



American Association of Colleges of
Osteopathic Medicine



2024-2025 Academic Year **Graduating Seniors Survey**

Summary Report



Prepared by the Research Department
American Association of Colleges of Osteopathic Medicine

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The AACOM Graduating Seniors Survey captures graduating osteopathic medical students' experiences, educational debt, satisfaction with training, and post-graduate plans. Administered annually, the survey provides national-level insights into the outcomes of osteopathic medical education and informs AACOM member schools, policymakers, and the public.

Administered using Qualtrics, the survey received responses from 5,045 expected 2025 graduates, representing approximately 57 percent of the anticipated graduating class nationwide. Aggregate results are available publicly, while participating colleges of osteopathic medicine may access institution-specific dashboards through AACOM Analytics.

**Note: This report was generated directly from a dashboard, and the layout reflects its dashboard format. AACOM is currently developing a public-facing version of the dashboard to improve usability and the overall user experience.*

Table 1: Mean Osteopathic Medical Education Debt

	All Students			
	Mean	Median	%	#
Total Loans for Osteopathic Medical Education	\$286,812	\$300,000	88%	3,213
Unsubsidized Stafford (FFELP or Direct)	\$163,334	\$189,083	83%	2,715
Subsidized Stafford (FFELP or Direct)	\$33,272	\$23,027	42%	782
Graduate PLUS	\$161,130	\$150,000	80%	2,463
Perkins	\$16,057	\$5,000	4%	64
Loans for Disadvantaged Students (LDS)	\$27,944	\$15,000	2%	27
Primary Care Loan (PCL)	\$107,837	\$56,500	2%	28
Other State Issued Loans	\$95,984	\$36,082	3%	36
Osteopathic Association Loans	\$5,014	\$8	1%	10
Alternative Loans	\$182,759	\$193,466	4%	60
Other	\$197,641	\$192,000	12%	186

Table 2: Mean Non-Osteopathic Medical Education Debt

	All Students			
	Mean	Median	%	#
At Entry, Loans Owing for Undergraduate Education	\$52,336	\$27,550	40%	1,849
At Entry, Loans Owing for Post-Bac Education	\$122,391	\$60,000	22%	996
Reported Family Loans to be Repaid by Student	\$99,894	\$50,000	3%	113
Reported Non-Educational Debt	\$31,122	\$20,000	35%	1,464

Table 3 : Osteopathic Education Debt Consolidation & Repayment

	All Students	
	%	#
Will Consolidate Debt	43%	2,075
Will Not Consolidate Debt	24%	1,164
Undecided	32%	1,537
Mean Years to Repay Debt	13	4,259

Table 4 : Osteopathic Education Debt Loan Forgiveness Participation

	All Students	
	%	#
Will Participate	68%	3,218
Will Not Participate	32%	1,542

Table 5: Graduating Seniors Planning Loan Forgiveness Participation Program

	All Students	
	%	#
Department of Education’s Public Service Loan Forgiveness	78%	2,519
Hospital Program	33%	1,066
State Loan Forgiveness Program	22%	720
National Health Service Corps	5%	165
National Institutes of Health Loan Repayment Program	4%	122
Other Loan Forgiveness Programs	5%	160
Armed Services (Navy, Army, Air Force)	2%	66
Indian Health Service Loan Repayment Program	1%	43
Health Resources and Services Administration Faculty Loan Repayme..	3%	96

Table 6a: Net Income One Year

	All Students		
	Mean Income	Median Income	Mode Income
One Year After Residency	\$264,963	\$260,000	\$300,000
Five Years After Residency	\$369,817	\$350,000	\$300,000
Ten Years After Residency	\$450,638	\$400,000	\$400,000

Table 7: Mean Osteopathic Medical Education Scholarships/Grants

	All Students			
	Mean	Median	%	#
Total Scholarships/Grants	\$84,723	\$16,850	56%	1,166
National Health Service Corps (NHSC) Scholarship	\$244,405	\$240,000	5%	65
Armed Forces Health Professions (AFHP) Scholarship	\$291,645	\$300,000	9%	127
Post-9/11 GI Bill	\$107,526	\$80,000	3%	43
Indian Health Service Scholarship Program	\$100,033	\$100,000	0%	3
Department of Defense Tuition Assistance Program	\$18,367	\$10,000	0%	3
Scholarships for Disadvantaged Students	\$20,719	\$6,000	4%	51
State Government Scholarship/Grant	\$25,804	\$10,000	7%	86
Award from Osteopathic School or its Parent University	\$19,862	\$6,400	33%	516
Tuition Waiver	\$58,610	\$55,004	4%	45
Osteopathic Association	\$10,105	\$4,000	7%	93
Other Sources	\$29,082	\$7,250	17%	228
Veterans Affairs Health Professionals Scholarship Pro..	\$232,120	\$250,000	5%	71
Western Interstate Commission for Higher Education (..	\$44,038	\$40,050	0%	4
Diversity/Minority Scholarship	\$10,959	\$5,000	4%	45

Table 8: Sources of Funds for Osteopathic Medical Education

	All Students
Loans	73%
Parents	13%
Scholarship/Grants	8%
Savings	2%
Other Source	1%
Earnings	1%
Relatives	1%

Chart 1: Percentage of Students with Expected Debt

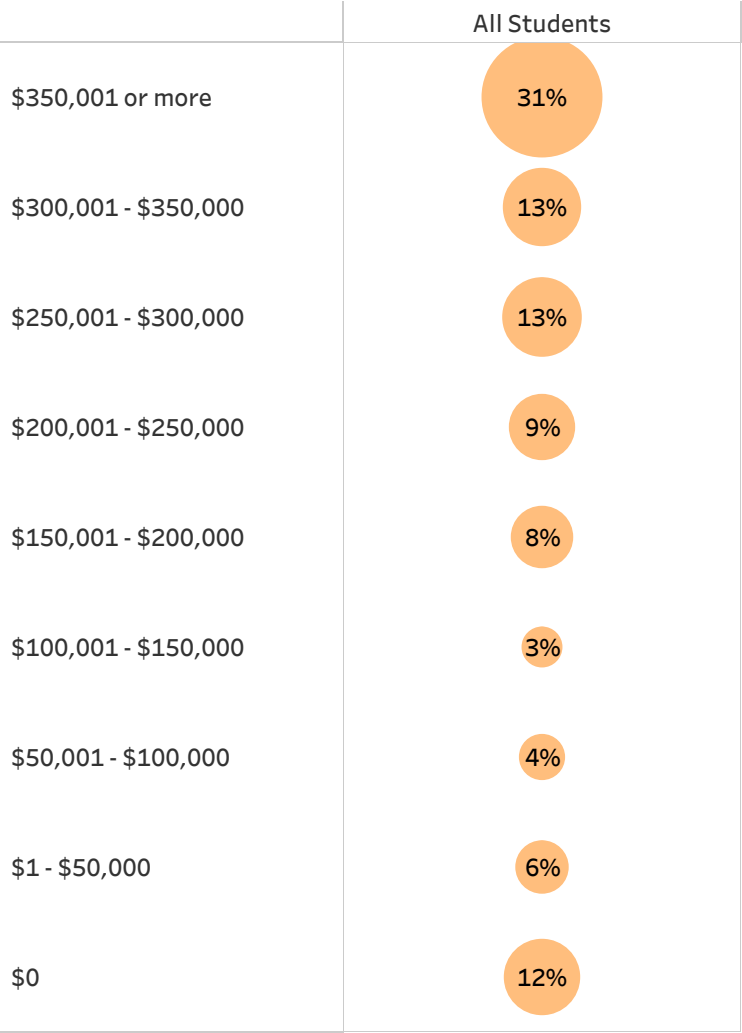


Chart 2: Percentage of Students with Expected Scholarship

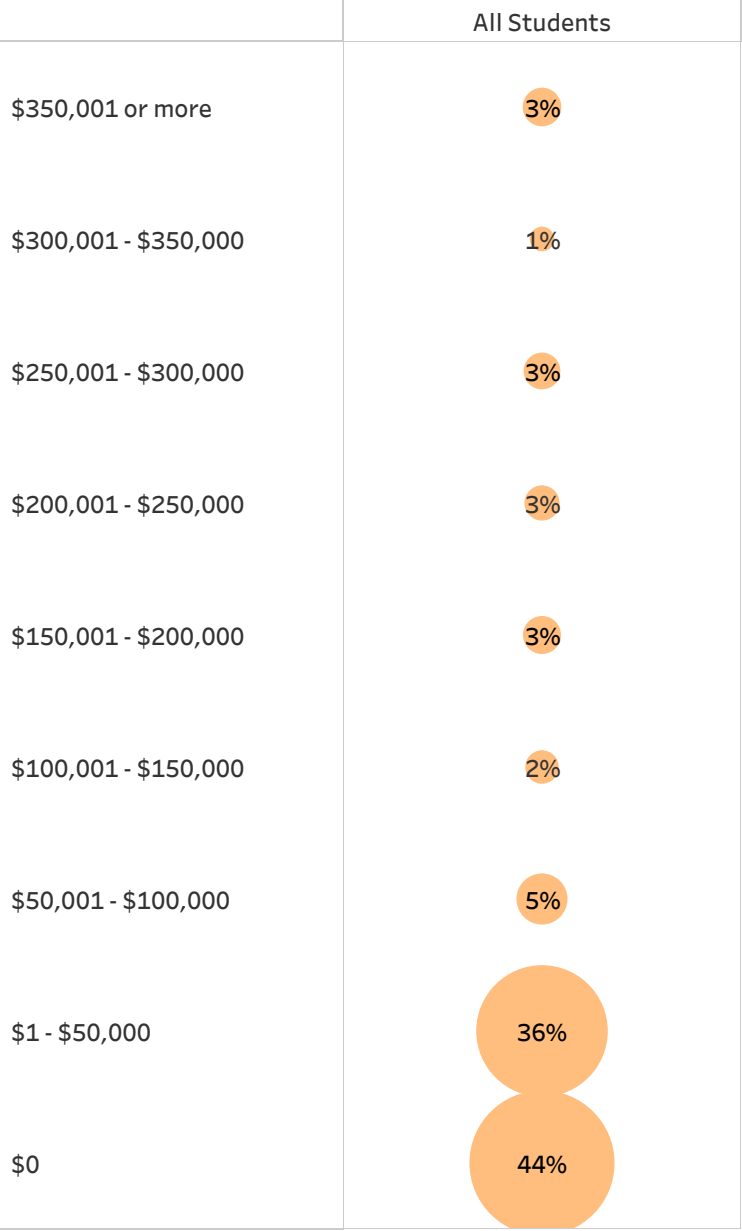


Table 9: Evaluation of Quality of Osteopathic Medical Training

	All Students	
	%	#
Very Satisfied	21%	1,050
Satisfied	54%	2,680
Neither Satisfied Nor Dissatisfied	16%	781
Dissatisfied	7%	347
Very Dissatisfied	3%	127
Mean Satisfaction Rating	3.8	4,985

Table 10: Satisfaction Level with Osteopathic Medicine Career Selection

Table 11: If Starting Over, Would Prefer to Enroll in:

	All Students	
	%	#
The osteopathic medical school from which you are about to graduate	50%	2,473
Another osteopathic medical school	9%	438
An allopathic medical school	36%	1,809
Would not have gone to medical school at all	5%	252

Table 12: Diversity Valued by Osteopathic Medical School

Table 13a: Satisfaction with Overall Campus/Climate Environment
All Graduating Seniors 2025

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

	Strongly Agree	Agree	Neither Agree Nor Disa..	Disagree	Strongly Disagree
I was able to openly express all my identities within my college of osteopathic medicine.	23%	42%	18%	8%	4%
I was able to connect with someone I considered a trusted friend or at least one person who helped me with struggles	49%	37%	9%	2%	1%
My college of osteopathic medicine was committed to creating a campus climate that respects individuals and groups with various cultural differences.	28%	44%	18%	5%	4%
My peers and I were afforded equitable opportunities for success under the same set of standards.	28%	45%	16%	5%	4%
My college of osteopathic medicine had a safe and inclusive environment.	30%	45%	17%	4%	3%
My college of osteopathic medicine had a visible culture that supported me while I was on campus.	25%	41%	22%	6%	4%
My college of osteopathic medicine had a visible culture that supported me while I was off campus.	20%	34%	28%	10%	6%
I felt safe to raise concerns about discrimination at my college of osteopathic medicine.	20%	34%	24%	9%	5%
There was process in place that led to appropriate outcomes when I raised concerns about discrimination at my college of osteopathic medicine.	15%	26%	27%	6%	5%
My college of osteopathic medicine valued and respected the unique attributes I brought to the learning environment.	26%	43%	22%	4%	3%
During my clinical years, I continued to receive support from my college of osteopathic medicine.	17%	39%	23%	13%	7%
My college of osteopathic medicine promoted a culture of civility.	24%	48%	19%	4%	3%

Table 14a: Evaluation of First Two Years of Medical Education
All Graduating Seniors 2025

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

	Strongly Agree	Agree	Neither Agree Nor Disa..	Disagree	Strongly Disagree
Basic & clinical science course objectives were made clear to students	37%	49%	9%	3%	1%
Basic science courses were sufficiently integrated with each other	32%	50%	12%	5%	2%
Basic science courses were sufficiently integrated with clinical training	27%	47%	15%	8%	3%
Course objectives & examination content matched closely	28%	49%	14%	7%	2%
Course work adequately prepared students for clerkships	23%	50%	16%	7%	3%
The first two years of medical school were well organized	21%	45%	19%	10%	5%
Students were provided with timely feedback on performance	25%	50%	16%	7%	3%
There was adequate exposure to patient care during the first two years	29%	45%	12%	9%	4%
Osteopathic principles were adequately integrated into course work	37%	50%	11%	2%	1%
An appropriate amount of training was provided in OMT	42%	44%	10%	3%	2%
There was adequate preparation for COMLEX Level I	28%	42%	15%	10%	5%

Table 15a: Evaluation of Time Devoted to Various Areas of Instruction
All Graduating Seniors 2025

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

	Appropriate	Inadequate	Excessive
Basic medical science	90%	4%	6%
Behavioral science	87%	11%	1%
Biostatistics	74%	23%	3%
Bioterrorism	59%	39%	1%
Care of ambulatory patients	88%	9%	3%
Care of elderly (geriatrics)	79%	17%	4%
Care of hospitalized patients	85%	14%	1%
Care of patients from diverse ethnic groups	73%	24%	3%
Care of patients from LGBTQI+ population	63%	32%	6%
Care of patients with HIV/AIDS	73%	25%	1%
Clinical decision-making	90%	9%	1%
Clinical pharmacology	90%	7%	3%
Clinical science	94%	5%	1%
Cost-effective medical practice	56%	43%	1%
Diagnostic skills	89%	10%	1%
Drug & alcohol abuse	89%	11%	1%
Family/domestic violence	74%	25%	1%
Genetics	86%	11%	3%
Health promotion & disease prevention	90%	9%	1%
Human sexuality	73%	24%	3%
Independent learning & self-evaluation	85%	11%	5%
Infection control/health care setting	90%	10%	1%
Infectious disease prevention	91%	8%	1%
Integrative medicine	81%	18%	1%
Legal medicine	58%	41%	1%
Literature analysis skill	68%	31%	1%
Medical care cost control	58%	41%	1%
Medical ethics	85%	13%	2%
Medical record-keeping	69%	30%	1%
Medical socioeconomics	74%	25%	1%
Neuromusculoskeletal med./OMT	81%	3%	16%
Nutrition	65%	33%	2%
Pain management	72%	27%	1%
Patient education	89%	11%	1%
Patient follow-up	87%	12%	1%
Patient interviewing skills	92%	4%	4%
Physician-patient relationship	94%	4%	2%
Practice management	61%	38%	0%
Primary care	88%	4%	8%
Public health & community medicine	86%	12%	2%
Rehabilitation	70%	29%	1%
Research techniques	66%	33%	1%
Role of medicine in community	87%	12%	1%
Screen for diseases	93%	6%	1%
Teamwork with other health professionals	88%	6%	5%
Therapeutic management	90%	9%	1%
Use of computers	82%	18%	1%
Utilization review & quality assurance	77%	22%	1%

Table 16: Percentage of Time Arranged/Set by COM for Required Clerkships

	All Students	
	%	#
10% or fewer	3%	136
11% - 40%	3%	170
41% - 60%	12%	607
61% - 80%	15%	714
81% - 100%	67%	3,270

Table 17: Percentage of Time Arranged/Set by COM for Elective/Selective Clerkships

	All Students	
	%	#
10% or fewer	40%	1,940
11% - 40%	17%	843
41% - 60%	16%	759
61% - 80%	11%	536
81% - 100%	16%	799

Table 18: Advance Notification of Required Clerkship Location

	All Students	
	%	#
Less than 1 month	10%	470
1 to 3 months	32%	1,567
3 months or more	58%	2,860

Table 19: Advance Notification of Elective Clerkship Location

	All Students	
	%	#
Less than 1 month	11%	557
1 to 3 months	58%	2,817
3 months or more	31%	1,505

Table 20a: Evaluation of Clinical Education - Required Clerkships
All Graduating Seniors 2025

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

	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree
Clear goals and objectives were set	27%	53%	13%	6%	1%
I was able to design my own goals and objectives	21%	44%	20%	11%	3%
Clerkships were well-organized	20%	44%	20%	11%	4%
Rounds were conducted as scheduled	24%	53%	17%	5%	1%
Timely feedback was provided on performance	22%	50%	18%	8%	2%
There was too large a role by residents in teaching and evaluation	26%	50%	15%	6%	3%
There was appropriate diversity of patients and their health issues	33%	53%	10%	3%	1%
There was an appropriate number of inpatient experiences	33%	49%	9%	6%	2%
Each clerkship had an osteopathic orientation	18%	40%	19%	18%	5%
Osteopathic principles & practice (OPP) were well-integrated in each clerkship	26%	50%	14%	7%	3%
There was appropriate technology usage for the situation	30%	57%	11%	2%	1%
I was able to work on a personal basis with patients	39%	52%	8%	1%	0%
The attending modeled excellent patient relationship skills	33%	53%	12%	2%	1%
Support staff was friendly and supportive to students	32%	53%	12%	2%	1%
Coverage hours were set and finished on time	24%	50%	17%	7%	2%
I was asked relevant and pertinent questions on patient diagnosis, treatment options, management, and follow-up care	32%	55%	10%	2%	0%
I felt free to ask questions	34%	52%	11%	2%	0%
The attending seemed interested in my opinions	26%	50%	18%	5%	1%
Personal concerns were addressed by the attending while on rotation	26%	50%	19%	4%	1%
I was treated with respect	30%	54%	14%	2%	1%
I was able to discuss progress on rotation with the attending	29%	54%	13%	3%	1%
The attending critically evaluated me during rotation	28%	54%	13%	3%	1%
I was able to discuss the final rotation evaluation with the attending	23%	44%	15%	12%	4%
The attending based the evaluation on direct observation	27%	54%	15%	3%	1%
I was able to meet and discuss areas of concern with the attending outside of the clinical setting	21%	41%	23%	13%	3%
I lived a reasonable distance from rotation sites	26%	49%	13%	8%	4%
The rotations prepared me for examinations	21%	49%	18%	8%	3%
There was adequate preparation for COMLEX Level 2-CE	23%	43%	15%	13%	6%
Adequate assessment of patient encounters	23%	51%	16%	6%	3%
Testing was provided at end of each core rotation	40%	50%	8%	1%	1%

Table 21a: Evaluation of Clinical Education - Selective/Elective Clerkships
All Graduating Seniors 2025

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

	Strongly Agree	Agree	Neither Agree Nor Disagr..	Disagree	Strongly Disagree
Clear goals and objectives were set	28%	53%	13%	5%	1%
I was able to design my own goals and objectives	28%	51%	15%	5%	1%
Clerkships were well-organized	26%	51%	15%	6%	2%
Rounds were conducted as scheduled	28%	55%	14%	3%	1%
Timely feedback was provided on performance	28%	54%	13%	4%	1%
There was too large a role by residents in teaching and evaluation	18%	33%	21%	23%	5%
There was appropriate diversity of patients and their health issues	33%	54%	10%	1%	0%
There was an appropriate number of inpatient experiences	35%	51%	11%	3%	1%
Each clerkship had an osteopathic orientation	21%	43%	19%	12%	5%
Osteopathic principles & practice (OPP) were well-integrated in each clerkship	23%	43%	19%	10%	5%
There was appropriate technology usage for the situation	32%	55%	11%	2%	1%
I was able to work on a personal basis with patients	39%	51%	9%	1%	0%
The attending modeled excellent patient relationship skills	34%	54%	10%	1%	0%
Support staff was friendly and supportive to students	35%	53%	11%	1%	0%
Coverage hours were set and finished on time	28%	52%	14%	5%	1%
I was asked relevant and pertinent questions on patient diagnosis, treatment options, management, and follow-up care	33%	56%	9%	1%	0%
I felt free to ask questions	35%	53%	10%	1%	1%
The attending seemed interested in my opinions	31%	52%	14%	3%	1%
Personal concerns were addressed by the attending while on rotation	29%	51%	16%	3%	1%
I was treated with respect	34%	54%	11%	1%	1%
I was able to discuss progress on rotation with the attending	31%	54%	13%	2%	1%
The attending critically evaluated me during rotation	30%	55%	12%	2%	1%
I was able to discuss the final rotation evaluation with the attending	25%	47%	15%	9%	3%
The attending based the evaluation on direct observation	30%	54%	13%	2%	1%
I was able to meet and discuss areas of concern with the attending outside of the clinical setting	25%	46%	18%	8%	2%
I lived a reasonable distance from rotation sites	28%	51%	13%	5%	3%
There was adequate preparation for COMLEX Level 2-CE	24%	45%	18%	9%	5%

Survey Year
2025

Note that due to changes in the survey on a yearly basis some tables may not display properly from years other than the most recent.

Table 22: Graduating Seniors Who Applied to Elective MD Rotations through VSAS
(Only Included in Survey Years before 2021)

Table 23: Applications to Elective MD Rotations through VSAS
(Only Included in Survey Years before 2021)

Table 24a: Evaluation of Confidence Level to Perform Certain Examinations
All Graduating Seniors 2025

Beige highlighted categories are those where $\leq 70\%$ are "Completely Confident" + "Mostly Confident."
Teal highlighted categories are those where $\geq 90\%$ are "Completely Confident" + "Mostly Confident."

	Completely Confident	Mostly Confident	Fairly Confident	Not At All Confident	No Opportunity To Perfo..
General adult examination	58%	32%	9%	1%	0%
General pediatric examination	35%	39%	22%	4%	0%
Well-baby examination	26%	32%	30%	11%	1%
Breast and pelvic examination	22%	33%	30%	12%	2%
Prostate and testicular examination	15%	26%	34%	19%	6%
Osteopathic structural examination	38%	36%	21%	5%	1%
Sports participation examination	31%	35%	24%	6%	4%

Table 25a: Evaluation of Various Academic Services
All Graduating Seniors 2025

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

	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree
Academic counseling	14%	40%	26%	15%	6%
Accessibility to administration	14%	41%	27%	13%	5%
Awareness of student problems by administration	12%	34%	27%	19%	9%
Career counseling	13%	34%	29%	17%	8%
Computer resource center	19%	45%	27%	6%	2%
Disability insurance	9%	24%	59%	5%	3%
Electronic communication (e-mail, Internet/Intranet)	18%	53%	22%	5%	2%
Faculty mentoring	15%	38%	25%	16%	6%
Financial aid administration services	17%	43%	29%	8%	3%
Library	21%	44%	25%	6%	3%
Participation of students on key medical school committees	16%	47%	31%	5%	2%
Personal counseling	15%	35%	37%	9%	4%
Student health insurance	10%	30%	34%	15%	10%
Student health services	11%	35%	37%	11%	6%
Student relaxation space	11%	34%	33%	15%	6%
Student study space	16%	43%	22%	14%	6%
Tutorial help	12%	35%	42%	7%	3%

Table 26a: Evaluation of Training in Osteopathic Manipulative Treatment, Principles, and Practice
All Graduating Seniors 2025

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

	Strongly Agree	Agree	Neither Agree Nor Disagr..	Disagree	Strongly Disagree
Well prepared to diagnose structural problems	30%	53%	13%	3%	1%
Well prepared to treat structural problems	28%	52%	16%	3%	1%
Well prepared to document findings in a structural examination	30%	51%	15%	3%	1%
Had opportunity to practice OPP during first two years in medical school	47%	42%	9%	1%	1%
Had opportunity to practice OPP during in-hospital rotations	16%	34%	21%	22%	7%
Had opportunity to practice OPP during ambulatory primary care rotations	22%	51%	15%	9%	3%
Had opportunity to practice OPP during ambulatory non-primary care rotations	16%	33%	22%	22%	7%
Had osteopathic physician role models during the first two years in medical school	33%	48%	13%	4%	2%
Had osteopathic physician role models during required in-hospital rotations	20%	41%	19%	16%	4%
Had osteopathic physician role models during ambulatory non-primary care rotations	20%	42%	20%	15%	4%
Had osteopathic physician role models during ambulatory primary care rotations	24%	49%	15%	9%	3%
Had osteopathic physician role models during selectives/electives	22%	46%	18%	11%	4%

Table 27a: Evaluation of Training in Geriatric Care
All Graduating Seniors 2025

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

Table 28 a: Graduating Seniors Who Applied To VSLO Rotations

	All Students		
	%	#	
Yes	91%	4,607	
No, please explain why yo..	6%	307	
	3%	131	

Table 28 b: Applications to VSLO Rotations (Inside)

Table 28 c: Graduating Seniors Rotation Sites Accepted through VSLO Included in Rank Order List

	All Students	
	%	#
Yes	61%	3,089
No	27%	1,378
	11%	578
Grand Total	100%	5,045

Table 28 d: Graduating Seniors Rotation Sites Accepted through VSLO Included in Top Three Position on Rank Order List

	All Students	
	%	#
Yes	46%	2,310
No	15%	770
	39%	1,965
Grand Total	100%	5,045

Table 28 e: Graduating Seniors Match to a Program at Rotation Sites Arranged through VSLO

	All Students	
	%	#
Yes	21%	1,054
No	68%	3,418
	11%	573
Grand Total	100%	5,045

Table 28 f: Graduating Seniors Who Applied To Visiting Student Rotations Outside of VSLO

	All Students	
	%	#
Yes	60%	3,029
No	29%	1,480
	11%	536
Grand Total	100%	5,045

Table 28 g: Applications to VSLO Rotations Outside

	All Students
Number of Applications Outside VSLO	2,922
Number of Accepted Outside VSLO	2,910
Number of Rotations Accepted/Attended Outside VSLO	2,890
Number of Rotations Interviewed Outside VSLO	2,510
Average Applications Outside VSLO	3.8
Average Accepted Outside VSLO	2.6
Mean Number of Rotations Accepted/Attended Outside	2.5
Average Rotations Interviewed Outside VSLO	1.8

Table 28 h: Rotation Sites Accepted Outside of VSLO included in Rank Order List

	All Students	
	%	#
Yes	49%	2,492
No	10%	504
	41%	2,049
Grand Total	100%	5,045

Table 28 i: Rotation Sites Accepted Outside of VSLO included in Top Three Position of Rank Order List

	All Students	
	%	#
Yes	32%	1,616
No	17%	867
	51%	2,562
Grand Total	100%	5,045

Table 28 j: Graduating Seniors Match to a Program at Rotation Sites Arranged outside VSLO

	All Students	
	%	#
Yes	18%	928
No	41%	2,072
	41%	2,045
Grand Total	100%	5,045

Survey Year
2025

Note that due to changes in the survey on a yearly basis some tables may not display properly from years other than the most recent.

Table 28 l:USMLE Score
Provided for VSLO
(Only Included in Survey Year 2022)

All Students	
%	#

Table 28 l:USMLE Score Provided for VSLO
(Only Included in Survey Year 2022)

Table 28 m : VSLO Not
Permitted Due to No USMLE
Score
(Only Included in Survey Year 2022)

All Students	
%	#

Table 28 m : VSLO Not Permitted Due to No USMLE Score
(Only Included in Survey Year 2022)

Table 28 n : Higher Fee Paid
for VSLO than MD students
(Only Included in Survey Year 2022)

All Students	
%	#

Table 28 o : Not Premitted to
VSLO Rotation Due to DO
Degree
(Only Included in Survey Year 2022)

All Students	
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Table 29a: Evaluation of Confidence Level to Perform Certain Activities
All Graduating Seniors 2025

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

	Completely Confident	Mostly Confident	Fairly Cofident	Not at all Confident	No Opportunity to Perform
Perform an accurate, complete, and focused history or physical exam in a prioritized, organized manner without supervision and with respect for the patient.	48%	39%	12%	1%	0%
Integrate patient data to formulate an assessment and develop a list of potential diagnoses that can be prioritized, leading to a selection of a working diagnosis.	35%	47%	17%	1%	0%
Select and interpret common diagnostic and screening tests using evidence-based and cost-effective principles when approaching a patient in any setting.	32%	48%	19%	2%	0%
Write safe and indicated orders and prescribe therapies or interventions in a variety of settings (e.g. inpatient, ambulatory, urgent or emergent care) without direct supervision.	23%	39%	28%	8%	2%
Provide accurate, focused, and context-specific documentation of a clinical encounter in either written or electronic formats.	38%	44%	16%	2%	0%
Present a concise oral summary of a patient encounter to achieve a shared understanding of the patient’s condition.	37%	44%	18%	1%	0%
Identify key clinical questions in caring for patients, identify information resources, and retrieve information and evidence that will be used to address those questions.	34%	49%	16%	1%	0%
Perform safe and effective transitions of responsibility for patient care from one health care team or practitioner to another.	30%	44%	21%	3%	2%
Participate as a contributing and integrated member of an interprofessional team and fully embrace the value of teamwork in patient care.	42%	43%	14%	1%	0%
Promptly recognize a patient who requires urgent or emergent care, initiate evaluation and treatment, and seek help.	35%	47%	17%	2%	0%
Obtain consent for tests and/or procedures for which I know the indications, contraindications, alternatives, risks and benefits.	32%	44%	20%	3%	1%
Understand systems, identify system failures, and intervene in systems to improve quality and safety in health care.	26%	44%	23%	4%	2%

Table 30a: Evaluation of Confidence Level to Perform Certain Skills Without Direct Supervision
All Graduating Seniors 2025

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

	Completely Confident	Mostly Confident	Fairly Cofident	Not at all Confident	No Opportunity to Perform
Intravenous (IV) line insertion	11%	17%	28%	30%	13%
Phlebotomy	12%	17%	24%	31%	16%
Bag-valve-mask (BVM) ventilation	28%	31%	26%	9%	6%
Cardiopulmonary resuscitation (CPR)	27%	33%	27%	8%	6%
Osteopathic manipulative treatment	31%	33%	27%	8%	2%
Simple laceration or excision repair	38%	29%	21%	10%	2%

Table 31: Evaluation of School’s Involvement in Clerkship Years

	All Students	
	%	#
Adequate involvement	54%	2,666
Some, but inadequate involvement	26%	1,266
Outstanding involvement	11%	555
Not involved	6%	297
Excessive involvement	3%	130

Table 32: Type of School Involvement During Clerkship Years

	All Students	
	%	#
E-Mail	100%	3,930
Distance Learning	100%	1,772
COMLEX Level 2-CE Preparation	100%	2,801
Newsletter	100%	1,117
Faculty Visits	100%	1,110
Virtual Platforms	100%	2,891
Learning Management System	100%	2,890
Clinical Skills Assessment	100%	2,053

Table 33: Percentage of Time Devoted to Various Activities During Clerkship Years

	All Students	
Inpatient Care, Including Reading X-ray Films and Laboratory Work	33%	
Outpatient Care	27%	

Table 34: COMLEX-USA Examinations

	All Students	
	%	#
Level 1 - Passed 1st Attempt	94%	4,667
Level 2-PE - Passed 1st Attempt		
Level 2-CE - Passed 1st Attempt	93%	4,586

Table 34a: USMLE Examinations

	All Students	
	%	#
Step 1 - Attempted Examination	77%	2,423
Step 1 - Passed 1st Attempt	94%	2,274
Step 2 CK - Attempted Examination	89%	2,817
Step 2 CK - Passed 1st Attempt	98%	2,755
Step 2 CS - Attempted Examination		0
Step 2 CS - Passed 1st Attempt		0
Step 3 - Planning to Attempt Examination	31%	969

Table 35: Interprofessional Medical Education Participation

	All Students	
	%	#
Did Participate	85%	4,205
Did Not Participate	11%	521

Table 36: Types of Interprofessional Medical Education

	All Students	
	%	#
Preclinical Education	90%	3,958
Pharmacy	73%	3,204
Nursing	71%	3,149
Clinical Education	70%	3,075
Physician Assistant	55%	2,444
MD Medicine	43%	1,891
Physical Therapy	46%	2,043
Social Work	41%	1,798
Occupational Therapy	33%	1,477
Dentistry	21%	906
Podiatry	20%	866
Psychology	20%	904
Public Health	17%	756
Veterinary Medicine	6%	279
Other	4%	174
Advance Practice Nursing (NPs)	44%	1,923
Optometry	8%	368

Table 37: Settings of Interprofessional Medical Education

	All Students	
	%	#
Active Engagement with Patients	50%	2,188
Patient-Centered Case Studies	60%	2,643
Lecture (Clinical Subject)	44%	1,932
Clinical Simulations	38%	1,681
Skills Training in Team Settings	39%	1,732
Lecture (Basic Science)	36%	1,574
Community Projects or Service Learning	21%	917
Other	2%	106

Survey Year
2025

Note that due to changes in the survey on a yearly basis some tables may not display properly from years other than the most recent.

Table 38a: Evaluation of Students Participating in Interprofessional Medical Education
All Graduating Seniors 2025

	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree
The learning experiences with other health professionals helped me to better understand the roles of other health professionals in patient care.	31%	48%	14%	5%	2%
I believe the learning experiences with other health professionals will contribute to/improve my performance as an osteopathic physician.	36%	43%	14%	4%	2%

Table 39a: Evaluation of Percentage of Training Delivered by Allopathic MD Physicians
All Graduating Seniors

	None	1 - 25%	26 - 50%	51 - 75%	76 - 100%
During the First Two Years of Medical School	4%	34%	37%	19%	5%
During Required In-Hospital Rotations	1%	6%	29%	45%	20%
During Required Ambulatory Primary Care Rotations	3%	13%	38%	32%	15%
During Required Ambulatory Non-Primary Care Rotations	2%	10%	36%	34%	17%
During Selectives/Electives	1%	8%	33%	38%	21%

Table 40: Immediate Post-Graduate Plans

	All Students	
	%	#
Governmental/military service residency without Osteopathic Recognition	2%	91
Governmental/military service residency with Osteopathic Recognition	1%	67
Research or other non-residency activity	1%	57
Undecided	2%	80
Osteopathic Focus/Integrated Residency	0%	23
Residency with Osteopathic Recognition	23%	1,117
Residency without Osteopathic Recognition	65%	3,179
Transitional year with Osteopathic Recognition	1%	56
Transitional year without Osteopathic Recognition	4%	199
Grand Total	100%	4,869

Table 41: Board Certification Plans

	All Students	
	%	#
Both AOA and ABMS Boards	45%	1,105
Other	2%	37
Not Planning Board Certification	0%	7
Undecided	53%	1,307
Grand Total	100%	2,456

Table 42: Reasons Given for Taking ABMS (Allopathic) or Both Boards

	All Students	
	%	#
ABMS board certification is more widely recognized	116%	1,280
ABMS board certification provides more opportunities	104%	1,146
ABMS board certification has more colleague acceptance	73%	802
Hospital privileges more readily obtained with ABMS board certification	65%	722
ABMS board certification carries more prestige	60%	663
Licenses more readily obtained with ABMS board certification	61%	676
Personal desire for dual certification	72%	801
It is a requirement of the residency program	41%	448
Other	2%	26

Table 43: Long-Range Career Plans

	All Students	
	%	#
Employed in a hospital or physician group	38%	1,853
Self-employed with or without a partner in private practice	9%	428
Other professional activity, e.g. teaching, research, administration, fellowship	1%	37
Governmental service, e.g. military, NHS Corps, Indian Health Service, V.A., state/local health dept.	4%	186
Undecided	16%	793
Academic Medicine	4%	181
Fellowship	23%	1,090
Practice in a Federally Qualified Health Center (FQHC)	4%	189
Practice in an Health Maintenance Organization (HMO)	2%	79
Grand Total	100%	4,836

Table 44: Plans to Work as a Hospitalist

	All Students	
	%	#
Yes	22%	1,068
No	46%	2,245
Unsure	32%	1,558
Grand Total	100%	4,871

Table 45: Planned Patient Care as a Hospitalist

	All Students	
	%	#
Full-time (at least 36 hours a week)	77%	817
Part-time (less than 36 hours a week)	15%	160
Unsure	8%	89
Grand Total	100%	1,066

Table 46: Planned Research Involvement as a Hospitalist

	All Students	
	%	#
Full-time	6%	61
Significantly involved	11%	113
Involved in a limited way	57%	611
Unsure	26%	281
Grand Total	100%	1,066

Table 47 : Size of Location Planned for Practice After Residency

	All Students	
	%	#
Major metropolitan area (1,000,001 or more)	17%	821
Metropolitan area (500,001 to 1,000,000)	17%	840
City (100,001 to 500,000)	23%	1,108
City (50,001 to 100,000)	10%	504
City or town (10,001 to 50,000)	14%	659
City or town (2,501 to 10,000)	5%	235
Area 2,500 or less	1%	36
Undecided	13%	605

Table 48 : Plans to Practice in Underserved/Shortage Area

	All Students	
	%	#
Yes	45%	2,165
No	11%	550
Unsure	44%	2,133
Grand Total	100%	4,848

Table 49 : Plans to Practice in Underserved/Shortage Area by Type

	All Students	
	%	#
Inner-city community	29%	619
Rural community	35%	746
Other	4%	88
Suburban/urban but shortage of my specialty	32%	695
Grand Total	100%	2,148

Table 50 : Specialization Plans

		All Students	
		#	%
Primary Care Specialties	Family Medicine	903	19%
	Internal Medicine	1,100	23%
	Pediatrics	394	8%
Non-Primary Care	Emergency Medicine	654	13%
	Anesthesiology	222	5%
	Orthopedic Surgery	106	2%
	Physical Medicine & Rehabilitation	143	3%
	Dermatology	54	1%
	Otolaryngology	10	0%
	Ophthalmology	23	0%
	Plastic Surgery	9	0%
	Thoracic Surgery	8	0%
	Osteopathic Neuromusculoskeletal Medicine	13	0%
	Allergy & Immunology	23	0%
	Urology	26	1%
	Medical Genetics And Genomics	3	0%
	Vascular Surgery	5	0%
	Child Neurology	19	0%
	Diagnostic Radiology	77	2%
	Interventional Radiology	20	0%
	Neurodevelopmental Disabilities	2	0%
	Neurological Surgery	9	0%
	Neurology	110	2%
	Obstetrics And Gynecology	234	5%
	Pathology	67	1%
	Preventive Medicine	18	0%
	Psychiatry	312	6%
	Radiation Oncology	13	0%
	Radiology Diagnostic	39	1%
	Surgery	182	4%
Undecided	Undecided or Indefinite	65	1%
Grand Total		4,863	100%

Table 51 : Primary Care Plans

	All Students	
	%	#
Non-Primary Care	49%	2,401
Primary Care	49%	2,397
Undecided	1%	65
Grand Total	100%	4,863

Table 52a: Specialty Decision Factor - Mean Influence Rating
All Graduating Seniors 2025

Survey Question	All Students
Intellectual content of the specialty (type of work, diagnostic programs, diversity)	3.1
Like dealing with people (type of person, type of patient) more than techniques	2.9
Skills/abilities (possess the skills required for the specialty or its patient population)	2.9
Lifestyle (predictable working hours, sufficient time for family)	2.9
Like the emphasis on technical skills	2.5
Role models (e.g., physicians in the specialty)	2.6
Desire for independence	2.6
Academic environment (courses, clerkships in the specialty area)	2.6
Previous experience	2.5
Peer influence (encouragement from practicing physicians, faculty, or other students)	2.0
Prestige/income potential	1.9
Debt level (level of debt, length of residency, high malpractice insurance premiums)	1.8
Opportunity for research/creativity	1.9
Program has Osteopathic Recognition	1.1

Grand Total	All Students			
	Under Represented Minority		Non-Under Represented Minority	
	Male	Female	Male	Female
3.1	3.0	3.0	3.1	3.1
2.9	2.8	3.0	2.9	3.0
2.9	2.9	2.9	2.9	2.9
2.9	2.8	2.9	2.9	2.9
2.5	2.7	2.5	2.6	2.4
2.6	2.7	2.5	2.6	2.5
2.6	2.6	2.6	2.7	2.6
2.6	2.5	2.6	2.6	2.6
2.5	2.5	2.4	2.5	2.5
2.0	2.2	1.9	2.1	2.0
1.9	2.0	1.7	2.0	1.7
1.8	2.1	1.7	1.9	1.6
1.9	1.9	1.8	1.9	1.8
1.1	1.5	1.2	1.1	0.9