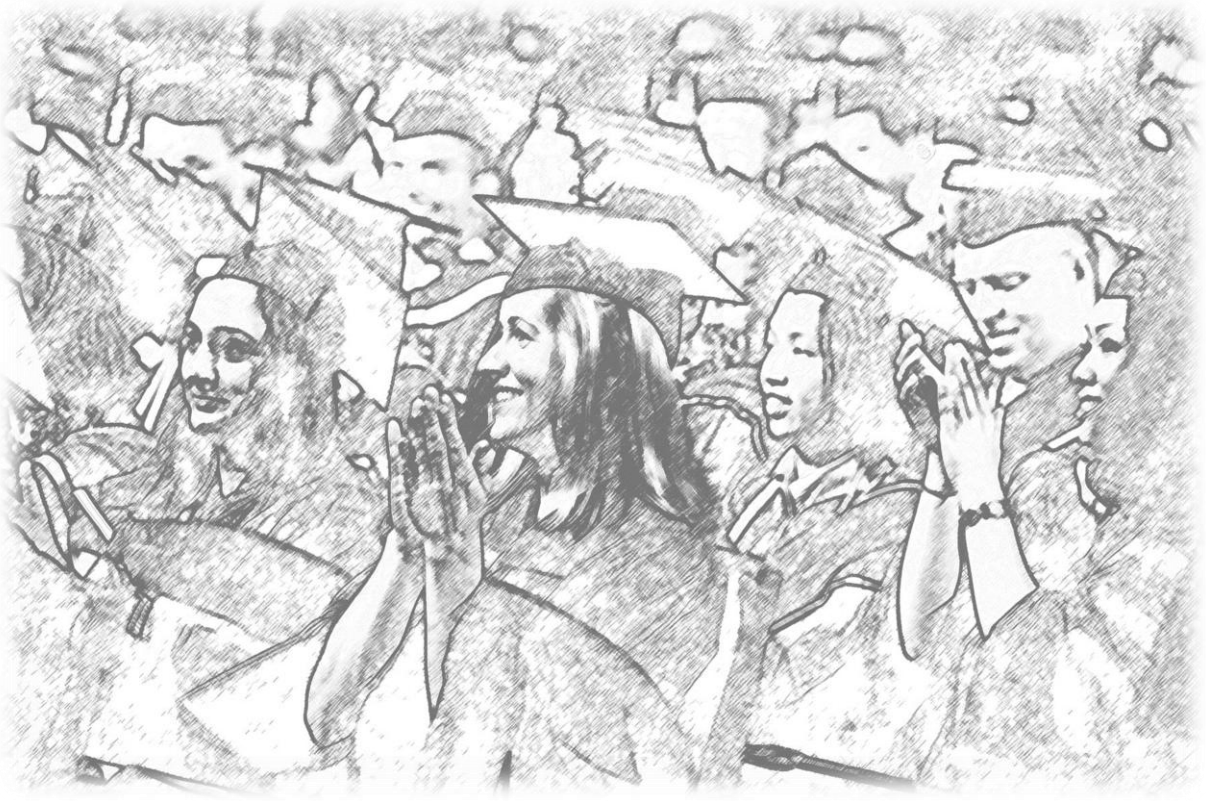
AACOM 2011-12 Academic Year Survey of Graduating Seniors Summary Report



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American Association of Colleges of Osteopathic Medicine

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AACOM 2011-12 Academic Year Graduating Seniors Survey Summary Report, Abstract

Each year, AACOM asks the nation's colleges of osteopathic medicine (COMs) to conduct the AACOM Graduating Seniors Survey. The survey queries graduating seniors and compiles a comprehensive snapshot of osteopathic medical education debt, experiences in and satisfaction with various aspects of their education, graduate medical education plans, and future specialty and practice plans. A total of 3,489 seniors participated in the *2011-2012 Graduating Seniors Survey* . Demographic analyses presented in this report can be considered along with the data presented on AACOM's Data and Trends webpage: http://www.aacom.org/data/Pages/default.aspx

Updated 2011-2012 Summary Report Format

Tables in the *2011-2012 Graduating Seniors Survey Summary Report* , incorporate data from the 2009-2010, 2010-2011 and 2011-2012 surveys. To simplify the report, statistical significance is reported only for the current (2011-2012) data. Statistical significance of past data can be found in the respective summary reports at: http://www.aacom.org/data/classsurveys/Pages/default.aspx

Reported Student Debt, Scholarships and Income in 2011-2012

Between 2010-2011 and 2011-2012, mean reported osteopathic medical education debt decreased by 1 percent, from $207,317 to $205,674. The percentage of seniors reporting any debt also decreased slightly, from 93 to 91 percent. Mean reported medical education debt differed significantly between seniors at private osteopathic medical schools and those at public schools. Seniors at private schools reported a mean debt of $210,679, 13 percent more than the mean debt of $184,565 reported by seniors at public schools (Table 1.1).

From 2010-2011 to 2011-2012, mean reported scholarship/grant award amounts increased by 47 percent, from $48,735 to $71,439, while the percentage of seniors reporting any awards decreased, from 43 to 40 percent. Similar to reported debt, reported scholarship/grant award amounts differed significantly between seniors at private osteopathic medical schools and those at public schools. Seniors at private schools reported a mean award of $75,514, 28 percent more than the mean $56,713 reported by seniors at public schools (Table 8).

However, as Tables 8 and 8a show, this large difference in mean scholarships is attributable to the number of seniors who received Armed Forces Health Professions (AFHP) scholarships. When considering scholarship/grant award amounts excluding the AFHP awards, there is no significant difference in reported award means between seniors at private osteopathic medical schools and those at public schools.

The percentage of students reporting any scholarship/grant awards differed significantly between seniors at private and public schools; 39 percent of private school students reported receiving awards compared with 44 percent of public school students.

From 2010-2011 to 2011-2012, the distribution of scholarship/grant award sources remained similar, with the largest portion (18 percent) of awards coming from the osteopathic medical schools and/or their respective parent universities. A similarly significant portion (10 percent) of awards was attributed to Armed Forces Health Professions (AFHP) scholarships. The largest award means were attributed to AFHP ($219,616) and National Health Service Corps (NHSC) ($136,393) scholarships, both of which stipulate post-educational service requirements (Table 8).

Income expected the first year following completion of residencies increased from $164,964 in 2010-2011 to $165,531 in 2011-2012 amongst graduating seniors (Table 7).

Seniors' Evaluations of Their Medical Education

In 2011-2012, graduating seniors evaluated their osteopathic medical education similarly to 2010-2011 seniors. Resembling their 2010-2011 counterparts, 83 percent of 2011-2012 seniors were very satisfied or satisfied with the quality of their osteopathic medical training Table 11). Eighty-one percent of seniors were very satisfied or satisfied with their osteopathic medical career choice, slightly less than the 83 percent of 2010-2011 seniors reporting these levels of satisfaction (Table 12). When asked what they would do if they were to begin medical school again, 65 percent of 2011-2012 seniors would agein enroll in an osteopathic medical school, and 56 percent would enroll in the same osteopathic medical college (Table 13).

Beginning in 2011-2012, seniors were asked to evaluate if diversity is valued by their osteopathic medical schools. Seventy-four percent of 2011-2012 seniors strongly agreed or agreed that their osteopathic medical schools value diversity (Table 14).

Overall in 2011-2012, seniors were satisfied with the first two years of their osteopathic medical education. However, as in 2010-2011, more than one fifth of seniors disagreed with the statements, "There was adequate exposure to patient care during the first two years" and "There was adequate preparation for the COMLEX Level I" (Table 15).

Less than 60 percent of 2011-2012 seniors felt an appropriate amount of time had been devoted to each of the following topics: biostatistics, cost-effective medical practice, literature analysis skill, medical care-cost control, and research techniques (Table 16).

Similar to 2010-2011 seniors, 2011-2012 seniors generally were more satisfied with their selective/elective clerkships than with their required clerkships. Less than a quarter of the seniors strongly agreed or agreed that each required clerkship had an osteopathic orientation, or that osteopathic practice and principles (OPP) were well-integrated into the required clerkships. Also, less than 60 percent of seniors strongly agreed or agreed that the required clerkships were well-organized; or that they were able to meet and discuss areas of concern with the attending outside of the clinical setting during their required clerkships (Table 17).

More than 90 percent of 2011-2012 seniors strongly agreed or agreed that they were able to work on a personal basis with patients during their required and selective/elective clerkships (Tables 17 and 18).

While 95 percent of seniors were completely or mostly confident in performing general adult examinations, less than 70 percent felt the same level of confidence about performing a well-baby or prostate/testicular examination (Table 19).

More than 80 percent of seniors were very satisfied or satisfied with their school's electronic communication and library services. However, less than 40 percent were very satisfied or satisfied with their school's career counseling (Table 20).

Ninety-two percent of 2011-2012 seniors strongly agreed or agreed that they had been given the opportunity to practice OPP during their first two years in medical school. Conversely, 41 percent or less strongly agreed or agreed that they had the opportunity to practice OPP during in-hospital rotations and ambulatory non-primary care rotations (Table 21).

As in 2010-2011, in 2011-2012, graduates were generally satisfied with their medical training in geriatrics care; in each aspect of geriatrics training, over 80 percent of seniors strongly agreed or agreed that they were suitably prepared (Table 22).

Graduate Medical Education, Professional Practice and Specialty Plans

More than half of the 2011-2012 graduating seniors indicated plans to pursue an osteopathic residency, a dual AOA/ACGME-approved residency, or an osteopathic internship (Table 27), and 62 percent of seniors indicated plans to pursue osteopathic or both AOA and ABMS board certification (Table 29).

Thirty-two percent of seniors indicated plans to practice in an underserved/shortage area; of those, 52 percent indicated rural areas and 39 percent indicated inner-city areas (Tables 31 and 35). Seventy percent of seniors indicated plans to practice in a city with a population greater than 50,000 (Table 32).

Thirty-two percent of graduating seniors indicated plans to pursue a primary care specialty (Table 39). Primary care specialty selection differed significantly among genders, marital status, financial independence/dependence, parental income, and parental education (Table 40). The data are presented by cohort in this report.

Table 1.1: Mean Osteopathic Medical Education Debt, Graduating Seniors*

Source of Debt	Debt‡			% in Debt		
	All Schools	Public	Private	All Schools	Public	Private
Total Osteopathic Medical Education Loans						
2011-2012	$205,674	$184,565 [a]	$210,679 [b]	91%	91%	91%
2010-2011	$207,317	$185,259	$213,677	93%	93%	92%
2009-2010	$199,774	$175,329	$205,927	93%	95%	93%
Unsubsidized Stafford or FFELP						
2011-2012	$124,031	$117,477 [a]	$125,589 [b]	86%	86%	85%
2010-2011	$120,943	$117,944	$121,799	75%	76%	75%
2009-2010	$122,053	$111,876	$124,601	79%	80%	79%
Subsidized Stafford or FFELP						
2011-2012	$37,127	$37,997	$36,915	87%	89%	86%
2010-2011	$36,263	$37,431	$35,923	76%	78%	76%
2009-2010	$38,125	$37,855	$38,196	79%	83%	78%
Graduate PLUS						
2011-2012	$64,087	$52,935 [a]	$66,028 [b]	65%	53% [α]	68% [β]
2010-2011	$51,482	$41,005	$53,375	50%	34%	54%
2009-2010	$51,865	$47,381	$52,585	51%	35%	54%
Perkins						
2011-2012	$7,788	$7,558	$7,931	21%	39% [α]	16% [β]
2010-2011	$8,074	$6,967	$8,608	18%	26%	15%
2009-2010	$6,334	$5,560	$6,762	16%	29%	13%
Loans for Disadvantaged Students (LDS)						
2011-2012	$12,530	$17,406 [a]	$10,314 [b]	3%	5%	3%
2010-2011	$10,285	$12,369	$9,204	1%	2%	1%
2009-2010	$19,536	$23,613	$17,906	2%	2%	1%
Primary Care Loan (PCL)						
2011-2012	$57,918	$14,281 [a]	$63,009 [b]	3%	2%	3%
2010-2011	$70,494	$26,544	$82,480	1%	1%	1%
2009-2010	$105,609	$87,168	$107,027	2%	1%	2%
Other State-Issued Loans						
2011-2012	$56,931	$50,630	$59,222	4%	5% [α]	3% [β]
2010-2011	$36,579	$21,250	$39,499	2%	1%	2%
2009-2010	$24,108	$15,925	$28,473	2%	3%	1%
Osteopathic Association Loans						
2011-2012	$11,209	$3,367 [a]	$13,823 [b]	1%	1%	1%
2010-2011	$5,524	$7,000	$4,540	1%	2%	1%
2009-2010	$14,007	$8,000	$14,508	0%	0%	1%
Alternative Loans						
2011-2012	$50,740	$40,324	$52,729	6%	5%	6%
2010-2011	$34,004	$23,676	$36,624	3%	3%	3%
2009-2010	$32,134	$26,120	$32,796	5%	2%	5%
Other						
2011-2012	$63,479	$49,497	$66,262	12%	10%	12%
2010-2011	$3,257	$2,431	$3,501	5%	5%	5%
2009-2010	$26,623	$20,809	$27,907	7%	6%	7%

*All debt data are self-reported by survey respondents.

‡Mean taken from responses greater than zero.

† Amounts indicated are a portion of those indicated in the "At Entry, Loans Owing for Undergraduate Education" source of debt.

a,b Means within subrow noted by distinct letters differ significantly ($p<0.05$) by one-way ANOVA.

α,β Percentages within subrow noted by distinct letters differ significantly ($p<0.05$) by one-way ANOVA.

Table 1.2: Mean Non-Osteopathic Medical Education Debt, Graduating Seniors*

Source of Debt	Debt‡			% in Debt		
	All Schools	Public	Private	All Schools	Public	Private
At Entry, Loans Owing for Undergraduate Education						
2011-2012	$35,293	$40,151	$34,244	50%	46% α	51% β
2010-2011	$31,581	$28,230	$32,515	50%	49%	50%
2009-2010	$29,561	$28,777	$29,734	50%	45%	51%
At Entry, Loans Owing for Post-Bac Education†						
2011-2012	$34,053	$36,200	$33,630	28%	26%	28%
2010-2011	$34,108	$26,002	$36,177	19%	17%	19%
2009-2010	$32,789	$34,707	$34,707	13%	9%	13%
Reported Family Loans to be Repaid by Student						
2011-2012	$62,103	$47,761	$65,207	5%	5%	5%
2010-2011	$81,738	$58,607	$87,521	4%	4%	4%
2009-2010	$74,586	$100,438	$69,416	7%	6%	7%
Reported Non-Educational Debt						
2011-2012	$24,053	$24,921	$23,858	49%	47%	49%
2010-2011	$22,745	$22,298	$22,871	50%	49%	50%
2009-2010	$22,643	$25,384	$21,998	51%	49%	52%

*All debt data are self-reported by respondents of the survey.
‡Mean taken from responses greater than zero.
† Amounts indicated are a portion of those indicated in the "At Entry, Loans Owing for Undergraduate Education" source of debt.
α,β Percentages within subrow noted by distinct letters differ significantly ($p<0.05$) by one-way ANOVA.

Table 2.1: Mean Reported Debt and Gender

Gender	Debt‡	% in Debt
Male		
2011-2012	$205,037	91%
2010-2011	$206,883	92%
2009-2010	$200,477	92%
Female		
2011-2012	$206,725	91%
2010-2011	$207,486	93%
2009-2010	$198,615	95%

‡Mean taken from responses greater than zero.

Table 2.2: Mean Reported Debt and Race/Ethnicity

Gender	Debt‡	% in Debt
White		
2011-2012	$209,515 [a]	91% [α]
2010-2011	$210,267	94%
2009-2010	$201,336	94%
Asian		
2011-2012	$179,118 [b]	90% [α]
2010-2011	$187,979	88%
2009-2010	$187,416	88%
Hispanic		
2011-2012	$194,686 [sb]	100% [β]
2010-2011	$211,607	93%
2009-2010	$213,868	97%
Black		
2011-2012	$218,383 [a]	96% [α]
2010-2011	$217,659	100%
2009-2010	$208,265	97%
All Others*		
2011-2012	$186,470 [ab]	87% [α]
2010-2011	$217,113	89%
2009-2010	$187,135	97%

‡Mean taken from responses greater than zero.
a,b Means within subcolumn noted by distinct letters differ significantly, by one-way ANOVA followed by the Games-Howell post-hoc test when applicable.
α,βPercentages within subcolumn noted by distinct letters differ significantly, ($p<0.05$) by z-test.
*In 2010-2011 and 2011-2012, includes respondents indicating American Indian and Alaskan Native, Native Hawaiian and Pacific Islander or multiple races. In 2009-2010, category also includes Hispanics and Blacks.

Table 2.3: Mean Reported Debt and Marital Status

Marital Status	Debt‡	% in Debt
Married/Cohabiting		
2011-2012	$211,224 [a]	91%
2010-2011	$209,428	94%
2009-2010	$201,312	96%
Single		
2011-2012	$201,657 [b]	90%
2010-2011	$205,408	92%
2009-2010	$198,236	91%

‡Mean taken from responses greater than zero.
a,b Means within subcolumn noted by distinct letters differ significantly, by one-way ANOVA followed by the Games-Howell post-hoc test when applicable.
($p<0.05$) by z-test.

Table 2.4: Mean Reported Debt and Financial Status

Financial Status	Debt‡	% in Debt
Independent		
2011-2012	$217,867 [a]	93% [α]
2010-2011	$215,047	96%
2009-2010	$206,816	96%
Dependent		
2011-2012	$168,598 [b]	83% [β]
2010-2011	$175,981	81%
2009-2010	$169,277	82%

‡Mean taken from responses greater than zero.
a,b Means within subcolumn noted by distinct letters differ significantly, by one-way ANOVA followed by the Games-Howell post-hoc test when applicable.
α,β Percentages within subcolumn noted by distinct letters differ significantly, ($p<0.05$) by z-test.

Table 2.5: Mean Reported Debt and Parental Income

Parental Income	Debt‡	% in Debt
$49,999 or less		
2011-2012	$218,690 [a]	96% [αβ]
2010-2011	$215,521	98%
2009-2010	$210,073	97%
$50,000 - $99,999		
2011-2012	$215,152 [a]	95% [α]
2010-2011	$213,832	97%
2009-2010	$196,774	97%
$100,000 - 199,999		
2011-2012	$202,775 [b]	91% [β]
2010-2011	$204,222	95%
2009-2010	$196,774	94%
$200,000 or more		
2011-2012	$179,335 [c]	80% [γ]
2010-2011	$186,661	79%
2009-2010	$182,175	83%

‡Mean taken from responses greater than zero.
a,b,c Means within subcolumn noted by distinct letters differ significantly, by one-way ANOVA followed by the Games-Howell post-hoc test when applicable.
α,β,γ, Percentages within subcolumn noted by distinct letters differ significantly, ($p<0.05$) by z-test.

Table 2.6: Mean Reported Debt and Parental Education

Parental Education†	Debt‡	% in Debt
Graduate/Professional Degree		
2011-2012	$193,719 [a]	88% [α]
2010-2011	$197,740	89%
2009-2010	$192,897	91%
Bachelor's Degree		
2011-2012	$212,302 [b]	93% [β]
2010-2011	$215,392	94%
2009-2010	$203,363	95%
No College Degree		
2011-2012	$220,934 [b]	94% [β]
2010-2011	$216,762	97%
2009-2010	$210,331	97%

†Highest education level indicated between mother and father considered.
‡Mean taken from responses greater than zero.
a,b Means within subcolumn noted by distinct letters differ significantly, by one-way ANOVA followed by the Games-Howell post-hoc test when applicable.
α,β,γ Percentages within subcolumn noted by distinct letters differ significantly, ($p<0.05$) by z-test.

Table 3: Mean Reported Debt, Parental Income and Financial Independence/Dependence

Parental Income	Debt		Debt % Difference	% in Debt	
	Dependent	Independent		Dependent	Independent
$49,999 or less					
2011-2012	$192,898 [aα]	$224,315 [β]	15%	93% [x]	96% [x]
2010-2011	$201,502	$217,284	8%	100%	97%
2009-2010	$174,945	$214,145	20%	96%	98%
$50,000 - $99,999					
2011-2012	$179,258 [aα]	$223,762 [β]	22%	92% [xφ]	96% [xψ]
2010-2011	$192,629	$217,862	12%	96%	97%
2009-2010	$180,374	$208,786	15%	92%	98%
$100,000 - 199,999					
2011-2012	$177,883 [aα]	$213,126 [β]	18%	93% [x]	91% [y]
2010-2011	$179,593	$211,135	16%	90%	96%
2009-2010	$176,313	$202,574	14%	88%	96%
$200,000 or more					
2011-2012	$169,530 [bα]	$203,867 [β]	18%	68% [y]	89% [y]
2010-2011	$150,247	$207,879	32%	63%	94%
2009-2010	$154,658	$196,031	24%	68%	94%

a,b Means within subcolumn noted by distinct letters differ significantly ($p<0.05$) by one-way ANOVA followed by the Games-Howell post-hoc test.
α,β Means within subrow noted by distinct letters differ significantly ($p<0.05$) by one-way ANOVA.
x,y Percentages within subcolumn noted by distinct letters differ significantly ($p<0.05$) by z test.
φ,ψ Percentages within subrow noted by distinct letters differ significantly ($p<0.05$) by z-test.

Table 4: Osteopathic Education Debt, Consolidation & Repayment Plans

	% Students
Will Consolidate Debt	
2011-2012	51%
2010-2011	53%
2009-2010	47%
Will Not Consolidate Debt	
2011-2012	18%
2010-2011	16%
2009-2010	17%
Undecided	
2011-2012	28%
2010-2011	30%
2009-2010	36%
Mean Years to Repay Debt	
2011-2012	15
2010-2011	15
2009-2010	15

Table 5: Osteopathic Education Debt, Loan Forgiveness Participation Plans

	Students
Will Participate	
2011-2012	47%
2010-2011	N/A
2009-2010	N/A
Will Not Participate	
2011-2012	50%
2010-2011	N/A
2009-2010	N/A

Table 6: Percentage of Graduating Seniors Planning Loan Forgiveness Participation By Program

	Students
Hospital Program	
2011-2012	53%
2010-2011	N/A
2009-2010	N/A
Department of Education's Public Service Loan Forgiveness	
2011-2012	50%
2010-2011	N/A
2009-2010	N/A
State Loan Forgiveness Program	
2011-2012	34%
2010-2011	N/A
2009-2010	N/A
National Health Service Corps	
2011-2012	15%
2010-2011	N/A
2009-2010	N/A
Armed Services (Navy, Army, Air Force)	
2011-2012	4%
2010-2011	N/A
2009-2010	N/A
Other Loan Forgiveness Programs	
2011-2012	6%
2010-2011	N/A
2009-2010	N/A

Table 7: Expected Net Income

	Mean	Median	Mode
One Year After Residency			
2011-2012	$165,531	$150,000	$200,000
2010-2011	$164,964	$150,000	$200,000
2009-2010	$165,077	$150,000	$150,000
Five Years After Residency			
2011-2012	$226,968	$200,000	$200,000
2010-2011	$228,849	$200,000	$200,000
2009-2010	$225,424	$200,000	$200,000
Ten Years After Residency			
2011-2012	$303,577	$250,000	$250,000
2010-2011	$276,993	$250,000	$200,000
2009-2010	$279,607	$250,000	$200,000

Table 8: Mean Osteopathic Medical Education Scholarship/Grants, Graduating Seniors*

Source of Scholarship	Award‡			% Awarded		
	All Schools	Public	Private	All Schools	Public	Private
Total Scholarships/Grants						
2011-2012	$71,439	$56,713 [a]	$75,514 [b]	40%	44% [α]	39% [β]
2010-2011	$48,735	$28,395	$55,444	43%	49%	42%
2009-2010	$49,223	$35,290	$52,768	43%	43%	43%
National Health Service Corps (NHSC) Scholarship						
2011-2012	$136,393	$107,000	$137,569	1%	0%	1%
2010-2011	$113,778	$72,000	$143,619	0%	0%	1%
2009-2010	$138,470	$0	$138,470	1%	0%	1%
Armed Forces Health Professions (AFHP) Scholarship						
2011-2012	$219,616	$202,195	$223,381	10%	9%	11%
2010-2011	$184,917	$156,061	$188,160	8%	3%	9%
2009-2010	$178,915	$190,626	$177,330	8%	5%	8%
State Government Scholarship/Grant						
2011-2012	$23,657	$10,591 [a]	$29,443 [b]	4%	7% [α]	4% [β]
2010-2011	$26,109	$9,659	$36,210	3%	6%	3%
2009-2010	$27,415	$17,705	$32,185	3%	6%	3%
Award from Osteopathic Medical School						
2011-2012	$15,512	$10,977 [a]	$16,666 [b]	18%	19%	18%
2010-2011	$13,390	$10,484	$14,217	15%	15%	15%
2009-2010	$14,799	$8,933	$16,123	16%	15%	16%
Tuition Waiver						
2011-2012	$42,972	$43,657	$42,342	3%	8% [α]	2% [β]
2010-2011	$43,825	$44,085	$43,655	2%	4%	2%
2009-2010	$48,024	$27,412	$60,755	2%	4%	2%
Osteopathic Association						
2011-2012	$5,058	$6,265	$6,265	6%	7%	6%
2010-2011	$6,416	$3,282	$7,664	5%	7%	5%
2009-2010	$4,506	$4,976	$4,432	5%	3%	5%
Other Sources						
2011-2012	$19,295	$17,789	$17,789	8%	10%	8%
2010-2011	$18,079	$32,528	$13,615	6%	7%	6%
2009-2010	$14,771	$22,359	$12,482	6%	7%	6%

*All award data are self-reported by survey respondents

‡Mean taken from responses greater than zero.

a,b Means within subrow noted by distinct letters differ significantly ($p<0.05$) by one-way ANOVA.

α,β Percentages within subrow noted by distinct letters differ significantly ($p<0.05$) by one-way ANOVA.

Table 8a: Mean Award and AFHP and NHSC Scholarships

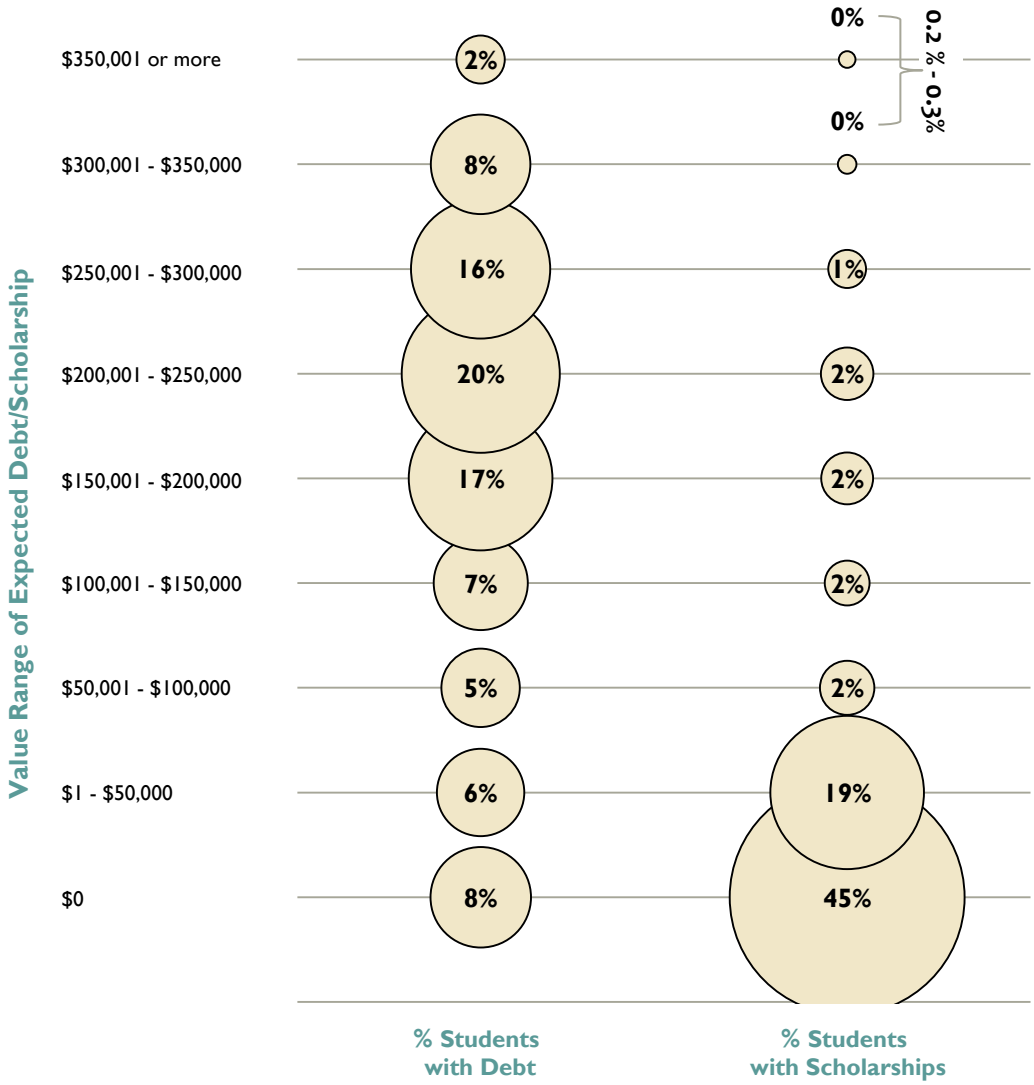
Source of Scholarship	Award‡		% Awarded	
	Public	Private	Public	Private
Total Scholarships/Grants				
2011-2012	$56,713 [a]	$75,514 [b]	44% [α]	39% [β]
2010-2011	$28,395	$55,444	49%	42%
2009-2010	$35,290	$52,768	43%	43%
Non-AFHP/NHSC Scholarships				
2011-2012	$21,419	$22,280	38% [α]	31% [β]
2010-2011	$17,644	$19,434	44%	33%
2009-2010	$16,827	$19,436	39%	34%

‡Mean taken from responses greater than zero.

a,b Means within subrow noted by distinct letters differ significantly ($p<0.05$) by one-way ANOVA.

α,β Percentages within subrow noted by distinct letters differ signifcantly ($p<0.05$) by z-test.

Chart 1: Percentage of Students with Reported Debt and Scholarships*



*Bubble sizes are proportional to the percentage/number of students with debt/scholarships and may appear inconsistent due to rounding.

Table 9.1: Mean Award and Gender

Gender	Award‡	% Awarded
Male		
2011-2012	$83,555 [a]	40%
2010-2011	$57,451	42%
2009-2010	$62,614	41%
Female		
2011-2012	$58,482 [b]	39%
2010-2011	$40,886	45%
2009-2010	$37,914	45%

‡Mean taken from all responses.
a,b Means within subcolumn noted by distinct letters differ significantly, by one-way ANOVA followed by the Games-Howell post-hoc test when applicable.

Table 9.1a: Mean Award and Gender

Source of Scholarship/Grant	Award‡		% Awarded	
	Male	Female	Male	Female
Total Scholarships/Grants				
2011-2012	$83,555 [a]	$58,482 [b]	44% [α]	39% [β]
2010-2011	$57,451	$40,886	42%	45%
2009-2010	$62,614	$37,914	41%	45%
AFHP Scholarships				
2011-2012	$224,270	$213,303	13% [α]	7% [β]
2010-2011	$184,168	$185,703	9%	6%
2009-2010	$181,661	$173,629	10%	5%
Non-AFHP Scholarships				
2011-2012	$25,341	$26,255	32%	35%
2010-2011	$20,834	$19,759	32%	39%
2009-2010	$21,233	$19,848	30%	40%

‡Mean taken from responses greater than zero.
a,b Means within subrow noted by distinct letters differ significantly ($p<0.05$) by one-way ANOVA.
α,β Percentages within subrow noted by distinct letters differ signifcantly ($p<0.05$) by z-test.

Table 9.2: Mean Scholarship Award and Race/Ethnicity

Race/Ethnicity	Award‡	% Awarded
White		
2011-2012	$74,488 [a]	41% [α]
2010-2011	$52,211	45%
2009-2010	$49,463	44%
Asian		
2011-2012	$34,310 [b]	19% [β]
2010-2011	$26,950	34%
2009-2010	$43,613	36%
Hispanic		
2011-2012	$98,916 [ab]	73% [γ]
2010-2011	$31,339	38%
2009-2010	$50,649	35%
Black		
2011-2012	$45,764 [ab]	58% [γ]
2010-2011	$35,838	67%
2009-2010	$43,079	51%
All Others*		
2011-2012	$89,478 [ab]	53% [αγ]
2010-2011	$68,960	42%
2009-2010	$68,742	49%

‡Mean taken from responses greater than zero.
a,b Means within subcolumn noted by distinct letters differ significantly, by one-way ANOVA followed by the Games-Howell post-hoc test when applicable.
α,β,γ Percentages within subcolumn noted by distinct letters differ significantly, ($p<0.05$) by z-test.
*In 2010-2011 and 2011-2012, category includes respondents indicating American Indian and Alaskan Native, Native Hawaiian and Pacific Islander or multiple races. In 2009-2010, category also includes Hispanics and Blacks.

Table 9.3: Mean Scholarship Award and Marital Status

Marital Status	Award‡	% Awarded
Married/Cohabiting		
2011-2012	$78,907 [a]	45% [α]
2010-2011	$50,634	47%
2009-2010	$48,968	46%
Single		
2011-2012	$64,500 [b]	35% [β]
2010-2011	$46,456	43%
2009-2010	$49,883	40%

‡Mean taken from responses greater than zero.
a,b Means within subcolumn noted by distinct letters differ significantly, by one-way ANOVA followed by the Games-Howell post-hoc test when applicable.
α,β Percentages within subcolumn noted by distinct letters differ significantly, ($p<0.05$) by z-test.

Table 9.4: Mean Scholarship Award and Financial Status

Financial Status	Award‡	% Awarded
Independent		
2011-2012	$78,243 [a]	45% [α]
2010-2011	$54,802	47%
2009-2010	$53,896	46%
Dependent		
2011-2012	$29,241 [b]	44% [β]
2010-2011	$19,654	32%
2009-2010	$25,697	31%

‡Mean taken from responses greater than zero.
a,b Means within subcolumn noted by distinct letters differ significantly, by one-way ANOVA followed by the Games-Howell post-hoc test when applicable.
α,β Percentages within subcolumn noted by distinct letters differ significantly,
†Highest education level indicated between mother and father considered.

Table 9.5: Mean Scholarship Award and Parental Income

Parental Income	Award‡	% Awarded
$49,999 or less		
2011-2012	$58,153	46% [α]
2010-2011	$45,942	52%
2009-2010	$48,150	51%
$50,000 - $99,999		
2011-2012	$71,256	43% [γ]
2010-2011	$47,900	49%
2009-2010	$48,082	48%
$100,000 - 199,999		
2011-2012	$79,096	40% [γ]
2010-2011	$59,391	41%
2009-2010	$54,154	40%
$200,000 or more		
2011-2012	$78,830	28% [β]
2010-2011	$40,980	31%
2009-2010	$46,989	33%

‡Mean taken from responses greater than zero.
α,β,γ Percentages within subcolumn noted by distinct letters differ significantly, ($p<0.05$) by z-test.

Table 9.6: Mean Scholarship Award and Parental Education

Parental Education†	Award‡	% Awarded
Graduate/Professional Degree		
2011-2012	$80,668 [a]	37% [α]
2010-2011	$52,302	38%
2009-2010	$50,427	41%
Bachelor's Degree		
2011-2012	$56,695 [b]	40% [αβ]
2010-2011	$44,049	45%
2009-2010	$50,094	43%
No College Degree		
2011-2012	$69,877 [ab]	44% [β]
2010-2011	$47,085	51%
2009-2010	$46,989	46%

†Highest education level indicated between mother and father considered.
‡Mean taken from responses greater than zero.
a,b Means within subcolumn noted by distinct letters differ significantly, by one-way ANOVA followed by the Games-Howell post-hoc test when applicable.
α,β Percentages within subcolumn noted by distinct letters differ significantly, ($p<0.05$) by z-test.

Table 10: Sources of Funds for Osteopathic Medical Education (% of total cost provided by each source)

	All Schools	Public	Private
Loans			
2011-2012	78%	77%	79%
2010-2011	79%	81%	79%
2009-2010	78%	80%	77%
Scholarships/Grants			
2011-2012	10%	10%	9%
2010-2011	9%	7%	9%
2009-2010	9%	7%	10%
Savings			
2011-2012	2%	2%	2%
2010-2011	2%	2%	2%
2009-2010	2%	2%	2%
Earnings			
2011-2012	1%	1%	1%
2010-2011	1%	2%	1%
2009-2010	2%	2%	1%
Parents			
2011-2012	8%	9%	8%
2010-2011	8%	8%	8%
2009-2010	8%	9%	8%
Relatives			
2011-2012	1%	0% [a]	1% [b]
2010-2011	1%	0%	1%
2009-2010	1%	1%	1%
Other			
2011-2012	0%	1%	0%
2010-2011	0%	1%	0%
2009-2010	0%	0%	1%

a,b Percentages within subrow noted by distinct letters differ significantly ($p<0.05$) by one-way ANOVA.

Table 11: Evaluation of Quality of Osteopathic Medical Training 2011-2012

	Students		
	2011-2012	2010-2011	2009-2010
Very Satisfied	22%	22%	21%
Satisfied	61%	60%	61%
Neither Satisfied nor Dissatisfied	11%	12%	11%
Dissatisfied	6%	5%	6%
Very Dissatisfied	1%	1%	1%
Mean Satisfaction Rating*	4.0	4.0	3.9

*Scale from 1 to 5; 1 being "Very Dissatisfied," 5 being "Very Satisfied."

Table 12: Satisfaction Level with Osteopathic Medicine Career Selection 2011-2012

	Students		
	2011-2012	2010-2011	2009-2010
Very Satisfied	37%	41%	38%
Satisfied	44%	42%	43%
Neither Satisfied nor Dissatisfied	14%	13%	13%
Dissatisfied	4%	4%	5%
Very Dissatisfied	1%	1%	1%
Mean Satisfaction Rating*	4.1	4.2	4.1

*Scale from 1 to 5; 1 being "Very Dissatisfied," 5 being "Very Satisfied."

Table 13: 2011-2012 Graduating Seniors, if Starting Over, Would Prefer to Enroll in:

	Students		
	2011-2012	2010-2011	2009-2010
The osteopathic school from which you are about to graduate	56%	58%	56%
Another osteopathic medical school	9%	10%	11%
An allopathic medical school	30%	27%	28%
Would not have gone to medical school at all	5%	5%	6%

Table 14: Diversity Valued by Osteopathic Medical School, Graduating Seniors 2011-2012

	Students		
	2011-2012	2010-2011	2009-2010
Strongly Agree	28%	N/A	N/A
Agree	46%	N/A	N/A
Neither Agree nor Disagree	18%	N/A	N/A
Disagree	6%	N/A	N/A
Strongly Disagree	2%	N/A	N/A
Mean Agreement Rating*	3.9	N/A	N/A

*Scale from 1 to 5; 1 being "Strong Disagree," 5 being "Strongly Agree."

Table 15: 2011-2012 Graduating Seniors' Evaluation of First Two Years of Medical Education

	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree
Basic and clinical science course objectives were made clear to students	37%	52%	7%	3%	1%
Basic science courses were sufficiently integrated with one another	30%	49%	10%	8%	2%
Basic science courses were sufficiently integrated with clinical training	25%	47%	14%	11%	3%
Course objectives & examination content matched closely	27%	53%	11%	6%	2%
Coursework adequately prepared students for clerkships	25%	51%	14%	7%	2%
The first two years of medical school were well-organized	25%	46%	14%	10%	5%
Students were provided with timely feedback on performance	27%	50%	13%	8%	3%
There was adequate exposure to patient care during the first two years	22%	39%	16%	17%	6%
Osteopathic principles were adequately integrated into coursework	34%	49%	11%	5%	1%
An appropriate amount of training was provided in OMT	43%	44%	8%	3%	1%
There was adequate preparation for COMLEX Level I	23%	40%	14%	15%	8%

Highlighted categories are those where ≤ 70% are "Strongly Agree" + "Agree."

Table 16: 2011-2012 Graduating Seniors' Evaluation of Time Devoted to Various Areas of Instruction

	Appropriate	Inadequate	Excessive
Basic medical science	88%	10%	2%
Behavioral science	82%	15%	2%
Biostatistics	59%	39%	2%
Bioterrorism	61%	37%	2%
Care of ambulatory patients	88%	8%	3%
Care of elderly (geriatrics)	80%	12%	7%
Care of hospitalized patients	83%	17%	0%
Care of patients with HIV/AIDS	70%	28%	1%
Clinical decision-making	85%	15%	1%
Clinical pharmacology	80%	18%	2%
Clinical science	90%	9%	1%
Cost-effective medical practice	55%	44%	1%
Diagnostic skills	88%	12%	1%
Drug and alcohol abuse	85%	14%	1%
Family/domestic violence	77%	21%	1%
Genetics	79%	19%	2%
Health promotion & disease prevention	79%	20%	2%
Human sexuality	79%	20%	2%
Independent learning & self-evaluation	83%	14%	3%
Infection control/health care setting	89%	10%	1%
Infectious disease prevention	91%	9%	0%
Integrative medicine	83%	15%	1%
Legal medicine	62%	36%	2%
Literature analysis skill	59%	40%	1%
Medical care cost control	55%	45%	1%
Medical ethics	80%	13%	7%
Medical record-keeping	68%	31%	1%
Medical socioeconomics	70%	29%	1%
Neuromusculoskeletal Medicine/OMT	82%	4%	14%
Nutrition	71%	27%	2%
Pain management	68%	31%	1%
Patient education	89%	11%	1%
Patient follow-up	88%	12%	0%
Patient interviewing skills	91%	4%	5%
Physician-patient relationship	93%	4%	3%
Practice management	64%	36%	1%
Primary care	84%	3%	13%
Public health & community medicine	86%	11%	3%
Rehabilitation	70%	30%	0%
Research techniques	52%	48%	1%
Role of medicine in community	88%	11%	1%
Screening for diseases	93%	7%	0%
Teamwork with other health professionals	88%	11%	1%
Therapeutic management	90%	10%	0%
Use of computers	85%	15%	1%
Utilization review & quality assurance	75%	24%	1%

Beige highlighted categories are those where ≤ 70% are "Appropriate" or ≥ 10% "Excessive."
Teal highlighted categories are those where ≥ 90% are "Appropriate."

Table 17: 2011-2012 Graduating Seniors' Evaluation of Clinical Education – Required Clerkships

	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree
Clear goals and objective were set	21%	54%	14%	9%	2%
Able to design own goals and objectives	20%	46%	18%	12%	3%
Clear performance objectives were set	19%	51%	16%	11%	2%
Clerkships were well-organized	14%	42%	21%	16%	7%
Rounds were conducted as scheduled	18%	52%	19%	8%	3%
Timely feedback was provided on performance	17%	50%	18%	11%	4%
Too large a role by residents in teaching and evaluation†	9%	22%	28%	33%	8%
Appropriate diversity of patients and their health issues	30%	57%	9%	3%	1%
Appropriate number of inpatient experiences	29%	52%	8%	7%	3%
Each clerkship had an osteopathic orientation	7%	16%	17%	40%	21%
Osteopathic principles & practice (OPP) were well-integrated in each clerkship	7%	17%	20%	35%	21%
Appropriate technology usage for situation	23%	59%	13%	4%	1%
Able to work on a personal basis with patients	40%	53%	5%	1%	0%
Attending modeled excellent patient relationship skills	24%	56%	16%	3%	1%
Support staff was friendly and supportive	25%	56%	14%	4%	1%
Coverage hours were set and finished on time	18%	53%	19%	8%	2%
Was asked relevant and pertinent questions on patient diagnosis, treatment options, management, and follow-up care	25%	62%	9%	3%	1%
Felt free to ask questions	32%	57%	8%	2%	1%
The attending seemed interested in my opinions	21%	51%	21%	6%	1%
Personal concerns were addressed by the attending while on rotation	20%	51%	22%	5%	1%
Was treated with respect	28%	56%	12%	3%	1%
Able to discuss progress on rotation with attending	22%	55%	16%	5%	1%
Attending critically evaluated me during rotation	19%	54%	19%	6%	1%
Able to discuss the final rotation evaluation with the attending	18%	47%	21%	11%	4%
Attending based the evaluation on direct observation	21%	54%	18%	6%	2%
Able to meet & discuss areas of concern with the attending outside of the clinical setting	17%	41%	27%	13%	3%
Lived a reasonable distance from rotation sites	22%	50%	14%	9%	5%
Rotations prepared me for examinations	17%	48%	20%	11%	4%
Testing was provided at end of each rotation	24%	53%	12%	8%	3%
Adequate preparation for COMLEX Level 2-CE	19%	46%	17%	12%	6%
Adequate preparation for COMLEX Level 2-PE	36%	49%	8%	4%	2%

Beige highlighted categories are those where ≤ 70% are "Strongly Agree" + "Agree."

Teal highlighted categories are those where ≥ 90% are "Strongly Agree" + "Agree."

†Not highlighted because evaluation factor is stated in the negative.

Table 18: 2011-2012 Graduating Seniors' Evaluation of Clinical Education – Selective/Elective Clerkships

	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree
Clear goals and objectives were set	22%	56%	14%	6%	2%
Able to design own goals and objectives	25%	57%	12%	4%	1%
Clear performance objectives were set	21%	56%	15%	6%	2%
Clerkships were well-organized	20%	55%	16%	7%	3%
Rounds were conducted as scheduled	21%	58%	16%	4%	1%
Timely feedback was provided on performance	21%	57%	15%	5%	2%
Too large a role by residents in teaching and evaluation†	10%	25%	27%	32%	7%
Appropriate diversity of patients and their health issues	31%	58%	9%	1%	1%
Appropriate number of inpatient experiences	31%	55%	9%	2%	1%
Each clerkship had an osteopathic orientation	9%	23%	19%	32%	18%
Osteopathic principles and practice (OPP) were well-integrated in each clerkship	9%	22%	22%	30%	18%
Appropriate technology usage for situation	26%	59%	12%	2%	1%
Able to work on a personal basis with patients	36%	55%	8%	1%	0%
Attending modeled excellent patient relationship skills	29%	57%	11%	1%	1%
Support staff was friendly and supportive	29%	57%	11%	2%	1%
Coverage hours were set and finished on time	23%	56%	15%	5%	1%
Was asked relevant and pertinent questions on patient diagnosis, treatment options, management, and follow-up care	29%	60%	9%	1%	0%
Felt free to ask questions	32%	58%	8%	1%	1%
Attending seemed interested in my opinions	27%	56%	14%	3%	1%
Personal concerns were addressed by the attending while on rotation	24%	54%	18%	3%	1%
Was treated with respect	30%	58%	10%	1%	1%
Able to discuss progress on rotation with attending	25%	57%	14%	3%	1%
Attending critically evaluated me during rotation	24%	56%	16%	4%	1%
Able to discuss the final rotation evaluation with the attending	23%	52%	17%	7%	2%
Attending based the evaluation on direct observation	26%	57%	14%	3%	1%
Able to meet and discuss areas of concern with the attending outside of the clinical setting	21%	49%	21%	8%	2%
Lived a reasonable distance from rotation sites	23%	55%	13%	6%	2%
Rotations prepared me for examinations	21%	52%	20%	5%	2%
Testing was provided at end of each clerkship	17%	38%	20%	18%	7%
Adequate preparation for COMLEX Level 2-CE	19%	48%	21%	8%	4%
Adequate preparation for COMLEX Level 2-PE	27%	50%	17%	4%	2%

Beige highlighted categories are those where ≤ 70% are "Strongly Agree" + "Agree."
Teal highlighted categories are those where ≥ 90% are "Strongly Agree" + "Agree."

†Not highlighted because evaluation factor is stated in the negative.

Table 19: 2011-2012 Graduating Seniors' Evaluation of Confidence Level to Perform Certain Examinations

	Completely Confident	Mostly Confident	Fairly Confident	Not at All Confident	No Opportunity to Perform
General adult examination	67%	28%	5%	0%	0%
General pediatric examination	36%	40%	20%	4%	0%
Well-baby examination	29%	35%	28%	8%	1%
Breast and pelvic examination	40%	34%	20%	5%	0%
Prostate and testicular examination	30%	35%	25%	8%	2%
Osteopathic structural examination	42%	36%	19%	3%	0%
Sports participation examination	43%	36%	16%	3%	1%

Beige highlighted categories are those where ≤ 70% are "Completely Confident" + "Mostly Confident."
Teal highlighted categories are those where ≥ 90% are "Completely Confident" + "Mostly Confident."

Table 20: 2011-2012 Graduating Seniors' Evaluation of Various Academic Services

	Very Satisfied	Satisfied	Neither Satisfied Nor Dissatisfied	Dissatisfied	Strongly Dissatisfied
Academic counseling	14%	39%	23%	15%	9%
Accessibility to administration	19%	45%	18%	12%	5%
Awareness of student problems by administration	13%	38%	21%	19%	9%
Career counseling	9%	29%	29%	21%	12%
Computer resource center	21%	50%	22%	5%	2%
Disability insurance	11%	32%	52%	3%	2%
Electronic communication (e-mail, Internet/Intranet)	26%	56%	13%	4%	1%
Faculty mentoring	14%	36%	24%	17%	10%
Financial aid administration services	26%	47%	17%	6%	4%
Library	31%	50%	13%	4%	1%
Participation of students on key medical school committees	20%	48%	26%	4%	2%
Personal counseling	15%	34%	39%	7%	5%
Student health insurance	12%	34%	30%	14%	10%
Student health services	15%	40%	30%	9%	6%
Student relaxation space	15%	40%	27%	11%	6%
Student study space	18%	47%	19%	11%	5%
Tutorial help	14%	37%	41%	6%	4%

Highlighted categories are those where ≤ 70% are "Very Satisfied" + "Satisfied."

Table 21: 2011-2012 Graduating Seniors' Evaluation of Training in Osteopathic Manipulative Treatment, Principles, and Practice

	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree
Well-prepared to diagnose structural problems	30%	55%	11%	3%	1%
Well-prepared to treat structural problems	26%	53%	14%	5%	1%
Well-prepared to document findings in a structural examination	27%	54%	13%	5%	1%
Had opportunity to practice OPP during first two years in medical school	47%	45%	6%	2%	1%
Had opportunity to practice OPP during in-hospital rotations	12%	29%	19%	28%	12%
Had opportunity to practice OPP during ambulatory primary care rotations	17%	50%	15%	13%	6%
Had opportunity to practice OPP during ambulatory non-primary care rotations	12%	28%	22%	28%	10%
Had osteopathic physician role models during the first two years in medical school	32%	49%	11%	5%	2%
Had osteopathic physician role models during required in-hospital rotations	14%	34%	19%	23%	9%
Had osteopathic physician role models during ambulatory primary care rotations	18%	48%	15%	13%	6%
Had osteopathic physician role models during ambulatory non-primary care rotations	13%	35%	21%	23%	8%
Had osteopathic physician role models during selectives/electives	16%	38%	20%	19%	7%

Beige highlighted categories are those where ≤ 70% are "Strongly Agree" + "Agree."
Teal highlighted categories are those where ≥ 90% are "Strongly Agree" + "Agree."

Table 22: 2011-2012 Graduating Seniors' Evaluation of Training in Geriatric Care

	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree
Can identify situations where co-morbid conditions, life expectancy, and/or functional status should modify (or override) standard recommendations for screening tests in older adults	25%	62%	10%	3%	1%
Can anticipate and identify hazards of hospitalization for older adults	26%	63%	8%	2%	0%
Can identify those medications that should be avoided or used with caution in older adults	20%	61%	15%	4%	1%
Can differentiate the clinical presentations of delirium, dementia, and depression in older adults	27%	61%	10%	2%	0%
Can assess a patient's self-care/functional capacity, e.g. ADLs & IADLs	22%	58%	14%	5%	1%
Can assess an older adult patient's fall risk, identify underlying causative factors, and make recommendations for further evaluation and initial management	23%	59%	14%	4%	1%
Can describe the differences in the presenting signs, symptoms, and laboratory findings of common conditions in older, as compared to younger, adults	22%	61%	13%	3%	0%

Table 23: 2011-2012 Graduating Seniors' Evaluation of School's Involvement in Clerkship Years

	Students
Excessive Involvement	2%
Outstanding Involvement	10%
Adequate Involvement	49%
Some, but Inadequate, Involvement	31%
Not Involved	8%

Table 24: Type of School Involvement During Clerkship Years

	Students
E-Mail	83%
COMLEX PE Preparation	57%
Distance Learning	38%
COMLEX Level II Preparation	35%
Faculty Visits	28%
Newsletter	26%

Table 25: Percentage of Time Devoted to Various Activities During Clerkship Years, 2011-2012 Graduating Seniors

	Students
Inpatient Care, Including Reading X-ray Films and Laboratory Work	49%
Outpatient Care	39%
Extended/Long-Term Care	6%
Research	2%
Other	4%

Table 26: 2011-2012 Graduating Seniors' Evaluation of Percentage of Training Delivered by MD Physicians

	None	1%-5%	26%-50%	51%-75%	76%-100%
During the First Two Years of Medical School	6%	58%	26%	8%	3%
During Required In-Hospital Rotations	1%	14%	25%	35%	24%
During Required Ambulatory Primary Care Rotations	7%	24%	29%	24%	15%
During Required Ambulatory Non-Primary Care Rotations	4%	18%	29%	28%	21%
During Selectives/Electives	1%	15%	24%	31%	29%

Table 27: Immediate Post-Graduate Plans, Graduating Seniors

	% Students	Gender		Race-Ethnicity				
		Male	Female	White	Asian	Hispanic	Black	All Others*
Osteopathic Residency								
2011-2012	29%	33% [a]	24% [b]	29%	27%	31%	26%	40%
2010-2011	29%	33%	25%	28%	29%	30%	30%	32%
2009-2010	28%	31%	25%	29%	27%	29%	27%	26%
Dual AOA/ACGME-Approved Residency								
2011-2012	12%	10% [a]	14% [b]	12% [α]	13% [αβ]	7% [αβ]	20% [β]	6% [α]
2010-2011	12%	9%	14%	13%	9%	7%	15%	10%
2009-2010	12%	9%	14%	12%	11%	9%	7%	11%
Internship								
2011-2012	12%	15% [a]	9% [b]	12%	12%	10%	14%	10%
2010-2011	13%	15%	12%	13%	16%	13%	15%	8%
2009-2010	16%	18%	14%	15%	15%	20%	27%	18%
Allopathic Residency								
2011-2012	40%	35% [a]	46% [b]	40% [αβ]	44% [β]	38% [α]	32% [α]	28% [αβ]
2010-2011	39%	34%	43%	39%	41%	39%	20%	45%
2009-2010	37%	33%	41%	37%	40%	34%	28%	32%
Government, NHSC, Military, VA, etc.								
2011-2012	5%	6% [a]	4% [b]	5% [α]	0% [β]	14% [γ]	3% [α]	14% [γ]
2010-2011	5%	7%	4%	6%	2%	5%	7%	2%
2009-2010	6%	7%	4%	6%	4%	3%	5%	11%
Undecided								
2011-2012	2%	2% [a]	2% [b]	1% [α]	4% [β]	0% [αβ]	5% [β]	2% [αβ]
2010-2011	2%	2%	2%	1%	2%	6%	12%	2%
2009-2010	2%	2%	2%	1%	3%	5%	7%	2%
Total								
2011-2012	100%	100%	100%	100%	100%	100%	100%	100%
2010-2011	100%	100%	100%	100%	100%	100%	100%	100%
2009-2010	100%	100%	100%	100%	100%	100%	100%	100%

a,b Percentages within subrow noted by distinct letters differ significantly ($p<0.05$) z-test.
α,β,γ, Percentages within subrow noted by distinct letters differ significantly ($p<0.05$) z-test.
*In 2010-2011 and 2011-2012, includes respondents indicating American Indian and Alaskan Native, Native Hawaiian and Pacific Islander or multiple races.
In 2009-2010, category also includes Hispanics and Blacks.

Table 28: Reasons Given for Planning an Allopathic or Dual AOA/ACGME-Approved Residency*

	% Students		
	2011-2012	2010-2011	2009-2010
Opens more career opportunities	57%	55%	53%
Located in more suitable geographic location(s)	72%	74%	74%
Located in larger institutions	59%	59%	60%
Believe better training and educational opportunities available	60%	61%	61%
Desire specialty training not available in osteopathic program	25%	22%	22%
Better chance of being accepted in program	15%	15%	12%
Allows ABMS board certification	14%	N/A	11%
Higher pay	13%	12%	12%
Shorter training period	6%	7%	7%
Obligation	1%	1%	1%
Other	13%	11%	11%

*Each respondent indicating allopathic or dual AOA/ABMS-approved residency plans could choose one or more of the listed reasons influencing residency choice.

Table 29: Board Certification Plans, Graduating Seniors

	% Students	Gender		Race-Ethnicity				
		Male	Female	White	Asian	Hispanic	Black	All Others
Osteopathic AOA Boards								
2011-2012	39%	41% [a]	37% [b]	39% [α]	32% [β]	45% [αβγ]	43% [α]	60% [γ]
2010-2011	43%	43%	43%	44%	41%	46%	52%	35%
2009-2010	44%	44%	44%	44%	40%	52%	42%	44%
Both AOA and ABMS Boards								
2011-2012	23%	21% [a]	25% [b]	23% [α]	24% [α]	17% [α]	37% [β]	12% [α]
2010-2011	22%	22%	22%	22%	22%	23%	30%	29%
2009-2010	23%	21%	25%	23%	27%	23%	29%	17%
Allopathic ABMS Boards								
2011-2012	22%	24% [a]	20% [b]	22% [α]	27% [α]	7% [β]	4% [β]	22% [α]
2010-2011	18%	21%	15%	18%	22%	17%	6%	18%
2009-2010	16%	19%	13%	15%	19%	13%	9%	17%
Other								
2011-2012	0%	0%	0%	0% [α]	0% [αβ]	0% [αβ]	1% [β]	2% [β]
2010-2011	0%	0%	0%	0%	0%	1%	0%	1%
2009-2010	0%	0%	0%	0%	0%	0%	0%	0%
Not Planning Board Certification								
2011-2012	0%	0%	0%	0%	0%	0%	0%	0%
2010-2011	0%	0%	0%	0%	0%	0%	0%	1%
2009-2010	0%	0%	0%	0%	0%	1%	0%	0%
Undecided								
2011-2012	16%	13% [a]	18% [b]	16% [α]	16% [α]	31% [β]	14% [α]	4% [γ]
2010-2011	16%	13%	19%	16%	16%	14%	12%	17%
2009-2010	17%	15%	19%	17%	14%	11%	20%	22%
Total								
2011-2012	100%	100%	100%	100%	100%	100%	100%	100%
2010-2011	100%	100%	100%	100%	100%	100%	100%	100%
2009-2010	100%	100%	100%	100%	100%	100%	100%	100%

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α,β,γ Percentages within subrow noted by distinct letters differ significantly ($p<0.05$) z-test.
*In 2010-2011 and 2011-2012, includes respondents indicating American Indian and Alaskan Native, Native Hawaiian and Pacific Islander or multiple races. In 2009-2010, category also includes Hispanics and Blacks.

Table 30: Reasons Given for Taking ABMS (Allopathic) or Both Boards*

	% Students		
	2011-2012	2010-2011	2009-2010
ABMS board certification provides more opportunities	61%	58%	60%
Personal desire for dual certification	30%	34%	40%
ABMS board certification is more widely recognized	56%	54%	57%
Hospital privileges more readily obtained with ABMS board certification	29%	31%	34%
It is a requirement of the residency program	46%	N/A	N/A
ABMS board certification has more colleague acceptance	38%	36%	37%
Licenses more readily obtained with ABMS board certification	22%	31%	25%
ABMS board certification carries more prestige	25%	22%	21%
Other	9%	5%	8%

*Each respondent indicating plans to take ABMS or both boards could choose one or more of the listed reasons influencing board certification choice.

Table 31: Long-Range Career Plans, Graduating Seniors

	% Students	Gender		Race-Ethnicity				
		Male	Female	White	Asian	Hispanic	Black	All Others*
Group or Other Type of Private Practice								
2011-2012	47%	48%	45%	49% α	47% αβ	45% αβ	36% β	44% αβ
2010-2011	47%	48%	46%	50%	43%	42%	27%	40%
2009-2010	48%	47%	49%	51%	41%	40%	40%	43%
Self-Employed, with or without a Partner								
2011-2012	9%	11% a	7% b	9% αβ	6% α	5% αβ	8% αβ	16% β
2010-2011	10%	12%	8%	9%	11%	10%	16%	5%
2009-2010	12%	15%	9%	11%	13%	22%	7%	15%
Practice in an HMO								
2011-2012	6%	5% a	7% b	6%	5%	8%	7%	2%
2010-2011	4%	4%	4%	4%	6%	6%	3%	6%
2009-2010	4%	3%	4%	3%	4%	2%	5%	6%
Government, NHSC, Military, VA, etc.								
2011-2012	9%	9%	9%	9% α	3% β	20% γ	13% αβ	16% αβ
2010-2011	10%	10%	10%	10%	6%	11%	17%	19%
2009-2010	8%	9%	8%	8%	6%	9%	12%	13%
Other Professional Activity								
2011-2012	9%	8% a	10% b	8% α	15% β	3% α	14% β	8% αβ
2010-2011	9%	9%	10%	9%	11%	8%	12%	10%
2009-2010	9%	8%	10%	8%	14%	9%	11%	9%
Undecided								
2011-2012	21%	19% a	22% b	20%	24%	20%	22%	14%
2010-2011	19%	17%	21%	18%	23%	22%	24%	20%
2009-2010	20%	18%	21%	18%	22%	20%	25%	14%
Total								
2011-2012	100%	100%	100%	100%	100%	100%	100%	100%
2010-2011	100%	100%	100%	100%	100%	100%	100%	100%
2009-2010	100%	100%	100%	100%	100%	100%	100%	100%

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α,β,γ Percentages within subrow noted by distinct letters differ significantly (p<0.05) z-test.
*In 2010-2011 and 2011-2012, includes respondents indicating American Indian and Alaskan Native, Native Hawaiian and Pacific Islander or multiple races. In 2009-2010, category also includes Hispanics and Blacks.

Table 32: Size of Location Planned for Practice After Residency

	% Students		
	2011-2012	2010-2011	2009-2010
Major Metropolitan Area (1,000,001 +)	21%	20%	20%
Metropolitan Area (500,001 - 1,000,000)	18%	18%	19%
City (100,001 - 500,000)	20%	20%	19%
City (50,001 - 100,000)	11%	10%	10%
City or Town (10,001 - 50,000)	12%	11%	11%
City or Town (2,501 - 10,000)	4%	3%	5%
Area 2,500 or less	1%	1%	1%
Undecided	13%	16%	16%
Total	100%	100%	100%

Table 33: Plans to Practice in Underserved/Shortage Area

	% Students		
	2011-2012	2010-2011	2009-2010
Yes	32%	34%	33%
No	16%	17%	17%
Unsure	52%	49%	50%
Total	100%	100%	100%

Table 34: Percentage of Students Who Plan to Practice in Underserved/Shortage Areas

	% Students		
Gender	2011-2012	2010-2011	2009-2010
Male	30% [a]	29%	29%
Female	36% [b]	39%	36%
Race/Ethnicity			
White	32% [a]	32%	33%
Asian	30% [a]	29%	27%
Hispanic	48% [b]	46%	37%
Black	59% [b]	61%	55%
All Others*	43% [ab]	44%	30%
Marital Status			
Married/Cohabiting	36% [a]	36%	36%
Single	30% [b]	33%	30%
Financial Status			
Independent	36% [a]	36%	35%
Dependent	23% [b]	28%	24%
Parental Income			
$49,999 and less	38% [a]	42%	41%
$50,000 - $99,999	36% [a]	35%	35%
$100,000 - 199,999	30% [b]	31%	28%
$200,000 or more	28% [b]	27%	27%
Parental Education			
Graduate/Professional Degree	32%	31%	31%
Bachelor's Degree	31%	33%	32%
No College Degree	35%	39%	37%

a,b Percentages within subcolumn noted by distinct letters differ signifcantly ($p<0.05$) by z-test.

*In 2010-2011 and 2011-2012, includes respondents indicating American Indian and Alaskan Native, Native Hawaiian and Pacific Islander or multiple races. In 2009-2010, category also includes Hispanics and Blacks.

Table 35: Plans to Practice in Underserved/Shortage Area by Type

	% Students		
	2011-2012	2010-2011	2009-2010
Inner-city	39%	38%	N/A
Rural	52%	52%	N/A
Other	9%	10%	N/A
Total	100%	100%	N/A

Table 36: Percentage of Students Who Plan to Practice in Inner-city Underserved/Shortage Areas

	% Students		
Gender	2011-2012	2010-2011	2009-2010
Male	35% [a]	33%	N/A
Female	42% [b]	42%	N/A
Race/Ethnicity			
White	30% [a]	29%	N/A
Asian	54% [b]	67%	N/A
Hispanic	60% [bc]	49%	N/A
Black	80% [c]	67%	N/A
All Others*	19% [a]	32%	N/A
Marital Status			
Married/Cohabiting	30% [a]	28%	N/A
Single	46% [b]	47%	N/A
Financial Status			
Independent	37% [a]	35%	N/A
Dependent	50% [b]	50%	N/A
Parental Income			
$49,999 and less	46% [a]	37%	N/A
$50,000 - $99,999	34% [b]	38%	N/A
$100,000 - 199,999	39% [ab]	34%	N/A
$200,000 or more	40% [ab]	45%	N/A
Parental Education			
Graduate/Professional Degree	39%	40%	N/A
Bachelor's Degree	39%	35%	N/A
No College Degree	38%	37%	N/A

a,b,c Percentages within subcolumn noted by distinct letters differ signifcantly ($p<0.05$) by z-test.

*In 2010-2011 and 2011-2012, includes respondents indicating American Indian and Alaskan Native, Native Hawaiian and Pacific Islander or multiple races.

Table 37: Percentage of Students Who Plan to Practice in Rural Underserved/Shortage Areas

	% Students		
Gender	2011-2012	2010-2011	2009-2010
Male	57% [a]	58%	N/A
Female	49% [b]	48%	N/A
Race/Ethnicity			
White	61% [a]	61%	N/A
Asian	40% [b]	24%	N/A
Hispanic	35% [bc]	41%	N/A
Black	17% [c]	25%	N/A
All Others*	67% [a]	46%	N/A
Marital Status			
Married/Cohabiting	63% [a]	61%	N/A
Single	44% [b]	43%	N/A
Financial Status			
Independent	54% [a]	55%	N/A
Dependent	44% [b]	36%	N/A
Parental Income			
$49,999 and less	45% [a]	57%	N/A
$50,000 - $99,999	58% [b]	52%	N/A
$100,000 - 199,999	50% [ab]	53%	N/A
$200,000 or more	52% [ab]	44%	N/A
Parental Education			
Graduate/Professional Degree	52%	50%	N/A
Bachelor's Degree	51%	55%	N/A
No College Degree	55%	53%	N/A

a,b,c Percentages within subcolumn noted by distinct letters differ signifcantly ($p<0.05$) by z-test.
*In 2010-2011 and 2011-2012, includes respondents indicating American Indian and Alaskan Native, Native Hawaiian and Pacific Islander or multiple races.

Table 38: Planned Specialization, Graduating Seniors

		% Students		
		2011-2012	2010-2011	2009-2010
Family Practice	Primary Care Specialties	21%	20%	20%
Internal Medicine, General		7%	7%	8%
Pediatrics, General		4%	5%	4%
Emergency Medicine		11%	12%	12%
Internal Medicine, Subspecialty		14%	11%	12%
Orthopedic Surgery		3%	3%	3%
Pediatrics, Subspecialties		5%	5%	4%
Surgery Subspecialties		2%	2%	2%
OB/GYN and Subspecialties		5%	5%	5%
Anesthesiology		5%	5%	5%
Surgery, General		3%	3%	3%
Sports Medicine		1%	1%	2%
Dermatology		1%	1%	2%
Neurology and Subspecialties		1%	2%	2%
Radiology and Subspecialties		2%	2%	3%
Psychiatry and Subspecialties		4%	4%	5%
Physical Medicine & Rehabilitation Med.		3%	3%	3%
Ophthalmology		1%	1%	1%
Pathology and Subspecialties		1%	1%	1%
Geriatrics		0%	0%	0%
Plastic Surgery/Reconstructive Surgery		0%	0%	1%
Preventive Medicine and Subspecialties		0%	0%	0%
Thoracic Surgery		0%	0%	0%
Osteopathic Manipulative Medicine		0%	1%	0%
Otolaryngology		0%	1%	1%
Allergy and Immunology		0%	0%	0%
Urology/Urological Surgery		1%	0%	1%
Critical Care		1%	1%	1%
Medical Genetics		0%	0%	0%
Vascular Surgery		0%	0%	0%
Nuclear Medicine		0%	0%	0%
Proctology		0%	0%	0%
Colon Rectal Surgery		0%	0%	0%
Undecided or Indefinite		1%	2%	1%
Total		100%	100%	100%

Table 39: Primary Care Plans, Graduating Seniors

	% Students		
	2011-2012	2010-2011	2009-2010
Primary Care	32%	32%	31%
Non-Primary Care	67%	66%	68%
Undecided	1%	2%	1%
Total	100%	100%	100%

Table 40: Percentage of Graduating Seniors Who Plan to Practice in Primary Care Specialties

	% Students		
Gender	2011-2012	2010-2011	2009-2010
Male	26% [a]	27%	26%
Female	39% [b]	38%	37%
Ethnicity			
White	32%	32%	32%
Asian	31%	31%	31%
Hispanic	43%	35%	30%
Black	37%	42%	34%
All Others*	24%	36%	27%
Marital Status			
Married/Cohabiting	36% [a]	34%	37%
Single	29% [b]	31%	27%
Financial Status			
Independent	34% [a]	33%	32%
Dependent	28% [b]	28%	30%
Parental Income			
$49,999 or less	36% [a]	40%	39%
$50,000 - $99,999	34% [a]	35%	34%
$100,000 - 199,999	30% [b]	31%	29%
$200,000 or more	26% [b]	26%	22%
Parental Education			
Graduate/Professional Degree	30% [a]	31%	29%
Bachelor's Degree	32% [a]	33%	37%
No College Degree	37% [b]	35%	33%
Parental Profession			
DO/MD†	26%	26%	27%
Non-DO/MD	30%	33%	32%

a,b Percentages within subcolumn noted by distinct letters differ signifcantly ($p<0.05$) by z-test.
*In 2010-2011 and 2011-2012, includes respondents indicating American Indian and Alaskan Native, Native Hawaiian and Pacific Islander or multiple races. In 2009-2010, category also includes Hispanics and Blacks.
†Category includes respondents who indicated a DO/MD father and/or mother.

Table 41: Planned Specialty Choice Decision Factors

	Mean Influence Rating*		
	2011-2012	2010-2011	2009-2010
Like Dealing with People	3.0	3.0	3.0
Intellectual Content of the Specialty	3.2	3.2	3.1
Skills/Abilities	2.9	2.9	2.9
Lifestyle	2.7	2.7	2.7
Like the Emphasis on Technical Skills	2.5	2.4	2.4
Role Models	2.8	2.7	2.7
Desire for Independence	2.4	2.4	2.4
Previous Experience	2.2	2.1	2.2
Academic Environment	2.4	2.4	2.4
Prestige/Income Potential	1.8	1.7	1.7
Debt Level	1.6	1.5	1.7
Opportunity for Research/Creativity	1.7	1.6	1.6
Peer Influence	1.9	1.7	1.8

*Scale from 0 to 4; 0 being "No Influence," 4 being "Major Influence."

Table A1: 2011-2012 Graduating Seniors Response Rate to the AACOM Graduating Seniors Survey

Response Rate Range	Number of COMs
90% or more	12
75% - 89%	5
50% - 74%	5
25% - 49%	6
Less than 25%	0

Mean response rate for all COMs: 75%

Table A2: 2011-2012 Response Rate to Debt, Scholarship and Specialty Survey Questions

	Response Rate
Debt	
Total Osteopathic Medical Education Loans	90%
Unsubsidized Stafford or FFELP	88%
Subsidized Stafford or FFELP	89%
Graduate PLUS	82%
Perkins	67%
Loans for Disadvantaged Students (LDS)	61%
Primary Care Loan (PCL)	61%
Other State-Issued Loans	61%
Osteopathic Association Loans	60%
Alternative Loans	61%
Other	62%
Family Loans to be Repaid by Student	98%
Non-Educational Debt	49%
At Entry, Loans Owing for Undergraduate Education	4%
At Entry, Loans Owing for Post-Bac Education	93%
Scholarships/Grants	
Total Scholarships/Grants	75%
National Health Service Corps Scholarship	65%
Armed Forces Health Professions Scholarship	67%
State Government Scholarship/Grant	66%
Award from Osteopathic Medical School	69%
Tuition Waiver	65%
Osteopathic Association	66%
Other Sources	66%
Specialty	
Specialty Choice	100%