

# **Pre-SOMA Guide**

## **An Undergraduate Guide to Osteopathic Medical Education**

### **Information On:**

- ✓ **SOMA and Pre-SOMA Membership and Benefits**
- ✓ **History of Osteopathic Medicine**
- ✓ **Philosophy and Practice of Osteopathic Medicine**
- ✓ **Osteopathic Medical Education**



# **Table of Contents:**

- 1. What Are SOMA and Pre-SOMA? (p. 3)**
- 2. Benefits of Pre-SOMA Membership (p. 4)**
- 3. Chartering a Pre-SOMA Chapter (p. 5-6)**
- 4. A Constitution Writing Guide (p. 7)**
- 5. How Osteopathic Medicine Got Its Start (p. 8)**
- 6. The Founder of Osteopathic Medicine (p. 9-10)**
- 7. What is a D.O. and how do they differ from an M.D.? (p. 11)**
- 8. OMT, OMM, OTM, OPP: What's With the Acronyms? (p. 12)**
- 9. Osteopathic Medical Education (p. 13)**
- 10. Colleges of Osteopathic Medicine (p. 14)**
- 11. Helpful Links and Additional Resources (p. 15)**
- 12. Join Pre-SOMA Today! (p. 15)**

## **What Are SOMA and Pre-SOMA?**

### **SOMA**

The Student Osteopathic Medical Association (SOMA) was founded in 1970 as a nonprofit association with the objectives to improve the quality of healthcare delivery, to educate osteopathic medical students, to espouse the ideals of osteopathic medicine, and to establish lines of communication among health care professionals.

SOMA is recognized by the American Osteopathic Association (AOA) and the American Medical Association (AMA) as the national professional society of osteopathic medical students. Membership in SOMA offers students a legitimate voice in shaping the future of their chosen profession. Additionally, it serves as a means of communication among the students of all 28 colleges of osteopathic medicine. All students of osteopathic medicine are eligible for membership in SOMA.

With over 10,000 members, SOMA is the largest osteopathic medical student organization in the world. In addition to providing valuable programs and benefits, SOMA plays an active role in portraying the student voice to the AOA and larger medical community in order to help shape the future of our chosen career field. Volunteer osteopathic medical students run both local and National SOMA organizations.

### **Pre-SOMA**

Pre-SOMA is the undergraduate division of the Student Osteopathic Medical Association. Our goals are to promote osteopathy and inform the public about osteopathic medical education as well as to increase the number of applicants to osteopathic medical schools and prepare students for success as osteopathic physicians.

Members of Pre-SOMA have access to the SOMA newsletter, have the opportunity to be a registered user on our website, and are invited to attend our National SOMA Conventions. Pre-SOMA members are also given an open line of communication with current osteopathic medical student and practicing DO's around the country, to help offer better insight into the profession that they are about to enter.

National SOMA is currently offering FREE membership to all Pre-SOMA members. To become a member of Pre-SOMA, please fill out the online registration form at [www.studentdo.com](http://www.studentdo.com): In the lower left-hand corner, click the button that says "New Users, Sign up Now!" (under "School", select "Pre-SOMA student").

If you have any questions about Pre-SOMA, membership, convention registration or setting up a Pre-SOMA chapter, visit [www.studentdo.com](http://www.studentdo.com) and navigate to the Pre-SOMA Page (Under "Programs"). Also, do not hesitate to contact me any time at [presoma@studentdo.com](mailto:presoma@studentdo.com). Thank you for interest in Pre-SOMA!

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## Why Join Pre-SOMA?

National Pre-SOMA is the official and ONLY undergraduate pre-medical organization directly affiliated with the Student Osteopathic Medical Association and the American Osteopathic Association.

National Pre-SOMA members have an open line of communication with current osteopathic students and physicians to ask questions, gather information, and find out more about osteopathic medical school and careers in osteopathic medicine. Members receive the SOMA Newsletter as well as informational emails on a regular basis and are consistently in contact with the National Pre-SOMA Director who serves as a mentor to help them in their quest to become a DO. In addition, there are discount benefits listed below. More benefits are being added constantly, so please visit the website or email the Pre-SOMA Director for the most up-to-date list! Scholarships to Pre-SOMA members vary from year to year, please check the SOMA website or contact the Pre-SOMA director at [presoma@studentdo.com](mailto:presoma@studentdo.com) for more information.

**Car Rentals** - Alamo, Avis, Budget, Hertz, National

**Hotels** - <http://choicehotels.com> - 8 great brands, 1 great discount! SOMA members save 20%!

**GEICO Car Insurance** - <http://www.geico.com>

**MBNA Mastercard** - [http://www.mbna.com/index\\_main.html](http://www.mbna.com/index_main.html)

-This benefit is in conjunction with the AOA. For every dollar that you spend on this credit card, royalties are provided to national SOMA & each local chapter.

**SOMA Health Insurance** - [www.somainsurance.com](http://www.somainsurance.com) Toll Free: 800-349-1039

## Looking for More Benefits?

**FREE Membership!**

**FREE Convention Registration!**

Pre-SOMA members are eligible for free convention registration for both our fall and spring National Conventions. Are you going to be in town during our convention? Please email [presoma@studentdo.com](mailto:presoma@studentdo.com) for more information. There may even be a scholarship for travel expenses available!

**FREE Information!**

Do you have any acquaintances in DO school? We know ALL the students in DO school! Need to ask questions about admissions, interviewing, class schedules, books, studying, or medical school in general? Now you have someone to ask!

## **Establish a Local Pre-SOMA Chapter!**

In addition to becoming a National Pre-SOMA member, members are encouraged to join a local Pre-SOMA chapter or establish a new chapter if one does not already exist at their undergraduate institution. This gives students a better opportunity to network with fellow like-minded pre-med students and support one another throughout the process of preparing for and applying to medical school. This also offers pre-osteopathic students a base from which to work as a team to educate the community about osteopathic medicine, encourage other students to apply to osteopathic schools, and prepare themselves for success as Osteopathic Physicians. In addition, holding a leadership position in a Pre-SOMA chapter, and especially helping establish a new chapter will distinguish individuals as leaders among the Pre-Osteopathic student population.

## **Becoming a New Student Club/Organization**

While the process for starting a new club/organization at every undergraduate college or university is different, here are some guidelines to keep in mind. *Check with the specific policy on your campus for more details.*

**Instructions for obtaining a National Pre-SOMA Charter (and all necessary documents) can be found on the website at [www.studentdo.com](http://www.studentdo.com).**

### **How Do I Start a New Student Organization?**

Any group of students (numbers vary by school) that want to organize to pursue a common interest may start a student organization.

#### **1. Apply for Recognition**

This process again, varies by school, but an authorized representative of your college or university must sign the "Verification of Student Organization Status" form.

##### **Purpose for Recognition**

Recognition of a group as a student club/organization establishes an identity and relationship with the school which enables that organization to secure the use of college facilities and services.

#### **2. Develop a Constitution**

A basic outline for the constitution is included in this guide. A signed copy of the National Pre-SOMA constitution must accompany the application for National recognition, and an individualized Chapter Constitution must be created and submitted to the National office by the beginning of the Spring Semester of the year of charter application.

#### **3. Elect and/or Select Officers**

A list with names, addresses, and phone numbers of the officers must accompany the application; and an Officer Update form must be submitted by the chapter each summer by July 1<sup>st</sup>.

#### **4. Select an Advisor**

Select a willing faculty advisor from your college or university who will assist with oversight of the organization and help to provide continuity over the years, as student officers come and go.

#### **5. Maintain "Active" Status**

To maintain active status, a club must complete and submit all of the required forms (found on the website: [www.studentdo.com](http://www.studentdo.com)) by the deadlines outlined in the Charter Information document as well as on the website. A charter can be obtained at any time throughout the year, please contact the National Pre-SOMA Director for more information: [presoma@studentdo.com](mailto:presoma@studentdo.com).

## **General guidelines:**

**The purpose of Pre-SOMA** is to promote and inform the public about osteopathic medical education, to increase the number of applicants to osteopathic medical schools, and to prepare our members for entrance into these schools.

**Officer positions may include:** President, Vice President, Secretary, Treasurer and National Liason Officer (who relays information between National Pre-SOMA/SOMA and the local chapter). Titles may vary by chapter, depending on discretion of founding officers, but these titles and descriptions should be included in the Chapter Constitution.

**Activities** can include speakers, demonstrations, conferences, or service activities and **resources** may include studentdo.com website, a local SOMA chapter at an Osteopathic Medical School, area D.O.s, M.D.s, hospitals or health agencies.

**Dues:** National SOMA is currently offering FREE membership to all Pre-SOMA members. Any local dues that your officer board deems necessary should be clearly stated to all prospective members and used in a manner consistent with the mission of Pre-SOMA.

## **A Constitution Writing Guide (Example)**

### **Article I. Name**

The Name of this organization shall be \_\_\_\_\_. (i.e. \_\_\_\_\_ University Pre-Student Osteopathic Medical Association; here forth referred to as Pre-SOMA)

### **Article II. Purpose**

In this section you describe the purpose/purposes of your organization as it relates to your college, your own members, and the community in general. This may be just a simple statement or a detailed description. You may use the purpose from the National Pre-SOMA Constitution, or fit the purpose more specifically to your chapter.

### **Article III. Membership**

Membership shall be open to \_\_\_\_\_ (State your requirements).

- Requirements for voting privileges ("who may vote") must be stated in this portion of the constitution.
- Define a quorum in the constitution. This will clarify and streamline procedures dealing with elections, by-laws, amendments, and ratification.
- Specify if membership dues will be charged

### **Article IV. Organization/Officers**

1. The primary duty of the president will be to be responsible for the overall success of the group. The president may also be required to: Call and preside over meetings, represent the organization outside the group whenever necessary and, fulfill any other duties the group sees fit.
2. The duties of the vice-president will be to perform the duties of the president in the latter's absence. Additional duties may be assigned according to the needs of your particular organization.
3. The duties of the secretary will be to keep the records of the business of the group, to conduct its correspondence and to take minutes at the meetings.
4. The duties of the treasurer will be to administer the financial affairs of the organization.
5. The group will choose one or more faculty/staff advisors and will consult with them on matters of procedure and programs. In the absence of all officers the faculty/staff advisor may function as president pro-tempore. In no circumstances except as stated above, shall the advisor be give voting privileges or direct control of any kind over the disbursement of funds or the direction of the group.

### **Article V. Elections**

An appropriate procedure for elections should be described as part of the constitution. This should include a specific timeframe in which elections will be held, for example "The second week of Spring Semester" or whatever makes sense for your chapter. It is also possible to grant an officer most likely the president the right to call for elections. However, in such case a deadline must be set for election to be called. In no circumstances shall a term of office exceed one calendar year without re-election.

### **Article VI. By-Laws**

By-laws are rules and procedures used by an organization to run its own meetings and affairs. By -laws need not be approved by senate, however the procedure by which they are adopted (i.e. a 2/3 quorum vote) must be specified in the group's constitution. By-laws themselves are not a part of the constitution.

### **Article VII. Amendments**

The constitution may be amended by the procedures you set up in this section. This may require the approval of the student senate as well as the Pre-SOMA chapter itself (check with the policy of your school).

### **Article VIII. Ratification**

This constitution shall become effective upon ratification upon a quorum vote of the group (usually 2/3) following the approval of student senate.

*--Adapted from Cornell College*

**\*\*Students should consult their university handbook for further school-specific guidelines when writing the constitution. Any other questions can be directed to your school's office of Student Activities or or your student senate.**

## **How Osteopathic Medicine Got It's Start**

Dr. Andrew Taylor Still developed the concept of Osteopathic Medicine in 1874. Dr. Still was dissatisfied with the effectiveness of 19th Century medicine. He believed that many of the medications of his day were useless or even harmful. Dr. Still was one of the first in his time to study the attributes of good health so that he could better understand the process of disease.

In response to the current state of medical care, Dr. Still founded a philosophy of medicine based on ideas that date back to Hippocrates, the father of medicine. The philosophy focuses on the unity of all body parts. He identified the musculoskeletal system as a key element of health. He recognized the body's ability to heal itself and stressed preventive medicine, eating properly and keeping fit.

Dr. Still pioneered the concept of "wellness" more than 125 years ago. In coordination with appropriate medical treatment, the osteopathic physician acts as a teacher to help patients take more responsibility for their own well-being and change unhealthy patterns.

Just as Dr. Still pioneered osteopathic medicine on the Missouri frontier in 1874, today osteopathic physicians serve as modern day medical pioneers. They continue the tradition of bringing health care to areas of greatest need. This is apparent when recognizing that approximately 65% of all osteopathic physicians practice in primary care areas such as pediatrics, family practice, obstetrics/gynecology and internal medicine. Also, many D.O.s fill a critical need for doctors by practicing in rural and medically underserved areas.

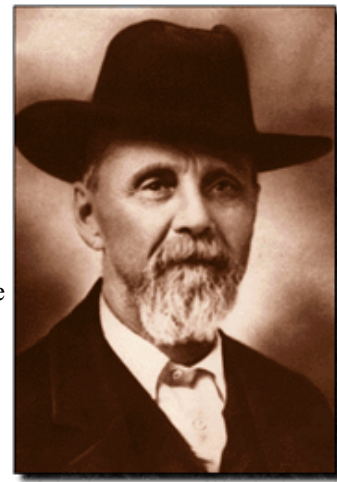
Today osteopathic physicians continue to be on the cutting edge of modern medicine. D.O.s combine today's medical technology with their ears, to listen compassionately to their patients; their eyes, to see their patients as whole persons; and their hands, to diagnose and treat injury and illness.

**"To find health should be the object of the doctor. Anyone can find disease."**

**-Dr. A.T. Still, Founder of osteopathic medicine, 1874**

## The Founder of Osteopathic Medicine

Andrew Taylor Still was born on August 6, 1828, in a log cabin in Lee County, Virginia. The third of nine children born to Abram and Martha Still, young Andrew led a typical frontier boy's life, with plenty of hard work and intermittent schooling. His father was a Methodist circuit-riding preacher and a physician, whose work led the family to move several times between 1834 and 1841, to circuits in Tennessee and Missouri. Finally, in 1851, Abram was assigned to head up the Wakarusa Shawnee Mission in Kansas. At least part of the reason he received this assignment was to get him out of Missouri, a pro-slavery state where his strong anti-slavery sermons were getting an increasingly hostile reception.



STILL NATIONAL OSTEOPATHIC MUSEUM

Andrew Still, by then married with two young children, followed his parents to Kansas in 1853. It was about this time that he decided to become a physician. It was common practice in those days for a would-be doctor to train by studying medical books and working with a practicing physician--in this case, his father. He may have received additional, formal training at a school in Kansas City, but no records remain to establish where and when this training took place.



STILL NATIONAL OSTEOPATHIC MUSEUM

In the beginning, Still had a typical frontier medical practice, sometimes traveling great distances to reach the bedsides of his patients. Once there, he employed the usual methods of the time, outlined in the medical books owned by him: bleeding, blistering, purging, and so on. During the same period, Still became deeply embroiled in the fight over whether Kansas would be admitted to the Union as a slave state or a free state. The Kansas-Nebraska Act of 1854 provided that the settlers in those two territories would decide the question for themselves. For more than four years, civil war raged in Kansas as both sides tried to gain control of the territorial government. Several of the Still brothers, including Andrew, took up arms in the cause. A.T. Still found himself in continual danger as he traveled the countryside tending his patients. In October 1857, Still was elected to represent Douglas County in the territorial legislature. By August 1858, a free-state

constitution had been passed. Kansas was admitted to the Union as a free state on January 29, 1861.

After the Civil War broke out in 1861, Andrew Still enlisted, serving as a hospital steward in the 9th Kansas Cavalry, a captain in the 18th Kansas Militia, and a major in the 21st Kansas Militia. In October 1864, Still's outfit saw action near Kansas City, helping to repel the Confederate forces advancing on the city and pursuing the army of General Sterling Price for more than 90 miles. Soon thereafter, Still received orders to disband the regiment and go home. Back at home, Still faced a grave personal crisis. Earlier that year, an epidemic of spinal meningitis had swept through the area and killed three of his children. He had already lost his first wife, Mary Vaughan, to childbirth complications; a month after the epidemic, the daughter born to his second wife, Mary Elvira Turner, died of pneumonia. His inability to save his family, coupled with his grim experiences as a Civil War doctor, led Still to reject most of what he had learned about medicine and search for new and better methods.

Still's explorations were grounded in the study of anatomy. Having grown up as a hunter and farmer, he already had a basic understanding of the structural relationships of bones, muscles, and organs, knowledge which he now extended through the study of human skeletons. He became convinced that most diseases could be alleviated or cured without drugs. The key was to find and correct anatomical deviations that interfered with the free flow of blood and "nerve force" in the body.

It is impossible to say exactly what influences Still drew on as he shaped his new system of healing. He was a well-read man, deeply interested in the social and intellectual developments of his time, which undoubtedly helped shape his philosophy. Furthermore, there is evidence that Still knew about a number of alternative medical theories then in circulation--magnetic healing, bonesetting, Grahamism, hydrotherapy, homeopathy, and eclecticism--and that in his search for a new way of healing, he investigated several of these systems for himself. Most he rejected outright. From others, he retained and adapted--consciously or unconsciously--those elements which seemed to have some validity.



STILL NATIONAL OSTEOPATHIC MUSEUM

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From the beginning, Still met with considerable opposition to his new theories and techniques. The local church denounced his claims of hands-on healing as sacrilegious. His brothers were embarrassed by his outspoken questioning of medical tradition; they criticized his willingness to risk his livelihood by driving away patients and to neglect his family and farm in pursuit of his "crazy" ideas. When Still asked to present his ideas at Baker University, which his family had helped to establish in the 1850s, school officials refused him permission. In 1874, Still decided to leave Kansas and return to Macon, Missouri, where he hoped his ideas would be better received. They were not, and after a few months of trying, Still moved north to Kirksville. There he finally began to find some acceptance, enough to open an office on the town square in March 1875. Advertising himself as a magnetic healer and a "lightning bonesetter" and traveling to towns as far away as Hannibal, Still slowly built up his reputation. Word spread about the doctor whose system of drugless, manipulative medicine--officially named "osteopathy" in 1885--was able to cure many apparently hopeless cases.

Finding he had more patients than he could handle, Still trained his children and a few others to assist him in his practice. Finally, there were enough people who wanted to learn his methods that he was persuaded to start a school. The American School of Osteopathy (ASO) was founded in Kirksville, MO in 1892, in a two-room frame building. The first class of five women and sixteen men--including three of Still's children and one of his brothers--graduated in 1894. The school became a huge success. In August 1894, work was begun on a new infirmary building, which opened in January 1895; by 1897, it was necessary to add two wings that more than tripled the size of the original building. More than 30,000 osteopathic treatments were given at the infirmary in 1895. It was estimated that on any given day, there were more than 400 people who had come to Kirksville to be treated. The Wabash Railroad increased to four the number of daily passenger trains to Kirksville.

With his medical school and practice firmly established, Still returned to one of his other great loves: mechanical inventions. He had always been interested in machines; faced with a mechanical problem, his solution had always been to come up with a better approach. In the 1870s, he had patented an improved butter churn; in the years since, he had come up with a number of other inventions. Some were related to the practice of osteopathy, such as the patient brace, a simple device designed to keep patients from falling off the narrow treatment table during vigorous manipulations. In about 1904, Still began work on several inventions. In 1910, he patented a smokeless furnace burner but had some trouble producing a full-sized working model. Heartbroken from Mary Elvira's death in May 1910, he did not have the will to pursue the matter further, and the invention was never successfully marketed.

Still remained active in the ASO almost until his death at the age of 89, though greatly weakened by a stroke in 1914. When he died on December 12, 1917, the beloved "Old Doctor" was mourned by the students at the ASO and the more than 3,000 members of the healing profession which he had conceived more than 50 years before.

*---Adapted from Cheryl A. Gracey, Collections Manager, Still National Osteopathic Museum, Kirksville, MO*

## **What is a D.O.? How does a D.O. degree differ from an M.D. degree?**

There are many similarities between D.O.s (osteopathic physicians) and M.D.s (allopathic physicians). Applicants to both D.O. and M.D. medical schools typically have a four-year undergraduate degree with required pre-requisite science courses. Both D.O.s and M.D.s complete four years of basic medical education. After medical school, both D.O.s and M.D.s can choose to practice in any specialty area of medicine -- such as surgery, family practice or psychiatry--after completing a residency program (typically two to six years of additional training). Both D.O.s and M.D.s must pass comparable state licensing exams. D.O.s and M.D.s both practice in fully accredited and licensed health care facilities. D.O.s comprise a separate, yet equal branch of American medical care. Together, D.O.s and M.D.s enhance the state of care available in America. It is, however, the ways that D.O.s and M.D.s are different that bring an extra dimension to health care.

Osteopathic medicine brings a unique philosophy to traditional medicine. D.O.s practice a "whole person" approach to medicine; instead of treating specific symptoms or illnesses they regard the body as an integrated whole. D.O.s receive more extensive training in the musculoskeletal system - the body's interconnected system of nerves, muscles, and bones. This training provides osteopathic physicians with a better understanding of the ways in which an injury or illness in one part of the body can affect all other parts of the person. Osteopathic physicians focus on preventive health care, and thus, Osteopathic medical schools graduate more students who become primary care physicians. One of the most obvious differences between allopathic (M.D.) and Osteopathic (D.O.) education is the extra 200+ hours of training that D.O.s receive in Osteopathic manipulative medicine (OMM). D.O.s are trained to use their hands to diagnose and treat injury and illness and encourage the body's natural tendency toward good health. By combining all other medical procedures with OMM, D.O.s offer their patients the most comprehensive healthcare available in medicine today.

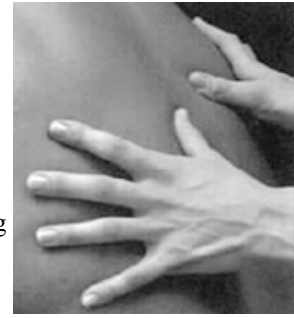
If you're like most people, you've been going to a doctor since you were born and perhaps didn't know if you were seeing a D.O. (osteopathic physician) or an M.D. (allopathic physician). You may not even be aware that there are two types of complete physicians in the United States, as M.D.s and D.O.s are sometimes indistinguishable in the way that they practice medicine. The primary difference is in the training that each doctor receives, and the overall philosophy that guides their approach to patient care.

**"Doctors of osteopathic medicine combine the art of healing with the art of caring. They treat each patient with a warm, hands-on approach that's more about wellness than illness."**

-John B. Crosby, J.D. Executive Director, AOA

## **OMM, OMT, OTM, OPP: What's with the Acronyms??**

Osteopathic manipulative medicine (OMM), or Osteopathic Manipulative Treatment (OMT), Neuromusculoskeletal Medicine (NMSK), whatever you want to call it is essentially hands-on care. It involves using the hands to diagnose, treat, and prevent illness or injury. Using OMM, your osteopathic physician (D.O.) will move your muscles and joints using techniques including stretching, gentle pressure and resistance. In some Osteopathic schools, OMM is taught in conjunction with Osteopathic Theory, making the course titled OTM (Osteopathic theory and methods) or OPP (Osteopathic Principles and Practices).



OMM used in a medical practice can help people of all ages and backgrounds. It can: ease pain, promote healing, and increase mobility. OMM is often used to treat muscle pain, but it can also help patients with a number of other health problems, among them: asthma, sinus disorders, carpal tunnel syndrome, migraines, and menstrual pain. Patient response to OMM is highly individualized, and treatments must be tailored to each patient.

Does OMM work? Yes! D.O.s have known this for years, but don't take just their word for it. Consider the results of a study published in the November 4, 1999 issue of the *New England Journal of Medicine*. In the study, researchers looked at how well OMM works to treat lower-back pain.

Patients were divided into two groups. One group received standard treatments, such as hot and cold packs, physical therapy, and drugs. The other group received standard care plus OMT. Twelve weeks later, patients in both groups felt better. But those in the OMT group had used less drugs and physical therapy. That meant they had fewer side effects and lower health care costs.

Another study looked at how well OMM works to reduce pain after a hysterectomy. Researchers measured the amount of morphine used to treat pain. And they asked patients to describe their pain levels. They found that patients receiving OMM needed less morphine. The success goes on and on. For more proof, simply do some searching within the academic journals! When appropriate, OMM can complement—and even replace—drugs or surgery. In this way, OMM adds an important dimension to standard medical care.

### **How is OMM incorporated into an office visit?**

#### **Exam**

Your D.O. will do a complete physical exam. This includes standard components of a physical exam including looking into the eyes, ears, nose and throat, listening to the lung and heart sounds, and other standard examination procedures. Another key component of an osteopathic office visit is the structural exam which starts by checking your posture, spine, and balance. The D.O. will also check your joints, muscles, tendons, and ligaments. If necessary, tests are ordered (i.e. X-rays, lab tests, etc...)

#### **Interview**

The D.O. will talk with you about various aspects of your medical history. In addition, you will be asked about such factors as your home, work, and family life, in order to extrapolate potential contributing factors to your current health problems.

#### **Diagnosis**

The D.O. will consider the results of the exam and interview and will discuss with you the most likely cause of your symptoms.

#### **Treatment**

The D.O. will suggest a treatment plan. This may include such options as drugs or surgery. It may also include OMM and lifestyle changes. Depending on how severe your problem is, you may need multiple OMM sessions.

## **Osteopathic Medical Education**

Osteopathic medicine is emerging as one of our nation's fastest growing healthcare professions. Because of our commitment to primary care and preventive medicine, osteopathic physicians (D.O.s) are becoming the physicians of choice for more and more people. Osteopathic medicine emphasizes the inter-relationship of all aspects of the patient's body, mind and spirit. The osteopathic philosophy of treating the whole person is applied to the prevention, diagnosis and treatment of illness, disease and injury.

To be considered for admission to any of the nation's osteopathic medical schools, applicants typically have a bachelor's degree, with undergraduate studies that include one year each of English, biological sciences, physics, general chemistry and organic chemistry. Other requirements may include genetics, mathematics, and psychology (check with individual schools for specific requirements). Most prospective D.O. students major in a scientific discipline; however, applicants may major in any discipline as long as they meet the pre-requisite requirements for the schools to which they are applying. Applicants must also take the Medical College Admissions Test (MCAT).

Osteopathic medicine is a people-oriented profession that demands dedicated and empathetic individuals. Prospective osteopathic medical students must exhibit a genuine concern for people. Applicants are advised to spend some time with a D.O. or do volunteer work in a healthcare setting before considering a career in this field. A personal letter from an osteopathic physician is required by most osteopathic schools for admission. Osteopathic medical colleges also require a personal interview to assess an applicant's character and desire to become an osteopathic physician.

The first two years of the osteopathic medical curriculum focus on basic sciences and general medical knowledge and skills development, laying the groundwork for becoming a successful physician. The third and fourth years are clinically-based rotations, with much of the teaching in community hospitals, major medical centers and doctors' offices. These years give osteopathic students a chance to apply their knowledge and skills that they have been developing throughout the first two years of medical education.

During the clinical years, students study general medicine and are involved in research. They rotate through urban, suburban and rural settings, gaining exposure to a variety of specialty areas of medicine and assessing their interest in various specialties in order to guide their decision of what residency to apply for after medical school.

Osteopathic principles and practices, which emphasize the relationship between body systems, are integrated into the four-year curriculum. Students learn osteopathic manipulative medicine for prevention, diagnosis and treatment of disease and are called upon to utilize these skills during their clinical rotations to enhance the healing process in the patients that they encounter. Many osteopathic students find their OMM skills to be particularly beneficial during clinical rotations as they have this capacity to help their patients in a way that allopathic students cannot. As a student, you are not able to perform major medical procedures or prescribe medications, but osteopathic students can actually do something to help their patients immediately by treating them with OMM.

Following graduation, D.O.s apply for either osteopathic or allopathic residency programs in the specialty area of their choice. Depending on the residency program, a 1-year rotating internship may be required. (This internship is also great for those students who are not yet sure which specialty they wish to enter). Interns rotate through hospital departments including internal medicine, family practice and surgery. Interns then complete a residency program in a specialty area, requiring two to six years of additional training.

D.O.s are licensed for the full practice of medicine and surgery in all 50 states and many countries across the globe! Each state (or country) determines the tests and procedures for licensing its physicians. In some states, the same tests are given to D.O.s and M.D.s; other states administer separate licensing exams.



**Helpful Links** (visit [www.studentdo.com/pre-soma.htm](http://www.studentdo.com/pre-soma.htm) for continually updated links)

**Preparing for the MCAT:**

<http://www.aamc.org/students/mcat/start.htm>  
<http://www.kaplan.com/>  
<http://www.princetonreview.com/>  
<http://www.e-mcat.com/mcat2/login.asp>  
<http://www.columbiareview.com/>  
<http://www.berkeley-review.com/>

**Learning more about osteopathic medicine and its colleges:**

<http://www.aacom.org/>  
<https://aacomas.aacom.org/>  
<http://www.osteopathic.org/>

**Preparing for interviews:**

<http://www.aamc.org/students/applying/about/31questions.htm>  
<http://www.medscape.com/px/urlinfo>  
<http://www.admission-interview.com/>  
<http://www.bestpremed.com/intviews.htm>

**To chat with other pre-med and current medical students:**

<http://www.studentdoctor.net/index.asp>  
[http://www.medschoolchat.com/Flash\\_Chat+main.html](http://www.medschoolchat.com/Flash_Chat+main.html)

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