

Fundamental Osteopathic Medical Competency Domains 2026

Overall summary:

The FOMCD 2026 strengthens osteopathic medicine's emphasis on:

- Nutrition and diet as core components of patient care and disease prevention
- Food as medicine
- Integration of nutrition across education, clinical practice, wellness, advocacy, and health systems science.

New competencies specifically assess 1) understanding nutrition's role in health and disease and 2) applying dietary principles in patient care.

Nutrition References in Document:

President's Foreword

- The FOMCD 2026 also has an increased focus on social determinants of health and health systems science, and an increased focus on **nutrition** and diet in patient care and disease prevention– the latter a major component in Dr. Still's original philosophy and a resurging area of interest across numerous health professions today. – pg. 3

Introduction

- This document builds on the fundamental competency domains outlined in the FOMCD 2016 and prior work to delineate the competency domains dating back to 2006. While osteopathic medical practice is always evolving, changes of the past decade have required greater competence in rapidly developing areas such as digital health care and other technologies, professional well– being, health systems science, and **nutritional** and dietary facets of practice. Throughout its evolution, the osteopathic profession remains committed to the osteopathic tenets and to its origin in compassion, empathy, body– mind– spirit unity, social determinants of health (SDoH), and patient– centered care. – pg. 7

FOMCD 2026 ENHANCEMENTS

- New outcomes were added to assess competence in understanding the roles **nutrition** and diet play in health and their application to patient care, and to align

with the American Association of Colleges of Osteopathic Medicine food as medicine and **nutrition** in medical education principles – pg. 8

The NBOME defines the role of **nutrition** in osteopathic medicine as follows:

- **Nutrition** in osteopathic medicine integrates safe, effective, evidence– based dietary knowledge, food– as– medicine principles, and concepts of disease prevention into comprehensive, person– centered care. It considers socioeconomic, cultural, and psychological influences on eating and uses compassionate, collaborative, interprofessional, community– oriented strategies in shared decision– making to address nutritional needs across the lifespan. – pg. 8

Competency Domain 1:

1.1 Knowledge of Osteopathic Principles, Practice, and OMT

Measured outcomes

The osteopathic physician:

- ...#3 articulates how the five osteopathic models of care (behavioral– biopsychosocial, metabolic– nutritional, neurologic, respiratory– circulatory, and biomechanical/structural) support the osteopathic tenets. – pg. 16
- #7 identifies the effects of the patient’s diet and nutrition on the whole person for both health and disease. – pg. 16

1.2 Skills in Osteopathic Principles, Practice, and OMT

Measured outcomes

The osteopathic physician:

- #2 obtains medical, family, social, diet and nutritional, and cultural histories, including patient belief systems and other relevant information from or about the patient pertinent to the presenting concern, emphasizing structure– function and body– mind– spirit relationships. – pg. 17

Competency Domain 2

2.1 Patient– Centered Data Gathering and History Building

Measured outcomes

The osteopathic physician:

- ... #3 elicits the essential information from the patient, and, when appropriate, from caregivers and other sources, regarding health history contributing to the patient's presentation (e.g., past medical and surgical histories, allergies, physical and psychological trauma, exercise habits and tolerance, occupation, family history, diet and nutrition history, travel, sexual history, developmental milestones, social determinants of health) – pg. 22

2.5 Patient Care Management

Measured outcome

The osteopathic physician ...

- ... #2 applies a person– centered, osteopathic approach to develop an evidence– based care plan that may include diagnostic testing, nonpharmacologic treatment (including OMT), dietary and nutritional management, and medication use/reconciliation – pg. 26
- ... #3 incorporates nutrition, lifestyle and body– mind– spirit unity principles– including attention to diet, nutrition, social determinants of health, and the patient's belief systems– into the patient's wellness and care plan. – pg. 27

Competency Domain 3

Application of Knowledge for Osteopathic Medical Practice

- Foundational osteopathic principles of body, mind, and spirit underlying the human condition– including biological complexity, genetic diversity, homeostasis, **nutrition** and the importance of diet, biomechanical and neuromusculoskeletal structure– function interrelationships, social determinants of health, and the influence of systems and environment– guide osteopathic physicians in understanding health and in diagnosing and treating disease across the lifespan. Osteopathic physicians must understand common religious and spiritual beliefs in order to respond sensitively to the needs of patients and their support networks and assist the patients in meeting their desired outcomes. – pg. 29

Required Elements

3.1 Foundational Biomedical Sciences Knowledge Base

- Definition: Given the various clinical presentations common and important to osteopathic medical practice, the osteopathic physician must be able to demonstrate the application of knowledge of foundational biomedical science

concepts related to patient care and health, homeostasis, **diet and nutrition**, structure– function relationships, disease prevention, and disease recognition and management and do so in an integrated, compassionate, and patient– centered manner for patients presenting with various concerns or opportunities to maintain wellness – pg. 30

MEASURED OUTCOMES

The osteopathic physician effectively applies clinically relevant foundational biomedical science knowledge related to the following:

- #3 Diet and the nutritional bases of health and disease – pg. 30

3.2 Clinical Sciences Knowledge Base

- Definition: Given the various clinical presentations common and important to osteopathic medical practice, the osteopathic physician must be able to demonstrate the application of knowledge of established and evolving clinical science concepts related to patient care and health, homeostasis, **diet and nutrition**, structure– function relationships, disease prevention, and disease recognition and management and do so in an integrated, compassionate, and patient– centered manner for patients presenting with various concerns or opportunities to maintain wellness. – pg. 30

MEASURED OUTCOMES

The osteopathic physician effectively applies clinical science knowledge pertaining to the primary care– oriented focus of osteopathic medical practice, including generalist concepts from the following specialties and their relevant subspecialties: ...

- #3 Diet and nutritional care – pg. 30

Competency Domain 4

4.2 Clinical Decision– Making Tools

MEASURED OUTCOMES

The osteopathic physician

- #4 integrates evidence– based nutrition guidelines, incorporating patient history and/or self– monitoring data into patient and population care – pg. 34

4.5 Translating Evidence into Practice Based Improvement

MEASURED OUTCOMES

The osteopathic physician

- #8 incorporates ongoing learning– by acquiring, evaluating, and applying new knowledge in areas such as disease prevention, diagnosis, management, nutrition, patient education, and palliative care– into patient– centered care. – pg. 35

Competency Domain 5

5.1 Eliciting Information

MEASURED OUTCOMES

- The osteopathic physician ... gathers information on the patient's dietary habits and food choices in a sensitive manner, incorporating social and personal context. – pg. 38

5.3 Information Giving and Patient Education

MEASURED OUTCOMES

The osteopathic physician

- #10 recommends dietary and nutrition– based strategies that support health promotion, disease prevention, and patient management, taking into account the patient's dietary habits and goals and the roles of macronutrients and micronutrients, incorporates ongoing learning– by acquiring, evaluating, and applying new knowledge in areas such as disease prevention, diagnosis, management, nutrition, patient education, and palliative care– into patient– centered care. – pg. 40

MEASURED OUTCOMES

The osteopathic physician ...

- #1 documents subjective elements of the patient's history and review of systems– including information provided by the patient or secondary sources– covering medical, surgical, family, medication, diet and nutrition, allergy, social, cultural, and sexual histories. – pg. 40

MEASURED OUTCOMES

The osteopathic physician:

- ... #4 provides compassionate, unbiased care using evidence– based strategies that minimize harm and enhance quality of life (e.g., pain management, palliative and hospice care, trauma– informed care, dietary and nutritional care). – pg. 45

Competency Domain 6

6.4 Spirituality and Belief Systems in Health Care

- Definition: The osteopathic physician must demonstrate an understanding of the role of spirituality and religion in patient care and integrate this awareness into clinical decision– making and communication, being open to learning from patients and their support systems about how their belief systems might impact health care decision– making and patient outcome goals. Religious belief systems can significantly influence health care through beliefs about illness, healing, diet and nutrition, organ donation and transplants, reproductive health, and end– of– life issues. The osteopathic physician must support the spiritual well– being of patients as part of comprehensive, person– centered care, consistent with the tenets of osteopathic medicine, and with an awareness that understanding the patient's source of meaning and purpose can promote trust and alleviate suffering – pg. 46

6.7 Physician Well– Being

The osteopathic physician ...

- #2 recognizes factors that influence one's own health and nutritional well– being. – pg. 49

Competency Domain 7

7.2 Social Determinants of Health

MEASURED OUTCOMES

The osteopathic physician ...

- #4 identifies community– based resources for patients (e.g., nutrition resources for patients experiencing food insecurity, transportation services for health care, social work resources, spiritual resources). – pg. 54

7.8 Policy and Advocacy

UNMEASURED OUTCOMES

The osteopathic physician ...

- #2 advocates for access to nutritious food options for patients in their communities. – pg. 58