To the Editor

I am writing in response to an article in the February 2010 issue of Academic Emergency Medicine, "COMLEX-1 and USMLE-1 Are Not Interchangeable Examinations."

With the growth of the osteopathic medical profession, there is a significant increase in the number of Doctors of Osteopathic Medicine (DOs) applying to Accreditation Council of Graduate Medical Education (ACGME)-accredited residency programs. Program directors are therefore more frequently confronted with Comprehensive Osteopathic Medical Licensing Examination (COMLEX)-USA scores, because osteopathic medical students are required to take the series of examinations. While there is evidence to support the validity of using COMLEX-USA for these purposes, overdependence on licensure examination scores for other purposes should be avoided, and most studies show that program directors use an array of selection criteria for determining which applicants will best meet the needs of their program and the patients they serve.

COMLEX-USA is the recognized pathway to licensure for osteopathic physicians in all 50 states and a number of foreign jurisdictions. The Federation of State Medical Boards has undertaken a comprehensive review of COMLEX-USA and the United States Medical Licensing Examination (USMLE: http://www.fsbmb.org/gpPOL_policydocs.html) and concluded that both are valid and reliable for their respective intended purposes, based on evidence that was found to be "exemplary."

As a profession, osteopathic medicine honors its shared social contract with the public and its critical role in self-regulation by assuring osteopathic physicians are licensed based on the COMLEX-USA, an examination series that is designed for the practice of osteopathic medicine and validated for that distinct purpose. Osteopathic medical students and residents train for the practice of osteopathic medicine, regardless of where they elect to complete the graduate medical education portion of their training. The curriculum of every osteopathic medical school incorporates distinctive osteopathic principles and prepares DOs for medical practice as osteopathic physicians. Likewise, COMLEX-USA incorporates these distinctive osteopathic principles and is constructed and validated based on practice patterns that are distinctive to DOs. It is the only examination series tailored to osteopathic education and practice and is therefore the most appropriate assessment tool to measure the competency of an osteopathic medical student or physician.

Requiring USMLE scores of osteopathic medical school graduates in addition to COMLEX-USA—as some programs do—with the associated time, expense, and energy required is unfounded and represents an unnecessary and unfair burden for osteopathic physicians. It is also a potential barrier for residency programs in attracting a larger pool of qualified applicants.

Whether or not one knowledge examination predicts another (e.g., COMLEX-USA predicting USMLE) might be of some interest, but it would seem to pale in comparison to the importance of whether an examination such as COMLEX-USA or USMLE predicts performance of examinees in residency and in practice thereafter and also to predicting important physician competencies in addition to medical knowledge. Further information and percentile conversion tools for COMLEX-USA are available on our website (http://www.nbome.org), and our staff is available to respond to additional requests.

The National Board of Osteopathic Medical Examiners appreciates your interest in COMLEX-USA. As you may know, osteopathic medical schools represent the fastest-growing element of U.S. medical education. Currently one in five U.S. medical students is attending an osteopathic medical school. No doubt many of them will train in ACGME-accredited emergency medicine residency programs, serve your patients, and become your colleagues.

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John R. Gimpel, DO, MEd
(jjimpel@nbome.org)
President & CEO
The National Board of Osteopathic Medical Examiners
Conshohocken, PA

References

