

College of Osteopathic Medicine MICHIGAN STATE UNIVERSITY

Program Level Educational Objectives

Competency Domains	Program Objectives - MSUCOM graduates will be able to:	Mapped Objective Competencies or "Tags"	KSAs			Outcome Definitions of Mapped Competencies or "Tags"
			Knowledge	Skills	Attitudes/ Behaviors	
Osteopathic Principles, Practice, and OMM (OPP)	 Demonstrate and apply knowledge and skills related to osteopathic principles and practice such that care of patients is approached from the distinct behavioral, philosophical, and procedural aspects of osteopathic medical practice. Recognize, diagnose, and treat patients with somatic dysfunction using hands-on osteopathic manipulative treatment (OMT) in the clinical setting. 	OPP: OPP Principles/Integration	x	х	x	Apply knowledge and skills related to osteopathic principles and practice to an appropriate patient care plan in a clinical setting or case discussion.
		OPP: OMM/OMT Principles/Integration	x	х	x	Apply knowledge and skills related to osteopathic manipulative treatment to an appropriate patient care plan in a clinical setting or case discussion.
		OPP: OMM/OMT Observation	х			Participate in learning experiences in academic, clinical, and community settings that include observation of hands-on application of OMT performed by COM-credentialed physicians (DO or MD).
		OPP: OMM/OMT Application	х	х		Participate in learning experiences in academic, clinical, and community settings that include hands-on application of OMT as supervised by COM-credentialed physicians (DO or MD).
	 Provide osteopathic medical care that is patient- centered, compassionate, evidence-based, timely, and equitable in order to promote health and the body's self- regulatory and self-healing nature. Determine and monitor the nature of the patient's concern or complaint; implementing mutually agreed upon diagnostic and patient care plans that include appropriate patient education and follow-up. Perform all diagnostic and therapeutic clinical procedures essential for generalist practice in the delivery of high-quality patient care, promotion of wellness, and prevention of disease. 	PC: Data Gathering - History (EPA 1)	х	х		Gather accurate, essential data from all history sources, including the patient, secondary sources, and medical records, regardless of patient age or clinical setting.
		PC: Data Gathering - Physical Exam (EPA 1)	x	х		Gather accurate, essential data from physical examination (including osteopathic structural examination), regardless of patient age or clinical setting.
Patient Care and Procedural Skills (PC)		PC: Differential Diagnosis (EPA 2)		х		Formulate a differential diagnosis based on the patient evaluation and epidemiologic data, prioritizing diagnoses appropriately, and determining the nature of the concern or complaint in the patient's life cycle and in a variety of health care settings.
		PC: Diagnostic Testing (EPA 3)	х	х		Recommend and interpret common diagnostic and screening tests using evidence- based and cost-effective principles.
		PC: General Clinical Procedures (EPA 12)	х	x		Perform basic clinical procedures essential for the generalist practice of osteopathic medicine such as: CPR, bag and mask ventilation, venipuncture, and insertion of an intravenous line.
		PC: Urgent Clinical Procedures (EPA 10)	х	x		Recognize a patient requiring urgent or emergent medical care, initiating evaluation and management in those circumstances. Examples: chest pain, mental status changes, shortness of breath and hypoxemia, fever, hypotension and hypertension, tachycardia and arrhythmias, oliguria, anuria, urinary retention, electrolyte abnormalities, and hypoglycemia or hyperglycemia.
		PC: Treatment/Management (EPA 4)	х	x		Develop an evidence-based, cost-effective, patient-centered care plan; using all ethical and appropriate options to relieve the patient's physical and psychological distress. May include: Entering and discussing orders and prescriptions in a variety of settings (e.g., inpatient, ambulatory, urgent, or emergent care) and assessing the patient's willingness and ability to cooperate with the therapeutic plan.
		PC: Patient Education/Counseling (SCI)	×	х	x	Assess patient's health literacy and understanding, counseling or educating patients accordingly.
		PC: Informed Consent (EPA 11) (SCI)	х	x		Assess patient's health literacy and understanding, facilitating the informed consent process for tests and/or procedures. This may include ability to explain biomedical science research processes and outcomes to patients and/or subjects of a clinical study.
Medical Knowledge (MK)	6. Interpret and apply established and evolving principles of foundational biomedical and clinical sciences to explain principles of health, disease, and diagnostic and treatment options.	MK: Foundational Biomedical Science	х			Apply knowledge of clinically applicable foundational biomedical science concepts related to patient care and health (homeostasis and structure-function relationships in disease prevention) and disease in an integrated, patient-centered, osteopathic manner.
		MK: Clinical Science	х			Apply knowledge of established and evolving clinical science concepts related to patient care and health (homeostasis and structure-function relationships in disease prevention) and disease in an integrated, patient-centered, osteopathic manner.

Practice-Based Learning and Improvement (PBLI) Interpersonal and Communication Skills (COMM)	7. Assimilate and apply evidence-based medicine principles and practices, fundamental biostatistical and epidemiologic concepts, and clinical decision-making skills to evaluate the validity and clinical significance of established and evolving scientific evidence.	PBLI: Clinical Decision-Making (EPA 7) (SCI)	Х	x		Use clinical decision-making tools and procedures, including the ability to form a clinical question, to retrieve and interpret best available evidence to advance patient care.
		PBLI: EBM Principles/Practice (SCI)	Х		х	Apply evidence-based osteopathic medicine principles and practice, incorporating evolving evidence into practice and continuous learning.
	 Demonstrate practical strategies for integrating best medical evidence and evidence-based principles and practices into patient care. 	PBLI: Literature Search/Appraisal (SCI)	х	x	x	Seek peer-reviewed literature, critically appraising its source, methodology, and relevance.
	 9. Leverage systematic methods to ensure continuous self-evaluation of clinical practice patterns and practice-based improvements, including those that reduce medical errors and promote optimal, equitable health outcomes. 10. Exhibit skills and behaviors that facilitate effective information gathering and giving, empathic rapport building, and shared decision-making in interactions with the patient, the patient's family and caregivers, and other sembers of the interprofessional collaborative team. 11. Effectively document and synthesize clinical findings, diagnostic impressions, and diagnostic and treatment instructions in verbal, written, and electronic formats. 12. Adhere to the ethical, behavioral, and social science principles that underpin medical professionalism, demonstrating accountability to patients, society, and the profession in medical education, training, research, and practice. 13. Establish, maintain, and conclude the physician-patient relationship in a manner that is responsive to the needs of patients, appropriate to one's scope of practice, and supersedes self-interest. 	PBLI: Clinical Significance (SCI)	х			Determine the clinical significance of research evidence and statistical inferences.
		PBLI: Reflection/Metacognition		x	x	Identify, describe, and apply systematic methods relating to continuous evaluation of personal reasoning and practice patterns, practice-based improvements, and the reduction of medical errors.
		COMM: Eliciting Information		х		Communicate effectively with the patient, the patient's family, and other caregivers in order to establish a diagnostic impression and ascertain the nature of the concern or complaint.
		COMM: Rapport Building		х		Develop, maintain, and conclude the therapeutic relationship while demonstrating competence in the rapport-building functions of the medical interview.
		COMM: Information Giving		x		Effectively provide information, ensuring that the patient (or caregiver) understands the condition along with diagnostic and/or treatment options and recommendations. This includes achieving consensus and encouraging strategies to avoid illness and promote and maintain health as appropriate.
		COMM: Documentation (EPA 5)		х		Demonstrate effective written and electronic communication in patient care and in team collaboration while documenting a clinical encounter in the patient record.
		COMM: Oral Presentation (EPA 6)		х		Demonstrate effective oral communication in patient care and in team collaboration while providing an oral presentation of a clinical encounter.
		PROF: Professionalism	х		x	Demonstrate knowledge of the behavioral and social sciences that provide the foundation for the professionalism competency, including social accountability, and responsibility.
		PROF: Ethics	х		х	Demonstrate knowledge of the behavioral and social sciences that provide the foundation for competency with medical ethics.
		PROF: Humanistic Behavior			х	Exhibit respect, altruism, compassion, integrity, honesty, and trustworthiness.
Professionalism		PROF: Primacy Patient Need			х	Demonstrate responsiveness to the needs of patients and society that supersedes self- interest.
(PROF)		PROF: Accountability/Duty			x	Establish, maintain, and conclude the physician-patient relationship in accordance with proper ethical and legal standards while also demonstrating accountability to patients, society, and the profession.
		PROF: Self-Care	х		х	Provide for one's personal care and well-being by applying the principles of wellness, disease prevention, and coping mechanisms to the conduct of one's own professional and personal life.
		PROF: Ethical Research (SCI)	x		x	Apply ethical principles in the practice and research of osteopathic medicine, particularly in the areas of confidentiality of patient information, access to care, regulation of care, provision or withholding of care, and the conduct of research.
	14. Describe the larger context and systems of health care, including one's role and responsibilities in this system, and	SBP: Health Systems	х			Discuss how health care delivery systems and their associated health care coverage and access affect the practice of an osteopathic physician and the care of patients in the community.
Systems-Based Practice (SBP)	potential impacts on practice and patient care.	SBP: Costs/Risks	х		x	Consider how to allocate resources (e.g., evaluating value, quality, cost, risk-benefit analysis, potential wastes) in the health care delivery system and incorporate them into the care of patients.

	patient safety while reducing medical errors, inequities, needless pain and suffering, waste, and other inefficiencies.	SBP: Quality/Safety (EPA 13)	х		x	Advocate for and apply methods for the evaluation and improvement of patient care systems, with the goal of improving patient safety and quality of care. This includes the identification of system failures and contributing to a culture of safety and improvement.
Scientific Method (SCI)	16. Apply knowledge of the scientific method, research methods, and basic scientific and ethical principles of clinical and translational research to collect data, test and verify hypotheses, and conduct and evaluate research, applying findings into patient care as appropriate.	SCI: Scientific Data Collection	Х			Apply data collection methods for scientific purposes.
		SCI: Hypothesis Testing	х			Apply procedures for testing and verifying hypotheses or questions regarding biomedical phenomena.
		SCI: Clinical/Translational Research	х			Act in adherence with basic scientific and ethical principles of clinical and translational research.
		SCI: Research Methods	x			Review methods by which research is conducted, evaluated, explained to patients/subjects of a clinical study, and applied to patient care.
Self-Directed and Lifelong Learning (SDL)	17. Seek and apply continuing knowledge for lifelong learning and practice improvement, formulating appropriate clinical questions and retrieving related evidence as appropriate to inform patient care.	SDL: Self-Directed Learning		x	x	Use a four-step process in self-directed learning: self-assessment of one's learning needs; independent identification, analysis, and synthesis of information; appraisal of source credibility; and receipt and application of supervisor feedback on information seeking skills.
		SDL: Lifelong Learning			х	Pursue continuous knowledge-base development and lifelong learning in the biomedical and clinical sciences.
	 18. Foster a climate of shared values, mutual respect, and effective team communication with other health professionals, patients and their families, and broader communities in health promotion and disease treatment. 19. Practice collaboratively and appropriately as a member or a leader of an interprofessional health care team in adherence with IPEC core competencies. 	IPE: Interprofessional Values/Ethics			х	Work with individuals of other professions to maintain a climate of mutual respect and shared values.
Interprofessional Education for Collaborative Practice (IPE)		IPE: Interprofessional Roles/Responsibilities	Х		х	Use the knowledge of one's own role and those of other professions to appropriately assess and address the health care needs of patients and to promote and advance the health of populations.
		IPE: Interprofessional Communication/Handovers (EPA 8)		×		Communicate in a responsive, responsible, team-oriented manner with patients, families, communities, and professionals as a member or leader of an interprofessional collaborative team. This includes effectively giving or receiving patient handovers to transition care responsibility.
	20. Use one's role and those of other professions to promote effective, efficient, equitable care while learning in academic and clinical environments that promote interactions with other health professions and professionals.	IPE: Interprofessional Teams/Teamwork (EPA 9)		×	x	Collaborate with awareness of the interprofessional health care team and one's role as a team member to optimize system performance and promote safe, quality patent- and population-centered care. This includes the application of relationship-building and team dynamics along with the planning, delivery, and evaluation of related health care, programs, and policies.
		IPE: IPE Event Participation (EPA 9)	х	x		Participate in learning experiences in academic, clinical, and community settings with other health professionals and students of health profession fields to foster knowledge, skills, and abilities related to the IPEC core competencies.
Societal and Cultural Awareness and Advocacy (SCAA)	21. Provide sensitive, responsive patient care to a culturally and socially diverse patient population in varied clinical settings and across the lifecycle.	SCAA: Cultural Competency/Humility	х		x	Demonstrate sensitivity, respect, and responsiveness to a diverse and heterogeneous patient population, while recognizing biases in oneself, others, and health care systems and processes.
		SCAA: Social Determinants	х			Describe social determinants of health that promote health inequities or risk health outcomes for underserved populations at the local, national and global levels.
	22. Leverage system resources to advocate for and maximize the health of the individual and communities or populations at large.	SCAA: Advocacy/Response	Х		х	Advocate for all patients within the health care system, leveraging methods to eliminate health care disparities. This includes the diagnosis, prevention, reporting, and treatment of common societal problems stemming from social determinants of health.

References:

NBOME (2016). Fundamental Osteopathic Medical Competency Domains 2016: Guidelines for Assessment of Osteopathic Medical Licensure and the Practice of Osteopathic Medicine.

COCA (2019). Accreditation of Colleges of Osteopathic Medicine: COM Continuing Accreditation Standards.

AAMC (2013). Core Entrustable Professional Activities for Entering Residency, 2013.

IPEC (2016). Core Competencies for Interprofessional Collaborative Practice: 2016 Update.

LCME (2016). Functions and Structure of a Medical School: Standards for Accreditation of Medical Education Programs Leading to the MD Degree.

AAMC (2013). Physician Competency Reference Set.

Medbiquitous Curriculum Inventory Working Group Standardized Vocabulary Subcommitee (2016). Curriculum Inventory Standardized Instructional and Assessment Methods and Resource Types.