

Discrimination Against DO Students in Medical Residency

Issues:

Doctor of osteopathic medicine (DO) trainees experience unique challenges and barriers to pursuing graduate medical education (GME) compared to their allopathic doctor of medicine (MD) counterparts. For example, there exists a longstanding preference for United States Medical Licensing Examination® (USMLE) scores over Comprehensive Osteopathic Medical Licensure Examination (COMLEX-USA) scores as an application metric to GME programs. DO students also tend to experience additional financial and administrative burdens when applying to GME programs.

Currently, there is an effort to pass legislation prohibiting residency programs who receive federal GME funding from discriminating against DOs in the residency selection process. The specific draft federal legislative proposal would make hospital receipt of Medicare GME dollars contingent on hospitals not imposing testing, certification, or accreditation requirements that are in excess of state licensure requirements. Seeking federal legislative intervention could negatively impact physicians' long-standing policy of self-regulation and oversight. The American Medical Association (AMA) supports resolution of the matter by leaders in medical education, rather than the federal government.

Background:

DO compared to MD

In the United States (U.S.), students seeking a medical degree can attend an allopathic medical school, leading to a MD degree, or an osteopathic medical school, leading to a DO degree. About one-quarter of U.S. medical students train at osteopathic medical schools. The curricula of both types of schools reflect a similar structure, with students spending much of their first two years in the classroom and the remainder of their training in a clinical setting. According to the American Osteopathic Association (AOA), the clinical training differs in that DO students also learn osteopathic manipulative treatment, defined as a “set of hands-on techniques used by osteopathic physicians ... to diagnose, treat, and prevent illness or injury.” As such, DO students spend an additional 200+ hours of training on the musculoskeletal system.

COMLEX-USA compared to USMLE

Both COMLEX-USA and USMLE test trainees' knowledge of the fundamentals of medicine. The USMLE is administered by the National Board of Medical Examiners (NBME) and is taken by MD students during medical school and residency. The COMLEX-USA is for DO students and is administered by the National Board of Osteopathic Medical Examiners (NBOME). It also integrates knowledge of osteopathic manipulative medicine into its questions. DO trainees must take the COMLEX-USA, but also have the option to take the USMLE if they wish. Some DO trainees do ultimately take the USMLE to support their applications to residency programs.

Historically, some GME programs have accepted only USMLE scores from applicants. While that practice is changing, some program/residency directors give more weight to a USMLE score over a COMLEX-USA score in the selection process. This seems to be particularly true in more competitive specialties. Residency directors who themselves did not take the COMLEX-USA may be less inclined to understand or interpret its scoring. While the NBOME offers [scoring principles](#) to aid in this effort, this inequity may be influencing large

numbers of DO students to take both exams in preparation for applying to GME programs. The added cost for another exam puts DO trainees at a financial disadvantage.

Concern for residency matching

2021 data from [The Main Residency Match](#) highlights a concern that DO students are less likely to match into competitive specialties/programs.

Potential Strategies:

- Promote equitable and holistic review of candidates for residency applicant selection
- Encourage GME program directors to interpret and use the COMLEX-USA score in the same manner in which they use the USMLE score in the residency selection process.
- Encourage key stakeholders to jointly create a no-fee, easily accessible clearinghouse of reliable and valid advice and tools for residency program applicants seeking cost-effective methods for applying to and successfully matching into residency
- Oppose federal intervention in the regulation of the practice of medicine or medical education

Moving Forward:

The AMA has many policies that support DOs. To mitigate negative impacts related to DO access to GME, the AMA:

- promotes the principle that selection of residents should be based on a broad variety of evaluative criteria, and to propose that the ACGME General Requirements state clearly that residency program directors must not use NBME or USMLE ranked passing scores as a screening criterion for residency selection. ...Our AMA will: (a) promote equal acceptance of the USMLE and COMLEX at all United States residency programs; (b) work with appropriate stakeholders including but not limited to the National Board of Medical Examiners, Association of American Medical Colleges, National Board of Osteopathic Medical Examiners, Accreditation Council for Graduate Medical Education and American Osteopathic Association to educate Residency Program Directors on how to interpret and use COMLEX scores; and (c) work with Residency Program Directors to promote higher COMLEX utilization with residency program matches in light of the new single accreditation system. ([H-275.953](#))
- supports policies that ensure equity and parity in the undergraduate and graduate educational and professional opportunities available to medical students and graduates from all LCME- and Commission on Osteopathic College Accreditation (COCA)-accredited medical schools. ([H-295.854](#))
- supports collaboration...to raise awareness among policymakers and the public about the importance of expanded GME funding to meet the nation's current and anticipated medical workforce needs. ([D-305.967](#))
- opposes the interference of government in the practice of medicine, including the use of government-mandated physician recitations. ([H-270.959](#))

AMA Resources:

- [Council on Medical Education](#)
- [Policy Finder](#)
- [Reimagining Residency initiative](#)
- [FREIDA™](#)
- [Health Care Advocacy](#)