



LIBERTY

U N I V E R S I T Y

COLLEGE *of* OSTEOPATHIC  
MEDICINE

ACADEMIC  
CATALOG

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## Chapter 1. Introduction

### Message from the Dean



Welcome to Liberty University College of Osteopathic Medicine. Our faculty, staff, and students welcome all those who possess a servant's heart, a scientist's curiosity, and the desire to improve the lives of others through the practice of osteopathic medicine. We encourage students to provide patient care in accordance with the fruits of the spirit, demonstrating love, joy, peace, patience, goodness, faithfulness, gentleness, and self-control.

The faculty, staff, and administration of Liberty University College of Osteopathic Medicine are committed to honoring and advancing the culture of Liberty University as a Christian institution as well as the philosophy and heritage of the osteopathic profession. We believe in the body's inherent ability for wellness, a patient-centered approach to the practice of medicine, and a philosophy of medical care that embraces the body, mind, and spirit.

Our primary goal is to train physicians who exhibit the compassion, devotion, and excellence that we feel is best personified by the Great Physician, Jesus Christ.

As educators and medical professionals, we strive to advance medical knowledge, the practice of medicine, the health and wellness of our patients, equitable access to quality medical care by all individuals, and the promotion of health policy that advances healthcare in our nation and throughout the world. We strive to train physicians who will emphasize preventive medicine, wellness, primary care, and community-based practice, but who will be prepared to succeed in any discipline or graduate medical education program. We design our curriculum to provide our students with the skills required to remain lifelong learners, the desire to contribute to the advancement of medical knowledge, and the passion to serve their patients throughout their professional careers.

Recognizing the needs of underserved populations in the United States and around the globe, we recruit students with a servant's heart and then design local outreach events and international medical missionary trips to kindle a passion for disadvantaged patients and give them the experience of reaching these people with necessary medical care.

The task of becoming an osteopathic physician is educationally and personally demanding. If you have at your core a servant's heart, if you possess a strong commitment and passion to enhance the lives of others, and if you have the motivation, work ethic, and personal responsibility that the curriculum and profession demand, the personal and professional rewards that you experience will far exceed the cost. If you share the qualities that we seek, you will find kindred spirits and life-long partners here at Liberty University College of Osteopathic Medicine. "Therefore encourage one another and build each other up, just as in fact you are doing." Thes 5:11

*Joseph R. Johnson,*

Joseph R. Johnson, DO, FACOOG (Dist)

*Dean*

## 1.1. Mission

### 1.1.A. Mission Statement<sup>1</sup>

Liberty University College of Osteopathic Medicine (LUCOM) exists to educate osteopathic physicians in a Christian environment. LUCOM prepares physicians who dedicate themselves to excellence in the practice of osteopathic medicine through service toward their fellow man, lifelong learning, and the advancement of medical knowledge. Instilling the Christian values of integrity and professionalism, LUCOM trains physicians who will provide ethical, compassionate, competent, and patient-centered osteopathic medical care.

### 1.1.B. Values

Scholarship

Teamwork

Leadership

Service

Professionalism

Integrity

Commitment to a biblical worldview

Diversity

Ethical treatment of people

### 1.1.C. Goals<sup>2</sup>

1. To recruit and graduate osteopathic medical students who have a servant's heart and are committed to providing care to underserved and underrepresented patients in Virginia, the Southeastern United States, the United States of America, and the globe.
  - a. To recruit a diverse student body that has a desire to serve disadvantaged urban and rural underserved populations.
  - b. To place an emphasis on recruitment of students from Virginia and the Southeastern United States who share our mission, vision and values and are likely to practice in the region and help advance its health and economic status.
2. To honor and preserve the history and philosophy along with the art and science of osteopathic medicine through the teaching of historical principles and practices and the incorporation of up-to-date scientific knowledge, research, clinical, and biomedical sciences.
3. To provide an osteopathic medical education that is holistic, evidence-based, community-focused, and patient-centered with excellence as its expected standard.
4. To teach students by design, example, and mentorship the treatment of the patient as an integrated whole; incorporating the mind, body, and spirit.
5. To develop graduates who are qualified to enter any medical discipline upon graduation yet predominantly enter primary care, preventive, and community-based practices in our service area. This will be accomplished through the design of the curriculum, the type and location of the clinical

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<sup>1</sup> 1.1 Program Mission

<sup>2</sup> 5.2 Diversity

educational opportunities provided, and the leadership of the faculty role models that are provided by the COM.

6. To advance the careers, knowledge, skills, and personal lives of the faculty and staff of the COM through support for scholarly activity, research, faculty development, a positive environment, and respect.
7. To contribute to the advancement of medical knowledge and advance the quality of health care for society through educational, scientific, and clinical research, promotion of effective health policy, and other scholarly activity.
8. To be a valued member of the greater Liberty University, Lynchburg, and Virginia communities through contributions to educational, professional, societal affairs and through works of service.
9. To support and advance osteopathic and other professional medical associations through leadership, support, contributions of service, development of policies, expansion of knowledge, and collaborative efforts.
10. To develop clinical education opportunities in rural and underserved areas of Virginia, local as well as distant regions of the United States and globally, and to provide quality clinical educational opportunities for LUCOM students and residents.
11. To develop clinical opportunities in rural and underserved areas of Virginia that will provide expanded access for patients' healthcare through the efforts of LUCOM faculty, students, and residents.
12. To develop and maintain national and international medical outreach and mission programs to train clinicians to serve in underserved areas of Virginia, the United States, and the developing world.
13. To collaborate with our affiliated hospitals and clinical partners to develop graduate medical education programs for osteopathic and other health professions graduates, provide educational opportunities for health care professionals at the same time the programs provide healthcare and educational services to our region.

## **1.2. Commitments<sup>3</sup>**

The faculty, staff, and administration of Liberty University College of Osteopathic Medicine are committed to the osteopathic philosophy and heritage, serving the needs of our students, faculty, and patients today as well as into the future, and advancing both the science and art of the practice of osteopathic medicine.

Working together, we recruit and educate talented individuals committed to becoming osteopathic physicians. We have as a goal the graduation of students who are prepared to succeed in any graduate medical education program they decide to pursue. In addition, we are committed to ensuring that our graduates have the foundation of knowledge, skills, and competencies that will enable them to meet the needs of the wide diversity of patients they will encounter in their professional careers. We are committed to producing physicians who are knowledgeable, skilled and competent, but also professional and ethical. The college is dedicated to producing physicians with the skills needed to remain lifelong learners, the desire to contribute to the advancement of medical knowledge, and the passion to be of service to their patients throughout their professional careers.

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<sup>3</sup> 1.1 Program Mission  
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The College of Osteopathic Medicine prepares to accomplish these goals by:

- Providing experienced and dedicated professionals and faculty who demonstrate excellence in their knowledge, skill, and experience in the practice of medicine, professionalism, and ethics in their personal conduct and dedication for the education of medical students, to serve as the educators, mentors, and role models for our students.
- Providing the facilities and resources necessary to ensure that its students have access to, and the opportunity to acquire a state-of-the-art medical education in a positive learning environment.
- Providing the resources and support for research and scholarly activity that aligns the needs of our communities, students, and faculty.
- Providing opportunities for clinical experience under the supervision and guidance of talented, knowledgeable, dedicated, credentialed faculty that will allow our students to acquire the clinical knowledge, skills, and competencies required, while integrating these components within the core of knowledge acquired during the student's preclinical education.

LUCOM's dedication to a Continuous Quality Assessment and Quality Improvement Process serves to advance its mission and vision, benefit the education of its students, and assess the growth and development of its faculty and staff.

LUCOM is committed to seeking out and carefully evaluating the opinions and recommendations of our students, faculty, staff, and community and professional partners and to integrate them into our programs.

LUCOM is committed to our mission statement and reaching the goals established by the vision and values adopted by the Liberty University Board of Trustees and the College of Osteopathic Medicine.

### **1.3. The Osteopathic Physician**

Two types of physicians have unrestricted licenses and may practice medicine in all 50 states. They are the Doctor of Osteopathic Medicine (D.O.) and the Doctor of Allopathic Medicine (M.D.). While both types of physicians are qualified, competent, and trained in all aspects of patient care, D.O.s offer an approach to medical care that emphasizes holistic and patient-centered treatment with an emphasis on wellness, prevention of disease, and disability.

Osteopathic physicians are distinguished by an emphasis on holistic, patient-centered primary care, by using osteopathic manipulative medicine as indicated and when beneficial, and by their tradition of caring for patients in underserved rural and urban areas. Osteopathic physicians respect the relationship between physical structure and organic function and view the human body as an interdependent unit rather than an assortment of separate parts and systems.

All medical and surgical specialties are represented within the osteopathic medical profession. However, the training of primary care, community-based physicians, and the desire to reach rural, minority, geriatric, and indigent populations make the osteopathic medical profession unique.

We at Liberty University College of Osteopathic Medicine are dedicated to our stated mission of producing vitally needed primary care physicians with a goal of placing fifty percent of our graduates in community-based medical practices in the state and region. We are committed to providing an

education for our students that will prepare them to enter any resident program and advance the health of their patients in all patient care settings.

## **1.4. Accreditation & State Certification<sup>4</sup>**

### **1.4.A. Programmatic Accreditation**

Liberty University College of Osteopathic Medicine has received accreditation from its programmatic accreditor, the Commission on Osteopathic College Accreditation (COCA).

COCA is recognized by the U.S. Department of Education and the Government of Post- Secondary Accreditation as the accrediting agency for colleges educating osteopathic physicians and surgeons. More information about the COCA accreditation process can be found at: [www.aoacoca.org](http://www.aoacoca.org).

### **1.4.B. Institutional Accreditation**

Liberty University® is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools (SACSCOC) to award associate, bachelor, masters, specialist, and doctorate degrees. Questions about the accreditation of Liberty University may be directed in writing to the Southern Association of Colleges and Schools Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097, by calling 404-679-4500, or by using information available on SACSCOC website ([www.sacscoc.org](http://www.sacscoc.org)).

Normal inquiries about the institution, such as admission requirements, financial aid, educational programs, etc., should be addressed directly to Liberty University.

### **1.4.C. State Certification**

Liberty University is authorized to confer degrees by the Commonwealth of Virginia.

Pursuant to 23-276.1 - 12 of the Code of Virginia, the State Council of Higher Education for Virginia (SCHEV) is responsible for developing procedures to which certain private and all out-of-state postsecondary institutions must adhere in order to receive approval to confer degrees, certificates, or diplomas in the Commonwealth of Virginia. Certain private institutions are exempt from the requirements of certification or approval by SCHEV.

Liberty University was incorporated in the State of Virginia on January 18, 1972. It has operated under the same ownership since that time and has remained in good standing with the U.S. Department of Education and its accrediting body. Liberty University is an exempt institution.

### **1.4.D. Continuing Medical Education Accreditation**

The Liberty University College of Osteopathic Medicine (LUCOM) has been reviewed by the Accreditation Council for Continuing Medical Education (ACCME®) and has been awarded accreditation as a provider of continuing medical education (CME) for physicians. Accreditation in the ACCME System seeks to assure the medical community and the public that LUCOM delivers

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<sup>4</sup> 1.3 Licensing & Regional/Institutional Accreditation, 12.6 Public Information  
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education that is relevant to clinicians' needs, evidence-based, evaluated for its effectiveness, and independent of commercial influence.

### **1.5. Non-Discrimination Statement<sup>5</sup>**

Liberty University does not engage in unlawful discrimination or harassment because of race, color, ancestry, religion, age, sex, national origin, pregnancy or childbirth, disability or military veteran status in its educational programs and activities. Liberty University maintains its Christian mission and reserves its right to discriminate on the basis of religion to the extent that applicable law respects its right to act in furtherance of its religious objectives. Specifically, the College of Osteopathic Medicine furthers the University's religious mission by using religion-based criteria in hiring. Although the College of Osteopathic Medicine does not use religion-based criteria in student admissions, its students are expected to abide by its Code of Conduct.

The College of Osteopathic Medicine accepts the teaching of the traditional biblical view with regard to sexual conduct outside a biblically ordained marriage between a natural-born man and a natural-born woman, which is incorporated into its Code of Conduct. Consistent with those teachings, the College of Osteopathic Medicine does not discriminate solely on the basis of an individual's professed sexual orientation, but only with regard to accompanying sexual conduct or other actions that undermine essential elements of the University's Christian mission.

The College of Osteopathic Medicine also takes into account personal history and fitness to practice medicine in its admissions and retention decisions. Specifically, the College of Osteopathic Medicine requires compliance with the Technical Standards to be qualified for its programs; however, qualified students have the opportunity to request accommodations and any decisions based on failure to meet its standards can be appealed.

The following persons have been designated to coordinate Liberty University's compliance with certain anti-discrimination laws: Coordinator of LU Online Disability Academic Support at (434) 592-5417 or luoodas@liberty.edu; Director of Disability Academic Support (Residential) at (434) 582-2159 or odas@liberty.edu; Executive Director of Title IX at (434) 592-4999 or TitleIX@liberty.edu.

### **1.6. The American Osteopathic Association (AOA) Code of Ethics<sup>6</sup>**

The American Osteopathic Association (AOA) Code of Ethics is a document that applies to all physicians who practice osteopathically throughout the continuum of their careers, from enrollment in osteopathic medical college/school through post graduate training and the practice of osteopathic medicine. It embodies principles that serve as a guide to the prudent physician. It seeks to transcend the economic, political, and religious biases, when dealing with patients, fellow physicians, and society. It is flexible in nature in order to permit the AOA to consider all circumstances, both anticipated and unanticipated. The physician/patient relationship and the professionalism of the physician are the basis for this document.

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<sup>5</sup> 1.5b Non-Discrimination for Faith-based Institutions

<sup>6</sup> 1.4 Governance & Program Policies

The AOA has formulated this Code to guide its member physicians in their professional lives. The standards presented are designed to address the osteopathic physician's ethical and professional responsibilities to patients, to society, to the AOA, to others involved in health care and to self.

Further, the AOA has adopted the position that physicians should play a major role in the development and instruction of medical ethics.

Section 1. The physician shall keep in confidence whatever she/he may learn about a patient in the discharge of professional duties. Information shall be divulged by the physician when required by law or when authorized by the patient.

Section 2. The physician shall give a candid account of the patient's condition to the patient or to those responsible for the patient's care.

Section 3. A physician-patient relationship must be founded on mutual trust, cooperation, and respect. The patient, therefore, must have complete freedom to choose her/his physician. The physician must have complete freedom to choose patients whom she/he will serve. However, the physician should not refuse to accept patients for reasons of discrimination, including, but not limited to, the patient's race, creed, color, sex, national origin, sexual orientation, gender identity, or disability. In emergencies, a physician should make her/his services available.

Section 4. A physician is never justified in abandoning a patient. The physician shall give due notice to a patient or to those responsible for the patient's care when she/he withdraws from the case so that another physician may be engaged.

Section 5. A physician should make a reasonable effort to partner with patients to promote their health and shall practice in accordance with the body of systematized and scientific knowledge related to the healing arts. A physician shall maintain competence in such systematized and scientific knowledge through study and clinical applications.

Section 6. The osteopathic medical profession has an obligation to society to maintain its high standards and, therefore, to continuously regulate itself. A substantial part of such regulation is due to the efforts and influence of the recognized local, state and national associations representing the osteopathic medical profession. A physician should maintain membership in and actively support such associations and abide by their rules and regulations.

Section 7. Under the law a physician may advertise, but no physician shall advertise or solicit patients directly or indirectly through the use of matters or activities which are false or misleading.

Section 8. A physician shall not hold forth or indicate possession of any degree recognized as the basis for licensure to practice the healing arts unless he is actually licensed on the basis of that degree in the state or other jurisdiction in which she/he practices. A physician shall designate her/his professional degree in all professional uses of her/his name. Indications of specialty practice, membership in professional societies, and related matters shall be governed by rules promulgated by the American Osteopathic Association.

Section 9. A physician should not hesitate to seek consultation whenever she/he believes it is in the best interest of the patient.

Section 10. In any dispute between or among physicians involving ethical or organizational matters, the matter in controversy should first be referred to the appropriate arbitrating bodies of the profession.

Section 11. In any dispute between or among physicians regarding the diagnosis and treatment of a patient, the attending physician has the responsibility for final decisions, consistent with any applicable hospital rules or regulations.

Section 12. Any fee charged by a physician shall compensate the physician for services actually rendered. There shall be no division of professional fees for referrals of patients.

Section 13. A physician shall respect the law. When necessary a physician shall attempt to help to formulate the law by all proper means in order to improve patient care and public health.

Section 14. In addition to adhering to the foregoing ethical standards, a physician shall recognize a responsibility to participate in community activities and services.

Section 15. It is considered sexual misconduct for a physician to have sexual contact with any patient with whom a physician-patient relationship currently exists.

Section 16. Sexual harassment by a physician is considered unethical. Sexual harassment is defined as physical or verbal intimation of a sexual nature involving a colleague or subordinate in the workplace or academic setting, when such conduct creates an unreasonable, intimidating, hostile or offensive workplace or academic setting.

Section 17. From time to time, industry may provide some AOA members with gifts as an inducement to use their products or services. Members who use these products and services as a result of these gifts, rather than simply for the betterment of their patients and the improvement of the care rendered in their practices, shall be considered to have acted in an unethical manner.

Section 18. A physician shall not intentionally misrepresent himself/herself or his/her research work in any way.

Section 19. When participating in research, a physician shall follow the current laws, regulations and standards of the United States or, if the research is conducted outside the United States, the laws, regulations and standards applicable to research in the nation where the research is conducted. This standard shall apply for physician involvement in research at any level and degree of responsibility, including, but not limited to, research, design, funding, participation either as examining and/or treating provider, supervision of other staff in their research, analysis of data and publication of results in any form for any purpose.

## Chapter 2. Requirements for Admission<sup>7</sup>

### 2.1. Minimum Requirements for Admission

While most students who matriculate to LUCOM will have a bachelor's degree or higher, at a minimum, each applicant that matriculates must have completed no less than 75% of the credits needed for a baccalaureate degree from a college or university accredited by an agency recognized by the United States Department of Education. Exception may be granted by the Dean.

Students must have obtained not less than a 3.0 GPA overall and 3.0 GPA in sciences to be considered for admission unless an exception for cause is granted by the Dean.

Applicants must have a cumulative score of at least 499 on the MCAT to be considered for admissions unless an exception for cause is granted by the Dean. Verified MCAT scores submitted in AACOMAS should be no more than three years old.

The minimum required undergraduate courses for matriculation are:

- **Biochemistry** or **Cellular Biology**: one semester (3-5 semester hours/6-8 quarter hours). *Two semesters of biochemistry or completion of both courses are highly recommended.*
- **Biological Sciences**: one year with laboratory (8-10 semester hours/12-15 quarter hours)
- **English**: two courses (6-10 semester hours/8-15 quarter hours)
- **Inorganic Chemistry**: one year with laboratory (8-10 semester hours/12-15 quarter hours)
- **Organic Chemistry**: one year with laboratory (8-10 semester hours/12-15 quarter hours)
- **Physics**: one semester with laboratory (4-5 semester hours/ 6-10 quarter hours), second semester is recommended
- **Four (4) additional science hours** are required (Faculty recommend courses in Anatomy, Physiology, Biochemistry, Immunology, Microbiology, or Genetics to enhance the student's success in medical school)

Recommended courses to prepare for the osteopathic medical curriculum include additional humanities such as literature, philosophy or theology; communication skills such as speech, debate, or drama; additional science courses such as genetics, human anatomy and physiology with lab, immunology, epidemiology, etc. A course in statistics is highly recommended.

The applicant should demonstrate a humanistic and service mentality consistent with that of LUCOM as demonstrated by action and involvement in outreach and service events. Preference is given to students from rural and underserved environments that are more likely to advance the mission and goals of the COM, especially those from the Central, Western and Southern regions of Virginia. Each applicant's personal values should be compatible with the Christian mission and environment of Liberty University.

Applicants are required to meet the Technical Standards for admission, continued enrollment and must affirm that they meet the standards. Any falsification or misinformation regarding the ability to meet technical standards is reason for dismissal.

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<sup>7</sup> 9.1 Admissions Policy, 12.6 Public Information  
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Applicants must submit all required paperwork per deadlines. If paperwork is not submitted as required, an offer of admission may be retracted.

## **2.2. Technical Standards**

The requirements to succeed at LUCOM are those necessary to successfully complete the curriculum and to practice osteopathic medicine with full practice rights. Students must be able to function in a variety of learning and clinical settings and quickly, accurately, and consistently learn and process data.

LUCOM is committed to making accommodations for students whose qualified disabilities allow them to accomplish a successful career as an osteopathic physician. While reasonable accommodations do occur; the student, however, is required to function with independence and personally demonstrate all the skills described that LUCOM holds as mandatory for the safe and effective practice of osteopathic medicine. The use of a trained intermediary means that a candidate's judgment must be mediated by someone else's power of selection and observation and is not a permissible accommodation.

While LUCOM is committed to making the accommodations that make a student successful, LUCOM is also committed to patient safety and assuring a safe and effective environment that does not place patients, students, or others at risk. Each technical standard has been chosen from standards osteopathic physicians deem necessary for the safe and effective practice of osteopathic medicine. Applicants who do not meet the technical standards should not apply to LUCOM.

Students must consider these requirements at the time of application and must also consider whether or not they can meet these technical standards in the curriculum and in the practice of medicine. Once enrolled, students must maintain their ability to meet these technical standards and to make academic progress and succeed in the curriculum. LUCOM considers the ability to meet these standards essential for the entrance to, continuation in, and graduation from its degree program.

If an applicant has a question as to their ability to meet the minimal technical standards listed, the applicant is required to notify the Office of Admissions and Student Services in advance of applying so that reasonable testing may occur. Applicants must identify to the Office of Admissions and Student Services all areas where there is question in meeting these technical standards.

### **2.2.A. Observation and Visual Integration**

Applicants and students must have sufficient visual capabilities to observe laboratory demonstrations, experiments, laboratory exercises, microscopic tissue with the aid of the microscope, and computer-based pictures used in laboratory demonstrations in the basic and clinical sciences. The student must be able to visually and accurately observe the physical signs associated with a patient in order to make a diagnosis and management. The use of a trained intermediary in such cases would compromise performance, as it would be mediated by another individual's power of selection, observation, skill, and experience. Observation requires the functional use of vision and somatic sensations and is enhanced by the sense of smell and hearing.

They must be able to observe a patient accurately at varying distances with the ability to determine size and depth of an object in low light at 0.3 cm, and with the ability to discern non-verbal communication.

### **2.2.B. Communication**

Applicants and students must be able to communicate effectively in English as the curriculum and clinical experiences are offered in English. Students are encouraged to learn other languages for medical communication; however, all curriculum and assessment is given in English. LUCOM requires the functional ability to speak, hear, and observe patients in order to elicit accurate medical information. The student must be able both to describe changes in mood, activity, posture, and other physical characteristics and to perceive nonverbal communication. The student must be able to communicate in English effectively and efficiently in verbal and in written form with the patient and with all members of the health care team in order to successfully complete the curriculum.

### **2.2.C. Motor Function**

Applicants and students must have sufficient motor function to execute movements reasonable required to provide general care and emergency treatment to patients by eliciting information from patients by palpation, percussion, and other diagnostic measures. The student must have sufficient motor function to carry out maneuvers of general and emergency care and osteopathic manipulation. Examples of emergent motor functions required of physicians include, but are not limited to, cardiopulmonary resuscitation, administration of intravenous fluids and intravenous medications, management of an obstructed airway, hemorrhage control, closure by suturing of wounds, obstetrical deliveries and osteopathic manipulative medicine. In addition, the delivery of osteopathic manipulation requires the use of extremities in palpation, positioning, and carrying out maneuvers of manipulation. These actions require fine and gross muscular movements, equilibrium and sensory function, as well as the senses of touch and adequate vision for inspection.

Students must be able to perform these maneuvers. Students who have conditions that do not allow physically taxing workloads must consider the long hours of study, the hours required in the classroom and laboratories, the physical strength required in the osteopathic examination and treatment, and to stand and walk for long hours in the clinical setting.

### **2.2.D. Sensory Skills**

Applicants and students of osteopathic medicine must possess an enhanced ability to use their sensory skills. Individuals with disabilities who have significant tactile sensory or proprioceptive disabilities may require a thorough evaluation to determine if they are otherwise qualified, with or without reasonable accommodation. Such individuals may include those with significant previous burns, sensory motor deficits, cicatrix formation and malformations of the upper extremities.

### **2.2.E. Strength and Mobility**

Medical treatments, such as osteopathic manipulative medicine and cardiopulmonary resuscitation, often require upright posture with sufficient upper and lower extremity and overall body strength and mobility. Individuals with disabilities who have significant limitations in these areas may require evaluation to determine if they are otherwise qualified, with or without reasonable accommodation.

### **2.2.F. Intellectual, Conceptual, Integrative and Qualitative Abilities**

Applicants and students must have the ability to concentrate, reason, calculate, analyze and interpret data, measure, synthesize information, and make decisions within areas in which there is a reasonable amount of visual and auditory distraction. They must perform these functions under a time limitation and do so under a reasonable amount of stress as physicians are expected to be able to perform such

duties in diverse clinical settings where others may be present and where there is a certain degree of noise. Students must be able to accurately write prescriptions, accurately perform basic mathematical functions, and accurately and quickly read charts with minimal error in areas where there may be distractions. The student must be able to comprehend, memorize, synthesize, and recall a large amount of information without assistance to successfully complete the curriculum. The student must be able to comprehend three-dimensional relationships and to understand spatial relationships to succeed in school and to administer medical care. The student must be able to gain knowledge through all types of learning materials that the LUCOM curriculum offers and must be able to perform pattern identification, memorization, recall information, and to identify and discriminate important information, to problem solve, and to calculate and make decisions in timed situations and in the presence of noise and distraction.

The above intellectual abilities are necessary, as students and graduates will be expected and required to perform pattern identification, immediate recall of memorized material, identification and discrimination to elicit important information, problem solving, and decision-making as to emergent diagnosis and treatment of patients. Students must be able to recall important information for diagnosis and to calculate therapeutic management of emergent conditions. This type of demonstrated intellectual ability must be performed in a rapid and time-efficient manner in order to avoid placing patients in emergent conditions at risk. It is common for emergent situations to occur in the presence of visually distracting and noisy environments. Such emergent situations include, but are not limited to, cardiopulmonary compromise, cardiopulmonary resuscitation, obstetrical and neonatal emergencies, trauma presentations, poisonings and toxic exposures, shock, and hemorrhage.

### **2.2.G. Behavioral and Social Attributes**

Applicants and students must possess the emotional health required for full utilization of his/her intellectual abilities, exercise good judgment, and promptly complete all responsibilities attendant to the diagnosis and care of patients and the development of mature, sensitive and effective professional relationships with patients. Students must be able to function effectively under the high degree of stress and testing required in medical school and in COMLEX national board testing. Students who suffer from serious mood disorders and/or test anxiety should strongly consider if they will meet this technical standard, as it is essential to the success of a physician in being able to practice. Students must possess ability to identify behaviors and attributes in themselves and others, as well as to self-regulate their own behaviors and attitudes, to ensure professional practice and delivery of care.

Applicants and students must be able to tolerate physically taxing workloads and adapt to changing environments, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of many patients. Compassion, integrity, concern for others, interpersonal skills, interest and motivation are all personal qualities that will be assessed during the admissions and educational processes. The emotional health required for effective communication and for professional, mature, sensitive, and compassionate patient/physician or patient/student relationships must be present. Students must have the emotional health to be able to function without the aid of medications that are known to affect intellectual abilities and judgment. The student must have the emotional stability and motivation to deliver patient care and to make emergent decisions at all times. The ability to adapt to changing environments and stressful situations and to display compassion and integrity, while maintaining the necessary intellectual capacity to care for patients is one that is observed during the interview process and throughout the progress in medical school. An ability to demonstrate the emotional health necessary for the delivery of quality and safe medical care is mandatory throughout



medical school. LUCOM considers addiction or the participation in substance abuse as a risk for unsafe medical care.

## **2.2.H. Participation in OMM and Clinical Medicine Laboratory Encounters<sup>8</sup>**

Osteopathic physicians utilize touching as part of the osteopathic approach to treatment. As part of the educational process, LUCOM students must be able to tolerate being touched and to touch others of both sexes in order to acquire the skills necessary for palpation and examination. This palpation is performed in a professional and appropriate manner. Stedman's Medical Dictionary defines "palpation" as examination with the hands and fingers, touching, feeling or perceiving by the sense of touch.

Acquiring the skills to palpate and examine patients requires a student to examine partially or completely disrobed patients of both genders and is mandatory for successful completion of the curriculum at LUCOM. In physical diagnosis and osteopathic manipulative medicine laboratory experiences, as well as other clinical laboratories where skills are acquired, students are required to participate in the examination of fellow students of both genders who may be partially disrobed. Students will need to wear attire such as shorts and to partially disrobe for certain laboratory experiences. These are requirements for all students, regardless of cultural beliefs, in order for the student to acquire the skills necessary to practice medicine.

The development of palpatory skills and ability to perform osteopathic treatments are initiated in the first- and second-year labs. This learning requires active participation in all laboratory sessions where students palpate and will experience palpation by their peers and instructors of both genders to enhance the development of their own palpatory skills. Each student will palpate a variety of people with different body types to simulate the diversity of patients expected in a practice setting.

The osteopathic medical profession uses a variety of treatment models through which the student will learn the art, science and skills of osteopathic manipulative treatment. Psychomotor skills are developed by repetition and reinforcement. Reading and observation, while helpful in understanding the didactic concepts, do not develop the skills required to perform palpatory diagnosis and manipulative treatment. Each student is required to actively participate in all skill development sessions.

### **2.2.I. Ability in Standardized Test Taking**

In addition, LUCOM's accreditor, the COCA, requires students to pass COMLEX Level I, Level 2-CE, and Level 2-PE exams prior to graduation; therefore, students must be able to perform satisfactorily on timed, computerized and clinical performance comprehensive standardized exams. Accommodations granted by LUCOM may not necessarily be granted by the NBOME. NBOME determines the student's ability to receive accommodations (or not) for this exam and therefore the student's ability to pass the board exams with the accommodation level awarded by NBOME is the technical standard. Students may ask for accommodations by the NBOME; however, these are not guaranteed.

### **2.2.J. Disabilities and Accommodations**

Liberty University College of Osteopathic Medicine (LUCOM) complies with all applicable laws, including Section 504 of the Rehabilitation Act of 1973.

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<sup>8</sup> 6.13 Diversity, Equity, and Inclusion Curriculum  
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LUCOM applicants must self-identify if they do not meet technical standards. It is the student's responsibility to initiate the process for accommodations two months before the start of an academic year. If granted, the accommodation is given only for the academic year in which it is requested. Subsequent applications must follow for each academic year the student is requesting accommodations. LUCOM assures that no adverse view of the application will be made if accommodations are requested.

LUCOM will provide reasonable accommodations to osteopathic medical students with documented disabilities. Accepted applicants and students must submit their request to the Office of Medical Education, in a sealed envelope or electronically, to [LUCOMMedEd@liberty.edu](mailto:LUCOMMedEd@liberty.edu). Verbal disclosure prior to or following admission is not sufficient means to request accommodations. Any request for accommodations must be submitted in writing with supporting documentation from a physician (M.D. or D.O.) or other medical professional with appropriate peer-recognized expertise or certification in the area of claimed disability, and will then be forwarded to the Wellness, Infectious Disease, Preparedness and Safety, Section 504 of the Rehabilitation Act of 1973, and Facility Needs Chair for committee process. LUCOM will then engage in an interactive process with the applicant or student to evaluate the medical documentation and requested accommodation. LUCOM will seek to work with the applicant or student to find an individually-tailored and reasonable accommodation that addresses the disability-related needs.

All requests are not retroactive, and accommodations granted do not affect grades or actions taken prior to notification to LUCOM of the student's disability or the request for accommodations begin granted by LUCOM. Reasonable accommodations provided to students must not pose an undue hardship on LUCOM, result in a fundamental alteration in the nature of the academic program, academic requirements or professional activity, or result in an undue financial or administrative burden on LUCOM.

The Office of Medical Education and the Wellness, Infectious Disease, Preparedness and Safety, Section 504 of the Rehabilitation Act of 1973, and Facility Needs Committee recognizes that individuals with temporarily disabling conditions that are a result of injuries, surgery or short-term medical conditions may need access to services and resources similar to individuals with permanent disabilities. Examples of temporary disabilities may include, but are not limited to: broken limbs, hand injuries, or short-term impairments following surgery or medical treatments. The LUCOM Office of Medical Education can offer guidance and instruction for students to receive accommodations for a temporary disability.

Decision appeals are directed to the Dean of the College of Osteopathic Medicine.

Students who fail in the curriculum or who are suspended or dismissed may not claim failure due to disability if they have not previously identified the disability and requested reasonable accommodations in advance of the curricular failure.

### **2.3. AACOMAS Application Process**

LUCOM participates with other osteopathic colleges in a centralized application processing service called the American Association of Colleges of Osteopathic Medicine Application Service (AACOMAS). An application may be submitted online by visiting the [AACOMAS website](#). Students should contact AACOMAS directly for questions about the application:

AACOMAS  
aacomasinfo@liaisoncas.com (617) 612-2889

To initiate the application process, applicants must apply directly to AACOMAS.

Applicants who have taken course work and/or have earned a degree from a foreign institution must also submit to AACOMAS a World Education Service (WES) evaluation of their transcripts.

## **2.4. Applications Deadline**

LUCOM has received Accreditation from COCA and applications are being accepted for admission. Applications will be accepted annually beginning in June of each year.

The official AACOMAS application is available [online](#). The deadline for LUCOM applicants is March 1st but is subject to change annually. LUCOM reserves the right to alter dates based on factors such as class capacity and seat availability. The last day for applicants to submit their application and supporting materials is March 15<sup>th</sup> unless otherwise approved by the Assistant Dean for Admissions and Student Life.

Applications should be submitted prior to the end of December to have an optimal chance of gaining admission for the next academic year.

## **2.5. Secondary Application Process**

The primary and secondary applications have been combined to streamline the application process. The application is returned electronically along with the payment of a non-refundable application fee of \$50 and submission of three required letters of recommendation:

Three evaluation forms and/or letters of recommendation not written by a relative (by blood or through marriage) are required to complete the application for admission:

1. Evaluation from a board-certified physician, either DO or MD; submission on letterhead is preferred
2. Evaluation from a premedical advisory committee or science faculty member familiar with the academic work of the applicant; submission on letterhead is preferred
3. Evaluation or recommendation from someone acquainted with the student's academic or professional ability (employer pastor, mission/medical outreach coordinator, an osteopathic or allopathic physician, etc.)

All letters of recommendation must be originals, signed by the evaluator and submitted electronically through AACOMAS.

Candidates will be required to acknowledge by initial their ability and willingness to comply with the college's technical standards, policies on attendance, dress code, requirements for participation in osteopathic teaching and education, LUCOM student professional and academic conduct and policies, and the University code of behavioral conduct.

## **2.6. Interview Selection Process**

To be considered for an interview, an applicant must meet all the preceding admissions requirements and Technical Standards for admission, have a complete file, including the AACOMAS application, recommendation letters, and the admissions processing fee.

After the Office of Admissions receives these materials, the applicant's file is reviewed to determine eligibility for an interview, based on the established criteria of the Admissions Committee. If it is found to meet the standards and mission of the COM, an invitation may be extended to interview. An interview is not a guarantee of admission to the college.

Interviewing candidates are required to read and initial an acknowledgement that they:

- Meet the technical standards for admission (any questions pertaining to whether a standard is met must be addressed with the Assistant Dean of Admissions and Student Life or Dean's designee);
- Have read and comply with the statement for students of LUCOM regarding physical exposure in classroom activities;
- Have read and comply with LUCOM's attendance and dress code policy; and
- Have read and comply with LUCOM's code of student conduct/academic responsibility and code of behavioral conduct.

Each applicant who interviews with LUCOM will be reviewed by the Admissions Committee. An admissions decision, based on academic performance, professional experience, and interview, will be provided to the applicant usually within 30 days of the interview date.

Intentional misrepresentation or omission of information on any form relevant to admissions or records will subject the student to retraction of admission offer or dismissal. LUCOM reserves the right to deny admission to any applicant for any reason it deems sufficient. Matriculation will be denied to applicants who have failed to maintain a good record of scholastic performance and/or good record of personal conduct between the time of their acceptance and their matriculation at LUCOM.

At the conclusion of the interviews, the interviewers forward their recommendation to the Admissions Committee. The Admissions Committee may make any of the following recommendations to the Dean: to accept, to deny, or to place the applicant on an alternate or wait list.

All offers of admission are conditional until such time as the applicant has undergone a criminal background check, drug screen, and physical examination to ensure they meet the technical standards established by the COM, meet the physical, immunization and immunization titers requirements as verified by the COM. Those accepted during the fall must complete these checklist items by March 1 of the following year while those accepted in the spring must complete these items by May 1.

## **2.7. Matriculation Process<sup>9</sup>**

Accepted applicants must fulfill the conditions set forth in the matriculation agreement and are based upon the date of acceptance including:

1. Confirmation deposit (\$2,000)
2. Background Check
3. Drug Screen
4. Student Health and Physical Report
5. Immunizations and Titters

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<sup>9</sup> 9.2 Academic Standards

6. Student Authorization to Release information to Clinical Agencies
7. Proof of Insurance
8. Completion of the Orientation Module and attendance at Orientation and its related sessions and activities. Failure to attend could result in dismissal.
9. Financial Check-in
10. Applicants must submit official final transcript from colleges/universities attended, which were not previously submitted and verified through AACOMAS. In the event of course work, completed at foreign institutions, the applicant must submit official detailed course by course evaluations completed by an approved agency. These agencies include:
  - World Education Services, Inc. (212)966-6311; <http://www.wes.org>
  - AACRAO (202)296-3359; <http://www.acrao.org/credential/individual.htm>
  - Educational Credential Evaluators, Inc. (414)289-3400; [www.ece.org](http://www.ece.org)
  - Josef Silny & Associates, Inc. (305)273-1616; <http://www.jsilny.com>
11. Any other requirements set forth in the matriculation agreement.

## **2.8. Request for Admission Deferment**

Accepted applicants may request a one-year deferment for compelling reasons. Requests are to be submitted in writing to the Office of Admissions. The \$2,000 seat deposit will be applied to the tuition the following year. Applicants who are approved for deferment will be subject to the curriculum, degree completion plan, policies and procedures established in the college's handbooks, catalog, and other policy statements for the academic year in which the applicant matriculates.

## **2.9. Transfer Applicants<sup>10</sup>**

LUCOM accepts transfer applicants in rare circumstances only from students who are transferring from a LCME or COCA accredited college of medicine. Transfer students must acquire OMM/OPP competency prior to graduation. Transfers must be passing all subjects at the time of transfer and be in good standing with their current college of medicine. Transfer applicants must be eligible for continuing or for readmission at their current college of medicine. Transfer applicants who have been out of school for more than a year are considered to be ineligible for transfer to LUCOM unless otherwise specified by the Dean.

Transfer applicants who meet these qualifications must submit the following documentation to the LUCOM Office of the Registrar.

- A letter of request and reason for transfer
- A letter of recommendation from the Dean, Vice Dean, or Senior Associate Dean(s) of the presently/previously attended college of medicine
- A copy of the applicant's D.O. /M.D. level transcript (may be unofficial or official)
- A copy of the school's catalog with course descriptions

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<sup>10</sup> 9.3 Transfer Policies

The student must provide a written statement outlining reasons for the request for transfer to the Dean, and must be eligible for continuing or readmission at the current college of medicine. They must have a letter of recommendation from the Dean, Vice Dean or Senior Associate Deans of the prior college attended. Decisions regarding transfer are made by the Dean and will be based on factors including academic record, circumstances leading to the transfer request, available space, and admission standards.

All students must complete at a minimum the last two years of training at LUCOM, successfully fulfill all requirements of the LUCOM curriculum, including demonstration of competency in the philosophy and application of osteopathic principles and practice, and receive the recommendation of the faculty through the Student Progress Committee for graduation.

Liberty University College of Osteopathic Medicine transcripts will reflect the cumulative credit hours transferred from the previous medical school. Information regarding grades or class rank from the previous school will not be reflected on the LUCOM transcript. Students who transfer into Liberty University College of Osteopathic Medicine will not receive a class rank.

### **2.10. Advanced Standing**

Applicants who are interested in transferring but are not eligible based on one or more of the listed qualifications will need to apply for admission through the LUCOM Office of Admissions. If accepted, the applicant may be eligible to apply for advanced standing. Students may be considered for advanced standing if course and curriculum requirements are met, the student obtained a passing grade in the course consistent with LUCOM policy, and the courses submitted meet all of the academic requirements of the LUCOM courses it is to replace.

### **2.11. International Student Applicants**

Applicants who will require F-1 Visa should contact the Office of Admissions and Student Services for requirements at the time of application.

### **2.12 LU Med 3+1 Bachelor of Science Pathway**

#### **History:**

The LUMED 3+1 program was approved by Liberty University leadership during the 2021 – 2022 academic year to encourage pipeline development between LU Sciences and LUCOM. Successful matriculants can begin medical school at LUCOM one year early, waive the MCAT requirement, and satisfy the final year of their LU B.S. degree with year one of the LUCOM curriculum.

#### **Process:**

Qualified applicants must:

- Be enrolled as a full-time student in the B.S. in Biomedical Sciences program at Liberty University

- Complete prerequisite sciences on the LU residential campus
- Have no record of withdrawals from any prerequisite courses
- Earn and maintain a minimum 3.7 science GPA
- Complete an interview with the LU MED program subcommittee

### **Additional information**

Dr. Jeremy Sellers, Chair Biology and Chemistry, Professor of Biology [jasellers@liberty.edu](mailto:jasellers@liberty.edu)

Dr. Michael Neville, Assistant Dean for Admissions and Student Life, Professor of Pharmacology [mwneville@liberty.edu](mailto:mwneville@liberty.edu)

## **Chapter 3. Tuition, Fees and Financial Aid<sup>11</sup>**

### **3.1. Tuition**

Tuition and fees are set each year by the Liberty University Board of Trustees for the College of Osteopathic Medicine and are subject to change.

Tuition of **\$49,440** is divided evenly between LUCOM's two semesters for the year.

Students on altered degree plans who are required to repeat courses or return to complete a semester for which they have already paid 50% or more of the tuition will be charged 50% of the full-time block rate for the future semester in which they are returning. All other students will be subject to the full-time block rate for the term.

### **3.2. Fees**

#### **3.2.A. Admission Deposit**

Those accepted prior to November have 30 days to pay the confirmation deposit (\$2,000).

Those accepted between November 15 and May 14 have 14 days to pay the confirmation deposit (\$2,000).

Applicants accepted after May 14 may be asked for an immediate deposit.

All confirmation deposits are non-refundable and are applied to the first semester's tuition and fees. LUCOM reserves the right to redact any entry of forfeited deposits at their discretion.

#### **3.2.B. Semester Fees**

The following semester fees are charged in the Fall and Spring semesters.

Student Activity Fee	\$285
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<sup>11</sup> 9.2 Academic Standards, 12.6 Public Information  
LUCOM Academic Catalog 2023-24

Student Health Fee	\$170
Parking Fee	\$100

### 3.2.C. Annual Fees

The following annual fees are charged once each academic year during the Fall semester:

Anatomy, Clinical Medicine, SIM Lab Fee	\$675
LUCOM Student Activity Fee	\$300
Malpractice Insurance Fee	\$300

### 3.2.D. One-Time Fees

The following one-time fees are charged once during a student's enrollment at LUCOM.

Computer, Software, Equipment Fee (Fall of 1st Year Only)	\$1,750
Graduation Fees (Spring of Graduating Year Only)	\$950
<ul style="list-style-type: none"> <li>• LUCOM Graduation Fee</li> <li>• Regalia and Diploma Process Fee</li> <li>• Residential Graduation Fee</li> </ul>	<ul style="list-style-type: none"> <li>\$550</li> <li>\$300</li> <li>\$100</li> </ul>

## 3.3. Financial Aid<sup>12</sup>

The purpose of the Student Financial Assistance Program at Liberty University College of Osteopathic Medicine is to help as many qualified students as possible to complete their medical education. As a participant in the Title IV, USDE federally guaranteed loan programs, LUCOM works with students to meet the cost of their education while a student at the COM. Students may finance their education with scholarships, federal loans, private student loans, military health profession scholarships, or other federal and state programs. Students may also apply for one of the loan forgiveness programs available through a variety of government and non-profit agencies once they begin their medical education or practice.

All new students receiving any form of financial aid must meet with a financial aid counselor or attend a meeting provided by the Office of Financial Aid within sixty days of the beginning of their first semester as a student at LUCOM. Students must attend an annual financial aid meeting or meet individually with a financial aid counselor annually. All students with any form of financial aid must meet with a financial aid counselor during a three month period prior to graduation.

Financial aid will not be disbursed to anyone until he or she has been fully admitted as a student and all admission requirements have been met and approved by the administration.

Liberty University, as permitted by federal regulation [34 CFR 668.41], electronically disseminates consumer information, including the Jeanne Clery Disclosure of Campus Security Policy and Campus

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<sup>12</sup> 9.7 Financial Aid and Debt Management Counseling  
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Crime Statistics Act information. Upon request, the institution will provide a free paper copy. Anyone signing or processing financial aid forms or seeking information or assistance at Liberty University must read, understand, and comply with the requirements disclosed, which are available 24 hours a day at [www.Liberty.edu/ConsumerInfo](http://www.Liberty.edu/ConsumerInfo).

### 3.4. Tuition Payment

Late tuition payments or failure to make arrangements to pay tuition by 5 p.m. on Friday before classes begin will result in the student being removed from class and/or clinical rotations. Failure to meet obligations for tuition, fees, and other responsible financial obligations in a timely manner may result in dismissal from the College.

### 3.5. Tuition Refund Policy

Students who withdraw from LUCOM, take a leave of absence, are suspended, are removed from rotations as a result of a COMLEX failure, or are dismissed during a semester may be eligible for a tuition refund based on their date of withdrawal if the outcome results in a change to the student's anticipated graduation date. Please note that Admission Deposits and all fees are non-refundable.

#### 3.5.A. Tuition Refund Schedule

A student who withdraws from all courses during the first week of enrollment will receive a 100% tuition refund.\*

A student who withdraws after the first week but before the end of 7 weeks will receive a 50% tuition refund.\*\*

A student who withdraws after 7 weeks, but before the end of 13 weeks will receive a 25% tuition refund.\*\*

A student who withdraws after 13 weeks is not eligible for a tuition refund.\*\*

\*Eligible enrollment only includes courses that count toward the degree completion plan.

\*\*For students on clinical rotations, the number of weeks used to determine the tuition refund will be based on the number of weeks the student attended up until the date of withdrawal, excluding any gap weeks.

## Chapter 4. Student Health, Insurance and Liability Requirements<sup>13</sup>

### 4.1. Student Health Policies & Procedures

Student health forms (physical exam and immunization records) **ARE DUE TO THE** Clinical Director of Health Records by March 1<sup>st</sup> for those students admitted before January 1<sup>st</sup>, and no later than May 1<sup>st</sup> for those admitted after the first of each year.

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<sup>13</sup> 5.3 Safety, Health, and Wellness, 9.1 Admissions Policy, 9.2 Academic Standards, 9.4 Secure Student Record Keeping



Forms are to be returned to:

Clinical Director of Health Records  
Liberty University College of Osteopathic Medicine  
306 Liberty View Lane  
Lynchburg, VA 24502

It is important that each student verify that all forms are filled out completely and that they are dated and signed by the physician. Incomplete or unsigned forms will not be accepted. The form will be returned to the student. Such action does not change the due date for the documents and failure to meet the required deadlines **could result in the rescinding of LUCOM acceptance.**

Any requests for extension of the deadline should be addressed to the Clinical Director of Health Records.

**IMPORTANT:** LUCOM does not automatically waive immunizations or student health requirements. LUCOM is not responsible to secure or approve educational opportunities that are not in compliance with immunization policies.

Students will not be allowed any patient care activities until all required immunizations have been administered and proof of immunity is established, including but not limited to early clinical experiences, health care outreach events, international outreach trips, clinical rotations, etc.

Failure to begin clinical experiences as scheduled in the curriculum does not entitle the student to make up the missed experiences, could result in failure of the course, academic probation, or dismissal from the COM.

Regulatory, legislative, institutional, administrative authorities require that LUCOM students demonstrate immunization, immunity, or protection from multiple contagious diseases before being allowed to perform clinical rotations in the institutions utilized by the COM for the education of its students. Required laboratory evaluations and immunizations are subject to review and change annually based on recommendations from the Centers for Disease Control (CDC), the United States Preventive Services Task Force (USPTF) and other public health agencies. Students will be notified of any changes and will be required to comply with any mandated changes upon receipt of notice from LUCOM.

#### **4.1.A. Health Insurance<sup>14</sup>**

All LUCOM students are required to obtain and maintain health insurance coverage while enrolled. A current insurance card and current summary of benefits validating proof of insurance must be submitted for each student annually before registration and before the beginning of class or rotations not less than 30 days before the start of the academic year. Students must provide proof of insurance prior to matriculation. During the student's clinical years, some insurance policies, such as Health Care Share Plans, may be considered as self-pay and may not be accepted by some clinical sites as valid health insurance. For this reason, Health Care Share Plans are not considered as approved health insurance for OMS-I through OMS-IV students. OMS-IV students that serve audition rotations outside Virginia and who possess Virginia Medicaid insurance will need to see policies accepted in all locales. Failure

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<sup>14</sup> 9.11 Health Insurance

of the student to maintain health insurance that meets the standards will result in disciplinary action for the student up to and including dismissal from the COM. Any medical costs incurred by students while in training are the sole responsibility of the student and his/her health insurance carrier.

#### **4.1.B. History and Physical Examination**

Each student must have a comprehensive history and physical examination performed by a licensed allopathic or osteopathic physician or their designated Advanced Practice Provider after acceptance and before matriculation into LUCOM. The examination must be completed within the timeline detailed above. This examination must establish and the examining physician must verify that the student health status is adequate to meet the demands of the curriculum; that they are clinically free of contagious disease that would pose a risk to patients and that the student satisfies the health and technical requirements for admission, education, and graduation detailed in the student handbook. A signed copy of immunizations and lab reports demonstrating immunity and titers when applicable must be returned by the physician or APP to LUCOM by the posted deadline.

### **4.2. Immunization Requirements**

All vaccination requirements beyond those listed by LUCOM and required by the clinical rotation sites, are the responsibility of the student to either receive and/or apply (through the site) for exemption. Documentation of all vaccination information must be on file with LUCOM Student Health prior to participation in any patient contact.

LUCOM requires the following laboratory tests and immunizations:

- Annual Tuberculosis (TB) test
- Diphtheria, Pertussis and Tetanus
- Measles (Rubeola), Mumps, and Rubella (MMR)
- Polio (OPV/IPV)
- Varicella
- Hepatitis B Virus (HBV) immunization and titers
- Influenza

Detailed laboratory test and immunization requirements can be found below:

#### **4.2.A. TB Skin Test**

Prior to matriculating, applicants must complete TB testing as specified by LUCOM after January 1<sup>st</sup> in the calendar year of matriculation.

Annual TB testing is required for all enrolled students at LUCOM.

Students with a history of positive TB test will be required to submit the results of an annual chest x-ray and questionnaire which documents absence of active disease. The student may be required to be seen by his/her provider after review of questionnaire.

Students with a new positive TB test or those with a positive chest x-ray must follow up immediately with a licensed medical provider (MD, DO, NP, PA) or the local health department. Documentation of follow up and treatment by provider must be provided and will be reviewed for continued enrollment.

A history of immunization with the BCG vaccine as a child or adult does not remove the above requirements for TB screening and appropriate follow up.

#### **4.2.B. Diphtheria, Pertussis and Tetanus Toxoid**

The student must submit written documentation of completion of the initial immunization series with DTP or TDaP.

Proof of one adult Tdap and subsequent Td or Tdap every 10 years, per CDC

The date of each immunization is required to be documented.

#### **4.2.C. Measles, Mumps, Rubella (MMR)**

The student must have written documentation of receiving three (3) Rubeola, Rubella and Mumps (MMR) vaccine(s). (Individual or combination immunizations).

The date of each immunization is required to be documented.

The student must have titers that demonstrate immunity to measles, mumps, and rubella or immunization boosters may be required.

Students with prior documentation of immune status may submit that documentation in place of new titers.

#### **4.2.D. Polio (OPV/IPV)**

The student must have written documentation of receiving an initial series of three (3) IPV or OPV immunizations plus at least one booster immunization.

The date of each immunization is required to be documented.

#### **4.2.E. Varicella**

The student must have written documentation of receiving two (2) Varicella immunizations.

The date of each immunization is required to be documented.

The student must have titers that demonstrates immunity to Varicella.

Students with prior documentation of immune status may submit that documentation in place of new titers.

#### **4.2.F. Hepatitis B**

The student must have written documentation of receiving three (3) hepatitis B injections.

The date of each immunization is required to be documented.

The student must have documentation of laboratory titers that demonstrates immunity to hepatitis B.

Students with prior documentation of immune status may submit that documentation in place of new titers.

Students who have received the initial series of Hepatitis B vaccine and do not seroconvert to demonstrate immunity will be required to repeat the complete series of three immunizations.

If a student does not seroconvert and demonstrate immunity eight weeks after completion of a second series of immunizations, they will be considered at risk for acquiring HBV. The student will meet with the Associate Dean for Clinical Affairs. Current recommendations and additional education on universal precautions, risk avoidance, and treatment options if exposed to HBV will be provided to the student. The student will sign documentation of informed consent to continue his/her education, acknowledging the medical risk and receipt of this information, but they will not be required to continue additional HBV immunizations.

#### **4.2.G. Influenza**

The flu vaccine is mandatory for all LUCOM students. Proof of vaccination must be given to the office of the Director of Health Records ([LUCOMstudenthealth@liberty.edu](mailto:LUCOMstudenthealth@liberty.edu)) by October 31<sup>st</sup> (or earlier as designated by clinical site) annually while enrolled.

Failure to comply is a violation of school policy and affects the student's ability to provide patient care during the flu season, thus putting the completion of the educational curriculum in jeopardy. Students who are non-compliant will be referred to the appropriate clinical dean.

Medical exemption will be considered on a case-by-case basis and in accordance with the current CDC guidelines. Students must provide documentation from a licensed medical provider (MD, DO, NP, or PA) on letterhead stating the reason for exemption. After review, a determination will be made as to whether an exemption will be granted.

It is the student's responsibility to be familiar with and comply with all policies at their designated clinical site.

If recommendations by the clinical dean are not observed, the student will be referred to the Office of the Dean.

#### **4.2.H. Optional Immunizations**

The following vaccines are considered optional. LUCOM advises all students to discuss the appropriateness of each of the following vaccinations with their primary care physician, taking into account their personal medical history, risk factors for contracting these diseases and potential for international travel.

- Meningococcal (Hib)
- Human Papillomavirus (HPV)
- Typhoid Fever
- Yellow Fever
- Hepatitis A

### **4.3. Background Check, Drug, and Alcohol Screening**

#### **4.3.A Background Checks**

All accepted students are required to complete a criminal background check through LUCOM's preferred vendor. Results must be released to LUCOM prior to matriculation in accordance with the Admissions Checklist traffic guidelines, and the cost of this process will be paid by the applicant. LUCOM reserves the right to revoke an offer of admission based upon information received through the criminal background check. Criminal background checks are repeated for all students prior to the start of third- and fourth-year clinical rotations, and for specific program participation during the student's enrollment at LUCOM. Students must follow assigned deadlines to complete the background check at each required time.

By accepting admission to LUCOM and matriculating, the student agrees that LUCOM may share background check information in full with the student's respective clinical site(s).

LUCOM applicants and students are required to self-disclose any charges, arrests, or convictions including misdemeanors, felonies, deferred adjunctions, traffic violations, military non-judicial punishment, courts martial, and general or less than honorable discharge from the military, (all hereinafter "Offenses") with the understanding that non-disclosure/falsification of any previous or pending Offenses may result in the revocation of the offer of admission, or possible sanctions up to and including dismissal from LUCOM once enrolled. Offenses which occur while student is enrolled at LUCOM will be referred to Student Progress Committee and documented on the student's MSPE.

New Offenses must be reported to the Dean within 72 hours of the incident. It is the responsibility of the student to report any offenses including those pending final adjudication to LUCOM.

LUCOM has no control over the content of third-party background checks, which may include charges that have been reduced or dismissed. Background checks revealing prior offenses, even those which may have been dismissed by the courts, could result in consequences affecting clinical rotations, acceptance into residency programs, future licensing, specialty board certification, and/or employment opportunities.

A student with any Offenses is encouraged to contact the licensure boards in the state of intended practice to ensure the aforementioned Offense will not inhibit the ability to obtain a medical license upon graduation.

### **4.3.B. Drug Screenings**

In compliance with requirements in the professional practice environment and to minimize the risk to patients, all drug screen results must be received by LUCOM in accordance with Admissions Checklist guidelines prior to matriculation and prior to the start of clinical rotations. This must meet LUCOM's standards and be conducted by LUCOM's preferred vendor. Students must follow assigned deadlines to complete the drug screen at each required time.

Any substance-related incident which occurred before matriculation must be disclosed by the student to the LUCOM Office of Admissions and Student Services. Following review, acceptance to LUCOM may be rescinded.

A positive drug screen (i.e. evidence of a controlled substance) or one which shows other abnormalities will be reviewed by a medical review officer and reported to the Dean. Following review, acceptance may be rescinded.

The illegal use or abuse of drugs and/or alcohol has a clear and adverse effect on the educational environment. All students, as a condition of enrollment at LUCOM, must agree to abide by the Code of Conduct including the policies on alcohol and drug usage and the impaired student policy. Under this policy, students who are identified abusing alcohol, legal or illegal substances are subject to dismissal from LUCOM or may be referred to the Impaired Student Program. By signing the Code of Conduct confirming that students have read and acknowledge compliance with the precepts contained in the LUCOM Student Handbook, each student at LUCOM states that he or she is not currently using, and that he or she will not use while a LUCOM student, any products or substances in any manner which are illegal in the Commonwealth of Virginia.

Any substance related incident which occurs after matriculation, including, but not limited to charges/arrests for driving under the influence, must be reported by the student to the Dean within 72 hours of the occurrence. Following review, disciplinary action may be instituted, up to and including, dismissal from LUCOM.

Drug screens are done prior to commencing third year and fourth year clinical rotations and may be repeated at LUCOM's discretion at any time for reasonable suspicion or cause. By accepting admission to LUCOM and matriculating, the student agrees that LUCOM will share drug screen information in full with the student's respective clinical site(s).

## **Chapter 5. Academic Program<sup>15</sup>**

### **5.1. Academic Credit**

Academic credit is granted for classes successfully completed at LUCOM. A minimum of 14 and a maximum of 16 hours of academic effort are required for one credit in any course. Academic effort is determined according to the following:

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<sup>15</sup> 9.2 Academic Standards

- One hour of classroom contact is equivalent to one hour of academic effort
- Two hours of laboratory, small group or simulation contact is equivalent to one hour of academic effort
- Two hours of assigned directed learning or activity outside of the classroom is equivalent to one hour of academic effort

Examinations and anticipated study outside of the assigned requirements are not included in the calculation of academic credit.

0-4 hours of academic effort	0.25 credit	5-10 hours of academic effort	0.5 credit
11-13 hours of academic effort	0.75 credit	14-16 hours of academic effort	1.0 credit

One clinical rotation hour is equivalent to one hour of academic effort. Clinical rotations are designed to require 70-80 contact hours every two weeks or 140-160 contact hours during a four-week block. A clinical rotation hour is considered equivalent to a classroom contact hour since the students are working under the direct supervision of their physician preceptor(s).

Courses successfully completed may be transferred for credit from other LCME or COCA accredited colleges on an individual basis if they meet the criteria and objectives established in the COM catalog and course syllabus. No student may graduate from LUCOM without completing all of the requirements of the curriculum as established by the faculty and administration, meeting all of the requirements for knowledge, skill, and competency in osteopathic philosophy, procedures, and techniques and completing at least the last two years of instruction at LUCOM.

<b>Enrollment Classification</b>	<b>Less than Half Time</b>	<b>½ Time</b>	<b>¾ Time</b>	<b>Full-Time</b>
Credit Hours per Semester	1-2	3	4-5	=>6

### **5.2. Grades OMS-I and OMS-II<sup>16</sup>**

Grading for OMS I-II medical students, except where otherwise notated in the Catalog or Course Syllabus, is based on a scale of 0 to 100. LUCOM requires a grade of 70 or above for passing of all courses, any grade below 70 is failing. LUCOM provides only numerical grades between 0 and 100 for transcripts and Dean’s letters except where otherwise notated in the Catalog or Course Syllabus.

### **5.3. Grades OMS-III<sup>17</sup>**

Grading for OMS III core clinical rotations, except where otherwise notated in the Catalog or Course

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<sup>16</sup> 12.6 Public Information

<sup>17</sup> 12.6 Public Information

Syllabus, is based on a scale of 0 to 100. LUCOM requires a grade of 70 or above for passing of all courses, any grade below 70 is failing. LUCOM provides only numerical grades between 0 and 100 for transcripts and Dean’s letters except where otherwise notated in the Catalog or Course Syllabus.

The final numerical course grades from both preclinical and clinical years are used to calculate term and cumulative averages.

#### 5.4. Grades OMS-IV<sup>18</sup>

The grading structure for all OMS-IV selective and elective rotations will be pass/fail.

#### 5.5. Other Grades<sup>19</sup>

Some courses are graded pass with honors/high pass/pass/fail/and satisfactory; or satisfactory/fail; as shown below. LUCOM official grades are numerical grades only and not letter grades.

P	Pass*	70-100	W	Withdrawal	
F	Fail*	0-69	WP	Withdrawal Passing	
R	Repeated course		WF	Withdrawal Failing	
X	Remediated course		AU	Audited course	
I	Incomplete		H	Pass with honors	90-100
NR	No grade reported		HP	High pass	80-89
FN	Failure for nonattendance		S	Satisfactory	70-79
			U	Unsatisfactory	0-69

*\*courses when no honor grade is accepted*

#### 5.6. Transcript Request<sup>20</sup>

The official records of each student in LUCOM will be secured in the Office of the Registrar. The Family Educational Rights and Privacy Act (PL93-380) will govern the release of information for this record, which contains the transcript from Liberty University, transcripts and transcript evaluations from other educational agencies attended by the student, secondary school transcripts, scholastic aptitude, other standardized test scores, LUCOM admission application, and general correspondence with the student. Letters concerning misconduct or disciplinary actions at Liberty University are kept in the Office of the Dean. The official transcripts will only be released when the student has met all of their financial obligations to Liberty University. Questions regarding a hold on the student account may be addressed to Student Accounts at (434) 592-7201. The transcript and contents of the permanent record may be examined by the student upon emailing the request from your Liberty email account to [lucomregistrar@liberty.edu](mailto:lucomregistrar@liberty.edu) or by coming to the Registrar's Office and filling out a Transcript Request form.

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<sup>18</sup> 12.6 Public Information

<sup>19</sup> 12.6 Public Information

<sup>20</sup> 9.4 Secure Student Record Keeping



## 5.7. Rank Calculation and Distribution<sup>21</sup>

LUCOM documents term and cumulative rank on the student's record. Students will receive notification of their personal cumulative rank after the close of their OMS-II, OMS-III, and OMS-IV years. Rank is typically released to eligible students, after grades are finalized, in late-August, or early-September. Term average is calculated by multiplying the earned numerical grade for each course by the course credits assigned, resulting in course "points." Next, the total points for all courses taken within a term are summed and then divided by the total number of credits taken within the term. Cumulative average is an overall total of course points, which are divided by the overall total number of credits. Rank is determined by each student's term and cumulative average, compared to the student's classmates. As a result of a student's withdrawal, dismissal, suspension, delayed graduation date, or leave of absence, they will no longer be accounted for in the class rank calculations. Any OMS-III student unable to progress to OMS-IV by June 30 will be excluded from class rank calculations. A notation of "N/A" will be applied to the MSPE and the most recent rank will be noted (if available).

## 5.8. Graduation Requirements<sup>22</sup>

A student who has fulfilled all the academic requirements may be granted the degree Doctor of Osteopathic Medicine (D.O.) provided the student:

1. Has satisfactorily completed all of the curriculum and rotations requirements at a COCA-accredited college of osteopathic medicine including at a minimum the last two years of his/her education at LUCOM.
2. Has completed all academic requirements in no more than six years from the date of matriculation.<sup>23</sup>
3. Has complied with all the curricular, legal, and financial requirements of the university.
4. Has attended the compulsory portions of orientation and senior week, including graduation rehearsal and the graduation ceremony, at which time they take the osteopathic oath.
5. Has passed COMLEX Level I and both components of COMLEX Level 2 (CE and PE) of the examination administered by the National Board of Osteopathic Medical Examiners.<sup>24</sup>
6. Has reached at least 21 years of age.
7. Has demonstrated the ethical, personal, and professional qualities deemed necessary by the LUCOM faculty for the practice of osteopathic medicine and gained the recommendation for graduation from the Student Progress Committee.
8. Has demonstrated suitability for the practice of osteopathic medicine to the administration and LUCOM faculty through action of the Student Progress Committee as evidenced by their conduct, ethical and professional behavior, demonstrations of medical knowledge and skills, displaying responsibility for patient care, and exhibiting integrity in the conduct of clinical and academic activities.
9. Has demonstrated compliance with the Code of Behavioral Conduct.

Degrees are not awarded solely upon the completion of any prescribed number of courses, credits, or upon passing a prescribed number of examinations. Granting of the degree requires in addition, that the

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<sup>21</sup> 9.4 Secure Student Record Keeping

<sup>22</sup> 1.6 Degree-Granting Body, 12.6 Public Information

<sup>23</sup> 6.3 Maximum Length of Completion

<sup>24</sup> 6.12 COMLEX-USA

LUCOM faculty believes the student has attained sufficient maturity of thought, ethics, and professional proficiency to serve the public as an osteopathic physician. Matriculation and enrollment does not guarantee the issuance of a degree without satisfactorily meeting the aforementioned curriculum and degree requirements. Students will not receive a diploma until all degree requirements are fulfilled. Students must complete all degree requirements by December 31 to be allowed to participate in the May Commencement/Senior Week activities of the same calendar year.

### **5.8.A. Hooding Ceremony**

The student doctor hooding ceremony recognizes and celebrates LUCOM graduates. LUCOM recognizes the values of professionalism and service in support of the mission and vision of the institution. Eligible family members are, therefore, invited to participate in the hooding ceremony for student doctors. Family members are eligible to participate in the hooding ceremony if they meet the following qualifications:

- Hold a DO or MD degree
- Must be an immediate family member (parent, sibling or spouse)

Graduates must complete a Hooding Request Form for advanced approval of the family member's participation. If a student does not request to be hooded by a family member, the student will be hooded by a LUCOM faculty member.

### **5.9. Building Access by Guests and Visitors<sup>25</sup>**

LUCOM upholds the integrity of building access, the protection of those that utilize it, and the limitation of disruptions to the education of enrolled students.

The following includes, but is not limited to, who can classify as a guest:

- an individual who is not a LUCOM or School of Health Sciences currently enrolled student, faculty, or staff member
- students on a voluntary or administrative leave of absence, no longer registered in current courses, or who have been suspended or dismissed
- alumni

Once a student is considered non-enrolled, the student's badge access will be deactivated immediately by LUCOM. Deactivation will remove access to the building, printing, and other Liberty University auxiliaries.

Visitation to LUCOM by a non-enrolled person will require specific approval by the administration. Should the non-enrolled person want to attend any class, event, or meeting, then the non-enrolled person must submit a written request at least two weeks in advance of the intended visit and will need to receive written consent from The Office of Admissions and Student Services. The consent may require additional approval by faculty, the Director of Facilities, and/or the Dean.

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<sup>25</sup> 4.2 Security and Public Safety  
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Alumni (student doctors who have graduated) do not need prior approval by the administration to visit LUCOM facilities, but access may be limited or denied if alumni do not have a scheduled meeting or event to attend at LUCOM.

Once consent is granted to the non-enrolled person to visit as a guest, the non-enrolled person will be required to check-in at the front desk of the Center for Medical and Health Sciences Building. The guest will sign in, receive the guest pass, and, if deemed necessary by LUCOM administration, the guest will meet an escort who will guide them throughout the building. Failure to comply may result in disciplinary action.

## 5.10. Academic Calendar<sup>26</sup>

### 5.10.A.

### Fall 2023 Semester July 3, 2023 – December 31, 2023

July 3*	Elective and Make-Up Rotations, OMS-III and OMS-IV rotations can begin
July 25-28	Orientation (OMS-I)
July 31	Classes begin (OMS-I, OMS-II)
July 31-August 3	Orientation (OMS-II, during the lunch hour)
September 4	Labor Day Holiday (OMS-I, OMS-II)
October 16-20	Fall Break (OMS-I, OMS-II)
November 22-24	Thanksgiving Break (OMS-I, OMS-II), Classes resume November 27
December 13	Last day of classes (OMS-II**)
December 15	Last day of rotations (OMS-III*)
December 18	Last day of classes (OMS-I**)

### 5.10.B.

### Spring 2024 Semester January 1, 2024 – June 30, 2024

January 1*	Clinical Rotations can begin (OMS-III, OMS-IV)
January 8	Classes begin (OMS-I, OMS-II)
March 25-29	Spring Break (OMS-I, OMS-II)
April 1	Easter Break (OMS-I, OMS-II)
May 8-10	Senior Week*** (attendance requirements TBA)
May 9	LUCOM Hooding Ceremony (OMS-IV)*** <i>Center for Music and Performing Arts, Liberty University</i>
May 10	Main Commencement Ceremony (OMS-IV)*** <i>Williams Stadium</i>
May 27	Memorial Day, no OMS-I or OMS-II classes
May 31	Last day of classes (OMS-I, OMS-II)
June 3-June 28**	Pre-Clerkship electives/Vacation (OMS-I, OMS-II)
July 1*	Clinical Rotations can begin (OMS-III/OMS-IV), beginning of Fall 2024 semester

\*Scheduling for OMSIII and OMSIV students is coordinated through the Office of Clinical Education. Students must refer to LUCOM policies and rotation site requirements for scheduled obligations and attendance requirements.

\*\*A break is scheduled for personal time off and/or vacation for OMS-I and OMS-II students. Note: Student Progress Committee hearings are conducted during this time. Student-doctors may be required to return to campus. Refer to the [LUCOM Academic Calendar](#) for additional information.

\*\*\*Future dates subject to change

## 5.11. OMS-I Curriculum Schedule<sup>27</sup>

### 5.11.A. Fall Semester

Biomedical Foundations of Osteopathic Medicine	7 Credits
Osteopathic Manipulative Medicine 101	2 Credits
Patient-Centered Medicine 101	2.5 Credits
Integument and Musculoskeletal System	6.75 Credits
Cardiovascular, Respiratory, and Hematologic Systems	6.25 Credits
Humanities & Medical Ethics I	0.5 Credits
<b>Total 25 Credits</b>	

### 5.11.B. Spring Semester

Osteopathic Manipulative Medicine 102	2 Credits
Patient-Centered Medicine 102	2.5 Credits
Gastrointestinal System and Nutrition	5 Credits
Urinary System	4.25 Credits
Endocrine and Reproductive Systems	4.5 Credits
Nervous System/Head and Neck	7 Credits
Population Based Medicine	3.25 Credits
Humanities & Medical Ethics II	0.5 Credits
Elective*	
<b>Total 29 Credits</b>	

OMS I Total 54 Credits

\*Student may elect to take vacation instead of elective course. Some students may be remediating during this time and will not be able to take an elective course.

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<sup>27</sup> 12.6 Public Information  
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## 5.12 OMS-II Curriculum Schedule<sup>28</sup>

### 5.12.A Fall Semester

Osteopathic Manipulative Medicine 201	2 Credits
Hematology/Oncology	3.25 Credits
Orthopedics/Rheumatology/Dermatology	4 Credits
Cardiology, Pulmonology	7 Credits
Nephrology and Urology	3.5 Credits
Patient-Centered Medicine 201	1.5 Credits
Humanities & Medical Jurisprudence I	0.5 Credits
Elective*	
<b>Total</b>	<b>21.75 Credits</b>

### 5.12.B Spring Semester

Osteopathic Manipulative Medicine 202	1.75 Credits
Gastroenterology	4.25 Credits
Neurology/Psychiatry/Ophthalmology	6.25 Credits
Endocrinology	2.5 Credits
Women's Health	3 Credits
Pediatrics	2.75 Credits
Patient-Centered Medicine 202	1.5 Credits
Humanities & Medical Jurisprudence II	0.5 Credits
Capstone OMS-II	3.25 Credits
Elective*	
<b>Total</b>	<b>25.75 Credits</b>

OMS II Total 47.5

\*Students may elect to take vacation instead of elective course. Some students may be remediating during this time and will not be able to take an elective course.

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<sup>28</sup> 12.6 Public Information  
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### 5.13 OMS-III Curriculum Schedule\*\*<sup>29</sup>

Community Based Family Medicine	10 Credits
Family Medicine II	10 Credits
Internal Medicine I	10 Credits
Internal Medicine II	10 Credits
Surgery	10 Credits
Women's Health	10 Credits
Pediatrics	10 Credits
Psychiatry/Behavioral Health	10 Credits
Osteopathic Manipulative Medicine	5 Credits
Concepts in Acute Care Medicine	5 Credits
Capstone OMS-III	0.5 Credits
Elective <sup>^</sup>	
Undergraduate Fellowship <sup>^**</sup>	5-10 Credits
OMS-III Total without Electives or Fellowship	90.5 Credits

### 5.14 OMS-IV Curriculum Schedule<sup>30</sup>

#### 5.14.A OMS-IV Curriculum Schedule (applicable to students who matriculated between Fall 2018-Fall 2020)

Osteopathic Approach to Pain Management	5 Credits
GME Selective	10 Credits
Electives <sup>*</sup>	65 Credits
Undergraduate Fellowship <sup>**</sup>	5-10 Credits
OMS-IV Total	80 Credits

<sup>^</sup>Elective rotations taken in OMS-III must have Dean or Dean's designee prior approval

<sup>\*\*</sup>All Undergraduate Fellowships have a competitive selection process

<sup>\*</sup>Students must complete a minimum of 65 credits of Elective Rotations. At least 55 credits must be performed in a clinical setting. At least 20 credits must be performed in the Spring semester. Students may choose from the elective course offering list below:

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<sup>29</sup> 6.9 Clinical Education, 12.6 Public Information

<sup>30</sup> 6.9 Clinical Education, 12.6 Public Information  
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- Non-Clinical Elective Rotation (2.5 or 10 Credits)
- Research Elective Rotation (5 Credits)
- Family Medicine Elective Rotation (5 or 10 Credits)
- Internal Medicine Elective Rotation (5 or 10 Credits)
- Surgery Elective Rotation (5 or 10 Credits)
- Women’s Health Elective Rotation (5 or 10 Credits)
- Pediatrics Elective Rotation (5 or 10 Credits)
- Specialty Medicine Elective Rotation (5 or 10 Credits)
- Psychiatry & Behavioral Health Elective Rotation (5 or 10 Credits)
- Underserved Care & Medical Outreach Elective Rotation (5 or 10 Credits)
- Emergency Medicine Elective Rotation (5 or 10 Credits)
- OMM/NMM Elective Rotation (5 or 10 Credits)
- \*\*Undergraduate Fellowship courses (5 Credits per course)

**Total Credits Required for Graduation: 272 Credits**

**5.14.B. OMS-IV Curriculum Schedule (applicable to students who matriculated in Fall 2021 and later)**

Osteopathic Approach to Pain Management	5 Credits
GME Selective	20-45 Credits
Electives*	30-55 Credits
Undergraduate Fellowship**	5-10 Credits
OMS-IV Total	80 Credits

^Elective rotations taken in OMS-III must have Dean or Dean’s designee prior approval

\*In order to increase individual competitiveness for the Match, students are strongly urged to complete the maximum number of audition rotations with hospitals that have residency programs (GME Selective Rotations).

\*\*All Undergraduate Fellowships have a competitive selection process

\*Students must complete a minimum of 30 credits of Elective Rotations. No more than 10 non-clinical credit hours (LCOM 6900, 6925, 6950, 6801, 6802, 6811, 6812, 6821, 6822) can be applied towards the degree. At least 20 credits must be performed in the Spring semester. Students may choose from the elective course offering list below:

- Non-Clinical Elective Rotation (2.5 or 10 Credits)
- Research Elective Rotation (5 Credits)
- Family Medicine Elective Rotation (5 or 10 Credits)
- Internal Medicine Elective Rotation (5 or 10 Credits)
- Surgery Elective Rotation (5 or 10 Credits)
- Women’s Health Elective Rotation (5 or 10 Credits)



- Pediatrics Elective Rotation (5 or 10 Credits)
- Specialty Medicine Elective Rotation (5 or 10 Credits)
- Psychiatry & Behavioral Health Elective Rotation (5 or 10 Credits)
- Underserved Care & Medical Outreach Elective Rotation (5 or 10 Credits)
- Emergency Medicine Elective Rotation (5 or 10 Credits)
- OMM/NMM Elective Rotation (5 or 10 Credits)
- \*\*Undergraduate Fellowship courses (5 Credits per course)

**Total Credits Required for Graduation: 272 Credits**

## **5.15 Curriculum Description**

The normal course of study to gain a Doctor of Osteopathic Medicine (D.O.) degree from LUCOM consists of four years of progressive integrated education. Two years are held predominately on campus and the second two years are held predominately at clinical sites that are collaborative partners of LUCOM.

The College of Osteopathic Medicine has a dedicated faculty; established affiliations with medical centers, hospitals, and healthcare systems; a structured and supported rural/underserved medicine program; and a mission to educate the finest osteopathic physicians possible.

The design of the curriculum is based on successful integrated academic models. It emphasizes interdisciplinary collaboration, guiding students to develop a holistic, and more importantly, an osteopathic approach to medicine. We continually correlate basic scientific information and methodology with fundamental clinical application. Students are exposed to clinical settings in their first year, which gives them the opportunity to prepare for the “real world” of medicine.

This clinical exposure expands in the second year and the students have increased opportunity to interact with standardized patients on campus as well as be involved, under physician supervision, with real patients in the office and hospital setting.

Students are assigned to one of our core educational centers to ensure continuity and coordination of clinical education within our vast and growing clinical training network. Our innovative curriculum is designed to fulfill our mission of training students who are competent and ready to enter graduate medical education and training with an emphasis on preparing students to become primary care physicians.

### **5.15.A Pre-Clinical Curriculum<sup>31</sup>**

For the first two years of the osteopathic medical education, LUCOM utilizes a blended, spiral curriculum that features a variety of learning modalities to prepare its students to meet the competencies established by the AOA COCA, acquire the knowledge and skills expected of a graduate osteopathic physician and develop the tools required to become a life-long learner and contributor to the expansion of medical knowledge and patient health. The curriculum seeks to provide the opportunity for students

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<sup>31</sup> 6.7 Self-Directed Learning  
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to develop the level of professional and ethical standards and behaviors expected of osteopathic physicians in addition to the medical knowledge and skills required of a graduate osteopathic physician.

Early clinical experiences are provided during the first two years of medical school in order to integrate the student into the professional atmosphere and to attempt to maintain the humanistic qualities that the COM expects students to bring into the program. An emphasis on active learning and graduated student responsibility for their education and professional development is fostered through a variety of learning experiences, including classroom presentations and application exercises, laboratory sessions, small group and team-based learning activities, near-peer instruction, the use of standardized patients and patient simulators, clinical experiences and guided and self-directed independent study. The entirety of the educational experience at LUCOM aims to encourage students to develop a pattern of individual responsibility and capacity for life-long learning and growth as competent, patient-centered, holistic excellent osteopathic physicians.

The integrated spiral nature of the pre-clinical curriculum consists of three longitudinal “strands” of learning: (1) osteopathic manipulative treatment (OMM), (2) patient-centered medicine (PCM), and (3) biomedical basis of health, disease, and intervention (BBHDI). Each of these three strands runs throughout the first two years of the curriculum, and the contemporaneous learning in each of these strands is integrated, interrelated, and complementary – similar to the double helical nature of strands of DNA within chromosomes. LUCOM desires to create a culture of informed inquiry. The most valuable learning experiences are motivated by a rational recognition of the “need to know and grow.” The development of problem-solving skills, the application of inductive and deductive reasoning and a thoughtful, intentional process of clinical reasoning is introduced early in the curriculum of each of the three strands.

### **5.15.B Strand 1: Osteopathic Manipulative Medicine (OMM)<sup>32</sup>**

The courses regarding osteopathic principles, practice, and treatment may be viewed as one longitudinal curriculum spanning over four years divided into semesters and subdivided into four phases. The OMM courses may include didactic presentations, demonstrations, practical laboratory experiences and hands-on clinical opportunities utilizing other students as well as real and standardized patients to establish the student’s knowledge and ability to recognize and utilize the relationship between structure and function that is integral to Osteopathic Medicine.

During the OMS-I year, during the first semester, the student will be exposed to the history of the profession, vocabulary, osteopathic principles, and tissue palpation skills development (Phase One). This will form the foundational knowledge upon which all additional osteopathic studies will be built. After the student has demonstrated a sound knowledge of the foundational principles, the students will then begin their instruction in the biomechanical diagnosis and functional anatomy of the human body. Likewise, the students will advance their palpation skills to be able to diagnose and treat the human system from a biomechanical perspective as the students advances through the body systems for their first time in osteopathic medical training (Phase Two).

During the OMS-II year, the students are exposed to the various systems of the human body. However, at this time, the students will build upon their biomechanical knowledge gained during the first year and learn how to apply these skills to influence the body from a physiologic perspective. The educational

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<sup>32</sup> 6.6 Principles of Osteopathic Medicine  
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goal of the second year is to teach the student how to support the homeostatic process of the body, remove obstructions to health and help foster an environment which is optimal for the healing and self-regulating processes of the body to recover from disease. Further, the student will begin to understand that there are multiple ways to influence homeostasis and healing within the patient and manipulation, when integrated with all other standard methods of disease management, may play a role in helping to provide the patient with the best chance for recovery (Phase Three).

Lastly, through hands-on review lab sessions, online modules, and face to face contact with faculty and preceptors, students will be expected to carry, review and apply their knowledge and treatment skills during their third and fourth years of training.

### **5.15.C Strand 2: Patient-Centered Medicine (PCM)**

The PCM courses are designed to provide educational experiences that promote the development of the students into medical professionals and physicians rather than repositories of knowledge. The courses will require the development of active learning skills, the ability to inquire and communicate effectively with patients to acquire medical and historical information to guide patient care, the development of the skills required to work in health care teams and collaborative settings, and maturation of the skills required to become life-long learners. Throughout the PCM courses, the students should be able to develop their clinical skills related to the systems being studied and demonstrate the ability to interpret, evaluate, and apply both knowledge and clinical skills to improve patient outcomes.

The student will be expected to develop and demonstrate skills and competencies in areas of interviewing and communicating with patients and colleagues, demonstrate diagnostic and therapeutic reasoning, and problem-solving skills. The student will be taught the diagnostic and therapeutic procedures and skills required of an osteopathic graduate prepared to enter graduate medical education. The student will demonstrate competencies required to function in different systems of health care, collaborative, and team- based settings.

The student, as a component of this strand, will have the opportunity to participate in early clinical experiences including experiences with standardized patients and in the simulation laboratories, experiences in physician offices, community health centers, health departments, and hospitals.

The courses' curriculum requires both passive and active learning in the classroom, in the physical diagnosis and procedures laboratory, in small group settings and in clinical settings. It includes both the formative and summative utilization of simulator cases; computer-assisted clinical cases, early clinical exposure, and standardized patient encounters.

### **5.15.D Strand 3: Biomedical Basis of Health, Disease, and Intervention (BBHDI)**

There are four phases of the BBHDI strand of learning that run longitudinally through the preclinical curriculum. There are four turns (or "passes") in the preclinical curricular spiral, with each turn representing a pass through an expanding breadth and depth of information and clinical application. The first turn of the spiral occurs in Phase One and focuses on foundational information and understanding. The second turn occurs in Phase Two, which emphasizes the normal structure and function that defines states of health and wellness and approaches to health promotion in individuals and populations. The third turn occurs in Phase Three, where the emphasis is on recognition of disease and the application of clinical understanding that leads to rational patient-centered approaches to prevention, diagnosis, and treatment of disease. The fourth and final turn takes place in Phase Four, where students are

provided an opportunity for summation and synthesis of the understanding and application of information that has grown throughout the preceding phases.

*i) Phase One (BBHDI-1)*

This phase comprises the first few weeks of the curriculum in the first year of osteopathic medical education. BBHDI-1 consists of a single course: Biomedical Foundations of Osteopathic Medicine (BFOM). Students are introduced to fundamental concepts and mechanisms important to the biomedical consideration of health and disease. Disciplines of molecular and cellular biology, genetics, histology, physiology, microbiology, immunology, pathology, and pharmacology are considered in an interdisciplinary fashion. The BFOM course provides the foundation upon which the remainder of the BBHDI curriculum and learning is built throughout the preclinical years of education.

*ii) Phase Two (BBHDI-2)*

This phase extends through the remainder of the OMS-I year and consists of a series of six courses organized predominantly by body regions/system, and a final course that introduces and develops concepts and principles of public health, epidemiology, and clinical research. A study of traditional medical science disciplines (molecular and cellular biology, genetics, biochemistry, developmental biology and embryology, histology, anatomy, physiology, microbiology and immunology, pathology, and pharmacology) are integrated into the system-based courses. This phase emphasizes normal structure-function relationships and the principles, mechanisms, and processes of the human body that are important for the maintenance and promotion of health in individuals as well as populations. In the context of abnormal structure-function relationships, basic principles and mechanisms of disease processes and the rationale for approaches to intervention are introduced as well.

One of the innovative aspects of the LUCOM curriculum involves student cadaveric dissection beginning with Phase Two, rather than following the tradition of beginning gross anatomy student dissection activity at the onset of the curriculum. Throughout the system courses during OMS-I, students study human gross anatomy by examining prosected human cadavers and preserved specimens, models, and digital images.

The final course, Population Based Medicine, offers an overview and understanding of principles and practice of public health, classical and clinical epidemiology, general types of clinical research studies, and the biostatistical considerations that are relevant to being able to read, interpret, and apply clinical research information in the context of evidence-based medical practice.

*iii) Phase Three (BBHDI-3)*

This phase begins at the start of the second year of medical school and includes a “second pass” through the same body regions/systems that were examined during OMS-I. With this second pass, there is intentional review, with emphasis on recall, application, expansion, and synthesis of understanding and skills. In these OMS-II system-based courses, a greater focus is placed on understanding the epidemiology, risks, pathogenesis and pathophysiology of disease, as well as rational approaches to diagnostic evaluations and interventions aimed at advancing patient health and wellness. An emphasis is placed on developing sound clinical reasoning in generating appropriate differential diagnoses, working diagnoses, and the rationale for patient management plans.

In their second year, having already acquired a working understanding of human anatomy and the importance of three-dimensional structure-function relationships, students engage in human cadaveric dissection throughout the Phase Three system courses. Students begin their Phase Three human

cadaveric dissection experience with a sound knowledge and appreciation of human anatomy, allowing them to more efficiently and meaningfully learn from their dissection. Invariably, there is much pathology that can be appreciated and investigated through cadaveric dissection. By dissecting cadavers in their second year, students are better able to recognize pathology and benefit from a more thorough consideration of clinical-pathologic correlations.

LUCOM also uses the second-year dissection of cadavers as an opportunity to provide valuable near-peer teaching experiences. Because of the alignment of the two passes through the system-organized courses, second-year students are completing regional cadaveric dissection while the first-year students are studying the same relevant body system. OMS-I students can visit the gross anatomy cadaver lab and OMS-II students are able to present their dissections to their first-year colleagues. In this way, second-year students, under the supervision of the gross anatomy faculty, can become tutors and demonstrate and explain relevant three-dimensional anatomic and structure- function relationships as well as demonstrate and explain relevant clinical-pathologic correlations. Additionally, as first-year students examine the cadaveric dissection of their second-year near-peers, they are given a valuable glimpse into the future of what they will be doing themselves the following year.

*iv) Phase Four (BBHDI-4)*

This phase occurs near the end of the OMS-II year and includes a more in- depth study of conditions commonly found associated with women's health and pediatrics. These two courses provide an opportunity to compare and contrast notable processes, clinical syndromes and considerations in these important fields.

### **5.15.E. OMS-III Core Clinical Curriculum<sup>33</sup>**

The OMS-III year is based at one of LUCOM core clinical sites and each student follows a COM directed curriculum that includes patient care as well as didactics, independent learning assignments, interactive computer case-based learning, simulation scenarios to ensure development of foundational competencies for each discipline are provided for each student. The students will complete OMS-III core clinical rotations occurring both in the hospital and in community settings. Each rotation has designated learning objectives for the accompanying curriculum, integrated osteopathic learning objectives and requirements, as well as an end-of-rotation evaluation. OMS-III students participate in a two-week OMM rotation centered on a hands-on, proctored, osteopathic experience with patients. Additionally, OMM modules may be embedded into select OMS-III rotations. Each student must successfully pass each core clinical rotation to move to the OMS-IV year, in addition to COMLEX requirements established by the COM.

LUCOM recognizes the important benefit of interprofessional training and fully supports and anticipates several scheduled and extemporaneous opportunities for our students to train as a member of a patient-centered team comprised of multiple healthcare providers. It is the expectation that students will respect the roles of different members of the team and how each contributes to the delivery of complete care within the healthcare delivery system. Dependent upon the resources available at each core rotation site, students will be engaged in interdisciplinary didactic training, participation in team-based health care delivery discussions, and opportunities for simulation and standardized patient training alongside team members who are either in clinical training or providing care through training they have acquired in other healthcare disciplines. Interprofessional educational experiences may be done with

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<sup>33</sup> 6.8 Interprofessional Core Clinical Curriculum  
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pharmacists, physician assistance, nurses, nurse practitioners, certified nurse's aides, medical assistants, personal care technicians and among other disciplines while under the supervision of their physician preceptor.

The core rotations during the OMS-III year, supervised by COM appointed faculty at one of the COM affiliated core hospitals, are integral to the development of physicians and is designed to allow the student to convert facts and information accumulated during their preclinical years into application of that knowledge for the benefit of the patient, develop confidence in themselves as professionals as well as expose areas of need for further learning. Included are rotations in internal medicine and medical subspecialties, general surgery and surgical subspecialties, obstetrics, and women's health. During rotations, while the students are not primarily responsible for the care or outcome of the patient, the patient remains the primary concern of all members of the health care team, including the student. Students are challenged to demonstrate to the faculty that they have acquired and can utilize a foundation of basic clinical skills, medical knowledge, and competencies that has them prepared to move into graduate medical education.

Based in a community and outpatient setting, this portion of the core education of the OMS-III student is designed to expose the student to the practice of medicine originating outside of the hospital and academic settings. With an emphasis on public health, preventive medicine, wellness, primary and secondary care of acute and chronic illness, and emphasizing a holistic approach to the patient, the student will have opportunity to follow the physician from the clinic to the hospital and back, providing an opportunity to participate in the total care of the patient regardless of where the care originated.

#### **5.15.F. OMS-IV**

The OMS-IV year requires that a student complete one or more GME selective rotations within an ACGME accredited residency program. The student will learn to work within the framework of an accredited residency program. The GME selective rotation includes options in Emergency Medicine, Family Medicine, Internal Medicine, Pediatrics and General Surgery. Suggested areas of study within the general field of medicine may include the fields of: Cardiology, Dermatology, Endocrinology, Gastroenterology Hematology/Oncology, Infectious Diseases, Nephrology, Pulmonary Medicine, and Radiology. Suggested areas of study within the general field of surgery may include the fields of: General Surgery, Colorectal Surgery, Neurosurgery, Trauma Surgery, Ophthalmology, Urology, Urogynecology, Orthopedic Surgery, Otolaryngology, Oral and Maxillofacial Surgery, Pediatric Surgery, Plastic and Reconstructive Surgery, Surgical Oncology, Cardiothoracic Surgery, and Vascular Surgery. Selective OMS-IV rotations are intended to transition the osteopathic medical student from active learner to active medical decision maker and care planner and to expand knowledge in preparation for residency and/or parallel planning toward a second specialty. Selective rotations can be arranged in two- or four-week blocks. The objective of selective clinical rotations is to provide a framework for the evaluation and management of the patient with acute and chronic pathophysiology that requires the consultation of the specialty physician. The osteopathic medical student is given the opportunity to observe and participate in the management of medical and surgical cases in the hospital and/or outpatient environment and to experience the intricacies of necessary diagnostic and therapeutic planned procedures. Elective rotations may be completed by the student with COM appointed faculty, at COM approved sites or at other sites arranged by the student in accordance with LUCOM's policies and procedures. Elective experiences enable an individual's pursuit of concentrated intellectual, clinical, or research interests.



LUCOM makes available to all students adequate opportunities to provide and practice OMM under the supervision of COM credentialed physicians. During the OMS-IV year, students are required to participate in the Osteopathic Approach to Pain Management course to ensure they receive a comprehensive osteopathic education. The Osteopathic Approach to Pain Management course is designed to provide each graduating senior the opportunity to be exposed to OMM and OMT prior to entering residency. It is also designed to incorporate the Virginia Core Competencies in Pain Management and Addiction with an osteopathic approach utilizing the integration of OMT, behavioral considerations and modalities, the spiritual impact of pain, and procedural interventions.

### **5.16 Osteopathic Educational Continuum<sup>34</sup>**

In accordance with the Commission on Osteopathic College Accreditation (COCA) Element 10.1, Liberty University College of Osteopathic Medicine (LUCOM) is committed to ensuring that its curriculum is consistent with its mission and provides the content of sufficient breadth and depth to prepare students for entry into a graduate medical education program for the subsequent practice of medicine. LUCOM has policies, procedures, personnel, and budgetary resources to support the continuum of osteopathic medicine. This policy describes the practices and procedures to support the continuum of osteopathic medical education at LUCOM.

## **PROCEDURE**

### **SECTION I: INTRODUCTION**

#### **A. PURPOSE OF GRADUATE MEDICAL EDUCATION (GME)**

The purpose of GME is to provide an organized educational program with guidance and supervision of the resident/fellow, facilitating the resident/fellow's ethical, professional, and personal development while ensuring safe and appropriate care for patients. LUCOM fully supports the mission of the Accreditation Council for Graduate Medical Education (ACGME) "to improve health care and population health by assessing and advancing the quality of resident physicians' education through accreditation." LUCOM accomplishes this through its collaboration with LUCOM Graduate Medical Education Services (LUCOM GMES), which serves as an institutional sponsor of GME.

#### **B. SPONSORING INSTITUTION**

ACGME accredited GME programs must operate under the authority and control of one sponsoring institution. The sponsoring institution must be appropriately organized for the conduct of graduate medical education in a scholarly environment and must be committed to excellence in both medical education and patient care in order to fulfill its responsibility for oversight of activities related to patient safety, quality improvement, transitions of care, supervision, duty hours, fatigue management and mitigation, and professionalism. Oversight of the residents/fellows' assignments and the quality of the learning and working environment by the Sponsoring Institution extends to all participating sites. In the pursuit of supporting the continuum of osteopathic education, LUCOM collaborates with LUCOM GMES, which serves as an institutional sponsor of GME. LUCOM

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<sup>34</sup> 10.1 Osteopathic Educational Continuum  
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GMES provides the necessary support for the provision of leadership, administration, organizational structure, clinical support, as well as the necessary educational, financial, and human resources, to support the GME to be provided at levels required to achieve and maintain compliance with the ACGME Institutional Requirements. Additional services provided by LUCOM, LUCOM GMES, and other collaborative partners include, but is not limited to:

1. Accreditation support and training
  - a) Periodic site visits and mock reviews
  - b) Guidance on effective structure of GME Committee
  - c) Coordinator training and development of programs
  - d) Designated Institutional Official (DIO) services
2. Faculty development and support
  - a) Enhanced learning resources and electronic library access
  - b) Access to simulation training
  - c) Preceptor Continuing Medical Education (CME) and development
  - d) Didactic support

### **C. COMPLIANCE WITH ACGME REQUIREMENTS, POLICIES, AND PROCEDURES**

LUCOM supports GME programs through collaboration with LUCOM GMES, which serves as an institutional sponsor of GME. LUCOM GMES, must be in substantial compliance with the ACGME Institutional Requirements and must ensure that their ACGME accredited programs are in substantial compliance with Common Program Requirements, and specialty-specific Program Requirements. A sponsoring institution's failure to comply substantially with the Institutional Requirements and maintain accreditation will jeopardize the accreditation of all of its sponsored ACGME-accredited programs. Program Directors, core and other teaching faculty, and administrative staff should review the ACGME Institutional Requirements, Program Requirements, Policies and Procedures located on the ACGME website at [www.acgme.org](http://www.acgme.org). These accreditation requirements are updated frequently by the ACGME, and the ACGME website should be reviewed periodically for the most current requirements in effect.

## **SECTION II: INSTITUTIONAL RESPONSIBILITIES**

### **A. COMMITMENT TO UNDERGRADUATE MEDICAL EDUCATION<sup>35</sup>**

LUCOM's mission and corresponding goals are to provide students with an osteopathic medical education that emphasizes primary care, encourages research, promotes lifelong scholarly activity, and produces graduates who are committed to serving the healthcare needs of underserved communities in Lynchburg, the Virginia Tobacco Region, and across the nation. As such, LUCOM emphasizes the importance of the osteopathic focus in all its educational efforts. The academic and clinical deans, Executive Curriculum Committee, and all other appropriate designees are charged with overseeing and executing all osteopathic education associated with LUCOM throughout the educational continuum. LUCOM provides an integrative osteopathic education throughout a student's educational journey that is sustained by the allocation of funding, administrative support, personnel, and resources.

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<sup>35</sup> 6.1 Curriculum Design and Management  
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In the pre-clerkship years, knowledge and skills are assessed through written examinations; observation of performance during laboratory sessions; and structured evaluations of diagnostic treatment, knowledge, and skills taught through patient-focused courses (Osteopathic Manipulative Medicine and Patient Centered Medicine). In the clerkship years, clinical competence is evaluated by faculty and evaluations at the end of each rotation. Requirements for the incorporation and application of therapeutic and osteopathic principles are incorporated in clinical rotation syllabi, assigned readings, case-based modules, and through the required core rotations, including the OMS-III OMM rotation. Clerkship competency is additionally measured through assessments utilizing standardized patients and a COMAT examination.

## **B. COMMITMENT TO GRADUATE MEDICAL EDUCATION**

The administrative staff, teaching faculty, and medical staff of LUCOM and LUCOM GMES are committed to excellence in medical education and providing the necessary support for administrative, educational, clinical, and human resources to support growth of GME. This commitment is demonstrated through the provision of leadership, an organizational structure, and resources necessary to achieve substantial compliance with ACGME Institutional Requirements, implement and develop sponsored programs, and enable its ACGME-accredited programs to achieve substantial compliance with ACGME Program Requirements. LUCOM GMES is committed to promoting safe and appropriate patient care and providing an ethical, professional, and educational environment in which the curricular requirements, as well as the applicable requirements for the residents/fellows' work environment, scholarly activity, personal development, and the general competencies can be met. The regular assessment of the quality of the educational programs, the performance of its residents/fellows, the supervision of its residents/fellows, and the use of outcome assessment results for program improvement are essential components of the institution's commitment to GME.

## **C. ADMINISTRATION OF GRADUATE MEDICAL EDUCATION**

1. LUCOM's Office of Clinical Affairs and Graduate Medical Education: This office serves as an administrative support unit affiliated with sponsoring institutions' residency programs and residents/fellows, in the administration and oversight of all activities related to graduate medical education. The office is under the direction of the LUCOM's appropriate dean associated with Clinical Affairs and GME, who serves as a liaison with residency programs, residents/fellows, and affiliated institutions, as well as departments responsible for providing ancillary and support services for the graduate medical education programs.
2. LUCOM GMES Graduate Medical Education Committee (GMEC): LUCOM GMES will maintain a GMEC to provide the necessary support and resources to allow for effective delivery of shared services to all affiliated ACGME-accredited programs. LUCOM GMES' GMEC will be comprised of key LUCOM clinical faculty as well as senior staff necessary for the delivery of shared services. As a sponsoring institution, LUCOM GMES' GMEC includes the ACGME required positions of the DIO and Program Director(s), as well as others necessary to support the training programs and fulfill ACGME requirements.
3. Designated Institutional Official (DIO): Each sponsoring institution must appoint a DIO, the individual who, in collaboration with a Graduate Medical Education Committee (GMEC), must have authority and responsibility for the oversight and administration of each of the Sponsoring Institution's ACGME-accredited programs, as well as for ensuring compliance with the ACGME Institutional, Common, and specialty/subspecialty-specific Program Requirements.

## **D. COMMITMENT TO CONTINUING MEDICAL EDUCATION**

The provision of Continuing Medical Education (CME) allows a practitioner to learn and discover viable ways to improve on the patient care they deliver and effectively manage a career in the ever-changing landscape of the medical industry. In its support of the osteopathic continuum of osteopathic education, LUCOM is an American Osteopathic Association (AOA) Category I CME sponsor accredited by the AOA Bureau of Osteopathic Education Council on Continuing Medical Education (CCME) to present programs that qualify for AOA category 1 credit. Additionally, the LUCOM is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians, which affords opportunities to offer AMA PRA Category 1 Credit™ for selected CME activities. LUCOM's provision of CME activities aligns with its commitment to prepare outstanding osteopathic physicians who are committed to providing care and corresponding services to their fellow man. Planned educational programs will focus on the medical education of preceptors in addition to health and wellness needs of people within the Tobacco Region and beyond while emphasizing primary care for rural communities.

### **5.16.A GME Policies and Mechanisms of Support<sup>36</sup>**

The administration, faculty, and staff of Liberty University College of Osteopathic Medicine (and its parent institution – Liberty University) are committed to excellence in medical education and providing the necessary financial support for administrative, educational, clinical, and human resources to support and provide oversight to LUCOM Graduate Medical Education Services (LUCOM GMES). This commitment is demonstrated through the provision of leadership, an organizational structure, and resources necessary to achieve the development and maintenance of sponsored programs that are in compliance with ACGME Institutional Requirements.

Specifically, the Office of Clinical Education and Graduate Medical Education is charged with developing new Graduate Medical Education (GME) programs and assists existing GME programs in meeting and maintaining specialty programs in addition to providing support for the addition of faculty to develop curriculum to attain osteopathic recognition accreditation by the ACGME.

#### **1. Policy for developing new GME programs**

The Office of Clinical Education and Graduate Medical Education actively seek residency development as an ongoing activity. Institutional representatives meet with potential collaborators to discuss and create new GME programs. New programs may contract with LUCOM GMES as their ACGME institutional sponsor or for residency educational and administrative support from LUCOM GMES while using their own institutional sponsor. LUCOM GMES assists new and developing programs with ACGME accreditation and administrative and educational support.

#### **2. Mechanisms for developing new GME programs**

LUCOM Clinical Education leadership in conjunction with LUCOM GMES, oversee the development of new GME programs, while assisting in the continual growth of existing GME programs. The development of new GME programs often, but is not required to, begins with undergraduate site selection, infrastructure development, and faculty development with LUCOM GMES. LUCOM GMES and local site leadership establish the infrastructure needed to apply for ACGME accreditation.

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<sup>36</sup> 10.2 Accredited GME, 10.3 Osteopathic Recognition GME  
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LUCOM GMES submits the application for initial accreditation for ACGME, assists with selection of faculty and Program Director(s), and works with the appointed Program Director(s) to develop the curriculum and schedules, within ACGME guidelines. LUCOM GMES attends ACGME site inspection and works with local leaders to gain and maintain program accreditation.

### **3. Policy for assisting existing GME programs**

LUCOM is committed to promoting safe, evidence-based, patient-centered care and providing an ethical, professional, and educational environment towards meeting the curricular requirements, as well as the applicable requirements for the residents/fellows' work environment, scholarly activity, personal development, and the general competencies. The regular assessment of the quality of the educational programs, the performance of its residents/fellows, the supervision of its residents/fellows, and the use of outcome assessment results for program improvement are essential components of the institution's commitment to GME. Additionally, existing GME programs are afforded the necessary financial and administrative support for carrying out all daily operations.

### **4. Mechanisms for assisting existing GME programs**

Budgetary and other likewise resources are allocated to existing GME programs on an annual basis. The support of existing GME programs often begins and is maintained with program evaluations completed by the leadership of both LUCOM's Clinical Education and LUCOM GMES in addition to other designees, if applicable, appointed by the Dean. The key component of these evaluations are to determine the allocation of necessary and appropriate resources, which will be recommended and then ratified by the Graduate Medical Education Committee (GMEC).

## **Chapter 6. American Osteopathic Association Core Competencies and LUCOM Program Learning Outcomes<sup>37</sup>**

LUCOM's curriculum adheres to the development of the following seven osteopathic core competencies among its students as outlined by the AOA. LUCOM's Program Learning Outcomes for students reflect the seven AOA core competencies, in addition to the eighth programmatic outcome of spiritual care.

### **6.1. Osteopathic Principles and Practice/Osteopathic Manipulative Treatment<sup>38</sup>**

Both cognitive and psychomotor skill sets are taught and assessed in this competency domain. Classroom-based learning occurs throughout years one and two. Laboratories for training in clinical and manipulative medicine skills are conducted through years one and two. Requirements for the incorporation and application of osteopathic principles are incorporated in clinical rotation syllabi, reading, case-based modules, and through the required OMS-III OMM rotation. The principles of structure and function, the clinical osteopathic examination, the diagnosis and treatment of somatic dysfunction, viscerosomatic, and somatovisceral dysfunction are integrated throughout the curriculum through coordination of OMM with Principles of Clinical Medicine and Biomedical Foundations and Systems. Knowledge and skills are assessed through written examinations in years one and two,

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<sup>37</sup> 6.2 Programmatic Level Educational Objectives, 6.4 Osteopathic Core Competencies, 6.12 COMLEX-USA

<sup>38</sup> 6.6 Principles of Osteopathic Medicine

observation and evaluation of performance during laboratory sessions and structured evaluations of diagnostic and treatment knowledge and skills during the OMM courses. Clinical competence in this domain is evaluated by faculty at core rotation sites during years three and four as well as performance in hands-on labs, symposium, and evaluations at the end of each core rotation. Overall, competency in osteopathic manipulative medicine is assessed by laboratory practical examinations, through assessments utilizing standardized patients, and OSCEs during years one and two along with demonstration during the required OMM laboratory sessions during the core rotations of OMS-III. This competence is further tested by the NBOME (COMLEX) with passage of Levels 1 and 2-CE required of all degree candidates.

## **6.2. Medical Knowledge<sup>39</sup>**

Each course has established learning objectives established by the faculty and the curriculum committee, including learning objectives for the clinical rotations. These include humanistic and professional objectives as well as cognitive learning objectives during preclinical and clinical clerkship.

Medical knowledge is assessed through written or computer module examinations during preclinical courses, through student presentations and participation during active learning, case-based or team learning sessions, by student scholarly research, papers, and presentations. It is measured by both the preclinical and clinical faculty through assessment of the quality and depth of student patient assessments, presentations, research and documentation of patient interviews, assessments and plans during clinical rotations as well as through the utilization and evaluation of performance on assigned case-based modules, during practical examinations at the bedside as much as during clinical and osteopathic skills laboratories. Knowledge is measured by the students' performance individually and compared to peers during the end-of-rotation examinations at the completion of each core clinical rotation, their performance on each of the levels of COMLEX and/or USMLE. The assessment provided by peers on the student's performance during interactions in the class, lab, and clinical setting is also utilized along with self-assessment tools for each student.

## **6.3. Patient Care<sup>40</sup>**

Patient care is taught through the clinical evaluation and care of patients, through active learning opportunities in small groups with case-based scenarios, in the standardized patient and simulation laboratories, medical outreach experiences, and then assessed through observational evaluation by the faculty and peers, written or computer-provided case-based and educational modules and associated formative and substantive examinations, through student presentations and participation during case-based or team-learning sessions, through student-generated patient assessments and notes during clinical rotations, during practical examinations in clinical and osteopathic skills laboratories, through the utilization of end-of-rotation examinations at the completion of each core clinical rotation, through performance on the various stages of COMLEX and/or USMLE and through direct faculty interaction. Students also participate in formal case write-ups, peer education requirements utilizing oral presentations during clinical education.

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<sup>39</sup> 6.1 Curriculum Design and Management

<sup>40</sup> 5.4 Patient Care Supervision

## 6.4. Interpersonal and Communication Skills<sup>41</sup>

The COM provides structured curriculum, simulation opportunities, group and active learning requirements, practical experiences, role models, and mentors designed to foster the ability of each student to interact with patients and peers in a manner that exhibits clarity and respect in the Patient-Centered Medicine course that extends over years one and two as well as in day-to-day interactions at the campus, during outreach events, and throughout the clinical curriculum. Students receive formal interview training and communication training, coupled with training in the psychology, sociology and diversity of patients during the pre-clinical years of the curriculum during their Patient-Centered Medicine courses.

Ethics and professionalism are emphasized as features of the curriculum and high standards of each are expected by the COM for all students. An emphasis is placed on an understanding of population-based as well as individual healthcare issues, public health policy concerns and development, and the role the patient's diversity plays in their life and health care.

The art and requirements of the medical interview are part of the early curriculum for the students and the required skills are reinforced through clinical laboratory experiences, standardized patient encounters, case-based group interactions and team-based learning environments, along with early community clinic experiences. As students gain greater experience and skills during their supervised clinical experiences during OMS-III and IV years, so do the expected levels of performance increase.

These competencies are also assessed by observation by the faculty and other students during both professional and social settings occurring at the COM and problems and concerns dealt with through faculty and student governance structure. The actions and interactions with other students, staff and faculty are important assessments of the student's competency. Students are observed during small group, classroom, clinical laboratory, and outreach experiences beginning in year 1 and continuing into the core clinical rotations. OSCEs are conducted utilizing standardized patients and simulation which are recorded for both formative and summative evaluation and to promote self-improvement on the part of the student. Peer feedback as a part of this assessment is highly valuable in shaping and changing behavior as well as improving skills. Students are evaluated by their clinical faculty in this domain during OMS-III and OMS- IV clinical rotations. These competencies are further assessed during COMLEX Level 2-PE, during the high stakes at the end of the second year clinical OSCE and the end of the third year Capstone.

## 6.5. Professionalism<sup>42</sup>

Professionalism and ethics are presented during Patient Centered Medicine Courses, during small group educational sessions that are a component of the curriculum, as a component of clinical laboratories, simulation and standardized patient encounters.

While the competency is evaluated through written examinations including Standardized Patient and simulation scenario's, it is evaluated more importantly through the action of the student in active learning environments such as small groups and team-based learning events, by their compliance with the policies and procedures of the institution, the students' involvement in COM and University activities and organizations and professional organizations and associations. Further assessment is made

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<sup>41</sup> 6.13 Diversity, Equity, and Inclusion Curriculum

<sup>42</sup> 5.1 Professionalism

through the students' contributions for the benefit of other students, demonstrations of their leadership, their actions and interactions with other professionals, students, staff, and faculty all are important assessments of the student's competency in this domain. Each student is observed by the faculty and evaluated by their peers during clinical laboratory, simulation, small group, team-based learning, and outreach experiences beginning in year 1 and continuing into the core clinical rotations. OSCEs are conducted utilizing standardized patients and low and high-fidelity simulation which are recorded for both formative and subjective evaluation as well as self-improvement on the part of the student.

Students are evaluated for professionalism and ethics by their clinical faculty and other educators during OMS-III and OMS-IV clinical rotations. The competency is further assessed by COMLEX Level 2-PE, during the high stakes at the end of the second-year clinical competency OSCE and at the end of the third year Capstone conducted by the COM.

### **6.6. Practice-Based Learning and Improvement**

Activities that promote reflective learning require scholarly research and application of knowledge. Such actions requiring evaluation of outcomes compared to standards and peers provide students with opportunities to gain competence through both pattern recognition, analysis of these outcomes, and the acquisition of new knowledge.

Each student is placed in clinical environments during the OMS-III and OMS-IV years that provides for outcome-based and evidence-based practice. These occur in both institutional and outpatient settings. During these rotations, they are exposed to quality-of-care reviews, patient safety programs, patient registries, and standards of care requirements. Their skill and knowledge is assessed through small group, case-based, and practical evaluations of patient care and outcomes occurring as a component of the Patient Centered Medicine curriculum, written examinations during preclinical course work that measure knowledge of standards of care, patient safety, patient registries, outcome and scientific-based practices, as well as their knowledge of methods of research and analysis.

Student evaluations, presentations, and documentations during clinical rotations are evaluated and the students are given feedback by the faculty on how these evaluations and treatment plans meet established standards and could be expected to affect outcomes. The student will learn to utilize electronic assessment tools for the formulation of and narrowing of differential diagnosis and the appropriate diagnostic and evaluation. Subject examinations at the completion of each core clinical rotation, all levels of COMLEX and/or USMLE, along with direct faculty interaction, will provide the student with a guide to his/her progress along with performance during formal case write-ups and oral presentations. Knowledge and ability to utilize up- to-date information is also assessed during the high stakes end-of-second year clinical competency and end of third year clinical competency examination conducted by the COM.

### **6.7. Systems-Based Practice<sup>43</sup>**

Students are taught about patient health care challenges and opportunities surrounding both the United States and global medical systems and their effect on patient outcomes both as individuals and as populations during their Patient-Centered Medicine courses and symposium during the first two years of medical school at LUCOM. Early clinical experiences provide for practical experience working inside differing systems during the student's time in private clinics and institutions, at Federally Qualified

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<sup>43</sup> 6.8 Interprofessional Education for Collaborative Practice  
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Healthcare Centers (FQHC), at rural and critical access hospitals, military institutions, and at public health departments in Virginia. Active learning during case-based learning opportunities, including interdisciplinary/interprofessional experiences during simulation, and standardized patient encounters all require the student to apply knowledge of variant systems in determining appropriate evaluation and treatment of the “patients”. Clinical faculty provide practical insight into health care services in a complex interdisciplinary/interprofessional environment during core clinical rotations. Students also participate in formal case write-ups and oral presentations during both preclinical and clinical years that require them to address the issue.

The domain is taught and assessed through participation in small group discussion occurring as a component of the Patient Centered Medicine and Population Based Medicine curriculum, interactive learning opportunities with nursing students at Liberty University, through written examinations during preclinical years that measure knowledge of the operations of differing systems of care, knowledge of patient safety, and patient registry programs. Student patient evaluations, documentation, evaluation and treatment plans are evaluated by peers and faculty. The topics are covered during examinations at the completion of each core clinical rotation and the topic is included on COMLEX and USMLE evaluations. Students are assessed for this competency as well during the high stakes end-of-second year clinical competency and end-of-third year clinical competency examination conducted by the COM.

All students are required to become certified in BLS and ACLS, in that order, as a component of their prep for clinical practice curriculum. Students are taught the basics of acute care of the sick and injured patient during clinical medicine and as a component of their systems courses. This knowledge is assessed on end-of-rotation examination, during Standardized Patient and Simulation events, and during small group and team learning discussions and presentations. Students are taught the process for research and information retrieval during clinical medicine and the prep for clinical practice course utilizing on-line resources such as Up-to-Date, Epocrates, MEDLINE, etc.

## 6.8. Spiritual Care

Spiritual care is an integral part of providing holistic patient care in the osteopathic approach, due to its emphasis on the positive relationship between an individual’s body, mind, and spirit<sup>44</sup>. Spiritual care aims to encourage, nurture, and strengthen a patient’s ability to achieve wholeness in relation to personal, spiritual, and social well-being characterized by a sense of connection to self, others, and a higher power<sup>45</sup>. Spiritual care consists of demonstrating an awareness of and responsiveness to the spiritual needs of patients, families, and colleagues, characterized by interpreting the situations that individuals experience, providing counselling as applicable, and highlighting the use of coping mechanisms<sup>46</sup>. Specific spiritual care interventions include forming a trusting patient-physician relationship, actively listening to patient concerns, understanding the patient’s values and religious

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<sup>44</sup> Hvidt, N. C., Nielsen, K. T., Kørup, A. K., Prinds, C., Hansen, D. G., Viftrup, D. T., Assing Hvidt, E., Hammer, E. R., Falkø, E., Locher, F., Boelsbjerg, H. B., Wallin, J. A., Thomsen, K. F., Schrøder, K., Moestrup, L., Nissen, R. D., Stewart-Ferrer, S., Stripp, T. K., Steinfeldt, V. Ø., . . . Wæhrens, E. E. (2020). What is spiritual care? professional perspectives on the concept of spiritual care identified through group concept mapping. *BMJ Open*, 10(12), e042142-e042142. <https://doi.org/10.1136/bmjopen-2020-042142>

<sup>45</sup> Connerton, C. S., & Moe, C. S. (2018). The essence of spiritual care. *Creative Nursing*, 24(1), 36-41. <https://doi.org/10.1891/1078-4535.24.1.36>

<sup>46</sup> Türkben Polat, H., & Özdemir, A. A. (2022). Relationship between compassion and spiritual care among nurses in Turkey. *Journal of Religion and Health*, 61(3), 1894-1905. <https://doi.org/10.1007/s-10943-021-01287-6>

beliefs, learning how the patient views the illness, showing empathy, and providing resources to the patient in addressing spiritual needs<sup>47</sup>. Spiritual care will be evident by a servant's heart approach seen in patient care, community outreach, and missions. Students will embody LUCOM's mission by serving rural and underserved communities and will recognize and respond to individual needs for spiritual care.

In the preclinical years, students are trained to take patients' spiritual history during Standardized Patient encounters and are evaluated by clinical lab instructors. Furthermore, students are evaluated on spiritual care through written assessments. In the clinical years, OMS III and OMS IV students are evaluated by preceptors at each site on the core competencies along with spiritual care, to demonstrate an awareness of and responsiveness to the spiritual needs of patients. Finally, students complete a self-reflection assessment that includes spiritual care in each OMS year, as a part of co-curricular and/or curricular programs.

## Chapter 7. Course Descriptions

### 7.1. OMS I

#### 7.1.A. LCOM 4021: Osteopathic Manipulative Medicine 101 (OMM 101), 2 Credits<sup>48</sup>

This introductory Osteopathic Manipulative Medicine course is designed to provide the student with a fundamental understanding of the history, principles, and philosophies of osteopathic medicine. During this course the student will be introduced to the lexicon which are the foundational principles and professional expectations upon which the profession was built. The faculty works in conjunction with other departments to complement and integrate the knowledge received from the systems based and clinical medicine courses. Whenever possible, the OMM 101 curriculum will integrate with the basic science departments to help enhance knowledge of anatomic relationships, particularly in the musculoskeletal, nervous, and cardiopulmonary systems, as they apply to osteopathic theory and treatment.

Additionally, the student will sequentially initiate training in the tactile and haptic skills necessary for the diagnostic palpation of and manipulative treatments for their future patients, regardless of the medical specialty chosen. Consequently, this course will instruct the student in the philosophic and diagnostic underpinnings upon which they will continue to build their osteopathic knowledge, and structurally based examination, palpatory and clinical methods and modalities which will continually develop for the rest of their clinical careers. This course consists of a mandatory, skills-based laboratory component which will instruct the student incrementally on competencies central to osteopathic screening, structural evaluation, diagnosis, and osteopathic manipulative treatment (OMT).

#### 7.1.B. LCOM 2021: Patient-Centered Medicine 101 (PCM 101), 2.5 Credits

Patient-Centered Medicine 101 is designed to introduce clinical skills including the art of medical history taking and physical examination. It also introduces the student to the concepts of medical professionalism, and the physician-patient relationship.

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<sup>47</sup> Türkben Polat, H., & Özdemir, A. A. (2022). Relationship between compassion and spiritual care among nurses in Turkey. *Journal of Religion and Health*, 61(3), 1894-1905. <https://doi.org/10.1007/s-10943-021-01287-6>

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The course places an emphasis on the ability to communicate with patients effectively, educate and motivate them to advance their own health and wellness, along with the ability to work collaboratively in a team environment. The course requires active participation and demonstrations of mastery of the core competencies expected of an osteopathic physician. The course is the first of a series of clinical skills courses that are correlated with the biomedical courses taught in the curriculum. Instructional methods which may be utilized include computer-based educational content, lecture demonstration, small group case-based learning exercises, problem-solving exercises, clinical laboratory experiences, standardized patients and simulations as well as assigned reading to provide the knowledge and skills foundation expected by the faculty. The course teaches the basics of radiological imaging as related to the different body systems.

#### **7.1.C. LCOM 2111: Humanities and Medical Ethics I (HMEI), 0.5 Credits**

This course introduces students to biblical, historical, and osteopathic frameworks of humanistic care and medical ethics. Future physicians learn the foundational principles of medical ethics used when making clinical decisions. Opportunities to analyze ethical situations, discuss ethical principles, and practice making ethical decisions will be provided.

#### **7.1.D. LCOM 1001: Biomedical Foundations of Osteopathic Medicine (BFOM), 7 Credits**

The BFOM course provides students with a foundation upon which to further develop a growing understanding of important structure-function interrelationships that are involved in states of health and disease. The course integrates fundamentals of traditional medical science disciplines within the context of the body's natural ability to maintain homeostasis. A major purpose of the BFOM course is to provide a common medical scientific foundation and to introduce a holistic, osteopathic approach for learning about health and disease by emphasizing foundational principles of biochemistry, cell biology, genetics, immunology, microbiology, pathology, and pharmacology.

#### **7.1.E. LCOM 3002: Integument and Musculoskeletal System (IMSK), 6.75 Credits**

The Integument and Musculoskeletal System course builds upon the BFOM course and aims to expand the student's foundational understanding of human structure and function in both normal and pathologic states.

Students have the opportunity to study the development as well as the structure and function of the skin, skeleton, joints, the associated muscles and soft tissues, and the neurovascular connections of the somatic body in states of health and disease, but the emphasis is on the homeostatic maintenance of health. Students will be introduced to pathologic conditions affecting the somatic body and general considerations important to clinical decision-making, including the biological basis for generating differential diagnoses and approaches to rational patient care. Osteopathic principles and concepts will be discussed, integrated, and applied along with the interdisciplinary dialogue and application of traditional biomedical sciences. The sciences will include molecular and cellular biology, biochemistry, embryology, anatomy, histology, physiology, microbiology and immunology, pathology, and pharmacology.

#### **7.1.F. LCOM 3001: Cardiovascular, Respiratory, Hematologic Systems (CVRH), 6.25 Credits**

The Cardiovascular, Respiratory, Hematologic Systems (CVRH) course is designed to enable students to acquire knowledge and understanding of normal structure-function relationships and the biomedical

basis for health maintenance involving the cardiovascular, respiratory, blood and lymphatic systems. Principles regarding maintenance of homeostasis in blood formation, cardiac output, blood pressure, blood flow, water and nutrient exchange, ventilation, and gas exchange are explored. Exercise and environmental influences on these factors are studied, as are the underlying bases for pharmacological interventions.

#### **7.1.G. LCOM 4022: Osteopathic Manipulative Medicine 102 (OMM102), 2 Credits<sup>49</sup>**

During this course the student will continue to explore the lexicon, the foundational principles and professional expectations upon which the profession was built. The faculty works in conjunction with other departments to complement and integrate the knowledge received from the systems based and clinical medicine courses. Whenever possible, the OMM 102 curriculum will integrate with the basic science departments to help enhance your knowledge of anatomic relationships, particularly in the musculoskeletal, nervous, and cardiopulmonary systems, as they apply to osteopathic theory and treatment.

Additionally, the student will sequentially initiate training in the tactile and haptic skills necessary for the diagnostic palpation of and manipulative treatments for their future patients, regardless of the medical specialty chosen. Consequently, this course will instruct the student in the philosophic and diagnostic underpinnings upon which they will continue to build their osteopathic knowledge, and structurally based examination, palpatory and clinical methods and modalities which will continually develop for the rest of their clinical careers. This course consists of a mandatory, skills-based laboratory component which will instruct the student incrementally on competencies central to osteopathic screening, structural evaluation, diagnosis, and osteopathic manipulative treatment (OMT).

#### **7.1.H. LCOM 2022: Patient-Centered Medicine 102 (PCM102), 2.5 Credits**

Patient-Centered Medicine 102 is designed to build upon necessary clinical skills, including the art of medical history taking and physical examination

The course places an emphasis on the ability to communicate with patients effectively, educate and motivate them to advance their own health and wellness along with the ability to work collaboratively in a team environment. The course requires active participation and demonstrations of mastery of the core competencies expected of an osteopathic physician. The course is the second of a series of clinical skills courses that are correlated with the biomedical courses taught in the curriculum. Instructional methods which may be utilized include computer-based educational content, lecture demonstration, small group case-based learning exercises, problem-solving exercises, clinical laboratory experiences, utilization of standardized patients and simulations as well as assigned reading. The course teaches the basics of radiological imaging as related in the different body systems.

#### **7.1.I. LCOM 2112: Humanities and Medical Ethics II (HMEII), 0.5 Credits**

This course reinforces principles of humanistic care, introduces future physicians to key clinical cases that necessitated the development of medical ethics, and highlights important aspects of caring for minors and conducting research. Opportunities to analyze ethical situations and discuss ethical principles will be provided.

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### **7.1.J. LCOM 3006: Gastrointestinal System and Nutrition (GINutri), 5 Credits**

The Gastrointestinal System and Nutrition course is structured to enable the student to acquire knowledge related to the normal structure and function of the gastrointestinal system and be able to develop and apply this knowledge to the prevention, diagnosis, and treatment of pathological conditions affecting this system. Students will explore the autonomic and neurohormonal regulation of the GI system and apply this understanding to somatovisceral and viscerosomatic dysfunction and the clinical recognition of and approach to the treatment of GI disorders. The study of the molecular and cellular level structure and function of normal healthy states provides a basis for explaining the pharmacologic approaches to patient care.

Students will examine the organization and role of accessory organs of digestion: salivary glands, liver, gall bladder, and pancreas. This course expects students to recognize and describe common pathologic conditions of these organs and the effect that these abnormalities have on digestion and nutritional status and how such abnormalities typically present clinically. The acquisition, metabolism, and utilization of nutrients required for maintenance of health will be explored and contrasted with the abnormalities in structure and function characteristic of disease states that arise from inadequacies in nutrient sources or processing. In addition, the nutritional basis of dieting and weight management will be surveyed in relation to stages of the life cycle. The mental and physical components of obesity and eating disorders will be examined.

### **7.1.K. LCOM 3005: Urinary System (Uri), 4.25 Credits**

The Urinary System course is designed for the student to acquire knowledge related to the normal structure and function of the urinary system and to develop the ability to apply this knowledge to the prevention, diagnosis, and treatment of pathological conditions affecting this system. The gross and microscopic structure and organization of the kidneys, ureters, bladder, urethra, and associated structures are correlated with normal functions of the body, including the maintenance of acid-base balance, electrolyte balance, body fluid balance, blood pressure, and the elimination of metabolic wastes and drug agents. The pharmacology of antihypertensive and antimicrobial agents is also introduced in this course with a focus on the pharmacokinetics, pharmacodynamics, and potential side effects on each class of drugs.

Students study and discuss the biomedical basis for common clinical presentations related to pathologic states involving the urinary system and the rationale for approaches of prevention and therapeutic intervention. The utilization of common laboratory tests used to assess urinary system function as well as the application of such test results in the clinical decision-making process is explored and applied to clinical scenarios.

### **7.1.L. LCOM 3008: Endocrine and Reproductive Systems (EndRep), 4.5 Credits**

The Endocrine-Reproductive System course provides a study of the normal structure and function of the traditional endocrine organs (i.e. hypothalamus, pituitary, thyroid, parathyroid, adrenal, pancreas, testis and ovary) and their related hormones within the endocrine system along with reproductive, pelvic and perineal anatomy and physiology. Hormones from non-traditional endocrine organs (e.g., heart, kidney, stomach, duodenum) will be presented in other courses but students will recognize many overlapping features of structure and function within all the body's hormones. The ENDREP course will establish a basis for understanding the disorders of the endocrine/reproductive systems. The microscopic and macroscopic structure of the endocrine organs as well as non-endocrine reproductive, pelvic and perineal anatomy, will be presented in lecture and laboratory. The following seven aspects of

each hormone will be presented in lecture: (1) site of synthesis; (2) stimulus for release and transport; (3) cellular mechanism of action; (4) physiological effect(s); (5) feedback regulation; (6) elimination, degradation, half-life; and (7) clinical examples and case studies.

Students are expected to apply their understanding of normal and abnormal structure-function of the endocrine/reproductive/pelvic/perineal systems to explain the basis for both the clinical presentations of common endocrine/reproductive/pelvic/perineal disorders and the general approaches to diagnosis. Additionally, this course offers an introduction to the biomedical basis of common approaches to laboratory testing and pharmacotherapeutics.

### **7.1.M. LCOM 3003: Nervous System/Head and Neck (NHN), 7 Credits**

The Nervous System/Head and Neck course is designed to facilitate the student acquiring knowledge related to the healthy central nervous system's structure and function. In addition, the student should learn the anatomy and physiology of the normal head and neck musculature, skeleton, innervation and vasculature. The link between head and neck anatomy and nervous system anatomy will be reinforced by studying the pathways and functions of the cranial nerves, as these nerves connect many of the central nervous system topics with those of the head and neck.

Students study and discuss the biomedical basis for common clinical presentations related to pathologic states involving the nervous system. Students will be asked to correlate neurological, motor and sensory symptoms with lesions in the central nervous system. This course will also emphasize the connections between the nervous system and multiple other systems and regions, which reinforces the osteopathic principle of the body being a single unit.

### **7.1.N. LCOM 2011: Population Based Medicine (PBM), 3.25 Credits**

The Population Based Medicine course includes principles of classical and clinical epidemiology, preventive medicine, public health, population genetics, and evidence-guided medical practice. Students consider the role of the osteopathic physician as it is influenced by measures of population and individual health and efforts to improve individual and population health. An introduction to the principles and processes of clinically related research, as well as a basic understanding of parametric and nonparametric biostatistics needed to be able to read and interpret clinical research, provides a context for considering the application of clinical information in the practice of osteopathic medicine. The roles of public health related strategies in the prevention of disease and its dissemination are discussed.

The ability to review and critically evaluate medical literature and diagnostic and therapeutic outcomes is essential to the acquisition of the knowledge required to be competent osteopathic physicians appropriately engaged in life-long learning. This course presents the basics of these foundational skills and provides the foundation for developing an approach to evidence-guided medical practice.

## **7.2. OMS II**

### **7.2.A. LCOM 4023: Osteopathic Manipulative Medicine 201 (OMM201), 2 Credits<sup>50</sup>**

OMM 201 is designed to build upon and integrate the concepts taught in OMS-I curriculum to help enhance knowledge of functional anatomy as it applies to osteopathic theory and treatment. The

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student will continue training in the tactile and haptic skills necessary for the diagnostic palpation of and manipulative treatments for their future patients, regardless of the medical specialty chosen. This course will instruct the student in the philosophic and diagnostic underpinnings upon which they will continue to build their osteopathic knowledge, and structurally based examination, palpatory and clinical methods and modalities which will continually develop for the rest of their clinical careers. This course consists of a mandatory, skills-based laboratory component which will instruct the student incrementally on competencies central to osteopathic screening, structural evaluation, diagnosis, and osteopathic manipulative treatment (OMT).

Consistent with the professional and the core educational standards developed by the Educational Council of Osteopathic Principles (ECOP), OMM 201 will emphasize the best available supportive data related to the biomechanical, functional, and physiologic mechanisms in order to provide a foundation for future education and development within the art and science of osteopathy. The course is taught primarily through the utilization of clinically based directed self-learning and reinforcement in a hands-on lab. Instructional methods which may be utilized include case based learning events, assigned reading and computer-based modules, active hands-on laboratory sessions, standardized patients, the utilization of simulation events and the application of knowledge and skills provided to patients during faculty supervised clinics and medical outreach events.

### **7.2.B. LCOM 2023: Patient-Centered Medicine 201 (PCM 201), 1.5 Credits**

Patient-Centered Medicine 201 is designed to build upon necessary clinical skills including the art of medical history taking and physical examination. The course provides an insight into the clinical practice of medicine. The course places an emphasis on knowledge, evaluation and problem solving that promote the development of a differential diagnosis and subsequent treatment plan. The course requires active learning and participation and the demonstration of the clinical and communication skills necessary to practice medicine. Instructional methods which may be utilized include lecture demonstration, clinical laboratory experience, small group sessions, standardized patients and simulation encounters.

The course requires active participation and demonstrations of mastery of the core competencies expected of an osteopathic physician. The course is the third of a series of clinical skills courses that are correlated with the biomedical courses taught in the curriculum.

### **7.2.C. LCOM 2113: Humanities and Medical Jurisprudence 1 (HMJI), 0.5 Credits**

This course teaches principles of humanistic care and medical law by introducing and reinforcing fundamental aspects of medical jurisprudence such as: medical malpractice, insurance law, access to care, medical fraud and abuse statutes, and conflict of interest. Opportunities to analyze ethical situations and discuss ethical principles will be provided.

### **7.2.D. LCOM 3015: Nephrology and Urology (NephUro), 3.5 Credits**

Focus will be placed on the interpretation of patient presentations, signs and symptoms, clinical examination findings, and laboratory and radiographic testing results to generate appropriate differential diagnoses and formulation of treatment plans for pathological conditions commonly found in patients. Where appropriate, students should incorporate osteopathic principles and treatment into the overall patient management plan.

Clinical reasoning is employed for the discussion of a spectrum of common renal and urologic disorders.

### **7.2.E. LCOM 3004: Hematology/Oncology (HEM/ONC), 3.25 Credits**

The Hematology/Oncology course is designed to introduce the medical student to the basic concepts, pathophysiology, pathological clinical conditions and therapeutics in the clinical disciplines of Hematology and Oncology. Additionally, immunodeficiency, including HIV, will be covered in the course content. Students apply their expanding understanding of normal and abnormal structure and function of hemolymphoid tissues and cellular elements to the prevention, diagnosis, and treatment of pathologic conditions involving the hematologic system. Principles and mechanisms related to cell proliferation and differentiation that were examined in previous courses are recalled, expanded, and applied as students consider neoplasia in general – from tumor formation to clinical presentation, diagnosis, and treatment. Some of the common benign and malignant neoplastic diseases in adults and children are examined, with an emphasis on epidemiology, clinical presentation, diagnostic approaches, prognosis, and treatment. Students should be able to comprehend, synthesize potential solutions, and interactively apply knowledge of the pathophysiological processes that result in altered structure and function.

### **7.2.F. LCOM 3019: Orthopedics/Rheumatology/Dermatology (ORD), 4 Credits**

This course is designed to encourage students to recall and acquire knowledge of normal and abnormal structure and function of the integument, the musculoskeletal system, and the somatic body; applying this knowledge to the prevention, diagnosis, and treatment of pathologic conditions commonly diagnosed in clinical settings and relevant to the medical specialties of orthopedics, rheumatology, and dermatology. The student should be able to comprehend, synthesize potential solutions, and interactively apply knowledge of the pathophysiological processes that result in altered structure and function. Additionally, students are expected to recognize abnormalities, interpret diagnostic findings, and discuss the appropriate application of osteopathic principles into the overall medical treatment plan.

### **7.2.G. LCOM 3020: Cardiology/Pulmonology (CardPulm), 7 Credits**

Students will continue to expand and apply their understanding of normal and abnormal structure and function of the cardiovascular and respiratory systems to the biomedical rationale for the prevention, diagnosis, and treatment of pathologic conditions affecting these systems. Students will demonstrate their ability to comprehend, synthesize potential solutions, and interactively apply knowledge of the pathophysiological processes that result in altered structure and function of the cardiovascular and respiratory systems.

Clinical evaluation, treatment, and management of congenital and acquired structural and pathophysiological abnormalities are emphasized through active learning methods using illustrative clinical presentations. Students will discuss the appropriate application of osteopathic principles and treatments into the overall medical treatment plan.

### **7.2.H. LCOM 4024: Osteopathic Manipulative Medicine 202 (OMM 202), 1.75 Credits<sup>51</sup>**

OMM 202 is designed to be a capstone experience tying together concepts from biomedical and clinical science material to help enhance students' knowledge of functional anatomy as it applies to osteopathic theory and treatment. The student will continue training in the tactile and haptic skills necessary for the diagnostic palpation of and manipulative treatments for their future patients, regardless of the medical specialty chosen. Consequently, this course will instruct the student in the philosophic and diagnostic underpinnings upon which they will continue to build their osteopathic knowledge, and structurally

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based examination, palpatory and clinical methods and modalities which will continually develop for the rest of their clinical careers. This course consists of a mandatory, skills-based laboratory component which will instruct the student incrementally on competencies central to osteopathic screening, structural evaluation, diagnosis, and osteopathic manipulative treatment (OMT).

Consistent with the professional and the core educational standards developed by the Educational Council of Osteopathic Principles (ECOP), OMM 202 will emphasize the best available supportive data related to the biomechanical, functional, and physiologic mechanisms in order to provide a foundation for future education and development within the art and science of osteopathy. The course, as part of a two year OMM curriculum, is taught primarily through the utilization of clinically-based directed self-learning and reinforcement in a hands-on lab. Instructional methods which may be utilized include case-based learning events, assigned reading and computer-based modules, active hands-on laboratory sessions, standardized patients, the utilization of simulation events and the application of knowledge and skills provided to patients during faculty supervised clinics and medical outreach events.

### **7.2.I. LCOM 2024: Patient-Centered Medicine 202 (PCM 202), 1.5 Credits**

Patient-Centered Medicine 202 is designed to reinforce clinical skills including the art of medical history taking and physical examination. The course provides an insight into the clinical practice of medicine. The course places an emphasis on knowledge, evaluation and problem solving that promote the development of a differential diagnosis and subsequent treatment plan. The course requires active learning and participation and the demonstration of the clinical and communication skills necessary to practice medicine. Instructional methods which may be utilized include lecture demonstration, clinical laboratory experience, small group sessions, standardized patients and simulation encounters.

The course requires active participation and demonstrations of mastery of the core competencies expected of an osteopathic physician. The course is the fourth of a series of clinical skills courses that are correlated with the biomedical courses taught in the curriculum.

### **7.2.J. LCOM 2114: Humanities and Medical Jurisprudence II (HMJII), 0.5 Credits**

This course addresses issues of humanistic care and medical law related to special populations, reproduction, end-of-life concerns, peer review, professional relationships, and medical errors. Opportunities to analyze ethical situations and discuss ethical principles will be provided.

### **7.2.K. LCOM 3014: Gastroenterology (GI), 4.25 Credits**

As a component of this course, students continue their study of the effects of nutrition on normal growth and development, the role of metabolic products in disease, the role and management of oral, enteral and parenteral feeding techniques in light of general nutrition requirements and the pathophysiology and nutritional disorders. Students apply their expanding understanding of normal and abnormal structure and function of the gastrointestinal system to the molecular basis and biomedical rationale for the prevention, diagnosis, and treatment of pathologic conditions affecting the alimentary canal (foregut and hindgut), as well as the liver, gallbladder, and pancreas. Students should be able to comprehend, synthesize potential solutions, and interactively apply knowledge of the pathophysiological processes (anomalies, disorders, neoplastic and non-neoplastic diseases) that result in altered structure and function.

### **7.2.L. LCOM 3012: Neurology/Psychiatry/Ophthalmology (NPO), 6.25 Credits**

This course builds upon student knowledge of functional neuroanatomy and neuroscience while applying this understanding to the interpretation of clinical examination findings, patient complaints, signs and symptoms, for the generation of appropriate differential diagnoses, and formulation of treatment plans for pathological conditions commonly found in patients. This approach to clinical reasoning is employed while considering a spectrum of neurologic and psychiatric pathological processes.

Furthermore, given the strong interplay between the nervous system, organic neuropsychiatric conditions and human behavior, this course is designed with the goal of enabling the student to obtain the requisite knowledge and skills necessary to understand the structural changes and physiologic attributes that result in functional neurocognitive capabilities and normally accepted behaviors and actions. Conversely, pathologic conditions, both organic and acquired, that result in abnormal behavior will be discussed.

The psychiatry section provides an introduction to the clinical features, scientific understanding, and diagnoses of the major mental health disorders that characterize medical practice. Core areas of clinical psychiatry include human development, psychopathology and the psychopharmacological and nonpharmacological treatments of mental disorders.

This course also includes the medical specialties of ophthalmology and neuro-ophthalmology, with considerations of the clinical presentation, diagnostic evaluation and treatment of general pathologic processes affecting vision and the structure and function of the eye.

### **7.2.M. LCOM 3018: Endocrinology (Endo), 2.5 Credits**

The Endocrinology course focuses primarily on the involvement of the hypothalamus, pituitary, thyroid, parathyroid, pancreas, and adrenal gland components of the endocrine system in human disease processes. The pathophysiology of the diffuse endocrine system that is distributed widely throughout the mucosal portions of the respiratory and gastrointestinal systems is also examined in this course. Students apply their expanding understanding of normal and abnormal structure and function of these components of the endocrine system to the biomedical rationale for the prevention, diagnosis, and treatment of related pathologic conditions. Students should be able to comprehend, synthesize potential solutions for, and interactively apply knowledge of the pathophysiological processes that result in altered structure and function.

### **7.2.N. LCOM 3016: Women's Health (WH), 3 Credits**

Students apply their expanding understanding of normal and abnormal structure and function of the female reproductive system, including the associated endocrine organs, and female genital tract to the biomedical rationale for the prevention, diagnosis, and treatment of pathologic conditions affecting these organs and systems. Students should be able to comprehend, synthesize potential solutions, and interactively apply knowledge of the pathophysiological processes that result in altered structure and function.

The student will be introduced to diverse conditions and syndromes which contribute to the lack of wellness in women of all ages. The student will gain an appreciation for the pathological conditions that are important in women's health and the prevention, diagnostic evaluation, and treatment of conditions



important to a woman's well-being. Reinforced in this course is the role in which pathologic conditions from other systems present and impact the overall wellness and physiology of the female patient.

### **7.2.O. LCOM 3017: Pediatrics (PEDS), 2.75 Credits**

The Pediatrics course is designed to provide the student with the basic skills and knowledge required for the professional approach to the care of pediatric patients and their families. The course provides an overview of general pediatrics from newborn through adolescence, building on the foundational principles and understanding of the physiologic and pathophysiologic mechanisms that produce health and disease. The course will include such topics as neonatology, normal and abnormal growth and development, health supervision and preventive care, genetic and inheritable disorders, common acute and chronic pediatric clinical conditions and presentations, including pediatric emergencies and poisoning. The course will develop the student's ability to obtain detailed and relevant information from patients and their parents/caregivers, conduct a comprehensive examination, and formulate appropriate management approaches and treatments.

### **7.2.P. LCOM 2050: Capstone OMS II, 3.25 Credits**

The Capstone course requires students to demonstrate that they have acquired and are able to apply acquired medical, psychological and psychosocial knowledge and skills in a manner that indicates they are adequately prepared to enter into the clinical and patient-focused phase of their medical education. The course also provides specific clinical skills and knowledge that are essential to success.

The course includes ACLS Clinical Skills Testing and Certification. This high stakes evaluation reviews the knowledge and skills that students were expected to acquire over the preceding two years of study. Students will be expected to demonstrate medical knowledge and clinical skill during simulation and case-based clinical scenarios utilizing low and high fidelity simulators as well as computer-based cases. Students are expected to utilize proper communication and teamwork, demonstrate appropriate clinical examination skills, and incorporate osteopathic principles and philosophy in the evaluation of various scenarios.

This course also includes a structured COMLEX-L1 review of high-yield topics as selected by the faculty and administration.

## **7.3. OMS III**

The OMS-III core curriculum has been developed by the faculty and designed to ensure that all students obtain the competencies required to move toward Graduate Medical Education and to allow success on national competency examinations such as COMLEX. The curriculum is designed to cover the major components of the principle medical disciplines but is not inclusive of all aspects of each general discipline.

The required curriculum, in addition to the clinical experience provided at the rotation site, consists of assigned readings requirements from a designated text and faculty selected journals, the completion of on-line case-based clinical modules for the discipline, and the completion of assigned study in OMM topics correlated with the rotation. End-of-rotation examinations will occur on the last Friday of each block at a time and place assigned for each core rotation site. Students may be required to return to the campus for end-of-rotation examinations.

The goal of clinical education at LUCOM is to provide experience in the major core disciplines of medicine and graduate well-rounded generalist physicians that are prepared to enter any discipline for resident training. Students are expected to learn the pathophysiology and structure associated with patient conditions, the indications, contraindications, complications and follow-up of therapy for patients with a wide variety of medical issues.

### **7.3.A. LCOM 5001 Community Based Family Medicine, 10 Credits (FM I)**

This four-week, primarily outpatient office experience, is designed to provide exposure to and instruction in this Family Medicine. Students work alongside their Family Medicine preceptors during the preceptor's daily office visits. Additional patient care activities may include hospital, nursing home, and home visits, experience in volunteer clinics, attendance at obstetric deliveries, among others. Some sites may also offer on-call experience. Additional learning is provided through course assignments and didactic instruction. The overarching goal is to begin preparing students for their future role as Family Physicians and to enhance the understanding and learning of those who choose other fields.

### **7.3.B. LCOM 5003 Family Medicine II, 10 Credits (FM II)**

Family Medicine II is a third year, four-week core rotation. It is intended for the student to experience the roles and responsibilities of the Family Physician. It is to be served, preferably in an office based medical home setting. The clerkship focuses on actively engaging in the comprehensive care of patients across the lifecycle alongside family physicians. Students will expand their family medicine knowledge, ability, and responsibility as it relates to participating in whole-person care. A goal of this clerkship is for osteopathic medical students to evaluate patients of all ages, screen for areas of potential need – both physically and socially – and experience the broad range of responsibilities associated with family physicians in practice. Active learning assignments will be employed on a variety of essential topics to accompany in-person learning.

In addition, exposure to the needs of underserved patients is an emphasis of this course. Providing learning opportunities to better engage with and understand under-resourced individuals is consistent with the mission and vision of LUCOM and necessary to improve a student's contribution to whole-person wellness.

### **7.3.C. LCOM 5100: Internal Medicine I 10 Credits (IM I)**

Internal Medicine I is a core, four-week, hospital based, third year rotation. The third-year osteopathic medical student is progressed from the second year of pre-clinical study to practical applications in the hospital setting. The pathophysiology of adult diseases, which may include cardiovascular, cerebrovascular, pulmonary, renal, gastrointestinal, neurologic, and endocrine disorders are among the patient population seen. As a member of the internal medicine team, under the supervision of a general internist, the osteopathic medical student participates in the admission, in-hospital care and discharge of the patients served.

### **7.3.D LCOM 5101: Internal Medicine II, 10 Credits (IM II)**

Internal Medicine II is a core, four-week, third year rotation for internal medicine. The time may be spent in the hospital or outpatient setting in any internal medicine subspecialty. During this rotation, students will review published research to begin to apply evidence-based medicine practices and concepts to the practice of internal medicine.

### **7.3.E. LCOM 5200: Surgery, 10 Credits (SURG)**

General Surgery is a mandatory, four-week in length, third year core rotation. The third year osteopathic medical student is introduced to the evaluation and management of the surgical patient, in both the hospital and out-patient setting. The experience provides a framework for care of the surgical patient.

### **7.3.F. LCOM 5300: Women's Health, 10 Credits (WH)**

The Women's Health Obstetrics and Gynecology Third-Year Clinical Rotation is a four-week rotation introducing students to the care of women at all ages in multiple settings including the office, emergency rooms, labor and delivery, operating suites, and the hospital. The clerkship focuses on common obstetrical and gynecological conditions necessary for comprehensive women's health care. Students will acquire knowledge and learn skills that are needed as a physician in any specialty as the rotation stresses the importance of interpersonal relationships, interviewing skills, physical examinations, patient communication, surgical procedures, and the doctor-patient relationship.

### **7.3.G. LCOM 5400: Pediatrics, 10 Credits (PEDS)**

The four-week rotation provides third-year medical students with knowledge and experience in pediatric care. Students will develop knowledge and skills related to growth and development of infants, children, and adolescents. Students will apply their knowledge to common illnesses and disorders of children and adolescents. Students will observe cost effective medicine practices and provide evidence-based medical care based on review of medical literature.

### **7.3.H. LCOM 5600: Psychiatry/Behavioral Health, 10 Credits (PSYCH)**

Psychiatry is a core, four week, third-year rotation. The third-year osteopathic medical student is introduced to the evaluation and management of adult psychiatric patients. The experience may serve both the in-patient and out-patient population. This rotation is designed for students to learn and practice interviewing, diagnostic, and interpersonal skills necessary for working with patients who present with mental health concerns encountered in most medical practices. Under supervision, students will learn to perform psychiatric evaluation, mental status examination, identify psychiatric symptoms and differential diagnoses. The student will also learn how psychiatric illness may be present in patients with co-morbid medical disorders, how to manage psychiatric emergencies, and how to make informed medical and treatment decisions using psychopharmacology skills including the indications for use and mechanisms of action of psychotropic medications and evidenced-based treatments.

### **7.3.I. LCOM 5700: Underserved Care, 10 Credits<sup>52</sup>**

This four-week rotation serves to introduce the student to the healthcare needs that are unique to the underserved population in rural, urban, and suburban settings. Students will learn to identify and address the social determinants of health for their patients to achieve optimal health outcomes. Often, achieving health equity requires reaching beyond the clinic and into communities. Students will work with patients under supervision in an ambulatory clinic setting and also spend time outside of the clinic engaging in unique, non-clinical learning experiences. (Discontinued Fall 2022)

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<sup>52</sup> 6.13 Diversity, Equity, and Inclusion Curriculum  
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### **7.3.J. LCOM 5900 Osteopathic Manipulative Medicine Third Year Core Rotation, 5 Credits (OMM)<sup>53</sup>**

OMM is a core, third year rotation to be served in either a primary care/OMT or specialty/Osteopathic Neuromusculoskeletal Medicine (ONMM) office and/or hospital setting. This two-week program incorporates Osteopathic principles to the clinical care of patients. The student additionally will critically review and appraise medical research literature as well as demonstrate treatment to their peers.

### **7.3.K. LCOM 6050: Capstone OMS III, 0.5 Credits**

This course has been designed to prepare the 3<sup>rd</sup> year medical students for 4<sup>th</sup> year clinical rotations and the residency match process. Students will engage in learning activities with feedback to help them take the next steps in their medical education.

### **7.3.L. LCOM 6200: Concepts in Acute Care Medicine Third Year Core Rotation, 5 Credits (ACM)<sup>54</sup>**

This two-week course is a self-directed learning course in Acute Care Medicine topics. The focus of this curriculum is exposure of the student to core Emergency Medicine concepts, review of ECG interpretation, and observation in acute care settings. Aims include experience with learning the approach to the undifferentiated patient, triage, and honing their clinical and observational skills in acute care settings.

## **7.4. OMS IV**

The curriculum is designed to ensure that all students obtain the core competencies required to move into graduate medical education. Due to the diversity of rotations allowed, it may not be inclusive of all aspects of any discipline. OMS-IV rotations are designed to further refine clinical medicine and patient care knowledge and skills in preparation for graduate medical education. Students will be expected to assume additional responsibility and expand their volume of patient care activities during this portion of their education. The rotations are primarily hospital based, at COM affiliated or GME program locations and with COM approved or credentialed faculty.

### **7.4.A. LCOM 5999 (10 Credits), LCOM 5997 (5 Credits): Graduate Medical Education Selective**

The GME Selective rotation is designed to immerse the student in the US residency system. This allows the student to learn to work within the framework of an accredited residency program. This rotation includes options within Emergency Medicine, Family Medicine, Internal Medicine, Pediatrics and General Surgery. The LUCOM Office of Clinical Education must approve all selective rotations in advance in order for students to receive credit. The LUCOM Office of Clinical Education is available to assist the student in identification and scheduling.

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<sup>53</sup> 6.6 Principles of Osteopathic Medicine

<sup>54</sup> 6.7 Self-Directed Learning

### 7.4.B. LCOM 5998: Osteopathic Approach to Pain Management, 5 Credits<sup>55</sup>

This course is designed to provide each graduating senior the opportunity to be exposed to OMM prior to entering residency. It also is designed to incorporate Core Competencies in Pain Management and Addiction (adopted October, 2017) with an osteopathic approach utilizing the integration of OMT, behavioral considerations and modalities, the spiritual impact of pain, and procedural interventions. Part of this course will also serve as a conduit for transition from student to Graduate Medical Education (GME).

### 7.4.C. OMS-IV Electives

Students are responsible to set up their own electives, however, the LUCOM Office of Clinical Education is available to assist the student in identification and scheduling. All elective rotations must be approved in advance, in order for students to receive credit. The student may not do more than two electives with the same preceptor and may not do more than two electives in the same discipline at the same hospital or institution.

Electives allow students to strengthen their knowledge and skills in specific disciplines and areas of either individual weakness or interest. Electives provide students the opportunity to rotate at sites outside of core locations affiliated with the COM and acquire knowledge of differing approaches to the practice of medicine within varying disciplines. These clinical experiences allow students to demonstrate to Program Directors, clinical faculty, and DSME's their interest and abilities while seeking selection for GME training. The OMS-IV curriculum offers two- and four-week clinical elective courses and one-, two-, and four-week non-clinical elective courses. Elective Course Offering:

- <sup>56</sup>LCOM 6900: Research/Academic Studies 10 Credits, 4-week research/academic studies elective
- LCOM 6925: Non-Clinical Elective Rotation 2.5 Credits, 1 week Non-Clinical elective rotation
- LCOM 6950: Research/Academic Studies 5 Credits, 2-week research/academic studies elective rotation
- LCOM 7000: Family Medicine 10 Credits, 4-week Family Medicine or sub-specialty elective rotation
- LCOM 7050: Family Medicine 5 Credits, 2-week Family Medicine or sub-specialty elective rotation
- LCOM 7100: Internal Medicine 10 Credits, 4-week Internal Medicine or sub-specialty elective rotation
- LCOM 7150: Internal Medicine 5 Credits, 2-week Internal Medicine or sub-specialty elective rotation
- LCOM 7200: Surgery 10 Credits, 4-week Surgery or sub-specialty elective rotation
- LCOM 7250: Surgery 5 Credits, 2-week Surgery or sub-specialty elective rotation
- LCOM 7300: Women's Health 10 Credits, 4-week Women's Health or sub-specialty elective rotation
- LCOM 7350: Women's Health 5 Credits, 2-week Women's Health or sub-specialty elective rotation
- LCOM 7400: Pediatrics 10 Credits, 4-week Pediatrics or sub-specialty elective rotation

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<sup>55</sup> 6.6 Principles of Osteopathic Medicine

<sup>56</sup> 8.4 Student Participation in Research and Scholarly Activity  
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- LCOM 7450: Pediatrics 5 Credits, 2-week Pediatrics or sub-specialty elective rotation
- LCOM 7500: Specialty Medicine 10 Credits, 4-week Specialty Medicine or sub-specialty elective rotation
- LCOM 7550: Specialty Medicine 5 Credits, 2-week Specialty Medicine or sub-specialty elective rotation
- LCOM 7600: Psychiatry & Behavioral Health 10 Credits, 4-week Psychiatry or sub-specialty elective rotation
- LCOM 7650: Psychiatry & Behavioral Health 5 Credits, 2-week Psychiatry or sub-specialty elective rotation
- LCOM 7700: Underserved Care & Medical Outreach 10 Credits, 4-week Underserved Care & Medical Outreach or sub-specialty elective rotation
- LCOM 7750: Underserved Care & Medical Outreach 5 Credits, 2-week Underserved Care & Medical Outreach or sub-specialty elective rotation
- LCOM 7800: Emergency Medicine 10 Credits, 4-week Emergency Medicine or sub-specialty elective rotation
- LCOM 7850: Emergency Medicine 5 Credits, 2-week Emergency Medicine or sub-specialty elective rotation
- LCOM 7900 OMM/NMM Elective Rotation 10 Credits, 4-week ONMM/NMM or sub-specialty elective rotation
- LCOM 7950 OMM/NMM Elective Rotation 5 Credits, 2-week ONMM/NMM or sub-specialty elective rotation
- Undergraduate fellowships

Students have control over the selection of their elective rotations within certain educational requirements established by LUCOM administration.

All elective faculty must be appointed by the COM and meet the administrative criteria established by the COM. The student may not do more than two electives with the same preceptor and may not do more than two electives in the same discipline at the same hospital or institution unless approved by the Clinical Dean.

The student may perform an international medicine rotation for up to twenty credits provided the experience meets the academic standards established by LUCOM. International medical rotations have inherent risk for which the student assumes all responsibility. Any international rotation requires that a student have a travel medicine appointment prior to departure. All international rotations require that the preceptor is an American-trained physician who is board certified through ACGME or AOA. Due to additional time required to certify and credential these rotation sites, these must be applied for through LUCOM at least 150 days in advance of the desired date of rotation. Other requirements may need to be met to be approved for an international medicine rotation.

Students may perform non-clinical electives. Examples include but are not limited to: research, health policy, education, OPP, etc. during the OMS-IV year. Students must apply for this rotation and questions about research involvement should be directed to the appropriate Clinical Dean or Institutional Director for Research. Students may engage in research activity at LUCOM or LU, or the research experience may take place at an unaffiliated institution (e.g., NIH). Students will be required to complete an academic component for this rotation, which may consist of a culminating oral or poster presentation, written paper, or substantive contribution to a manuscript submitted to a peer-reviewed journal. An appropriate

evaluation of student performance must be completed according to the administrative criteria established by the COM. Recorded grades will be Pass/Fail.

## **7.5. Undergraduate Fellowships**

Unique opportunity that is made available to exceptional students through an application process. It expands the medical training period from four to five years. Participating students may receive tuition assistance and an additional stipend. Fellows are selected annually. All Undergraduate Fellowship Programs have a competitive selection process.

Prerequisite: Acceptance into the Undergraduate Fellowship Program.

### **7.5.A. LCOM 6801: Undergraduate Fellowship OMM/OPP I, 5 Credits**

This course will allow students to develop their skills teaching and improve their skills in the medical education course Osteopathic Manipulative Medicine/Osteopathic Principles and Practices. Each student will have an opportunity to give a guided lecture, provide laboratory teaching and tutor in the first-year medical curriculum.

### **7.5.B. LCOM 6802: Undergraduate Fellowship OMM/OPP II, 5 Credits**

This course will allow students to develop their skills teaching and improve their skills in the medical education course Osteopathic Manipulative Medicine/Osteopathic Principles and Practices. Each student will have an opportunity to give a guided lecture, provide laboratory teaching and tutor in the first-year medical curriculum.

### **7.5.C. LCOM 6811: Undergraduate Fellowship Teaching I, 5 Credits**

This course will allow students to develop their skills teaching and improve their skills in medical education courses. Each student will have an opportunity to give a guided lecture, provide laboratory teaching and tutor in the first-year medical curriculum.

### **7.5.D. LCOM 6812: Undergraduate Fellowship Teaching II, 5 Credits**

The Part II course will allow students to enhance their skills teaching and improve their skills in medical education courses including Anatomy and Patient-Centered Medicine. Each student will have an opportunity to give a guided lecture, provide laboratory teaching and tutor in the first-year medical curriculum.

### **7.5.E. LCOM 6821: Undergraduate Fellowship Research I, 5 Credits<sup>57</sup>**

This course will allow students to develop their skills in research methodology. Each student will have an opportunity to participate in a research project under the supervision of a faculty member.

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<sup>57</sup> 8.4 Student Participation in Research and Scholarly Activity  
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### **7.5.F. LCOM 6822: Undergraduate Fellowship Research II, 5 Credits<sup>58</sup>**

This course will allow students to enhance their skills in research methodology. Each student will have an opportunity to participate in a research project under the supervision of a faculty member.

## **7.6. Additional Course Offerings**

### **7.6.A. LCOM 6500: Preclinical Medical Outreach Elective**

Students may perform an elective providing medical care and other professional service as a component of medical outreach or international medicine rotation/experience each time offered if in good standing, upon completion of the required applications, submission of required documents and payment of any required fees. The Faculty will provide oversight of the rotation experience and any medical services provided for all students who engage in care and service activities at a clinical site in or outside of the U.S.A. Students will be required to complete an academic component for this rotation, which may consist of a culminating oral or poster presentation, written paper, case presentation or verification of substantive contribution to such materials submitted to a peer-reviewed or other professional journal acceptable to course director. The Faculty Sponsor will be required to ensure that an appropriate evaluation of student performance is completed according to the administrative criteria established by the COM. Recorded grades will be Pass/Fail.

### **7.6.B. LCOM 6501: Preclinical Elective: Advanced Studies in Anatomy**

Students may engage in an unrequired four-week Anatomical Sciences elective, in which they perform advanced anatomic study under the supervision of the LUCOM Anatomical Sciences Department faculty between OMS-I and OMS-II years. Students must apply for this elective rotation and will be selected based upon criteria established by the Anatomical Sciences Department and the approval of the Dean. Anatomical Sciences Department faculty will evaluate student performance and assign a Pass/Fail grade accordingly.

### **7.6.C. LCOM 6502: Preclinical Research Elective<sup>59</sup>**

Students may participate in an elective Preclinical Research Rotation. Typically, this is completed between the OMS-I and OMS-II years. Students must apply for this rotation in order to receive credit for their work in this course. Students who take this course will conduct research under an approved mentor at LUCOM, LU, or at an unaffiliated institution such as the National Institutes of Health (NIH). The research activity may be conducted in a four (4) week block or may be spread out over a longer period of time. Research mentors will be required to submit an appropriate evaluation of a student and his or her work. Grades will be Pass/Fail.

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<sup>58</sup> 8.4 Student Participation in Research and Scholarly Activity

<sup>59</sup> 8.4 Student Participation in Research and Scholarly Activity



## Chapter 8. Reservation of Power

This catalog is not intended to be a contract or part of a contractual agreement between LUCOM and the student. The Catalog is available online at [www.Liberty.edu/LUCOM](http://www.Liberty.edu/LUCOM). Changes in the content of the Catalog may be made at any time, by the University or College administration. Notice of anticipated changes will be given to the students in advance of implementation, whenever possible. Each addition of the Catalog supersedes all previous versions, documents, and directives where they may be in conflict. Failure to read the Catalog and to be familiar with the rules, policies, and procedures contained in it does not excuse the student from being required to comply with the provisions of the policy.

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