

REPORT OF THE COUNCIL ON MEDICAL EDUCATION

CME Report 6-A-07

Subject: Recommendation on Equal Fees for Osteopathic and Allopathic Medical Students

Presented by: Melissa K. Thomas, MD, PhD, Chair

Referred to: Reference Committee C
(Edward C. Tanner, MD, Chair)

1 Council on Medical Education Report 14-A-06, Equal Fees for Osteopathic and Allopathic
2 Medical Students, was developed in response to Resolution 809 (I-05), which asked that our
3 AMA: (1) support equal fees for clinical rotation externships by osteopathic and allopathic
4 medical students and (2) encourage institutions accredited by the Liaison Committee on Medical
5 Education and the Accreditation Council for Graduate Medical Education to maintain fair
6 practice standards for equal access to all US medical students, allopathic and osteopathic. The
7 resolution was referred to the Board of Trustees.

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9 Council on Medical Education Report 14, A-06, summarized existing data on the number of
10 students from osteopathic medical schools who were taking clerkships at allopathic medical
11 schools. Data collected in 2000-2001 indicated almost two-thirds of MD-granting medical
12 schools had students from DO-granting schools visiting for clinical electives during that year.

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14 In addition, the 2006 report described additional data that were needed in order to respond to the
15 resolution, including:

- 16 • access of students from osteopathic (DO-granting) medical schools to clinical electives at
17 allopathic medical schools;
- 18 • fees charged for clinical electives to allopathic and osteopathic medical students at
19 allopathic medical schools.

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21 The current report provides the data that are available on these areas. Data were obtained from
22 the 2005-2006 Liaison Committee on Medical Education (LCME) Annual Medical School
23 Questionnaire, which was sent to the deans of all 125 LCME-accredited medical schools and had
24 a 100% response rate.

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26 Results of Data Collection

27 In 2005-2006, 102 MD-granting medical schools (82% of the total) allowed students from DO-
28 granting medical schools and 121 (97%) allowed students from other MD-granting medical
29 schools to take clinical electives at their institutions.

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31 Data about fees from MD-granting medical schools that accept both MD and DO students for
32 clinical electives is shown in Table 1. For the great majority of schools (99%) where data were
33 available, visiting students from MD- and DO-granting schools are treated equally.

 Table 1 - Fees Charged to MD and DO Students for Clinical Electives
 (Based on 102 MD-granting schools that accept DO students for clinical electives)

	Number of Schools
No fee to students from MD and DO schools	43
Same fee to students from MD and DO schools	52
Higher fee to students from DO schools	1
No data on fees for DO students	6

Source: 2005-2006 LCME Annual Medical School Questionnaire

Summary and Recommendations

In the majority of MD-granting medical schools that accept both allopathic and osteopathic students for clinical electives, there is no distinction in the fees charged. There are no data available at this time on the access of students from allopathic medical schools to electives at osteopathic schools.

Not all MD-granting medical schools accept students from osteopathic medical schools for clinical electives. There are reasons why this might be the case. Some schools have unique characteristics (Uniformed Services University of the Health Sciences) or exist in a unique environment (University of Puerto Rico, Ponce School of Medicine), so that they do not accept either allopathic or osteopathic medical students for clinical electives. In other cases, schools may limit visiting students to assure the adequacy of clinical resources (patients, faculty) for their own students. The Liaison Committee on Medical Education (LCME), which accredits medical education programs leading to the MD degree, requires that

Institutional resources to accommodate the requirements of visiting and transfer students must not significantly diminish the resources available to existing enrolled students.
(Functions and Structure of a Medical School, Standard MS-12)

This issue of adequacy of resources to support clinical education is discussed in more detail in Council on Medical Education Report 14-A-07, Resources for Clinical Education.

Based on the information available, the Council on Medical Education recommends that the following be adopted and that the remainder of this report be filed:

1. That our American Medical Association encourage equitable fees for allopathic and osteopathic medical students in access to clinical electives, while respecting the rights of individual allopathic and osteopathic medical schools to set their own policies related to visiting students. (Directive to Take Action)
2. That our AMA continue to monitor and report back at the 2009 Annual Meeting on the adequacy of clinical resources and placements for allopathic and osteopathic medical students. (Directive to Take Action)

Fiscal Note: Less than \$500 for data gathering and preparation of a report.