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Policies and Procedures of the American Osteopathic Board of Radiology

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POLICIES AND PROCEDURES OF THE AMERICAN OSTEOPATHIC BOARD OF RADIOLOGY

Article I. Procedures

To expedite and direct its activities, the American Osteopathic Board of Radiology (hereinafter also referred to as "the Board" or AOBR) shall place into effect this set of Policies and Procedures.

This document is in addition to, and based upon, the American Osteopathic Association (AOA) Procedures of the Bureau of Osteopathic Specialists and AOA Specialty Certifying Boards ("Policies and Procedures of the BOS") and the Bylaws of the Board.

Article II. Committees

Board committees will be established and administered as denoted in the Bylaws of the Board.

Article III. Board Eligibility

The AOBR will follow the board eligibility process and procedure as outlined in Article VIII of the *Policies and Procedures of the BOS*.

Article IV. Certification Eligibility Requirements

Section 1. Eligibility Criteria

To be eligible to receive certification from the AOA through the AOBR, applicants for examination for certification are required to file an application which shall set forth their qualifications for examination. Applicants must demonstrate:

- A. The minimum requirements for AOA board certification outlined in Article IX of the *Policies and Procedures of the BOS*.
- B. Four (4) or more years of AOA-approved training in diagnostic radiology; or
- C. Four (4) or more years of AOA-approved training in radiation oncology; or
- D. One (1) years or more of AOA-approved training in a subspecialty of diagnostic radiology: vascular and interventional radiology, neuroradiology and pediatric radiology, following successful completion of an AOA-approved diagnostic radiology residency for candidates seeking certification of added qualifications.

Section 2. Additional Certification Requirements

Subject to the recommendation of the BOS and to the approval of the AOA Board of Trustees, the AOBR may require such further training and/or practice in each of the specialties or subspecialties coming under its jurisdiction as, in its judgment, such subspecialty may require, provided that the additional requirement for each specialty or subspecialty is clearly set forth in the Policies and Procedures of the Board. Additions to training and/or practice requirements shall go into effect one (1) year subsequent to the announcement of such change.

Section 3. Licensure Requirement

An applicant for certification that has a restricted license may petition the Board for the ability to enter the certification process based upon review of the reason for licensure restriction.

Section 4. - Application Requirements

A typewritten or computer generated application, fee, and release statement must be on file with the Secretary-Treasurer and approved by the Credentials Committee preceding the next examination meeting of the Board. All materials submitted by the applicant shall remain the property of the Board.

Section 5. - Training Requirements

The candidate shall provide documentary evidence of the required minimum number of years of AOA-approved residency training in the specialty or subspecialty for which certification is being sought. This training shall include:

- A. Advanced study in the sciences: anatomy, physiology, biochemistry, pathology, pharmacology, radiophysics, radiobiology, and such other basic sciences as are necessary to a mature and comprehensive understanding of the prevention, diagnosis, therapy and management of the disorders involved in radiology.
- B. Active experience in the diagnosis and treatment in such amount and diversity that it will assure adequate training in the specialty.

Article V. Examination

Section 1. General Examination Information

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 the specialty of diagnostic radiology or the specialty of radiation oncology, or the subspecialties of vascular and interventional radiology, neuroradiology and pediatric radiology, familiarity with the current advances, possession of sound judgment and of a high degree of skill in the diagnostic and therapeutic procedures involved in the practice of the appropriate specialty or subspecialty.

A. Written and oral/image interpretation examinations shall be conducted and required in the case of each diagnostic radiology applicant. The applicant must successfully pass both the written physics of medical imaging, biological effects and safety examination and the written diagnostic imaging examination before he/she will be eligible to take the oral examinations.

- B. Written and oral/clinical management examinations shall be conducted and required in the case of each radiation oncology applicant. The applicant must successfully pass the written examinations before he/she will be eligible to take the oral examinations.
- C. An oral/image interpretation examination shall be conducted and required in the case of each candidate for certification of added qualifications.

Section 2. Examinations

Examinations will be offered as follows:

A. Diagnostic Radiology

- 1. Part 1—Physics—Written is offered to residents in the second year of training or thereafter.
- 2. Part II—Diagnostic Imaging--Written is offered to residents in the third year of training or thereafter.
- 3. Part III—Diagnostic Radiology—Oral is offered to residents in the fourth and final year of training or thereafter who have passed the written examinations.

B. Radiation Oncology

- 1. Written examinations (Part I-Radiobiology, Part II-Physics, And Part III-Clinical) are offered to residents in the fourth and final year of training or thereafter.
- 2. Part IV-Oral examinations are offered to residents in the fourth and final year of training or thereafter who have passed the written examinations.

C. Certification of Added Qualifications

- 1. In the final year of subspecialty training or thereafter, an oral examination is offered to applicants certified in diagnostic radiology.
- 2. Examinations conducted in a subspecialty shall only be given upon notice of satisfactory completion of the examinations conducted in the specialty of diagnostic radiology.

Section 3 Examination Opportunities

The AOBR Policy and Procedure for re-examination is found in Article VII of this document.

Section 4. Examination Fees

- A. The applicant shall make written application on a form provided by the Secretary-Treasurer of the Board. The total fee for examination in diagnostic radiology, radiation oncology or CAQ shall be determined by the Board.
- B. The application fee shall be retained by the Board and is non-refundable if the applicant is denied examination or withdraws.
- C. If an applicant fails any part of the examination for certification, the fee for reexamination shall be determined by the Board.

Article VI. Rules for the Conduct of Examinations

Section 1. - Examination

The following rules shall govern all examinations in the specialties and subspecialties coming under the jurisdiction of the Board.

- A. Emphasis should be placed on obtaining a clear idea of the applicant's ability, capability, and attainments.
- B. Each applicant should be thoroughly acquainted with the definition of the specialty or subspecialty in which he/she is being examined, the scope of practice that it covers, and thoroughly acquainted with the Code of Ethics of the AOA.
- C. Candidates will not be permitted to review past examinations or questions at any time.
- D. Item writers/reviewers who have participated in the development of an examination are not eligible to take that examination for a period of two (2) years.
- E. There shall be two (2) parts to each examination in a specialty under the jurisdiction of the Board:
 - 1. Diagnostic Radiology
 - a. Review of credentials
 - b. Written and oral/image interpretation examinations
 - 2. Radiation Oncology
 - a. Review of credentials
 - b. Written and oral/clinical management examinations
- F. In the subspecialties of diagnostic radiology there shall be the following parts to each examination:
 - 1. Vascular and Interventional Radiology
 - a. Review of credentials
 - b. Oral/image interpretation examination
 - 2. Neuroradiology
 - a. Review of credentials
 - b. Oral/image interpretation examination
 - 3. Pediatric Radiology
 - a. Review of credentials
 - b. Oral/image interpretation examination

Section 2. Rules Governing the Examination

A. Examination of credentials is conducted by the Credentials Committee of the Board prior to the examination meeting.

- B. Examinations shall consist of as many parts as are required by the Board.
- C. Applicants for certification in diagnostic radiology shall be examined in:
 - 1. Physics of Medical Imaging, Biological Effects and Safety
 - a. Radiological Physics (Radiation Production and Interaction With Matter)
 - b. Radiation Biology (Health Effects)
 - c. Radiation Safety and Protection
 - d. Radiological Imaging (Radiography, Fluoroscopy, CT, and Mammography)
 - e. Ultrasound
 - f. MRI
 - g. Nuclear Medicine
 - h. Quality Control
 - i. Clinical Use of Unsealed Byproduct Material for which a Written Directive is Required
 - 2. Diagnostic Imaging
 - a. Neuroradiology
 - b. Vascular/Interventional Radiology
 - c. Cardiopulmonary
 - d. Genitourinary Tract
 - e. Ultrasound
 - f. Breast Radiology
 - g. Gastrointestinal Tract
 - h. Musculoskeletal
 - i. Pediatric Radiology
 - i. Nuclear Medicine
- D. Applicants for certification in radiation oncology shall be examined in:
 - Radiobiology
 - 2. Physics
 - 3. Clinical
 - a. Gastrointestinal Tract
 - b Gynecological Malignancies
 - c Genitourinary Tract
 - d Lymphoma/Leukemia
 - e Head, Neck and Skin
 - f Breast
 - g Central Nervous System and Pediatric Malignancies
 - h Lung And Mediastinum, Soft Tissue and Bone
- E. Applicants for certification of added qualifications in one (1) of the subspecialties of diagnostic radiology shall be examined in:
 - 1. Anatomy and physiology
 - 2. Methods of examination
 - 3. Technique

- 4. Indications and contraindications
- 5. Pharmacology of contrast agents, where applicable
- 6. Radiation safety and protection
- 7. Elements of normal and abnormal interpretation applicable to the individual subspecialty
- F. The cases used in the image interpretation examinations shall cover the entire specialty and/or subspecialties. A sufficient number of cases shall be used for each anatomical division of the body covering both normal and pathological conditions. Grading in this examination is based upon the applicant's approach to the image and his/her final summation. Practical questions may be interjected to evaluate applicant's ability. This examination may be conducted with one (1) or more examiners for each applicant.

Section 3. Notification to Applicants

Following the examinational meeting of the Board, the Secretary-Treasurer shall notify each applicant of the results of the examination and inform the applicant that the action of the Board is subject to the final approval of the BOS. The AOBR will follow the procedures outlined in Article X of the *Policies and Procedures of the BOS*.

Article VII. Reexamination

Section 1 - Diagnostic Radiology

A. Written Examination - Part I and Part II

A candidate must pass Part I-Physics-Written And Part II-Diagnostic Imaging-Written for admission to the oral examinations. A candidate will have three (3) consecutive opportunities to appear for and pass or condition the written examinations. The candidate's first scheduled examination in diagnostic imaging will represent his/her first opportunity. Failure to accept an appointment, cancellation of an appointment or failure to appear for a scheduled written examination will be regarded as one (1) of the three (3) opportunities.

A candidate who fails an examination may be reexamined in one (1) year.

1. Failures

If after three (3) opportunities a candidate fails to pass Part I-Physics and Part II-Diagnostic Imaging-Written, he/she must submit a new application, fee and appropriate documentation in effect at that time and will be required to repeat both written examinations, i.e. Part I-Physics and Part II-Diagnostic Imaging. Failure to accept an appointment, cancellation of an appointment or failure to appear for a scheduled examination will be regarded as one (1) of the three (3) opportunities.

2. Conditions

A candidate is identified as conditioning if he/she passes Part II-Diagnostic Imaging but fails Part I-Physics. A candidate conditioning has three (3) additional consecutive opportunities to pass the failed examination. If after three (3) opportunities the candidate fails to pass the examination, he/she must submit a new application, fee and appropriate

documentation in effect at that time and will be required to repeat both written examinations, i.e. Part I-Physics And Part II-Diagnostic Imaging. Failure to accept an appointment, cancellation of an appointment, or failure to appear for a scheduled examination will be regarded as one (1) of the three (3) opportunities.

B. Oral Examinations - Part III

A candidate who has passed the written examinations will have three (3) consecutive opportunities to appear for and pass or condition the oral examinations, beginning with the oral examinations for which he/she is first declared admissible. Failure to accept an appointment, cancellation of an appointment or failure to appear for a scheduled oral examination will be regarded as one (1) of the three (3) opportunities.

1. Failures

The oral examinations consist of ten sections. A candidate who fails to pass at least seven oral sections at a single sitting must repeat the complete oral examinations at the next scheduled date. If after three (3) opportunities the candidate fails to pass or condition the oral examinations, he/she must submit a new application, fee and appropriate documentation in effect at that time and will be required to repeat the entire examination in diagnostic radiology, Part I-Physics and Part III-Diagnostic Imaging Written Examinations and Part III-Oral Examination. Failure to accept an appointment, cancellation of an appointment or failure to appear for a scheduled examination will be regarded as one (1) of the three (3) opportunities.

2. Conditions

A candidate is identified as conditioning if he/she passes a minimum of seven of the ten oral sections. A candidate conditioning will have three (3) additional consecutive opportunities to appear for and pass the failed sections. If after three (3) opportunities the candidate fails to pass all sections, he/she must submit a new application, fee and appropriate documentation in effect at that time and will be required to repeat the entire oral examinations in diagnostic radiology at the next opportunity. Failure to accept an appointment, cancellation of an appointment or failure to appear for a scheduled examination will be regarded as one (1) of the three (3) opportunities.

Section 2 - Radiation Oncology

A. Written Examinations - Parts I, II, and III

A candidate must pass all three (3) examinations (Part I-Radiobiology, Part II-Physics, and Part-III-Clinical) of the written examinations for admission to the oral examinations. A candidate will have three (3) consecutive opportunities to appear for and pass or condition the written examinations. The candidate's first scheduled examination will represent his/her first opportunity. Failure to accept an appointment, cancellation of an appointment or failure to appear for a scheduled written examination will be regarded as one (1) of the three (3) opportunities.

A candidate who fails an examination may be reexamined in one (1) year.

1. Failures

A candidate failing two (2) or more written examinations at any examination sitting must repeat the entire examination at the next consecutive examination. If after three (3) opportunities a candidate fails to pass at least two (2) of the examinations at a single sitting, he/she must submit a new application, fee and appropriate documentation in effect at that time and will be required to repeat all three (3) sections of the written examinations, i.e. Part I-Radiobiology, Part II-Physics, And Part-III-Clinical. Failure to accept an appointment, cancellation of an appointment or failure to appear for a scheduled examination will be regarded as one (1) of the three (3) opportunities.

2. Conditions

A candidate is identified as conditioning if he/she passes two (2) of the three (3) examinations at a single sitting. A candidate conditioning has three (3) additional consecutive opportunities to pass the failed examination. If after three (3) opportunities the candidate fails to pass the examination, he/she must submit a new application, fee and appropriate documentation in effect at that time and will be required to repeat all three (3) written examinations, i.e. Part I-Radiobiology, Part II-Physics, and Part-III-Clinical. Failure to accept an appointment, cancellation of an appointment, or failure to appear for a scheduled examination will be regarded as one (1) of the three (3) opportunities.

B. Oral Examinations – Part IV

A candidate who has passed the written examinations will have three (3) consecutive opportunities to appear for and pass or condition the oral examinations, beginning with the oral examinations for which he/she is first declared admissible. Failure to accept an appointment, cancellation of an appointment or failure to appear for a scheduled oral examination will be regarded as one (1) of the three (3) opportunities.

1. Failures

The oral examination consists of eight (8) sections. A candidate who fails to pass at least six (6) oral sections at a single sitting must repeat the complete oral examinations at the next scheduled date. A candidate will have three (3) consecutive opportunities to appear for and pass or condition the oral examinations. If after three (3) opportunities a candidate fails to pass or condition the oral examinations, he/she must submit a new application, fee and appropriate documentation in effect at that time and will be required to repeat the complete examination in radiation oncology, i.e. Part I-Radiobiology-Written, Part II-Physics-Written, Part III-Clinical-Written and Part IV-Radiation Oncology-Oral Examination. Failure to accept an appointment, cancellation of an appointment or failure to appear for a scheduled examination will be regarded as one (1) of the three (3) opportunities.

2. Conditions

A candidate is identified as conditioning if he/she passes a minimum of six (6) of the eight (8) oral sections. A candidate conditioning will have three (3) additional consecutive opportunities to appear for and pass the failed sections. If after three (3) opportunities the

candidate fails to pass all sections, he/she must submit a new application, fee and appropriate documentation in effect at that time and will be required to repeat the entire oral examinations in radiation oncology at the next opportunity. Failure to accept an appointment, cancellation of an appointment or failure to appear for a scheduled examination will be regarded as one (1) of the three (3) opportunities.

Section 3. Certification of Added Qualifications

A candidate will have three (3) consecutive opportunities to appear for and pass the oral CAQ examination. The candidate's first scheduled examination will represent his/her first opportunity. If a candidate fails to pass the oral examination after three (3) attempts, he/she must submit a new application, fee and appropriate documentation in effect at that time. Failure to accept an appointment, cancellation of an appointment or failure to appear for a scheduled examination will be regarded as one (1) of the three (3) opportunities.

Section 4. Examination Reentry

To reenter the examination process, if eligible, a candidate must reregister by submitting a new application and documentation as described in Article V. All materials submitted by the applicant shall remain the property of the Board.

Section 5. Cancellation

Cancellation is defined as canceling one (1) of the three (3) consecutive examination opportunities. Failure to appear for a scheduled examination will be regarded as a cancellation. A cancellation fee will be charged for any cancellation received up to 20 days prior to the first day of any examination. This fee represents administrative costs to the Board. Cancellation less than 20 days prior to the first day of any examination will result in forfeiture of the entire examination fee.

Section 6. Withdrawal

Withdrawal is defined as withdrawing from the examination process. A new application, fee and appropriate documentation in effect at that time must be filed for future examination. In the event of withdrawal of an application, an administrative fee will be charged and the balance of the examination fee will be refunded.

Article VIII. Certificates

Section 1. Process

The AOBR will issue and maintain certificates of certification and recertification in accordance with the *Policies and Procedures of the BOS*.

<u>Section 2. Certificate Dates – Primary Certification</u>

The date carried by primary certification certificates shall correspond with the date on which successful completion of all Board requirements is confirmed by the Board. All primary certifications issued after 2001 shall be time-limited to ten (10) years. The certificate will expire on December 31 of the tenth year following issuance of the certificate. Lifetime primary certifications issued prior to this date without a time limit, will remain in effect.

Section 3. Certificate Dates – Certification of Added Qualifications

The date carried by certification of added qualifications (CAQ) certificates shall correspond with the date on which successful completion of all Board requirements is confirmed by the Board. All certification of added qualifications certificates issued after 2000 shall be time-limited to 10 years. The certificate will expire on December 31 of the tenth year following issuance of the certificate. Life-time certificates which were issued prior to this date without a time limit will remain in effect.

<u>Section 4. Certificate Dates – Recertification Certificates</u>

The date carried by recertification certificates shall correspond with the date on which successful completion of all Board requirements is confirmed by the Board. All recertification certificates shall be time-limited to ten (10) years. The certificate will expire on December 31 of the tenth year following issuance of the certificate.

Section 5. - Inactivation, Revocation, Reinstatement, and Reactivation

The AOBR will follow the procedures regarding certificate inactivation, revocation, reinstatement and reactivation in accordance with Article XI of the *Policies and Procedures of the BOS*.

Article IX. Osteopathic Continuous Certification (OCC)

Section 1.

Effective January 1, 2013, diplomates certified in Diagnostic Radiology or Radiation Oncology after 2001 and diplomates certified with a certification of added qualifications after 2000 in Nuclear Medicine, Body Imaging, Neuroradiology, Pediatric Radiology, or Vascular/Interventional Radiology are required to participate in OCC in order to maintain their board certification. OCC is available on a voluntary basis for those diplomates holding certificates issued prior to 2002 in the specialties of Radiology, Diagnostic Radiology, Roentgenology, Diagnostic Roentgenology, Radiation Oncology, or Radiation Therapy and certificates issued prior to 2001 in the subspecialties of Nuclear Medicine, Body Imaging, Neuroradiology, Pediatric Radiology, or Vascular/Interventional Radiology.

| Non-time-limited | Primary Certification obtained prior to 2002 | Not required to participate |
|------------------|--|-----------------------------|
| | CAQ obtained prior to 2001 | |
| Time-limited | • Primary Certification obtained in 2002 & after | Required to participate |
| | CAQ obtained in 2001 & after | |

OCC is a continuous certification process (see Appendix C) that advances quality and the lifelong learning and self-assessment of board certified specialty physicians by focusing on the core competencies of patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism and systems-based practice. The goals for OCC are to assure high standards for patient care; to provide physicians with the means to continually assess and improve their abilities; to assure stakeholders that physicians are being assessed by reliable and valid measures; and to be transparent to the public and communicate information about physicians' competence.

Article X. Appeals

Section 1. Right of Appeal

If a candidate feels that the actions of the 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 this Board.

Section 2. Appeal Process

An appeal to the Board must follow the process as outlined in the AOBR Appeal Policy (Appendix 1).

Section 3. Level of Appeal

If the candidate is not satisfied with the results 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.

Section 4. Limitations

During any level of appeal described above the candidate will not be allowed by this Board to review any previous examination items.

Article XI. Compliance with Federal Requirements

The Board supports the intent of the Americans with Disabilities Act (ADA) and has adopted an ADA policy for candidates who meet ADA eligibility. The board will make a reasonable effort to provide qualified board candidates who have documented disabilities the necessary auxiliary aids and services that do not fundamentally alter the measurement of the skills or knowledge the board assessment process is intended to test or result in an undue burden. (Appendix 2)

Patient confidentiality as defined by the Health Information Portability and Accountability Act (HIPAA) will be maintained at all times in every exam administered by the AOBR.

Article XII. Inquiries Regarding Status of a Physician

The AOBR will process inquiries regarding a physician's application and certification status as outlined in Article XIII, Section 13, of the *Policies and Procedures of the BOS*.

Article XIII. Amendments

Amendments to the Policies and Procedures of the AOBR may be adopted for submission to the BOS for approval by the vote of a majority of the members of the board at any meeting, provided the proposed amendments have been submitted in print or electronic format to each member.

APPENDIX A

Appeal Policy

Effective January 1, 2011

The American Osteopathic Board of Radiology (AOBR) is committed to assuring that aggrieved candidates for certification have access to an appeal process concerning the written and oral certification examinations. In accordance with the policies of the American Osteopathic Association (AOA) candidates may appeal decisions of the AOBR to the AOA's Bureau of Osteopathic Specialists (BOS). Thereafter, where necessary, candidates may appeal the decision of the BOS to the AOA Board of Trustees.

BEFORE PURSING AN APPEAL WITH THE AOA, CANDIDATES MUST APPEAL DECISIONS TO THE AOBR IN ACCORDANCE WITH THE FOLLOWING POLICY.

Appeal Mechanism

A. Scope of Appeal

1) Appealable Issues

Candidates may appeal to the AOBR to raise concerns relative to the examination's administration (i.e., alleged bias/prejudice of a member of an examination team or failure to follow established examination procedures.)

2) <u>Non-Appealable Issues</u>

The AOBR will not consider appeals based on examination content, sufficiency or accuracy of answers given to examination questions, scoring of the examination, scoring of answers to individual questions, and/or the determination of the minimum passing score.

B. <u>Procedure for Appeal</u>

1) Appeal Request Form

In order to appeal concerning the examination, a candidate must set forth the basis for his/her appeal on an Appeal Request Form and submit the Form to a member of the examination team. Appeal Request Forms will be provided to all certification candidates prior to the commencement of the examination. Additional copies of the Appeal Request Form will be available upon request to the examination team. The appellant must submit the completed Appeal Request Form to the examination team within two-hours after he/she has completed the examination.

2) <u>Late Appeals</u>

All appeals submitted after the two hour deadline for submission of the Appeal Request Form will be denied.

3) Evaluation of Appeal

Each appeal submitted on an Appeal Request Form within two hours of completion of the examination will be considered by the AOBR Appeal Committee. A majority vote of the Committee will determine whether the AOBR accepts or denies the appeal.

4) <u>Notification of Candidates</u> Candidates will be advised by the AOBR of the Appeal Committee's decision by certified mail.

C. Effect of Decision

- 1) <u>Decision to Accept Appeal</u>
 - a. <u>No Scoring or Recording of Examination</u>. If the Appeal Committee accepts an appeal, then the candidate's examination will not be scored or recorded. It will not be counted as one of the three opportunities to take the examination under the current application.
 - b. Right to Retake Examination. A candidate whose appeal is accepted shall have the right to a new oral examination at the next scheduled examination date at no additional application or examination fee. (All other fees incurred are the responsibility of the candidate.) At that time, the examination will be conducted by a different examiner OR IN A MANNER THAT IS DETERMINED BY THE BOARD TO ADDRESS THE ISSUES RAISED IN THE APPEAL REQUEST. Retake examinations will be conducted in accordance with the format for the current examination.
 - c. <u>Failure to Retake Examination</u>. If for any reason the candidate elects NOT to retake the examination at the next scheduled date, his/her appeal shall be considered null and void, and the candidate will be required to reapply for the certification examination and his/her application shall be considered in accordance with the criteria in effect at the time he/she submits the new application. Exceptions (for good cause) to this stipulation will be considered on an individual basis by the Executive Committee.

d. Further Appeals

- 1. <u>Current Examination</u>. The candidate whose appeal is accepted shall not have the right to further appeal of the current examination results, either within the AOBR or to the AOA.
- 2. <u>Subsequent Examination</u>. The candidate whose appeal is accepted shall not have the right to appeal the next scheduled examination to the AOBR under this Policy. However, the candidate shall have the right to appeal to the AOA.

2) <u>Decision to Deny Appeal</u>

If an appeal is denied by the AOBR Appeal Committee, the candidate shall have the right to appeal to the American Osteopathic Association, Department of Education, Division of Certification, 142 East Ontario Street, Chicago, IL 60611.

APPENDIX B

ADA Policy

Americans with Disabilities Act and Special Testing Accommodations

The American Osteopathic Board of Radiology (AOBR) is committed to a policy of compliance with federal, state and local laws and regulations. The AOBR has adopted the following policy in compliance with Americans with Disabilities Act (ADA). Physicians who are eligible for examination and meet the definition of disability may submit an application for accommodation of a disability by submitting the AOBR ADA Application Form.

Definition of Disability

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

Policy Statement

All qualified candidates for board certification who suffer from a disability that, as defined in the ADA, may apply to the AOBR for accommodation of that disability. The AOBR shall have the discretionary authority, subject to review by the BOS Appeals Committee and the AOA Board of Trustees, to determine if an accommodation is appropriate or if the disability interferes with the candidate's ability to take the certifying examinations.

Procedure for Applying for Accommodation of Disability

- The AOBR ADA Application Form requesting accommodation of a disability must be submitted in writing to the AOBR at least ninety (90) days prior to the examination date. The application must be supported by appropriate documentation of the diagnosis of disability and the need for accommodation, including the recent evaluation of the candidate by a qualified professional.
- The AOBR will complete its review for requests for accommodation in a timely fashion and advise the candidate within thirty (30) days of its receipt of a request for accommodation: (a) the requested accommodation will be granted in part; (c) additional information is required; or (d) the requested accommodation will be denied.

Appeals

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

APPENDIX C

Osteopathic Continuous Certification (OCC)

Section 1. Definition and Components

OCC is a program of lifelong learning and on-going self-assessment in which AOBR diplomates must demonstrate their rigorous commitment to achieving quality clinical outcomes for patients in a responsive, patient-focused setting. It includes methods of evaluating physician knowledge and skills applied to practice.

When developing the OCC process, the Board elected to create a phase-in timeline for diplomates, based on the date of their certificate expiration. Due to this phase-in, diplomates may enter the OCC process in a year other than year one (i.e. a diplomate who enters OCC in 2013 with a certificate that expires in 2016 will enter OCC in year seven (7) of the OCC process.) Therefore, requirements will vary based on this phase-in. Specific OCC requirements, broken down by year, can be found on the AOBR website.

Each participating diplomate will be required to comply with each of the following components:

Component 1 - Professional Status/Unrestricted Licensure

Requires that physicians who are board certified by the American Osteopathic Association (AOA) hold a valid, unrestricted license to practice medicine in one of the 50 states or Canada. In addition, these physicians are required to adhere to the AOA's Code of Ethics. Licensure status will be verified with the AOA on an annual basis.

Diplomates with a restriction on their medical license(s) will be sent for review by the Certification Compliance Review Committee of the Bureau of Osteopathic Specialists (BOS). This committee will determine whether or not the diplomate will be allowed to continue within the OCC process in order to maintain their board certification.

Component 2 – Lifelong Learning/Continuing Medical Education

Diplomates must adhere to AOA CME requirements to maintain certification: 120 credit hours per 3-year CME cycle, including 30 Category 1-A credits, and 50 Category 1 or 2 primary specialty credit hours. Of the 50 specialty hours, OCC will require that the diplomate obtain a minimum of 25% in their CAQ subspecialty area, if applicable. OCC will also require a specific number of the CME credit hours to be Self-Assessment CME (SAMs). The number of required SAMs is based on the year a diplomates' certification expires. The AOBR will require diplomates to obtain SAMs in the following areas: clinical content, non-interpretive skills and CAQ clinical content, if applicable. Specific SAM requirements can be found on the AOBR website. SAMs are educational venues, i.e. CME activities, workshops, reading assignments, online offerings, etc. usually offered by radiologic societies. Each SAM must include a self-administered examination and the diplomate must provide a certificate of attendance indicating the amount of credit earned, as provided by the organization offering the SAM. SAMs will count toward the CME requirement, as well as fulfilling the SAM requirement.

Diplomates must submit all CME obtained to the AOA CME Department for recording. CME status will be verified with the AOA on an annual basis.

Component 3 – Cognitive Assessment

A diplomate will be required to demonstrate through a formalized, secure examination, that he/she has the fundamental diagnostic skills, medical knowledge and clinical judgment to provide quality care. Time-limited diplomates will be required to take and pass the OCC cognitive exam prior to the expiration of their certificate. Diplomates may begin taking the OCC cognitive exam up to three (3) years prior to the expiration date of the certificate (in the eighth, ninth or tenth year of the candidates certificate cycle). Non-time-limited certificate holders participating in OCC are eligible to take the cognitive examination at any time during their 10 year OCC Cycle.

Diplomates with a CAQ will be required to pass their diagnostic radiology OCC cognitive exam in order to be eligible to take the CAQ OCC cognitive exam.

The OCC cognitive exam will be offered twice per year (Spring and Fall.) Specific exam dates will be available on the AOBR website no later than 9 months prior to the exam.

Component 4 - Practice Performance Assessment and Improvement

Each diplomate will be required to successfully complete a qualified OCC practice performance assessment every three (3) years or a total of three (3) projects per 10 year cycle <u>using the diplomates own patient data</u>. Patient data must be gathered within the three (3) year project period.

Due to the phase-in timelines that the Board has developed, diplomates should review the timeline specific to their certificate expiration year in order to determine project completion dates. This will provide the diplomate with information relating to when projects are scheduled to begin and when they are due.

The goal of the practice performance component is to demonstrate performance improvement in radiological knowledge and skills, including assessment activities of AOA specific core competencies. Each diplomate will be required to demonstrate that they can assess the quality of radiological care they provide compared to peers and national benchmarks and then apply the best evidence or consensus recommendations to improve that radiological care using follow-up assessments.

A diplomate must select a project from one of the following categories:

- Patient Safety
- Accuracy of Interpretation
- Practice Guidelines & Technical Standards
- Referring Physician Surveys
- Reporting Timeliness

Diplomates may participate in projects on an individual basis or within a group. If participating in a group setting, the diplomate must be able to attest to the number of their personal data points included in the group data.

Diplomates will be required to submit their project data to the AOBR approved third party vendor, which the Board will review and respond to the diplomate indicating approval status of their project. A template of the project submission form will be available on the AOBR website at all times for diplomates to use as a guide in the data collection process.

The Board will randomly audit OCC participants. It is incumbent upon the physician to retain the source data of each of his/her projects in the event of an audit.

<u>Component 5</u> – Continuous AOA Membership

Each diplomate will be required to maintain continuous and uninterrupted membership in the American Osteopathic Association (AOA). Membership status will be verified with the AOA on an annual basis.

Section 2. Enrollment/Application Process

All diplomates who wish to participate in the OCC process must submit an OCC enrollment form along with an enrollment fee. Enrollment forms may be found on the AOBR website. In addition, participating diplomates will be required to pay an annual OCC fee.

The Board will offer a 50% reduced OCC annual fee for physicians in fellowship training and physicians in the military. Supporting documentation must be submitted to the Board in order to receive this reduced fee.

Section 3. Non-Clinical Physicians

Non-clinical physicians are defined as diplomates who have no direct patient contact or clinical care. To maintain board certification under OCC, physicians must complete all components of the OCC process, but will be allowed to submit a PPA project that relates to their current job description. This project must be approved by the Board in order for the diplomate to proceed in the data collection process.

Non-clinical categories include:

- A. Academic/Administrative/Research Physicians
- B. Retired Physicians
- C. Unemployed Physicians

Diplomates who consider themselves non-clinical must contact the Board to declare this status. Upon reentry into clinical practice, physicians must notify the Board within thirty (30) days following return to patient care.

Section 4. Reporting

OCC participation information will be included on all physician profile reports through the American Osteopathic Information Association (AOIA.) The AOIA provides primary source verification for all osteopathic board certification, which is used by hospitals, state licensing boards, insurance companies, etc.

Diplomates who are required to show OCC compliance information to their employer, etc. may contact the Board for an OCC compliance report. The Board will provide compliance reports until the official launch of the AOA's "My OCC" platform that will allow diplomates to access this information at any time.

Section 5. Certificates

Upon successful completion of all five (5) OCC Components, the Board will provide the diplomate with a new certificate that will be valid for ten (10) years. Diplomates will be required to initiate a new ten (10) year OCC cycle and must continue compliance for their new OCC cycle.

Section 6. Non-Time-Limited Certificate Holders

Participation in the OCC process for osteopathic physicians holding a non-time-limited certificate (non-expiring, non-dated, lifetime) is voluntary. Failure to meet requirements in OCC will not impact the physicians original certification. However, non-time-limited physicians will be required to maintain standing AOA requirements for maintaining their certification outside of OCC.

Physicians holding a non-time-limited primary certification and a time-limited CAQ certification must participate in the OCC process for the CAQ subspecialty area in order to maintain their CAQ certificate.

Section 7. Dually-Certified Physicians (AOA and ABMS Certifications)

Physicians participating in the ABMS Maintenance of Certification (MOC) process may submit their practice performance assessment activities completed under MOC to the Board in order to fulfill their OCC Component 4 requirements. Project data must be submitted using the AOBR approved third party vendor.

Section 13. Fellowship Training Exemption

Physicians who begin fellowship training are exempt from Component 4 requirements during the training period only. The Board will also offer physicians in fellowship training a 50% reduced OCC annual fee during their training (maximum of one year.)

Section 14. OCC Reentry Process

The AOBR will follow the procedures regarding OCC Reentry in accordance with Article XII of the *Policies and Procedures of the BOS*.