

## **AOBNMM Initial Written Exam Detailed Blueprint**

### **Assessment and Diagnosis of Conditions Presenting with Neuromusculoskeletal Symptoms (1.\*)**

- 1.1 Ordering and interpreting ancillary diagnostic tests (e.g., laboratory, imaging, electrodiagnostics)
- 1.2 Describe functional anatomy associated with disorders presenting with neuromusculoskeletal symptoms (e.g. structure-function relationships, vascular and lymphatic drainage, nervous innervation)
- 1.3 Assess and diagnose somatosomatic, somatovisceral, viscerosomatic, viscerovisceral reflexes (e.g. pain referral patterns of organ and musculoskeletal dysfunction)
- 1.4 Assess and diagnose Chapman's Reflexes
- 1.5 Assess and diagnose acute and chronic generalized joint or myofascial pain (e.g. Lyme's disease, polymyalgia rheumatica, fibromyalgia)
- 1.6 Assess and diagnose disorders presenting with shoulder pain
- 1.7 Assess and diagnose disorders presenting with elbow pain
- 1.8 Assess and diagnose disorders presenting with wrist pain
- 1.9 Assess and diagnose disorders presenting with hand pain
- 1.10 Assess and diagnose disorders presenting with hip pain
- 1.11 Assess and diagnose disorders presenting with knee pain
- 1.12 Assess and diagnose disorders presenting with ankle pain
- 1.13 Assess and diagnose disorders presenting with foot pain
- 1.14 Assess and diagnose disorders presenting with head and facial pain
- 1.15 Assess and diagnose disorders presenting with cervical pain
- 1.16 Assess and diagnose disorders presenting with thoracic/rib pain
- 1.17 Assess and diagnose disorders presenting with lumbar pain
- 1.18 Assess and diagnose disorders presenting with sacral and pelvic pain
- 1.19 Assess and diagnose disorders presenting with visceral pain
- 1.20 Assess and diagnose disorders presenting with neurogenic pain (e.g. neuralgia, neuropathy, radiculopathy, plexopathy)
- 1.21 Assess and diagnose myopathies and neuromuscular disorders
- 1.22 Assess and diagnose postural, overuse, and muscle imbalance disorders (e.g. scoliosis, short leg, upper and lower cross syndrome)

### **Diagnosis and Osteopathic Manipulative Treatment of Somatic Dysfunction (2.\*)**

- **Diagnosis of Somatic Dysfunction**
  - 2.1 Diagnosis of upper extremity somatic dysfunction – shoulder
  - 2.2 Diagnosis of upper extremity somatic dysfunction – elbow
  - 2.3 Diagnosis of upper extremity somatic dysfunction - wrist
  - 2.4 Diagnosis of upper extremity somatic dysfunction - hand
  - 2.5 Diagnosis of lower extremity somatic dysfunction - hip
  - 2.6 Diagnosis of lower extremity somatic dysfunction - knee
  - 2.7 Diagnosis of lower extremity somatic dysfunction - ankle
  - 2.8 Diagnosis of lower extremity somatic dysfunction - foot

- 2.9 Diagnosis of head somatic dysfunction - craniofacial
- 2.10 Diagnosis of cervical somatic dysfunction
- 2.11 Diagnosis of thoracic and rib somatic dysfunction
- 2.12 Diagnosis of lumbar somatic dysfunction
- 2.13 Diagnosis of pelvic somatic dysfunction
- 2.14 Diagnosis of sacral somatic dysfunction
- 2.15 Diagnosis of abdominal somatic dysfunction
  
- **Osteopathic Manipulative Treatment Techniques and Principles**
  - 2.16 Contraindications to OMT
  - 2.17 Perform Myofascial Release (direct and indirect) Techniques
  - 2.18 Perform Muscle Energy Techniques
  - 2.19 Perform Counterstrain
  - 2.20 Perform Still Technique
  - 2.21 Perform Facilitated Positional Release
  - 2.22 Perform High Velocity Low Amplitude Techniques
  - 2.23 Perform Balanced Ligamentous Tension Technique
  - 2.24 Perform Ligamentous Articular Strain
  - 2.25 Perform Osteopathic Cranial Manipulative Medicine
  - 2.26 Perform Visceral Manipulation
  - 2.27 Perform Articular Techniques
  - 2.28 Perform Soft Tissue Techniques
  - 2.29 Perform Lymphatic Techniques
  - 2.30 General principles of osteopathic manipulative treatment

**Comprehensive Osteopathic Management of Conditions Presenting with Neuromusculoskeletal Symptoms (pharmacologic, injections, surgical, and lifestyle treatment approaches) (3.\*)**

- 3.1 Integrate osteopathic philosophy into clinical practice (e.g. 5 osteopathic treatment models)
- 3.2 Consider indications and contraindications for different therapeutic options, including surgery, when developing a treatment plan
- 3.3 Perform neuromusculoskeletal injection procedures (e.g. joints, ligaments, trigger points, nerve blocks)
- 3.4 Pharmacological management of acute and chronic musculoskeletal pain symptoms (e.g., opioids, NSAIDs, acetaminophen)
- 3.5 Management of neurogenic pain (e.g. neuralgia, neuropathy, radiculopathy, plexopathy)
- 3.6 Management of myopathies and muscular disorders
- 3.7 Management of acute and chronic soft tissue pain syndromes (e.g. overuse disorders, myofascial pain syndrome, fibromyalgia)
- 3.8 Management of rheumatologic disorders
- 3.9 Management of orthopedic disorders
- 3.10 Management of postural, overuse, and muscle imbalance disorders (e.g. bracing, orthotics, physical rehabilitation including exercise and stretching)

- 3.11 Provide nutrition and lifestyle counseling (e.g. dietary and supplements recommendations, functional medicine, weight management)

#### **OMM Considerations for Special Populations (4.\*)**

- 4.1 Assess and treat acute and chronic somatic dysfunction in pediatric patients
- 4.2 Assess and treat somatic dysfunction in hospitalized patients
- 4.3 Assess and treat somatic dysfunction in obstetric patients
- 4.4 Assess and treat somatic dysfunction in geriatric patients (i.e., 65 years or older)
- 4.5 Assess and treat somatic dysfunction in post-surgical patients

#### **Professional Roles and Responsibilities (5.\*)**

- 5.1 Indications for patient referral for psycho-therapeutic treatments (e.g., cognitive and behavioral therapies, integration of behavioral and drug therapies, bio-feedback techniques, sleep disorder assessment)
- 5.2 Indications for patient referral for rehabilitative services (e.g., PT, OT, Speech Therapy)
- 5.3 Indications for patient referral for nutritional counseling
- 5.4 Indications for patient referral for interventional pain procedures (e.g., epidural steroid injection, SI joint injections, facet blocks)
- 5.5 Indications for patient referral to other medical specialties (e.g. orthopedic, rheumatologic, oncologic, primary care, emergency management)
- 5.6 Perform and maintain appropriate medical documentation and coding in ONMM practices (e.g. documentation and coding for evaluation and management, OMT, and injections)
- 5.7 Maintain appropriate boundaries with patients
- 5.8 Demonstrate organizational, communication, ethical, interpersonal, and interdisciplinary collaborative skills

### Initial Written Exam

CONTENT	PERCENT RANGE ON EXAM
Assessment and Diagnosis of Conditions Presenting with Neuromusculoskeletal Symptoms	29%
Diagnosis and Osteopathic Manipulative Treatment of Somatic Dysfunction	43%
Comprehensive Osteopathic Management of Conditions Presenting with Neuromusculoskeletal Symptoms	13%
Osteopathic Manipulative Medicine Considerations for Special Populations	5%
Professional Roles And Responsibilities	10%