
Critical Care Medicine—Internal Medicine	21	20	6
Clinical Cardiac Electrophysiology—Internal Medicine	6	8	2
Geriatric Medicine—Internal Medicine	23	15	1
Sports Medicine—Internal Medicine	1	1	0
Addiction Medicine—Neurology/Psychiatry	...	0	5
Dermatopathology—Pathology	...	1	0
Angiography and Interventional Radiology—Radiology	1	3	8
Body Imaging—Radiology	1	1	3
Neuroradiology—Radiology	3	3	7
Nuclear Radiology—Radiology	2	1	1
Pediatric Radiology—Radiology	1	2	4
Sports Medicine—Rehabilitation Medicine	...	2	0
Sports Medicine—Special Proficiency in Osteopathic Manipulative Medicine	...	1	0
Surgical Critical Care—Surgery	5	2	0
Occupational Medicine—Any diplomate holding general certification through an AOA specialty board	6	6	17
TOTAL	299	177	134

*As of November 1, 1998.

Table 3
Recertification Statistics 1995 to 1998
(as of November 1, 1998)

Specialty Board	1995	1996	1997	1998
Anesthesiology	10	0	2	4
Dermatology	0	0	0	0
Emergency Medicine	9	2	6	6
Family Physicians	266	86	39	12
Internal Medicine	0	4	0	0
Neurology /Psychiatry	0	0	0	0
Nuclear Medicine	0	0	0	0
Obstetrics /Gynecology	0	1*	0	0
Ophthalmology/Otolaryngology— Head and Neck Surgery	0	0	1†	0
Orthopedic Surgery	10	0	2	0
Pathology	0	0	0	0
Pediatrics	0	0	0	0
Preventive Medicine	1‡	0	0	0
	1§		2§	0
Preventive Environmental Medicine	...	3	1	2
Proctology	0	0	0	0
Diagnostic Radiology	1	1	5	0
Radiology	2	2	2	0
Nueroradiology	0	1	0	0
Roentgenology	...	...	1	0
Diagnostic Roentgenology	0	0	0	0
Rehabilitation Medicine	0	0	0	0
Osteopathic Manipulative Medicine	0	0	0	0
Surgery	3	2	0	0
Urology Surgery	...	...	1	0
Total	303	102	60	24

*Obstetrics and Gynecologic Surgery
†Otolaryngology/ Facial Plastic Surgery

‡Public Health
§Occupational Medicine

Table 4
Certificate Time-Limiting by the
American Osteopathic Boards

American Osteopathic Board of	Certificate time limit in Years	Beginning date
Anesthesiology	None	...
Dermatology	None	...
Emergency Medicine	10	Jan 1, 1994
Family Practice	8	Mar 1, 1997
Internal Medicine	10	Jan 1, 1993
Neurology and Psychiatry	10	Jan 1, 1995
Nuclear Medicine	10	Jan 1, 1995
Obstetrics and Gynecology	None	...
Orthopedic Surgery	10	Jan 1, 1994
Special Proficiency in Osteopathic Manipulative Medicine	10	Jan 1, 1995
Ophthalmology	10	Jan 1, 2000
Otolaryngology—Head and Neck Surgery*	10	Jan 1, 2002
Pathology	10	Jan 1, 1995
Pediatrics	7	Jan 1, 1995
Preventive Medicine	10	Jan 1, 1994
Proctology	None	...
Radiology	None	...
Rehabilitation Medicine	None	...
Surgery	10	Jan 1, 1997†

* Previously called the American Osteopathic Board of Ophthalmology and Otorhinolaryngology.

†For candidates entering certification process after this date.

Psychometric assistance

Beginning in January 1994, the AOA began providing psychometric services to assist osteopathic certifying Boards in the validation of their certification

examinations. Certification is especially crucial for healthcare practice today, because it is usually required for obtaining hospital privileges and participating in a managed care environment. Because

certification is so consequential, the certification process must be legally justifiable and valid in order for credentialers to accept it.

To this end, the AOA provides consultation and data analysis services to certifying Boards and assists them in creating, scoring, and analyzing their examinations. These services provide psychometric guidance to a Board in any step of the examination process, whether for a written, oral, or practical examination.

Correction

The poem *Just a 'yet'*, which appears in the October *JAOA* in the Letters section, was written by Krista—not Kristin—Preston. The editors apologize for the error.