A Message from the Executive Director

Is this our new NORMAL? Social distancing. Shelter-in-place. Essential workers. All terms that are now ingrained in our minds.

As you travel to stores or other necessary places, you see others looking at each other, suspecting that they have the disease. The allergy sufferers, such as myself, go into the stores with their guard up for the fear of coughing or sneezing. Is someone going to hurl unacceptable comments at me? Will I be asked to leave the store, or even be denied service? My face is covered and so are my hands with gloves. Trying to practice the proper techniques. The new normal has me now shopping with someone that can pay for my items if the cough hits or if I happen to smell flowers, which are great outdoors, but inside will set off a sneezing fit.

Has this stopped me? No! I keep going and striving to make life better, no matter the current situation.

Here at the Academy, we are working reduced hours and working from home as well. Masks have been issued to all staff. When we come into the office, we stay six feet apart. We have Zoom meetings with staff at least three times a week, if not more. All courses that were scheduled to take place between April and June of this year have been cancelled or rescheduled. We are exploring options to offer online training whenever possible.

Indiana has lifted its stay at home order and the state is preparing to reopen in five phases. What does this mean for the Academy?

We will have part of the staff in the office and some staffers will continue to work from home. The main entrances to the office building are now equipped with touchless entry. Elevator use is limited to two people at a time. That should be interesting with 11 floors and a nursing school in our building. Management has increased the cleaning schedule and they deep clean a lot more often. Stairwells have been designated as either up only or down only. In case of an emergency, you can use both. That made me feel better.

As we adjust to a new normal, we continue to support Academy members and celebrate the positive developments within our organization.

New AAO Leadership
During the AAO Convocation in March, members elected new leaders that will move the Academy forward, harnessing the commitment and expertise within the membership to continue providing excellent education and mentorship. Their collective vision is to strengthen the role of the Academy to meet the current challenges in academic, economic, regulatory and organizational management needed to promote and maintain the osteopathic profession. You can see the list of AAO leaders on the AAO website at academyofosteopathy.org/board-of-trustees.

Student American Academy of Osteopathy Elections
The Student American Academy of Osteopathy (SAAO) also elected new national and regional leaders. SAAO operates under the guidance of the American Academy of Osteopathy for the purpose of helping osteopathic medical students 1) acquire better understanding of osteopathic principles, theories, and practice, and 2) improve public awareness of osteopathic medicine so that the community may better take advantage of the benefits provided by the complete healthcare concept of osteopathic medicine.

(continued on Page 2)
Executive director’s message
(continued from Page 1)

Congratulations to the following newly elected SAAO Executive Council!

- Chair: Marija Rowane, OMS III, Ohio University Heritage College of Osteopathic Medicine, Athens Campus
- Vice Chair: Emily Willmann, OMS III, Des Moines College of Osteopathic Medicine
- Immediate Past Chair: Danielle Dukes, OMS V, Ohio University Heritage College of Osteopathic Medicine, Athens Campus
- Secretary/Treasurer: Casey Koth, OMS III, Ohio University Heritage College of Osteopathic Medicine, Athens Campus
- National Coordinator: Valerie Daniels, OMS III, Edward Via College of Osteopathic Medicine, Virginia Campus
- National Undergraduate Fellows Association Liaison: Jennifer Markwood, OMS V, Kentucky College of Osteopathic Medicine

The SAAO regional coordinators are primarily responsible for the pre-SAAO initiative. Pre-SAAO is the undergraduate division of the Student American Academy of Osteopathy. Regional coordinators are to work with SAAO chapters in their region to help identify local undergraduate institutions and establish relationships with undergraduate students interested in pursuing a career in medicine.

In addition, regional coordinators are instrumental in improving overall collaboration between local SAAO executive boards. This may include developing and distributing a regional newsletter that highlights various outreach and events, sharing resources, holding regional online meetings, or organizing a regional “mini Convocation.”

If you would like to be involved in promoting osteopathy in your region, please contact the Immediate Past Chair at saopastchair@gmail.com.

Congratulations to the following newly elected SAAO regional coordinators!

- Central Regional Coordinator: Ashley Ewert, OMS IV, Des Moines University College of Osteopathic Medicine
- Northeastern Regional Coordinator: Michael Castellano, OMS III, New York Institute of Technology College of Osteopathic Medicine
- Midwestern Regional Coordinator: Kaitlyn Thomas, OMS III, Lake Erie College of Osteopathic Medicine, Seton Hill Campus
- Western Regional Coordinator: Phil Zeek, OMS III, Idaho College of Osteopathic Medicine
- Southeastern Regional Coordinator: Jonathan Carbungco, OMS III, Alabama College of Osteopathic Medicine
- Mid-Atlantic Regional Coordinator: Kaitlyn Benson, OMS III, Edward Via College of Osteopathic Medicine (VCOM) – Carolinas

Developing CME for COVID-19

In the last month, the Academy has partnered with the American Osteopathic Association (AOA) to offer two new online learning CME activities focused on treating COVID-19 patients. Both courses are free to members and non-members; however, you do need an AOA account/number to logon to AOA Online Learning. If you do not have an account, you can create one for free. The first, launched on April 5, has been completed by 1,295 individuals as of May 12, with more than 50% gaining skills/information for their area of practice. The second course was launched on May...
11, and early reviews state that it is both impactful and informative.

**OMM Techniques for COVID-19**

The first offering reviews applicable OMM techniques for optimizing pulmonary function in COVID-19 or suspected COVID-19 patients. The e-learning module, titled, *Osteopathic Manipulative Medicine (OMM) Techniques Addressing Respiratory Symptoms of COVID-19*, will provide a refresher in applicable OMM techniques. This patient-centered CME will offer 1.0 AOA 1-B credit or 1.0 AMA PRA Category 1 Credit. To learn more and enroll, visit academyofosteopathy.org/omm-covid-19

**Frontline Perspectives: COVID-19 & OMM**

The second offering puts you up close and personal with first-hand accounts from the frontlines on what it is like to perform OMT on a COVID-19 patient, the tragedy of watching someone pass away from this virus alone, and the joy of seeing a recovered patient being released. Hugh M. Ettlinger, DO, FAAO, FCA and OMM residency director at Saint Barnabas Hospital in the Bronx, New York and his colleagues share surprising insights from treating COVID-19 patients with OMM. Participants can earn 0.75 AOA 1-B credit or 0.75 AMA PRA Category 1 Credit. To learn more and enroll, visit academyofosteopathy.org/frontlines-perspective-omm-covid-19.

**We Must Not Be Defeated**

In the poem, “Still I Rise,” Maya Angelou writes, “Just like moons and like suns, / With the certainty of tides, / Just like hopes springing high, / Still I’ll rise.”

The ability to cope with adversity is a strong theme throughout “Still I Rise.” “All my work, my life, everything is about survival,” the poet once stated. “All my work is meant to say, ‘You may encounter many defeats, but you must not be defeated.’ In fact, the encountering may be the very experience which creates the vitality and the power to endure.”

Although we are currently facing adversity, uncertainty, and some defeats, we must still rise to meet this extraordinary and terrible occasion in our lifetimes, to not be defeated, and remain hopeful that our hard work and sacrifices will pay off in saving more lives.

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**2020-21 SAAO Executive Council**

Chair: Marija Rowane, OMS III; Vice Chair: Emily Willmann, OMS III; Immediate Past Chair: Danielle Dukes, OMS V; Secretary/Treasurer: Casey Koth, OMS III; National Coordinator: Valerie Daniels, OMS III; National Undergraduate Fellows Association Liaison: Jennifer Markwood, OMS V.

**2020-21 SAAO Regional Coordinators**

Central Region: Ashley Ewert, OMS IV; Northeastern Region: Michael Castellano, OMS III; Midwestern Region: Kaitlyn Thomas, OMS III; Western Region: Phil Zeek, OMS III; Southeastern Region: Jonathan Carbungco, OMS III; Mid-Atlantic Region: Kaitlyn Benson, OMS III.
Young Investigator Initiative Grant Mentoring & Career Development Program

**Deadline for applications: July 15, 2020**

The United States Bone and Joint Initiative (USBJI) is dedicated to raising public awareness and to increasing research of musculoskeletal diseases in the United States. The burden of these diseases is high, and to reduce this through increased knowledge and improvements in care, a higher level of sustained research is needed.

The USBJI and Bone and Joint Canada offer a program with grant mentoring workshops to provide early-career basic and clinical investigators an opportunity to work with experienced researchers in our field to assist them in securing funding and other survival skills required for pursuing an academic career.

Sixty-one percent (61%) of participants of the Young Investigator Initiative (YII) have been awarded more than $500 million in grants since entering the program.

The YII is now open for the next round of applications from young investigators who seek funding to undertake research studies on musculoskeletal health questions and pursue a career in research. The YII provides early-career investigators an opportunity to work with experienced researchers in our field to assist them in securing funding and other survival skills required for pursuing an academic career.

Participants consider this program instrumental to their success. They rate highly the one-on-one mentoring with experienced researchers, the opportunity for interdisciplinary and peer-to-peer exchange, and collaborations established during workshops.

YII is open to promising junior faculty, senior fellows or post-doctoral researchers nominated by their department or division chairs seeking to pursue a career in clinical or basic research. It is also open to senior fellows or residents who are doing research and have a faculty appointment in place or confirmed. Basic and clinical investigators, without or with training awards, are invited to apply. Investigators selected to take part in the program attend two workshops, 12-18 months apart, and work with faculty between workshops to develop their grant applications. The unique aspect of this program is the opportunity for attendees to maintain a relationship with mentors until their application is funded.

Apply online at usbji.org/programs/yii/application-information.

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**15 Month Course in Classical Homeopathy for Osteopathic Physicians**

**September 2020 to December 2021**

Hollistic Family Medicine, LLC

**15 Month Course: Classical Homeopathy for Osteopathic Physicians**

Instructor: Domenick J. Masiello, DO, DHy, C-SPOMM

Hilton Garden Inn, Danbury CT

120 credits of AOA Category 1-B CME anticipated

Learn more and register at: drmasiello.com/post-graduate-course

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**Refund policy update for the AAO 2020 Convocation:**

In accordance with our cancellation policy, individuals and organizations will be able to apply 50 percent of their fees to the AAO’s 2021 Convocation, per our usual policy. This year, in light of the COVID-19 pandemic, the AAO will issue a credit to your online account that can be used for AAO membership dues, books, courses and online materials.

**Survey on Payment Rates**

Watch your email in the coming weeks, as the Academy plans to distribute a survey asking you a few questions regarding payment rates to determine if payment rates for physician services and procedures from commercial medical insurance payers in your state are equal to, less than or greater than Medicare payment rates.
Three Members Earn Fellowship in the AAO

During the AAO’s president’s banquet on Saturday, March 14, Fellowship in the AAO was conferred on three Academy members: Michael D. Lockwood, DO; Jonathan W. Torres, DO; and Katherine A. Worden, DO. Fellowship in the AAO (FAAO) is an earned postdoctoral designation conferred on Academy members who have demonstrated outstanding understanding and execution of osteopathic principles.

Dr. Lockwood, Dr. Torres, and Dr. Worden completed the two-year process, which includes completing a thesis, three case histories, an oral examination and a practical examination administered by the Committee on Fellowship in the AAO, prior to the AAO’s 2020 Convocation. The candidates were honored at the FAAO dinner on Friday, March 13, and on Saturday, the committee’s chair, David B. Fuller, DO, FAAO, officially conferred fellowship on them during the banquet.

FAAO candidates must be sponsored by active FAAO members. Richard A. Feely, DO, FAAO, FCA, sponsored Dr. Lockwood; Millicent King Channell, DO, FAAO, sponsored Dr. Torres; and Sandra Sleszynski, DO, FAAO, sponsored Dr. Worden.

Topics for the candidates’ theses included improving respiratory dynamics in obstructive sleep apnea, exploring the mechanics of proprioceptive coherence, and physiology of somatic dysfunction. The case histories covered a range of complaints, including arthritis, chronic lower back pain from pelvic floor dysfunction, and ankylosing spondylitis in a patient with Crohn’s disease. FAAOs are encouraged to submit these manuscripts for publication.

AAO members interested in applying for fellowship in the Academy can obtain the application and explanatory materials from the AAO website at academyofosteopathy.org/fellowship-program, or they can contact the committee’s staff liaison, Debbie Cole, at (317) 879-1881, ext. 215, or at DCole@academyofosteopathy.org.

FAAO candidates scheduled for induction in March 2021 should note these upcoming deadlines:

- May 24, 2020—Final draft of thesis and third case history due.
- July 24, 2020—Final deadline for edits and corrections to all documents.
- Oct. 1, 2020—Nonrefundable test fee of $1,000 due.
- Oct. 10, 2020—Oral and practical examinations will be conducted between 8 a.m. and 5 p.m. at the AAO’s office in Indianapolis.
- March 20, 2021—Induction of approved candidates at Convocation in Dallas, Texas.
OMM Techniques for COVID-19

New CME E-Learning Opportunity
The American Academy of Osteopathy (AAO) has partnered with the American Osteopathic Association (AOA) to offer an online learning activity to help you review applicable OMM techniques for optimizing pulmonary function in COVID-19 or suspected COVID-19 patients.

The e-Learning module, titled, “Osteopathic Manipulative Medicine (OMM) Techniques Addressing Respiratory Symptoms of COVID-19” will provide a refresher in applicable OMM techniques.

Free for all members and non-members, this patient-centered CME will offer 1.0 AOA 1-B credit or 1.0 AMA PRA Category 1 Credits™.

After completing this course, learners will be able to:
• Summarize OMM techniques appropriate for patients with respiratory illnesses.
• Identify OMM techniques suitable for patients with respiratory symptoms based on osteopathic principle and past publications.
• Locate practical resources on appropriate use of osteopathic manipulative medicine for their patients with respiratory illnesses.

Learn more and enroll online today at academyofosteopathy.org/omm-covid-19.
Frontline Perspectives: COVID-19 and OMM

CME E-Learning Opportunity - Treating COVID-19 Patients Using OMM

The American Academy of Osteopathy (AAO) has partnered with the American Osteopathic Association (AOA) to offer a new online learning activity with first-hand accounts from the frontlines.

The e-Learning module, titled, “Frontline Perspectives On Treating COVID-19 Patients Using OMM” features Hugh M. Ettlinger, DO and OMM residency director at Saint Barnabas Hospital in the Bronx, New York and his colleagues sharing surprising insights from treating COVID-19 patients with OMM.

Free for all members and non-members. Participants can earn 0.75 AOA 1-B credit or 0.75 AMA PRA Category 1 Credit through this activity.

After completing this activity, learners will be able to:

- Identify common physical findings being seen in COVID-19 patients undergoing OMM.
- Summarize modifications of OMM techniques appropriate for patients with COVID-19.
- Discuss the physical and emotional burdens on the clinicians treating COVID-19 patients.

Learn more and enroll online today at academyofosteoathy.org/frontlines-perspective-omm-covid-19.
SAAO 2020 Convocation Events Shine

The student program at the 2020 Convocation, “Embracing Integration: Exploring the Limitless Applications of Osteopathy,” was a big success thanks to our physician presenters, the AAO staff, and our many sponsors.

A. Hollis Wolf Case Presentation

The A. Hollis Wolf Case Presentation Competition was strong again this year. Many thanks to all the students who competed this year. Congratulations to the following students for placing in the top five!

- **First place**: Kevin Marfiak, OMS III, OPP Fellow, Nova Southeastern University, Dr. Kiran C. Patel College of Osteopathic Medicine – “Preventing Plagiocephaly: A Hands-on Approach”
- **Second place**: Juliana Young, OMS I, Burrell College of Osteopathic Medicine - “Take a Deep Breath”
- **Third place**: Calley Gober, OMS III, Chicago College of Osteopathic Medicine - “A Mountain Top Moment with Sacral Rock”
- **Forth place**: Ryan McMunn, OMS IV, OMM Fellow, Des Moines University College of Osteopathic Medicine – “An Osteopathic Approach to Vocal Dysfunction”
- **Fifth place**: George Raum, OMS IV, Philadelphia College of Osteopathic Medicine – “What is that Mysterious Clicking Noise? Newborn TMJ”

5K Fun Run

Thank you to everyone who braved the early hours on Thursday, March 12, to participate in the SAAO 5K Fun Run. Special thanks to our sponsor, Indiana Timing, for making this event possible.

Chapter Awards

SAAO chapters compete to see who can earn the most points each year for osteopathic outreach and community service. Congratulations to the following SAAO chapters for winning Chapter Awards:

- **Chapter of the Year** (accompanied by a $250 grant and a box of SAAO t-shirts): University of North Texas Health Science Center Texas College of Osteopathic Medicine (UNTHSC-TCOM)
- **Outreach Chapter of the Year**: University of North Texas Health Science Center Texas College of Osteopathic Medicine (UNTHSC-TCOM)
- **Most Improved Chapter** (accompanied by a $250 grant): Idaho College of Osteopathic Medicine (ICOM)

Silent Auction

Many thanks to everyone who supported our silent auction at Convocation. A big shout out to the awesome students who volunteered their time as well. We were able to raise over $3,000 because of your efforts. These funds will be used to support activities and events at the 2021 Convocation in Dallas, Texas. We look forward to seeing you there!

Larkin Palm Springs ONMM 2 and ONMM 3 Residency Spots Available

Larkin Palm Springs has achieved ACGME accreditation for ONMM and has spots available for ONMM 2 and ONMM 3.

This program integrates Osteopathic Neuromusculoskeletal Medicine with many sorts of interventional and integrative techniques for management of muscular and skeletal disorders. There are two hospitals to rotate through for inpatient consultations, the typical Sports, Ortho, Neuro, Rheum, PM&R, Rads and/or Pain mandatory rotations as well as four ONMM Clinics throughout Palm Beach, Broward and Dade Counties in South Florida.

Four hour weekly didactics headed by each of our three NMM boarded doctors, one FAAO. Options are available for elective time for Ultrasound diagnostic and therapeutic injection guidance, Fluoroscopic interventional spine treatment, and integrative medicine and injection techniques.

Other options include out time for Acupuncture training when available.

Come join the well-rounded ONMM team at Larkin Hospital Campuses for your journey into the Osteopathic world of Neuromusculoskeletal Medicine. See you in sunny Florida!

Steven Licata, DO, C-FM/OMT, C-NMM; Program Director, ONMM, Larkin Palm Springs Hospital, Hialeah

David Joyce, DO, C-FM/OMT, C-NMM, Board Eligible-Pain Med

John Maarouf, DO, C-FM/OMT, C-Sports Medicine

Joel D. Stein, DO, FAAO, FAOASM, FACOFP, C-Pain Med; Medical Director, Institute for Non-Surgical Orthopedics, Ft. Lauderdale, Delray, Hollywood, S. Miami, Hialeah

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954-563-2707
Osteopathic Education Services at Convocation 2020

I would like to take this moment to personally thank all of the individuals, DOs and AAO staff alike, who volunteered their valuable time to help make the Osteopathic Education Service (OES) a huge success at the AAO’s 2020 Convocation in Colorado Springs, Colorado. This year we had a great volunteer turnout. It was good seeing so many new faces. THANK YOU!!

OES volunteers provide personalized hands-on demonstrations of osteopathic manipulative medicine. It is a unique program that provides the opportunity for DOs to be seen and evaluated by their fellow colleagues. For many of them, this is the one and only time they get to be on the other side of the treatment table. Although it is an awesome teaching opportunity, OES’s main goal is to make it easier for more DOs to be seen and still provide education opportunities for students and fellow DOs alike. Thank you again to those who volunteered. I respectfully ask that you continue to support our program with your time and dedication in the upcoming years. Bring a fellow colleague to help out next time you volunteer!

The following 35 volunteers provided 164 educational demonstrations during the 2020 Convocation:

Elizabeth L. Abbas, DO
Nathan Armerding, DO
Keith Barbour, DO
Juanita M. Brown, DO
Boyd R. Buser, DO, FACOFP dist.
Millicent King Channell, DO, FAAO
John C. Coppinger, DO
Joshua H. Dalton, DO
Jay B. Danto, DO
Brian F. Degenhardt, DO
Nate F. Delisi, DO, BA
Hannah M. Fine, DO
William M. Foley, DO, MSc
Stefan Hagopian, DO, FAAO
Kendi L. Hensel, DO, PhD, FAAO
Annette E. Hulse, DO
Paul K. Hume, DO
Natalie Hyppolite, DO
Richard W. Koss, DO
Robert J. Klein, DO
Judith L. Lewis, DO, FCA, FAAO
Henry J. Lok, DO
Daniel Lopez, DO
Daniel A. McCarthy, DO
Ehrin E. Parker, DO
M. Shane Patterson, DO
Andrew I. Schwartz, DO
Sandra L. Sleszynski, DO, FAAO
Charles J. Smutny, DO, FAAO
James C. Sullivan, DO
John P. Tortu, DO
Eren Ural, DO
Ralph C. (Clay) Walsh, Jr., DO
Damon M. Whitfield, DO
Sheldon C. Yao, DO, FAAO

Please accept my sincerest apology if I have left your name off this list.

Volunteer physicians earn 0.5 credit of AOA Category 1-B continuing medical education for each demonstration they provide. They also are entered in a drawing to win complimentary registration for the next year’s Convocation. This year, Ehrin Parker, DO, of Durango, Colorado won the drawing. Dr. Parker provided 14 demonstrations at the 2020 Convocation.

Special thanks also to our dedicated AAO staff - Sherri L. Quarles, Bev Searcy, Debbie Cole, and Gennie Watts, who helped provide support to our service. I need to recognize a very special person who we could not have managed without. Mrs. Loretta Delisi, wife of Nate Delisi, DO, volunteered her time and often single-handedly ran OES. She played a big part in our success. Thank you, Loretta!

Fraternally yours,

Clay Walsh, DO
Chair, Osteopathic Education Service Committee
LBORC-NUFA Poster Presentation Results

The Louisa Burns Osteopathic Research Committee (LBORC) and the National Undergraduate Fellows Association (NUFA) hosted their annual poster presentation on Thursday, March 12, during the AAO’s annual Convocation at The Broadmoor in Colorado Springs, Colorado.

Of 95 submitted abstracts, the committee accepted 58 submissions and 44 posters were presented by students, residents and practicing physicians in the following three categories: case study, education and public health, and original research.

The table below lists the winning authors and poster titles for the 2020 presentations. On behalf of Kimberly J. Wolf, DO, chair of the LBORC Research Poster Subcommittee, the poster judging session was supervised by LBORC Vice Chair Kyle K. Henderson, PhD; and LBORC member Leslie M. Ching, DO; with the following individuals volunteering to judge the presentations. The committee appreciates each of their contributions in making this a successful event: Christina Allison Bartoni, OMS; Marta Bringhurst, DO; Simone Childs-Walker; Lisa R. Chun, DO, MS, FNAOME; Michael A Conte, DO; Jay B. Danto, DO; Brian F. Degenhardt, DO; Robin R. Dyer, DO; Frank Patrick Goodman, DO, MS; Kurt P. Heinking, DO, FAAP; Jane C. Johnson, MA; James R. Keene, PhD, DO; Albert J. Kozar, DO, FAOASM, R-MSK; Bryan Le, DO; Yein Lee, DO, MMS; Mindy Chilman McComb, DO; Angelique C. Mizera, DO; Barbara Ann Moss, DO; James Murphy, DO; Sayward Louise Nelson, OMS; Mukarram Razvi, DO; Charles J. Smutny III, DO, FAAP; A. Hope Tobey, DO; Jonathan W. Torres, DO, FACOFP; and Samuel Hirsch Werner, DO.

The Foundation for Osteopathic Research and Continuous Education (FORCE) has generously provided sponsorship funds for the LBORC-NUFA Research Poster Presentation sessions during the AAO’s Convocation since 2015. The AAO, LBORC and NUFA members appreciate FORCE’s support in the growth of this educational experience.

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<th>Category</th>
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<tr>
<td>Student—Case study</td>
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<tr>
<td>First place</td>
<td>An Irregularly Fast Approach: Osteopathic Treatment of Inappropriate Sinus Tachycardia</td>
<td>Nikola L. Fellows, OMS II; Phillip A. Wong, DO; and Adrienne M. Kania, DO, FAAP</td>
<td>Burrell College of Osteopathic Medicine (BCOM)</td>
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<td>Second place</td>
<td>Sphenobasilar Synchondrosis Dysfunction as a Biomechanical Etiology of Post-Concussion Alice in Wonderland Syndrome</td>
<td>Nicholas R. Wawrzyniak, OMS III, MS; Emma S. Poff, SPT; and Nathan Patrick Widboom, DO</td>
<td>Nova Southeastern University Kiran C. Patel College of Osteopathic Medicine (NSU-KPCOM)</td>
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<tr>
<td>Third place tie</td>
<td>Application of Osteopathic Manipulative Medicine in the Management of Primary Dysmenorrhea: A Case Study</td>
<td>Erum Ahmed, OMS III; Reem Abu-Sbaih, DO; and Sheldon C. Yao, DO, FAAP</td>
<td>New York Institute of Technology College of Osteopathic Medicine (NYIT-COM)</td>
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<tr>
<td>Third place tie</td>
<td>Silent But Chronic: The Debilitating Disease of Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS) and the Power of OMT</td>
<td>Gabriela Teixeira, OMS III; Gabrielle Ann Mc Dermott, OMS III; Robin Mata, OMS III; Patrick Eugene Barry, DO; and Irina Rozenfeld, MSHS, MSN, APRN</td>
<td>NSU-KPCOM</td>
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(continued on Page 12)
AN IRREGULARLY FAST APPROACH: OSTEOPATHIC TREATMENT OF INAPPROPRIATE SINUS TACHYCARDIA
Nikola Fellows, OMS-II, Phillip Wong, DO, CSPOMM, Adrienne Kania, DO, FAAO
Burrell College of Osteopathic Medicine
Las Cruces, New Mexico

Introduction:
Inappropriate sinus tachycardia is a rare, yet important clinical entity, characterized by a heart rate greater than 100 BPM at rest, independent of stress or exertion. It often accompanies conditions such as heart disease, anxiety, and autoimmunity, and can have significant comorbidities. Recognizing this, an evident need for appropriate treatment. The mainstay of treatment for this condition is medications, specifically beta-blockers, which have a high incidence of noncompliance and adverse effects. The complications of long-term medication use, such as hypotension, bradycardia, and fatigue, are a leading cause for patients to discontinue their medications. Other options such as cardiac interventions are invasive and carry significant risks.

Initial Presentation:
A 17 year old white, highly athletic female complained of episodes of racing heart, throbbing, anxiety, and intense headache. The patient also reported episodes of hot flashes with flushing and an increasing heartrate (9/10 on a 1-10 pain scale), along with numbness and tingling down the left side of her face.

Hypothesis
Cranial somatic dysfunctions may be causing/contributing to the patient’s symptoms of AITS, who would benefit from OMT in addition to standard of care concomitant therapy.

Conclusions
Findings suggest cranial dysfunction may be the cause of symptoms that are not responding to conventional treatment. Further studies are needed to evaluate the efficacy of cranial manipulation in the treatment of AITS.

Learning Objectives
- Recognize cranial somatic dysfunction as a possible biomechanical cause of prolonged post-concussive symptomatology

References & Acknowledgements
- Agur AMR, Dalley AF. Grant’s: Art & Physiology. 5th ed. Lippincott Williams & Wilkins; 2006.

Congratulations to Nicola Fellows, OMS-II; Phillip Wong, DO; and Adrienne Kania, DO, whose poster on osteopathic treatment of inappropriate sinus tachycardia was awarded first place in the student case study division.
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<th>Category</th>
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<tr>
<td><strong>Student—Education and public health</strong></td>
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<tr>
<td>First place</td>
<td>Stressed Out Medical Students and How to Define Them: Tracking Depression, Anxiety, Stress, and Coping During Years I and II</td>
<td>Jonathan Carbungco, OMS III; Hunter Michael Green, OMS III; Vanessa Paige Lowdon, OMS IV; Kim Chosie, LPCS; Caleb Hamilton, PhD; and Audrey Vasauskas, PhD</td>
<td>Alabama College of Osteopathic Medicine (ACOM)</td>
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<tr>
<td>Second place</td>
<td>Preliminary results of a health education intervention: Utilizing narratives to reduce HIV stigma in rural Ecuador</td>
<td>Jennifer Viola, OMS II; Christopher Alan Keener, OMS II; Chelsea Iles, OMS II; Sharon Casapulla, EdD, MPH; Mario J. Grijalva, PhD; and Guillermo Gomez-Urrego, MA, MEd</td>
<td>Ohio University Heritage College of Osteopathic Medicine (OU-HCOM)</td>
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<td>Third place tie</td>
<td>Perceptions of non-opioid treatment for pain in a homeless population</td>
<td>Kristina Fraser, OMS III; Joshua Bernal, OMS III; Harvard Nguyen, OMS III; Flora Park, OMS II; Alexa Westberg, OMS III; and Alan Podawiltz, DO</td>
<td>University of North Texas Health Science Center (UNTHSC)</td>
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<td>Third place tie</td>
<td>Scholar 12: Beta trial of an osteopathic research cultural development computer application</td>
<td>Daniel Hellmann, PharmD, OMS II; Marija Rowane, OMS III; Rachel A. Branning, OMS II; Heather Cola, OMS II; Jude Fahoum, OMS I; Brittany Morgan Snyder, PharmD, BCPS, OMS II; Amber Healy, DO; Xiaojun Qi-Lytle, PhD; Mark Terrell, EdD; and Robert W. Hostoffer, Jr., DO, LhD, MSMEd, FACOP, FAAP, FACOI, FCCP</td>
<td>Ohio University Heritage College of Osteopathic Medicine (OU-HCOM)</td>
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<td><strong>Student—Original research</strong></td>
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<td>First place</td>
<td>Measuring Low Frequency Oscillations in the Microcirculation of the Face: In Search of Novel Mechanisms for the CRI</td>
<td>Jillian Lynn Smith, OMS V, MS; Derek Oswald, OMS IV; Robert Murphy, MS; Kurt P. Heinking, DO, FAAO; and Kyle K. Henderson, PhD</td>
<td>Midwestern University Chicago College of Osteopathic Medicine (MWU-CCOM)</td>
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<td>Second place</td>
<td>The Effect of Osteopathic Manipulative Treatment (OMT) on Proprioception in Adults: A Pilot Study</td>
<td>Thomas Robert Mehner, OMS IV; Krista Hoeve-meyer, OMS IV; Ryan Dean McMunn, OMS IV; Kai Yuan Teng, OMS IV; José S. Figueroa, DO, FAOCMPR, FAAPMR, and Chunfa Jie, PhD</td>
<td>Des Moines University College of Osteopathic Medicine (DMUCOM)</td>
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Measuring Low Frequency Oscillations in the Microcirculation of the Face: In Search of Novel Mechanisms for the CRI
Kurt P. Heinking, D.O., FAAO1,2, and Kyle K. Henderson, Ph.D.1,2,3

Abstract:
Objective: To determine if the cranial rhythmic impulse (CRI) can be assessed by Eulerian Video Magnification with wavelet analysis (EVM).
Methods: Data were collected and analyzed by William Herdman M.D. (EMG) and Ben Grady, MCSP, M.S. (EMG) using a cranial Doppler and a tripatic nerve Doppler.
Results: Palpation confirmed the presence of a left cervical rib. The CRI was measured and compared with the normal side.
Conclusion: The data suggests that the CRI can be assessed by EVM.

Background & Methods
Cranial Osteopathy

Low Frequencies Similar to CRI in Blood Flow

Cutaneous Doppler Blood Flow and Data Collection

Eulerian Video Magnification (EVM)

Figure 1: A, MP-Chat Radiograph; B, Modified view of Cervical outlet

RESULTS

Wavelet Analysis Reveals Low Frequency Oscillations Similar to CRI in Blood Flow and EVM Recordings

Multiple Low Frequency Oscillations Detected

Signal Analysis: Wavelet Analysis of Blood Flow and EVM Recordings Demonstrated low frequency oscillations in the microcirculation of the face.

Palpated CRI Frequency & Physiological Mechanisms

Future Research:
Obtain EVM videos in the classic regions used to palpate the CRI, and obtain multiple physician palpation rates for the CRI.
This study was limited by a single palpating physician and small sample size.

Summary and Conclusion:
Wavelet analysis of Eulerian video magnification can detect low frequency involuntary human oscillations which may be attributed to frequencies cited for the CRI (normal and slow-wave). This technology may provide a quantitative assessment tool for the CRI and treatment efficacy.

The authors wish to thank Erin Mooney, M.Sc., the College of Osteopathic Physicians and Surgeons, and the American Academy of Osteopathy for financial support.

Congratulations to Jillian Lynn Smith, OMS V, MS, and her team, whose poster on searching for novel mechanisms for the CRI was awarded first place in the student original research division.

Scholarly Question
Is direct cranial manipulation (CM) an effective technique for relief of thoracic outlet syndrome (TOS) in select patients?

Introduction
TOS is a common cause of upper extremity symptoms.
One common cause of TOS is cervical rib.
Cervical rib occurs in 2% of the general population and 8.3% of those with TOS.
Three types of TOS:
• Orthopaedic
• Neurologic
• Arterial

Evaluations:
• E闄ed cranial rib can lead to chronic pain, limited use of the extremity, and life-threatening complications.
• Initial treatment is physical therapy, muscle relaxants, and activity modification.
• Arterial evaluation, treatment of arterial insufficiency
• Osteopathic manipulative treatment (OMT) for TOS includes:
• CM of the cervical rib(s) for release
• Treatment of dystonia or rigid shoulders and neck
• No outlined OMT for cervical rib found on literature review

Case Presentation
• 25-year-old female with a history of intermittent left hand numbness and tingling.
• Symptoms resolved by the CRI distribution intermittently for several years.
• Poor response when she crutches more regularly.
• Patient had radiologic evidence of left-sided cervical rib (Figure 1)
• No history of treatment with Osteopathic Manipulation

Examination
• Symptoms worse with military posture and shoulder depression
• Vascular examination normal
• No cervical rib palpated on the left side

Imaging
• Figure 2: A, Supradeltoid view; B, Lateral view.
• 2011-2013 international data on cervical rib and associated complications.
• CM of the cervical rib(s) for release

Methods
• Initial evaluation and treatment of cervical rib
• No mention of CM for cervical rib
• No mention of CM for cervical rib
• No mention of CM for cervical rib
• No mention of CM for cervical rib

Results
• Symptoms resolved after treatment
• No symptoms with military posture or shoulder depression
• Remained asymptomatic for 10 days after initial treatment then remained asymptomatic for 2 weeks in the post-procedural observation period

Discussion
• 25-year-old female with cervical rib induced TOS
• Improvement of symptoms with CM
• No defined OMT for cervical rib
• No mention of CM for cervical rib
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Conclusion
• CM of the cervical rib(s) for relief
• No symptoms with military posture or shoulder depression
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Crock the Pain Away: A Case Study of Osteopathic Manipulation for Cervical Rib Induced Thoracic Outlet Syndrome
Joshua Herring, DO; Gabriela Soto, and Sabrina Silver, DO
Eigh Family Medicine Residency, Eglin Air Force Base, FL

Imaging
Figure 1: A, MP-Chat Radiograph; B, Modified view of Cervical outlet

Figure 2: A, Supradeltoid view; B, Lateral view.

Case Presentation:
A 25-year-old female with a history of cervical rib induced TOS was treated with CM.
• Initial evaluation and treatment of cervical rib
• Improvement of symptoms with CM
• No defined OMT for cervical rib
• No mention of CM for cervical rib
• No mention of CM for cervical rib
• No mention of CM for cervical rib
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Methods
• CM of the cervical rib(s) for relief
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Congratulations to Joshua Herring, DO; Gabriela Soto, and Sabrina Silver, DO, whose poster on osteopathic treatment for cervical rib induced thoracic outlet syndrome was awarded first place in the resident case study division.

May 2020
AAO Member News
### LBORC poster presentation results (continued from Page 12)

<table>
<thead>
<tr>
<th>Category</th>
<th>Title</th>
<th>Authors</th>
<th>School or Institution</th>
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<tbody>
<tr>
<td>Third place</td>
<td>Osteopathic Manipulation Improves Neurocognitive Performance in Adults with Pain: A Rationale for a New Approach</td>
<td>Bridget Condon, OMS IV; Mireille N. Rizkalla, MSc., PhD; Robert Murphy, MS; Kimberly Huntington-Alfano, DO; Kurt P. Heinking, DO, FAAO; Ann Impens, MPH, PhD; and Kyle K. Henderson, PhD</td>
<td>Midwestern University Chicago College of Osteopathic Medicine (MWU-CCOM)</td>
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<tr>
<td>Resident—Case study</td>
<td>Crochet the Pain Away: A Case Study of Osteopathic Manipulation for Cervical Rib Induced Thoracic Outlet Syndrome</td>
<td>Joshua Alan Herring, DO; Gabriela Soto; and Sabrina Silver, DO</td>
<td>Eglin Family Medicine Residency Eglin Air Force Base Hospital</td>
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<td>Resident—Education and public health</td>
<td>Can referrals to a pediatric osteopathic manipulative medicine clinic be increased through provider education? An Evolving Quality Improvement Project</td>
<td>Arpita Sinha, DO, MPH, PGY2; and Elizabeth Yakes Jimenez, PhD, RDN, LK</td>
<td>University of New Mexico Health Sciences Center</td>
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<td>Evidence-based education on osteopathic neuromusculoskeletal consultations for a hospitalized patient: A medical staff survey and retrospective review</td>
<td>Nicolette ODonnell Rosendahl, DO, PGY4; Bachtuyet Le, DO, PGY4; Olivia Pipitone, MPH; Erandhi N. Hall, DO; and Hannah M. Fine, DO</td>
<td>Good Samaritan Regional Medical Center</td>
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<tr>
<td>Resident—Original research</td>
<td>Characteristics and Management of Geriatric Patients from a Neuromusculoskeletal Medicine/Osteopathic Manipulative Medicine (OMM) Clinic</td>
<td>Alicia Ann King, DO, MPH; Jayme Lauren Cox, OMS III; Shalini Bhatia, MS; and Karen T. Snider, DO, FAAO, FNAOME</td>
<td>Andrew Taylor Still University Kirksville College of Osteopathic Medicine (ATSU-KCOM)/ Northeast Regional Medical Center</td>
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<td>Got Anxiety? I Got Your Back: Incidence of Somatic Dysfunction with Axial Pain and Anxiety/Depression</td>
<td>Cassandra A. Tamayo, DO, PGY3; Chantel F. Tessmer, MSc, MD, PGY2; and Kyle K. Henderson, PhD</td>
<td>AMITA LaGrange Medical Center</td>
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LBORC poster presentation results (continued from Page 14)

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<tr>
<td>Third place tie</td>
<td>Exploring the Feasibility and Safety of Osteopathic Medicine as an Adjunctive Therapy for Chemotherapy Side Effects in Pediatric Oncology Patients (OMET): An Interim Analysis</td>
<td>Jennifer Ashley Belsky, DO, MS, PGY6; Anneliese Rupp Hunztzinger, DO; Joseph Staneck MS; and Melissa J. Rose, DO</td>
<td>Nationwide Children’s Hospital</td>
</tr>
<tr>
<td>Third place tie</td>
<td>Somatic Dysfunction Prevalence in Patients with Tension Headaches from a Single Outpatient Multidisciplinary Osteopathic Musculoskeletal Clinic</td>
<td>Victoria Shadiack, DO, PGY4, ONMM3; and Albert J. Kozar, DO, FAOASM, R-MSK</td>
<td>Edward Via College of Osteopathic Medicine (VCOM)</td>
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Can referrals to a pediatric osteopathic manipulative medicine clinic be increased through provider education? An Evolving Quality Improvement Project

Anup Sinha, DO, MPH; and Elizabeth Yokemine PhD, RDN, LDN
Department of Pediatrics, Nationwide Children’s Hospital
University of New Mexico Health Sciences Center

**BACKGROUND**

- Osteopathic manipulative medicine (OMM) is non-invasive, non-pharmacological method for treating certain pediatric conditions, including adult-related difficulties, orthopedic symptomatology, and medical, orthopedic, musculoskeletal disorders in general, and ADHD.
- UNM’s pediatric manual medicine consult service does not see many patients per month, due to low referral rates and limited office hours.
- With increased inclusion of osteopathically-trained physicians into ACGME residencies, there is a need for greater awareness of osteopathic medicine’s evidence-based applications.
- The primary measure of interest was monthly referrals.

**LOCAL CONTEXT**

- The University of New Mexico (UNM) pediatrics resident program (2019-2020) is comprised of a significant number of DOs (15%) who work closely with other pediatric providers with referral capabilities.
- UNM Hospital’s pediatric OMM consult service does not have many patients per month, due to low referral rates and limited office hours.

**GOAL**

- To increase the average number of referrals to UNM Hospital’s OMM clinic by 50% by May 2020.

**STRATEGY**

- Non-invasive, non-pharmacological approach to pediatric conditions
- The primary measure of interest was monthly referrals.
- The primary measure of interest was monthly referrals.

**RESULTS TO DATE**

- **Background:** The results of this first PDSA cycle indicate:
  - Those who had previously referred patients to the OMM service (median: 10; IQR = 9-10) compared to those who had never referred to the clinic (median: 8; IQR = 7-10) (p=0.03; Figure 1).
  - There was a significant interest in referring to the pediatric OMM service (median: 8; IQR = 8-10). Interest was higher in those who had previously referred to the clinic (Med: 10; IQR = 9-10) compared to those who had never referred to the clinic (Med: 8; IQR = 7-10) (p=0.03; Figure 1).
- **Reflections and Opportunities:**
  - The results of this first PDSA cycle indicated:
    - There was a significant interest in referring to the pediatric OMM service (median: 8; IQR = 8-10). Interest was higher in those who had previously referred to the clinic (Med: 10; IQR = 9-10) compared to those who had never referred to the clinic (Med: 8; IQR = 7-10) (p=0.03; Figure 1).
  - There was a significant interest in referring to the pediatric OMM service (median: 8; IQR = 8-10). Interest was higher in those who had previously referred to the clinic (Med: 10; IQR = 9-10) compared to those who had never referred to the clinic (Med: 8; IQR = 7-10) (p=0.03; Figure 1).
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**DISCUSSION**

- We would like to thank:
  - Given McGuffey, MPH, Data Manager, Division of Preventive Medicine, Nationwide Children’s Hospital.
  - Dr. Cheryl Oubre, Division Chair, Division of Preventive Medicine, Nationwide Children’s Hospital.

**ACKNOWLEDGEMENTS**

- The author would like to thank:
  - Given McGuffey, MPH, Data Manager, Division of Preventive Medicine, Nationwide Children’s Hospital.
  - Dr. Cheryl Oubre, Division Chair, Division of Preventive Medicine, Nationwide Children’s Hospital.

- Congratulations to Arpita Sinha, DO, MPH and Elizabeth Yokemine PhD, RDN, LD, whose poster on increasing pediatric omc clinic referrals was awarded first place in the resident education and public health division.
Characteristics and Management of Geriatric Patients from a Neuromusculoskeletal Medicine/Osteopathic Manipulative Medicine (OMM) Clinic

Alicia A. King, DO, MPH1, Jayce Cox, OMSII2, Shaili Bhatta, MS2, Karen T. Snider, DO, FAAO, FNAOME 2
1 A.T. Still University-Kirksville College of Osteopathic Medicine, Kirksville, MO
2 A.T. Still University Research Support Department, Kirksville, MO

Background

- Osteopathic manipulative treatment (OMT) is used in the care of geriatric patients – published data limited
- Goal to provide data on the presentation and management of geriatric patients
- Guide providers in setting standards of care
- Future studies into training, effectiveness, and establishment of guidelines for geriatric OMT

Methods

- IRB approved, retrospective, observational study
- Data from electronic health records (EHR) of OMM clinic
- Patients ≥60 years old
- From July 1, 2016 to June 30, 2019
- Data collected - demographic information, presenting complaints, assessments, OMT techniques used, and treatment response

Results

- Total patients = 1238 (Table 2 & 2)
- Total clinical encounters = 9516 (Table 1 & 2)
- Mean encounters per patient per year (DD) = 4.5 (4.0)
- Total presenting complaints = 12020 (Table 3)
- Up to 10 chief complaints per encounter
- Total OMT techniques used = 43862b (Table 4)
- Each technique counted once per body region
- Total body regions treated = 46100c (Table 5)
- Most commonly treated regions: thoracic and lumbar
- Consistent with previous meta-analyses, back and lower extremity pain – most common sites of pain in geriatric patients1
- Most patients showed improvement
- Recent studies: OMT is an effective treatment method for geriatric musculoskeletal pain2
- In current guidelines for treating back pain3, 4, 8
- Limitations: Single clinic, excluded fee data, excluded data, potential utilization of data: guide care plans and patient referrals
- Future research: Compare findings to other locations and compare of nursing home to community dwelling elders – variation in presenting complaints, techniques used, or areas treated
- Data may be used to guide future prospective geriatric outcome studies and treatment guidelines

Conclusion

- Electronic health records revealed descriptive data of geriatric patients presenting to an OMM clinic
- Most common complaints: back and lower extremity
- Most common OMT technique: muscle energy
- Similar to surveys of OMT use among practicing osteopathic physicians and students taking COMLEX PE1
- Suggests correlation of training in OMT offered to osteopathic medical students consistent with OMT utilized in practice by osteopathic physicians2, 3
- Most commonly treated regions: thoracic and lumbar
- Consistent with previous meta-analyses, back and lower extremity pain – most common sites of pain in geriatric patients1
- Most patients showed improvement

References


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Raymond J. Hruby, editor

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Torsten Liem and Patrick van den Heede, editors

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Committee Corner

We will do our best to keep members updated on committee activities in this recurring section. See a complete list of committees at academyofosteopathy.org. Do not hesitate to contact the committee’s staff liaison or the committee chair with questions or concerns.

Resident American Academy of Osteopathy

The RAAO would like to welcome our new 2020-21 Executive Council. We are very grateful to those who donated to our RAAO Raffle, as well as those who spoke at our second RAAO Lecture Track. If you are interested in speaking at the 2021 RAAO Lecture Track (eligible for CME) please reach out to Frank P. Goodman, DO, MS, at raaochair@academyofosteopathy.org.

If you attended the resident lectures at 2020 Convocation, please complete our survey: surveymonkey.com/r/RAAOCONV2020.

If you are a graduating OMS IV or current resident looking to be more involved, please consider applying to serve as a RAAO Liaison to one of the AAO’s committees. In case you missed it, check our latest RAAO newsletter, which includes updates about board certification and the ONMM ITE, online at files.academyofosteopathy.org/news/RAAO-News-May-2020.pdf. Please reach out to Amber M. Brown, DO, at raaonc@academyofosteopathy.org if you have any other questions about the RAAO.

Research Grant Letters of Intent Due August 1

The American Academy of Osteopathy (AAO) supports clinical and basic science research involving health care outcomes in the practice of osteopathic medicine, with an emphasis on the use of osteopathic manipulative treatment (OMT) in patient care. The AAO has two research grant cycles per year with funds released in January and July. Research funding is typically $10,000 per year with a grant duration of 1 year (2 years with justification).

The major purpose of research funded by the AAO is to:

1. Generate and support research that develops and promotes an understanding of the philosophy, concepts and efficacy of osteopathic manipulative medicine (OMM).
2. Develop and maintain the research capacity of the profession through support and training for researchers. This is to include but is not limited to benchtop physiological models research, educational standards development, practice guidelines research, normative data collection and clinical research.

The AAO Louisa Burns Osteopathic Research Committee (LBORC) is seeking research grant applications involving health care outcomes in the practice of osteopathic medicine, with an emphasis on the utilization of osteopathic manipulative medicine/treatment (OMM/OMT) in patient care. The AAO recognizes the value of all areas of biomedical and educational research with a focus on those areas that investigate the unique aspects of osteopathic medicine. The breadth of this research focus may include but is not limited to:

• Mechanisms of action of OMT
• Clinical efficacy of OMT, which may include cost-effectiveness of osteopathic health care
• Biomarker assays in OMT delivery
• Collecting normative data in OMT
• Inter- and intra-examiner reliability of palpation/sensory assessment, which may include improvement of OMT record keeping
• OMT technique understanding or development, including methods to validate OMT through specific replicable research methodologies
• Methods of reproducible measurement of physiologic response, measurable outcome changes, and lengths of changes and responses to OMT
• Developing statistical methods instruments for OMT including surveys, SOAP notes, digital documentation through electronic health records, health status assessments and instruments for bias reduction
• Methods of teaching palpation and assessment of diagnosis (TART) in OMT
• Effects of patient–physician relationship on outcomes in OMT and sham techniques

The AAO will not fund machine or equipment engineering research and development.

To be considered in the upcoming grant cycle, please submit your letter of intent by August 1. Learn more at academyofosteopathy.org/aaogrant-application-process.
### Members in the News

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<th>Authors</th>
<th>Publication</th>
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<tr>
<td>Karen T. Snider, DO; Rachel Couch, OMS IV; Shalini Bhatia, MS</td>
<td><em>The Journal of the American Osteopathic Association</em>, May 2020, Vol. 120, 293-302.</td>
<td>Osteopathic Manipulative Medicine Practice Patterns of Third-Year and Fourth-Year Osteopathic Medical Students: An Educational Research Project</td>
<td>Objective: To identify student OMM practice patterns documented on required OMM practice logs detailing 10 OMM treatments each semester as part of a 3-semester third- and fourth-year clerkship curriculum and to determine whether these practice patterns varied by supervisor type (osteopathic vs allopathic) and semester.</td>
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<td>Sarah E. Davis, DO; Jan T. Hendryx, DO, FAAO; Christian Menezes, OMS IV; Stephanie M. Bouwer, OMS III; Heather Menezes, OMS IV; Vishesha Patel, OMS IV; Chevelta A. Bostick Smith, DO; Diana L. Speelman, PhD</td>
<td><em>The Journal of the American Osteopathic Association</em>, May 2020, Vol. 120, 310-321.</td>
<td>Weekly Osteopathic Manipulative Treatment to Improve Measures of Sympathetic Tone in Women With Polycystic Ovary Syndrome: A Randomized, Controlled Pilot Study</td>
<td>Polycystic ovary syndrome (PCOS), a common hormone disorder affecting reproductive and metabolic health of reproductive-age women, was shown in a previous study from these authors to be associated with increased sympathetic tone. Increased sympathetic tone contributes to long-term health risks for cardiovascular disease and promotes PCOS pathogenesis. Objective: To determine whether weekly osteopathic manipulative treatment (OMT) improves physiologic measures of sympathetic tone in women with polycystic ovary syndrome (PCOS).</td>
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<td>Vishesha Patel, OMS IV; Heather Menezes, OMS IV; Christian Menezes, OMS IV; Stephanie Bouwer, OMS III; Chevelta A. Bostick-Smith, DO; Diana L. Speelman, PhD</td>
<td><em>The Journal of the American Osteopathic Association</em>, May 2020, Vol. 120, 323-335.</td>
<td>Regular Mindful Yoga Practice as a Method to Improve Androgen Levels in Women With Polycystic Ovary Syndrome: A Randomized, Controlled Trial</td>
<td>A curricular initiative implemented at VCOM incorporates ICD-10 codes into the preclinical curriculum to enhance student learning and recall of basic science information and to prepare them for patient encounters during clinical rotations. This initiative aims to enhance the preclinical educational experience and prepare preclinical students for documenting patient care. After students have been fully exposed to this new learning component, a study is planned to analyze the effects of the curriculum.</td>
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<td>Artur Schander, DO, PhD, MS; Rudy Castillo, PhD; Dante Paredes, DO; Lisa M. Hodge, PhD</td>
<td><em>The Journal of the American Osteopathic Association</em>, May 2020, Vol. 120, 337-344.</td>
<td>Effect of Abdominal Lymphatic Pump Treatment on Disease Activity in a Rat Model of Inflammatory Bowel Disease</td>
<td>Inflammatory bowel disease (IBD), such as ulcerative colitis and Crohn disease, are chronic relapsing inflammatory diseases that affect 1.5 million people in the United States. Lymphatic pump treatment (LPT) techniques were designed to enhance the movement of lymph and can be used to relieve symptoms in patients with IBD and other gastrointestinal disorders. Objective: To determine whether LPT would decrease gastrointestinal inflammation and reduce disease severity in rats with acute IBD.</td>
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<th>Description</th>
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<tr>
<td>Shan Shan Wu, DO; Kelsey Graven, DO; Michelle Sergi, OMS IV; Robert Hostoffer, DO</td>
<td><em>The Journal of the American Osteopathic Association</em>, May 2020, Vol. 120, 351-358.</td>
<td><strong>Rhinitis: The Osteopathic Modular Approach</strong></td>
<td>This article provides an up-to-date literature review about the management of rhinitis using the 5 models of osteopathic medicine: biomechanical, respiratory-circulatory, metabolic, neurologic, and behavioral.</td>
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<td>Stefano Natali, OMS IV; Cara Borelli, DO; Paul Shogan, DO</td>
<td><em>The Journal of the American Osteopathic Association</em>, May 2020, Vol. 120, 362.</td>
<td><strong>Clinical Image: Dermatofibrosarcoma Protuberans</strong></td>
<td>Computed tomography of the abdomen and pelvis demonstrated an enhancing multilobulated mass involving the skin and soft tissue, measuring 10.0 cm by 5.4 cm</td>
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<td>Robert C. DeLuca, DO, MBA, FACOFP dist.</td>
<td><em>Osteopathic Family Physician</em>, Vol. 12, no. 3, May/June 2020, pp. 8-9</td>
<td><strong>Resilience During a Pandemic</strong></td>
<td>From the President's Desk</td>
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<td>Amanda Fernandez, OMS IV and Ronald Januchowski, DO, FACOFP</td>
<td><em>Osteopathic Family Physician</em>, Vol. 12, no. 3, May/June 2020, pp. 10-16</td>
<td><strong>Osteopathic Primary Care Treatment Options for Ulcerative Colitis</strong></td>
<td>An Osteopathic approach to the treatment of ulcerative colitis will help the patient remain highly functioning and reduce complications of this disease. By being aware of the various pharmaceutical and non-pharmaceutical treatment options available, one can collaborate with the patient to create a treatment plan to minimize morbidity and increase functional days.</td>
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<td>Syna Daudfar, OMS-IV, Natalia Nakajima, OMS-IV, Kristopher Faiss, OMS-IV, Luke Tegeler, OMS-V, Jessica Kuo, OMS-III, Robyn Dreibelbis, DO, Edward Goering, DO, Emmanuel Katsaros, DO, John T. Pham, DO</td>
<td><em>Osteopathic Family Physician</em>, Vol. 12, no. 3, May/June 2020, pp. 24-28</td>
<td><strong>Approach To Joint Pain In The Elderly For Osteopathic Providers</strong></td>
<td>The purpose of this manuscript is to present a case-based learning opportunity for osteopathic primary care providers, residents, and medical students regarding an elderly male with joint pain. In this manuscript, the authors have presented an advanced organizer to be used in the medical education setting which differentiates patients suffering from joint pain based on timing, the number of joints involved, and the size of the joint affected. We conclude with osteopathic considerations in evaluating an elderly patient with joint pain and the tools available to appropriately evaluate and treat the patient.</td>
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**Submit Member News**

Have you or a colleague done something noteworthy? Submit news items to communications@academyofosteopathy.org to be included in the next issue of AAO Member News.
Colbert Nelson Named WCU Student Doctor of the Year

The William Carey University College of Osteopathic Medicine named Colbert Nelson its 2019-20 Student Doctor of the Year during a reception on Jan. 29.

“Colbert Nelson has demonstrated significant leadership at William Carey University and is on the path to becoming a family medicine physician. We congratulate him and also extend our thanks to his wife, Raven, for her support and encouragement,” said Dr. Italo Subbarao, dean of the WCU College of Osteopathic Medicine.

A fourth-year medical student from Little Rock, Ark, Nelson has a background in exercise physiology and a master’s degree in public health. He researched sickle cell disease during his time at the University of Arkansas for Medical Sciences. He has authored multiple peer-reviewed journal articles and abstracts in the area of exercise science.

Ohio Osteopathic Association introduces Scholar Teacher

The newest videos in the Ohio Osteopathic Association’s Scholar Series were featured in the Winter 2020 issue of the Buckeye Osteopathic Physician. Authored by Robert W. Hostoffer, Jr., DO, LhD, FAAP, FACOP, FACP, FCCP; Michael P. Rowane, DO, MS, FAAFP, FAAO; and Paul Evans, DO, FACOFP, FAAFP, Scholar Teacher is a faculty development resource for residency programs with Osteopathic Recognition. It focuses on osteopathic modalities that can be utilized across the span of medicine. The single accreditation system has created a template for all graduate medical education programs. Osteopathic Recognition within this system requires the performance of osteopathic faculty development. Faculty development must be an easily accessible, clinically applicable and time conserving product. Scholar Teacher provides several professionally prepared 15-20 minute videos that highlight thoracic landmarks (muscular, skeletal), assessment of rib dysfunction and treatment. CME is available. View Scholar Teacher online at ohiodo.org/scholarseries.

August 13-16, 2020

Introduction to Osteopathic Manipulative Medicine
Integrating OMM Into Clinical Practice and Teaching

with Lisa Ann DeStefano, DO
at The Pyramids in Indianapolis

Designed for any health care professional who wants to learn more about osteopathic manipulative medicine.
Full-Time, Assistant Professor Faculty Position

Touro University Nevada College of Osteopathic Medicine (TUNCOM) is seeking qualified osteopathic physicians (D.O.) for a full-time assistant professor position in the Department of Osteopathic Manipulative Medicine. Responsibilities include teaching osteopathic medical students the principles of osteopathic manipulative medicine both in the classroom and clinic settings and in providing support for program development.

**MINIMUM QUALIFICATIONS:**
1. Osteopathic Physician, graduate of an AOA-approved osteopathic medical college;
2. Experience teaching and utilizing a variety of osteopathic manipulative medicine techniques;
3. Licensed or eligible for licensure to practice medicine in the state of Nevada;
4. Proficient in basic communication tools including email, Word and PowerPoint

**PREFERRED QUALIFICATIONS:**
The ideal candidate is preferred to be certified in Neuromusculoskeletal Medicine / Osteopathic Manipulative Medicine or Special Proficiency in Osteopathic Manipulative Medicine though candidates who have proven experience in providing high level osteopathic manipulative medicine services will be considered.

**SALARY:**
Commensurate with experience.

Learn more about Touro at tun.touro.edu
Apply on-line at https://touro.peopleadmin.com/postings/search

For more information, please contact:
Mrs. Theresa Bruscella
(702) 777-4740
theresa.bruscella@tun.touro.edu
We keep SAFETY, QUALITY, and PATIENT COMFORT at the forefront.

Learn more about Gebauer’s Ethyl Chloride at www.Gebauer.com/AAO
INTRODUCTION TO OSTEOPATHIC MANIPULATIVE MEDICINE: Integrating OMM Into Clinical Practice and Teaching

August 13-16, 2020 • The Pyramids • Indianapolis

Course Description
This course will:
• provide basic and refresher knowledge and skills for program directors and core teaching faculty who supervise osteopathic manipulative treatment (OMT) in clinics.
• help MD students and graduates obtain the prerequisites for entering osteopathic-recognized residencies.
• be valuable for clinicians interested in adding OMT to their skill set.

Through a combination of lectures and hands-on workshops, attendees will learn the basics of osteopathic manipulative medicine, which encompasses osteopathic tenets, palpatory diagnosis and OMT. The curriculum includes lessons on muscle energy technique; thoracic spine technique; articulatory techniques; functional techniques; myofascial release; and high-velocity, low-amplitude thrust.

Course registration includes one copy of Greenman's Principles of Manual Medicine, 5th edition.

Course Times
“...the teaching of the course itself was guided very wisely, carefully, with good examples. It helped me personally to draw a whole picture about integration of OMM in clinical practice.” —Sofio (MD)

Thursday from 1 to 6 p.m.
Friday and Saturday from 8 a.m. to 6 p.m.
Sunday from 8 a.m. to 4 p.m.

Continuing Medical Education
28 credits of AOA Category 1-A CME anticipated.

Meal Information
Morning coffee and tea will be provided Friday through Sunday, as will lunch.

Registration Form
Introduction to Osteopathic Manipulative Medicine
August 13-16, 2020

Name: ___________________________________ AOA No.: ____________

Nickname for badge: ____________________________________________

Street address: __________________________________________________

City: __________________________ State: _____ ZIP: ____________

Phone: ______________________ Fax: ______________________

Email: __________________________

I hereby authorize the American Academy of Osteopathy to charge the above credit card for the amount of the course registration.

Signature: ______________________________________________________

By registering for this course, you agree to abide by the AAO’s code of conduct, photo and video release, and cancellation policy.

Register online at www.academyofosteopathy.org, or submit this registration form and your payment by email to GWatts@academyofosteopathy.org; by mail to the American Academy of Osteopathy, 3500 DePauw Blvd., Suite 1100, Indianapolis, IN 46268-1136; or by fax at (317) 879-0563.
The American Academy of Osteopathy is your voice...

in teaching, promoting, and researching the science, art, and philosophy of osteopathic medicine, with the goal of integrating osteopathic principles and osteopathic manipulative treatment in patient care.

If you are not already a member of the American Academy of Osteopathy (AAO), the AAO Membership Committee invites you to join the Academy as a 2020-21 member. The AAO is your professional organization. It fosters the core principles that led you to become a doctor of osteopathic medicine.

For $5.83 a week or just 83 cents a day, you can become a member of the professional specialty organization dedicated to you and neuromusculoskeletal medicine/osteopathic manipulative medicine (NMM/OMM). Your membership dues provide you with:

• a national advocate for OMM, both within the profession and with health care policymakers and third-party payers.
• a champion that is monitoring closely and responding rapidly to the standards being developed for the single accreditation system for graduate medical education.
• referrals of patients through the “Find a Physician” tool at FindOMM.org.
• discounts on continuing medical education at the AAO’s annual Convocation and its weekend courses.
• access to NMM/OMM specialty-specific continuing medical education opportunities.
• networking opportunities with peers.
• discounts on books in the AAO’s online store.
• complimentary subscription to The AAO Journal, published electronically 4 times annually.
• complimentary subscription to the online AAO Member News, published 8 times annually.
• weekly OsteoBlast e-newsletters, featuring research on manual medicine from peer-reviewed journals around the world.
• practice promotion materials, such as the AAO-supported “American Health Front” segment on OMM.
• discounts on advertising in AAO publications and in materials for the AAO’s Convocation.
• the fellow designation of FAAO, which recognizes DOs for promoting OMM through teaching, writing, and professional service and which is the only earned fellowship in the osteopathic medical profession.
• promotion and grant support of research on the efficacy of OMM.
• support for the future of the profession through the Student American Academy of Osteopathy, the National Undergraduate Fellows Association, and the Resident American Academy of Osteopathy.

For questions regarding membership or membership renewal, contact Bev Searcy, the AAO’s finance and membership assistant, at BSearcy@academyofosteopathy.org or at (317) 879-1881, ext. 212.

AAOJ Call for Submissions

Time is precious and article writing is often triaged for busy physicians. In an effort to help guide the journal and stimulate interest in academic and scholarly activity, we are providing some broad topics that can be “reserved” for you. These are by no means the only topics for the journal, but it helps to eliminate the writer’s block that so many of us may face.

Below are topics available to reserve if you would like to support your portfolio with academic writing:

• Osteopathic approaches to treating patients with pelvic dysfunctions
• Osteopathic approaches for the cardiac patient
• The body triune: osteopathic treatment of mind and spirit for today’s patient
• Beyond Spencer technique: OMT for shoulder overuse
• Using OMT to treat patients with long-term side effects of radiation for cancer treatment

If you are interested in any of these topics, send an email to communications@academyofosteopathy.org and reserve your topic today. Manuscripts should be emailed to editoraaoj@gmail.com within three months of reserving a topic. See the AAOJ’s Instructions for Contributors for more information on submitting manuscripts.

In addition, we are asking for peer reviewers to assist us in producing the best journals we can, so please contact the AAO Publications Administrator at communications@academyofosteopathy.org if you can help in this capacity. No experience is required, and training resources will be provided. Peer reviewers are expected to review at least two manuscripts per year.

If you have any questions, please email us at editoraaoj@gmail.com.