# Call for experts: nutrition virtual patient cases

October 16, 2026 · @Mark Speicher

AACOM is recruiting physicians, registered dietitian/nutritionists, pharmacists, behavioral scientists and interested OME community and student reviewers from member colleges to build and validate eleven AI virtual patient cases in nutrition counseling with the University of Cincinnati's 2-Sigma team. Most roles take 10 to 30 hours between November 2026 and May 2027. Contributors earn authorship on the resulting publications and expressions of interest are due Oct 31, 2026, to Mark Speicher (mspeicher@aacom.org), copying Radhika Hira (rhira@aacom.org).

## Why this project

Medical schools teach nutrition, but few can demonstrate that their students counsel patients well. The HHS Medical Education Nutrition Competency Framework lists 71 competencies, and the ones that matter most in the exam room (counseling, behavior change, food-security screening and interprofessional referral) are the hardest to assess at scale.

AI virtual patients let every student at every participating college meet the same patient, get scored the same way and receive feedback immediately. Nine cases will be used for practice. Two will become summative assessments once they have been validated against trained human raters. Each case has an OMS-1/2 version and an OMS-3/4 version.

The cases are set where osteopathic graduates practice: rural Appalachia, a South Texas border town, a tribal health clinic, a Memphis internal medicine practice, a rural hospital ward. Getting them right takes clinicians, dietitians and pharmacists who know those patients.

## Roles we are filling

You can take one role or several. Case authors and content validators are kept separate, so no one validates a case they wrote. Hours are estimates and will firm up once the author template is final.

| Role | What you will do | Who fits | Approximate time | When |
|---|---|---|---|---|
| Physician case author | Co-write one or two cases with an RDN: patient script, hidden facts, key features with citations, OMS-1/2 and OMS-3/4 tasks | DO or MD faculty in primary care, internal medicine, pediatrics, OB-GYN, geriatrics, lifestyle or culinary medicine | 16 to 20 hours per case | November to mid-December |
| RDN case author | Co-write the same cases, owning the accuracy of nutrition content | Registered dietitian nutritionists; CDCES credential | 16 to 20 hours per case | November to mid-December |

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|---|---|---|---|---|
| | and the dietitian referral | welcome | | |
| Pharmacist reviewer | Review drug-nutrient content for the kidney disease, heart failure and GLP-1 cases | PharmD faculty or clinical pharmacists | About 6 hours per case | December |
| Community and cultural reviewer | Review the border-community and tribal-clinic cases for accuracy and respect | Clinicians or community members from border or tribal-serving practice | About 4 hours per case | December to January |
| Content validator | Rate the relevance of each case's key features and scoring anchors | Any of the profiles above, for cases you did not write | About 6 hours in total | January |
| Red-team tester | Interview the AI patient the way a struggling student would and log where it breaks character or invents facts | Faculty comfortable with standardized patient work | 4 to 6 hours | February |
| Human rater | Score encounter transcripts with the project rubric and the Motivational Interviewing Treatment Integrity code (MITI 4); training provided | Faculty with counseling or motivational interviewing experience; MITI coding experience a plus | 8 to 12 hours of training, then about 45 minutes per transcript for 20 to 40 transcripts | March to April |
| Standard-setting panelist | Help set passing standards for the two summative | Faculty experienced with OSCEs or clinical | About 6 hours | May |

| Role | What you will do | Who fits | Approximate time | When |
|---|---|---|---|---|
| | cases | skills assessment | | |

## Expertise each case needs

Every case pairs a physician author with an RDN author. The column on the right lists the additional expertise that would strengthen each one. Summative cases stay confidential and cannot be used in teaching at any college.

| # | Case | Use | Expertise most needed |
|---|---|---|---|
| 1 | Prediabetes in a long-haul truck driver, rural Appalachia | Summative | Primary care, diabetes prevention programs, rural practice |
| 2 | Stage 2 hypertension in a home health aide and caregiver, South Texas border town | Summative | Primary care, Hispanic and border-community health, community health workers |
| 3 | New type 2 diabetes in an elder at an Oklahoma tribal health clinic | Practice | Tribal or Indian Health Service practice, diabetes education |
| 4 | Obesity in a 12-year-old seen with her father | Practice | Pediatrics, adolescent medicine, family-based behavior change |
| 5 | New gestational diabetes with food insecurity | Practice | OB-GYN or family medicine obstetrics, prenatal nutrition, WIC |
| 6 | Type 2 diabetes, CKD stage 3b and a potassium salt substitute | Practice | Nephrology or renal nutrition, clinical pharmacy |
| 7 | Malnutrition after hip fracture repair in an 81-year-old | Practice | Geriatrics, hospital medicine, speech-language pathology |
| 8 | Heart failure discharge on warfarin with a food pantry diet | Practice | Cardiology or hospital medicine, clinical pharmacy, social work |
| 9 | Nausea and muscle loss on a GLP-1 receptor | Practice | Obesity medicine, clinical pharmacy, |

| # | Case | Use | Expertise most needed |
|---|---|---|---|
| | agonist | | exercise science |
| 10 | Knee osteoarthritis, obesity and low mood in a retired miner | Practice | Neuromusculoskeletal medicine and OMM, sports medicine, behavioral health |
| 11 | Weight loss on chemotherapy and an online "anti-cancer" diet | Practice | Oncology, oncology nutrition, palliative care |

## What contributors receive and what we ask

Contributors who meet ICMJE criteria will be authors on the case publication, planned for MedEdPORTAL, and on the validity paper. Everyone else is acknowledged by name. Contributors will also have first opportunity to present the work at Educating Leaders 2027, their colleges get the practice cases, and raters receive MITI 4 training they can use in their own teaching. AACOM will confirm whether honoraria are available before assignments are made.

In return, we ask each contributor to:

- Attend a 60-minute kickoff call.
- Meet the authoring or rating deadline for their role.
- Use the shared case template and cite a guideline or trial for every clinical key feature.
- Disclose conflicts of interest, including ties to AI education vendors or to food, supplement or pharmaceutical companies.
- Keep summative case content confidential.

## Timeline and how to express interest

Reply by October 31 to Mark Speicher (mspeicher@aacom.org), copying Radhika Hira (rhira@aacom.org). Dates after the kickoff are provisional until the platform schedule is confirmed in early November.

| Date | Milestone |
|---|---|
| Oct 31, 2026 | Expressions of interest due to Mark Speicher (mspeicher@aacom.org), CC Radhika Hira (rhira@aacom.org) |
| Nov 6, 2026 | Roster and case assignments sent |
| Nov 12, 2026 | Kickoff call for all contributors |
| Dec 18, 2026 | Case drafts due from author pairs |
| Jan 22, 2027 | Content validation complete |

| Date | Milestone |
|---|---|
| Feb 19, 2027 | Red-team testing complete |
| Apr 30, 2027 | Transcript rating complete |
| May 28, 2027 | Standard setting for summative cases |

Please include the following in your reply:

1. Name, college and credentials.
2. The role or roles you want.
3. Up to three cases you would most like to work on.
4. Motivational interviewing or MITI coding experience, if any.
5. Your availability between November and May, including any periods you are away.
6. Any conflicts of interest.