

# **The Osteopathic Cranial Academy**

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## Section 1 - Board of Directors Code of Leadership

The Mission of The Osteopathic Cranial Academy, an international nonprofit membership organization, as established by the Board of Directors, is to teach, advocate, and advance Osteopathy, including Osteopathy in the Cranial Field, as envisioned by Andrew Taylor Still MD and William Garner Sutherland DO.

As an elected or appointed leader of The Osteopathic Cranial Academy, I am fully committed to the integrity of The Osteopathic Cranial Academy and the fulfillment of this mission. As a leader, I have additional responsibilities and obligations, and my decisions and actions must be guided by what is in the best interest of The Osteopathic Cranial Academy. To this end, on my honor, I promise to adhere to three guiding principles:

I. I will demonstrate the responsibility which leadership in The Osteopathic Cranial Academy demands, understanding that...

- A. The basic function of the Board is policy making and governance rather than administrative and managerial, and accept the responsibility of learning to discriminate intelligently between these functions.
- B. The duty of loyalty requires that I support the organization in reasonable and legal ways in accordance with the articles of incorporation, bylaws and policies of the organization and laws of the land, knowing and obeying laws of governing boards and representing the entire profession at all times.
- C. Fiduciary responsibility and asset protection, as well as tax requirements, must be met and completely fulfilled.
- D. All business of the Board of Directors must be kept confidential until Board actions are communicated to the membership in appropriate ways.
- E. Leaders must be prepared to assure the membership with utmost good faith that all is being done in the best interest of the organization and the profession.
- F. Leaders must work cooperatively with and support the executive director and staff.
- G. Leaders must recognize the integrity of their predecessors, associates and the merits of their work.

II. I will meet personal responsibilities characteristic of leaders by ...

- A. Understanding and utilizing parliamentary procedure as outlined in *Roberts Rules of Order* (latest edition) to allow orderly, time sensitive meetings.
- B. Being available to attend meetings, participate in conference calls and serve on committees.
- C. Being prepared for all meetings by reading agendas and other materials.
- D. Responding timely to Board and committee business.
- E. Realizing whether in attendance or not, I am legally responsible for what transpires at meetings of the Board of Directors (regular and special).
- F. Attending strategic planning sessions to review the purposes, programs, priorities and targets or achievements.
- G. Insisting all business transactions be open, ethical and "above board" by refusing to play politics in either the traditional partisan or petty sense, including refusing to make statements or promises in any and all matters that should properly come before the Board as a whole.
- H. Refusing to use the position of the Board in any way for personal gain or prestige or putting personal gain above the organization.
- I. Adhering to a conflict of interest policy by recusing myself from discussion and/or voting when I may have a conflict of interest.
- J. Supporting activities and meetings of the organization and encouraging others to do as well.
- K. Annually contributing financial support to The Cranial Academy Foundation and encouraging others to do the same.

III. I will respect the interpersonal relationship with other Board members by...

- A. Recognizing authority rests only with the Board in official meetings, and individuals have no legal status to bind the Board outside of such meetings.
- B. Refusing to participate in irregular meetings which are not official and which all members do not have the opportunity to attend.
- C. Realizing action can be taken only by the Board in a properly noticed meeting with an agenda.
- D. Making decisions only after all facts bearing on a question have been presented and discussed.
- E. Supporting the opinion of others and graciously conforming to the principle of "majority rule."

Although dissension may occur inside the Board Room, I am bound to present a unified front outside the Board Room.

In conclusion, I accept that every leader is making a statement of faith about every other leader. Therefore, I trust others to carry out this code to the best of his/her ability for the continued integrity of The Osteopathic Cranial Academy.

(Signature and date required)

### **Section 1.1 - Attendance**

As a consideration to the other Officers and Directors and to guarantee a quorum will be present, any Director who cannot be in attendance at any regular or special meeting of the Board shall notify the President in writing that he/she cannot attend. Any Director who is absent from two (2) meetings of the Board of Directors, whether regular or special, shall forfeit his or her position without notice or further action of the Board of Directors.

### **Section 1.2 - Other Methods of Voting**

Voting action taken by a mail or electronic vote (telephone, facsimile, email or web meeting) requires that direct approval be registered in writing by the required majority of the members of the Board of Directors.

### **Section 2 - The Executive Committee**

An Executive Committee comprised of the President, President-Elect, Secretary, Treasurer, and the Immediate Past President shall carry out duties and responsibilities as assigned by the Board.

#### **Section 2.1 - President**

The President with the assistance of the Executive Director shall prepare an agenda for each meeting of the Board of Directors. The agenda shall be mailed two weeks prior to the meeting; reference materials shall accompany the agenda. The President or his/her designee shall serve as a representative to the American Academy of Osteopathy Board of Governors and to the American Academy of Osteopathy Component Society Forum.

#### **Section 2.2 - President-Elect**

The President-Elect shall automatically assume the office of President upon the expiration of the term of the previous President. The President-Elect shall serve as chair of the Committee of Chairs. The President-Elect shall be prepared to and shall assume the duties of the President in his/her absence or at his/her request.

#### **Section 2.3 - Secretary**

The Secretary shall be responsible for recording the minutes of the Board of Directors Meetings, special meetings and meetings of the Executive Committee. Board minutes shall be reviewed by the Secretary and President and distributed within two weeks after a Directors Meeting. Any motions resulting in policy changes are to be recorded in The Osteopathic Cranial Academy policy manual, ensuring that the policy manual is always up to date.

#### **Section 2.4 - Treasurer**

The Treasurer shall be the principal officer entrusted with the funds of The Osteopathic Cranial Academy, be responsible for the financial records, and serve as Chairperson of the Finance Committee.

### **Section 3 - Osteopathic Cranial Academy Committees**

The Board of Directors is responsible for the execution and direction of all programs and activities of The Osteopathic Cranial Academy. The President and President-Elect shall be ex-officio members of all committees. Committee Chairs and members shall be appointed by the President with the approval of the Board of Directors. When appropriate, nonmembers of The Osteopathic Cranial Academy who cannot qualify for Osteopathic Cranial Academy membership under the current membership categories (such as PhDs, basic scientists, etc.) may serve on committees, with approval of the Board of Directors. Documentation of qualification for such positions shall be submitted to the Credentials Committee for consideration, along with supportive letters of recommendation by two Osteopathic Cranial Academy members.

#### **Section 3.1 - Standing Committees**

The Standing Committees of The Osteopathic Cranial Academy as prescribed by the Bylaws include: The Executive Committee; the Credentials Committee; the Education Committee; the Fellowship Committee; the Finance Committee and the Nominating Committee.

#### **Section 3.2 - Other Committees**

The President, with the approval of the Board of Directors, may appoint such other committees or task forces as he or she deems appropriate for the accomplishment of the purpose of The Osteopathic Cranial Academy.

## **Section 4 - Osteopathic Cranial Academy Committees - General Procedures**

### *Selection*

Unless otherwise provided in the bylaws, the standing committees, including the chairperson, shall be appointed by the President of The Osteopathic Cranial Academy and approved by the Board of Directors. The President and President-Elect shall serve as ex-officio members of all committees.

In addition to the standing committees as prescribed in the bylaws, the President, with the approval of the Board of Directors, may appoint other committees or task forces as he or she deems appropriate for the accomplishment of the purposes of The Osteopathic Cranial Academy.

### *Term of Service*

Unless otherwise provided in the bylaws, the term of service of committee and/or task force chairpersons shall be one year, and reappointed at the discretion of the President and approved by the Board of Directors. Committee/task force members shall be appointed to one-year terms and may be reappointed with the recommendation of the committee/task force chairperson and the President.

### *Responsibilities*

The committees and/or task forces are charged with carrying out the directives of the President or the Board of Directors, as they relate to the work of the specific committees and/or task forces.

### *Meetings*

The chairperson shall be responsible for scheduling meetings as required to carry out the prescribed objectives. The Executive Director, President and all committee members shall be notified of such meetings at least 15 days prior to the meeting. A report of the meeting activities shall be submitted to the Executive Director within 30 days of the meeting.

### *Communication Procedures*

Letters representing official business of The Osteopathic Cranial Academy shall be submitted to the Executive Director who will copy the letters onto Osteopathic Cranial Academy letterhead and distribute within five working days to the appropriate parties. All reports of chairpersons and committee activity shall be sent to the Executive Director for mailing, distribution, appropriate record keeping and for maintenance of business documents of The Osteopathic Cranial Academy. Copies of committee correspondence and/or Board correspondence shall be sent to the President, President-Elect and the Executive Director.

### *Financial Responsibility*

The committees and/or task forces of The Osteopathic Cranial Academy shall not, except with the prior approval of the Board of Directors, obligate The Osteopathic Cranial Academy in any financial matter over and above incidental expenses of its operation for which a budget has been approved.

#### **Section 4.1 - Executive Committee (Standing)**

*Purpose:* Responsible for administrative functions of The Osteopathic Cranial Academy between meetings of the board of directors.

*Organization:* Chairperson: President of The Osteopathic Cranial Academy

Members: Elected officers of The Osteopathic Cranial Academy, including the Immediate Past- President

#### **Section 4.2 – Committee of the Chairs (Standing)**

*Purpose:* Responsible for reviewing and making recommendations regarding the continuation or modification of the strategic plan.

*Organization:* Chairperson: President-Elect of The Osteopathic Cranial Academy

Members: The chairs of all standing and special committees.

#### **Section 4.3 – Bylaws Committee (Special)**

*Purpose:* Responsible for reviewing, analyzing, and when necessary recommending modifications of The Osteopathic Cranial Academy bylaws and policy manual. This committee shall meet at least every 3 years to ensure their congruency.

*Organization:* Chairperson: Appointed by the President of The Osteopathic Cranial Academy and approved by the Board of Directors

Members: Appointed by the President with the approval of the Board of Directors

#### **Section 4.4 - Credentials Committee (Standing)**

*Purpose:* Responsible for:

1. Overseeing standards of eligibility for course participation and membership
2. Reviewing and recommending membership applications.
3. Approving faculty for Osteopathic Cranial Academy course offerings,
4. Determining whether Introductory cranial courses offered by other organizations including osteopathic colleges, meet the standards of The Osteopathic Cranial Academy.
5. Maintaining a Proficiency Recognition program for members.
6. Creating and/or reviewing position papers relevant to the practice of OCF.
7. Reviewing all Academy procedures and policies in conjunction with the bylaws committee.

*Organization:* Chairperson: Appointed by the President of The Osteopathic Cranial Academy and approved by the Board of Directors

Members: Five to eight members recommended by the chairperson and approved by the Board of Directors; must hold an Osteopathic Cranial Academy Recognition of Proficiency or be an FCA. (Revised 6/22/02)

#### **Section 4.5 - Education Committee (Standing)**

*Purpose:* Responsible for coordination, planning, administering and evaluating all continuing education activities of The Osteopathic Cranial Academy with approval of the Board of Directors.

*Organization:* Chairperson: Appointed by the President with the approval of the Board of Directors. Oversees activities of educational subcommittees, and sits on the educational committee of the AAO

Members: Chairs of All Subcommittees

## **Section 4.5.1 – Education Committee Structure:**

### *Section 4.5.1.1 Annual Conference Committee*

**Purpose:** Responsible for planning, administering and evaluating the structure and content of The Osteopathic Cranial Academy Annual Conference with input from the president and approval of the Board of Directors. *See Appendix B: Annual Conference Development Protocol*

**Organization:** **Chairperson:** Appointed by the President with the approval of the Board of Directors.

**Members:** Appointed by the President with the approval of the Board of Directors, consisting of at least 2 members who are either previous annual conference directors or past ACSC chairs; and all designated future conference directors.

### *Section 4.5.1.2 - Introductory Course Committee*

**Purpose:** Responsible for planning, administering and evaluating the structure and content of The Osteopathic Cranial Academy Introductory Course with approval of the Board of Directors. *See Appendix C: Faculty Development Protocol*

**Organization:** **Chairperson:** Appointed by the President with the approval of the Board of Directors.

**Members:** Appointed by the President with the approval of the Board of Directors, consisting of at least 3 members including active and past Introductory Course Directors.

### *Section 4.5.1.3 - Continuing Studies Committee*

**Purpose:** Responsible for developing, administering and evaluating the structure and content of The Osteopathic Cranial Academy Continuing Studies Curriculum with approval of the Board of Directors.

**Organization:** **Chairperson:** Appointed by the President with the approval of the Board of Directors.

**Members:** Appointed by the President with the approval of the Board of Directors

## **Section 4.6 - Fellowship Committee (Standing)**

*Purpose:* Responsible for recommending candidates for the Fellowship of The Osteopathic Cranial Academy Award.

*Organization:* Chairperson: FCA committee member selected by the Nominating Committee and approved by the Board of Directors; serves a maximum of 3 consecutive terms, each term being a maximum of 3 years.

Members: Five Fellows of The Osteopathic Cranial Academy each serving a 3 year term; appointed by the Nominating Committee and approved by the Board of Directors. Each may serve a maximum of 3 consecutive terms.

## **Section 4.7 - Finance and Investment Committee (Standing)**

*Purpose:* Responsible for fiscal management of The Osteopathic Cranial Academy.

*Organization:* Chairperson: Treasurer of The Osteopathic Cranial Academy

Members: Executive Director

### **Section 4.7.1 - Finance Committee Substructure**

#### *Section 4.7.1.1 - Audit Subcommittee*

*Purpose:* This committee ensures that all Academy financial and procedural activities are consistent with generally accepted accounting principles.

*Organization:* Chairperson: Appointed annually by the President of The Osteopathic Cranial Academy with the approval of the Board of Directors

Members: Three or more members appointed annually by the President of The Osteopathic Cranial Academy with approval by the Board of Directors

### **Section 4.8 – Grievance Committee (Special)**

*Purpose:* This committee shall serve as a contact vehicle for all general members of The Osteopathic Cranial Academy. Any perceived problems, and suggested solutions will be heard. This committee will serve as a liaison to the Board of Directors.

*Organization:* Chairperson: Appointed by the President of The Osteopathic Cranial Academy and approved by the Board of Directors

Members: Appointed by the President with the approval of the Board of Directors

#### **Section 4.9 - Nominating Committee (Standing)**

*Purpose:* Recommending a slate of nominees for the offices to be voted on at the annual meeting, and recommending nominees for awards, to the Board of Directors of The Osteopathic Cranial Academy.

*Organization:* Chairperson: Immediate Past President of The Osteopathic Cranial Academy

Members:

1. President-Elect
2. Chair of Fellowship Committee (or if unwilling or unable to serve, another non-board member of The Fellowship committee)
3. Member of Credentials Committee who is not the chair and is not a member of the Board of Directors
4. Non-FCA, proficiency recognized, general Member of The Osteopathic Cranial Academy.

#### **Section 4.10 – Information Technology Committee (Special)**

*Purpose:* Responsible for proposing, negotiating, reviewing, monitoring and when appropriate, generating items for electronic publication; including but not limited to audio, video and web media. Also responsible for recommending IT/AV hardware and software needs of The Osteopathic Cranial Academy.

*Organization:* Chairperson: Appointed annually by the President of The Osteopathic Cranial Academy with the approval of the Board of Directors

Members: Three or more members appointed annually by the President of The Osteopathic Cranial Academy with approval by the Board of Directors

#### **Section 4.11 – Membership Committee (Special)**

*Purpose:* Responsible for identifying and meeting the needs of The Osteopathic Cranial Academy general membership, including the development of programs that encourage individuals to initiate and maintain membership in The Osteopathic Cranial Academy.

*Organization:* Chairperson: Appointed annually by the President of The Osteopathic Cranial Academy with the approval of the Board of Directors

Members: Three or more members appointed annually by the President of The Osteopathic Cranial Academy with approval by the Board of Directors

## **Section 4.11.1 – Membership Committee Substructure**

### *Section 4.11.1.1 – International Membership Subcommittee*

*Purpose:* Responsible for identifying and meeting the needs of The Osteopathic Cranial Academy international membership. This includes

1. Encouraging International Affiliate Membership.
2. Developing relationships with qualified non-US osteopathic organizations
3. Identifying criteria for international membership qualification (in conjunction with the Credentials Committee and Board of Directors).
4. Notifying qualified individual osteopathic practitioners of Osteopathic Cranial Academy educational offerings, and membership opportunities.

*Organization:* Chairperson: Appointed annually by the President of The Osteopathic Cranial Academy with the approval of the Board of Directors. This individual shall also be appointed as an affiliate advisor to the Board of Directors, as designated in the Bylaws.

Members: Appointed by the President in consultation with the chair.

### *Section 4.11.1.2 – Physician-in-Training Membership Subcommittee*

*Purpose:* Responsible for identifying and meeting the needs of Osteopathic Cranial Academy physicians-in-training membership. Programs are to be developed that specifically meet those needs, such as student labs at annual conferences and mentorship opportunities. This committee shall also be charged with developing relationships with all US osteopathic and allopathic medical schools and residency programs, and quality educational offerings.

*Organization:* Chairperson: Appointed annually by the President of The Osteopathic Cranial Academy with the approval of the Board of Directors.

Members: Three or more members appointed annually by the President of The Osteopathic Cranial Academy with approval by the Board of Directors

#### **Section 4.12 – Publications Committee (Special)**

*Purpose:* Responsible for reviewing and recommending for approval the content of all material disseminated by The Osteopathic Cranial Academy. This includes developing standards, proposing, negotiating, reviewing, monitoring, and when appropriate, generating items for publication. A Journal of original peer reviewed and medically indexed articles shall be published annually.

*Organization:* Chairperson: Appointed annually by the President of The Osteopathic Cranial Academy with the approval of the Board of Directors

Members: Three or more members appointed annually by the President of The Osteopathic Cranial Academy with approval by the Board of Directors

#### **Section 4.13 – Marketing Committee (Special)**

*Purpose:* Responsible for the creation and/or support of programs that inform the public of The Osteopathic Cranial Academy, and Osteopathy including Osteopathy in the Cranial Field. Information should be directed towards medical professionals, organizations, governmental leadership, and the general public.

*Organization:* Chairperson: Appointed annually by the President of The Osteopathic Cranial Academy with the approval of the Board of Directors

Members: Three or more members appointed annually by the President of The Osteopathic Cranial Academy with approval by the Board of Directors

#### **Section 4.14 - Research Committee (Special)**

*Purpose:* Responsible for gathering and maintaining a repository for all research relevant to Osteopathy in the Cranial Field. This includes supporting and promoting basic science and clinical research in the practice of osteopathic manipulative medicine utilizing the cranial concept.

*Organization:* Chairperson: Appointed by the President and approved by the Board of Directors

Members: Appointed by the President and approved by the Board of Directors

## **Section 5 - Dues and Assessments**

Dues shall be payable before April 1 of membership year (April 1 to March 31).

### **Section 5.1 - Dues Schedule**

Dues shall be established by the board of directors, considering recommendations of the Finance Committee.

Regular	\$215
Associate	\$190
Affiliate	\$190
Intern / Resident	\$55
Retired	\$45
Student	\$35
Life	\$3,225

### **Section 5.2 - Dues Waiver**

Dues for new members shall be waived for the remainder of the membership year (April 1 to March 31) if the applicant has applied for and qualifies for membership in The Osteopathic Cranial Academy and if the applicant has paid tuition and has completed his/her first 40-hour Introductory Course sponsored by The Osteopathic Cranial Academy or the SCTF within that year. The waiver will apply, at the discretion of the Board of Directors, to the following year if a 40-hour Introductory Course is conducted close to the end of the dues year. This waiver does not apply to renewals of membership nor to an applicant taking a second or follow-up 40-hour Introductory Course. Dues may be waived for members on active duty during wartime. The Executive Director may, with the consent of the President, suspend, remit or make special arrangements for payment of dues or assessments.

#### **Section 5.2.1 - Dues Waiver: Students at Colleges of Osteopathic Medicine**

Students at Colleges of Osteopathic Medicine who qualify to attend, and successfully complete an OCA approved Introductory Courses are eligible for Student OCA Membership (Level I or Level II - see section 85.1). Annual OCA dues for COM students who successfully complete an OCA approved Introductory Course, shall be waived for the duration of their matriculation through Osteopathic Medical School, including OMM Fellowships.

### **Section 5.3 - Delinquency**

Members who have not paid dues and/or assessments for the current fiscal year by July 1 shall be considered delinquent and denied the privilege of membership. Payment of delinquent dues prior to December 31 of the same year shall automatically reinstate membership. To reinstate membership after January 1 of the following year, the delinquent member may be reinstated provided that he/she is an AOA and AAO member in good standing; a delinquent International Affiliate DO Member must be a member in good standing in the registry in the country where he/she practices.

### **Section 5.4 - Legal Preparedness Fund**

The Legal Preparedness Fund is a designated fund within The Osteopathic Cranial Academy. It consists of monies restricted for unbudgeted, unexpected legal expenses above and beyond usual and ordinary operating expenses of a legal nature. Its assets are subject to conservative management. Funds may be raised through fund solicitation, voluntary assessments on membership dues and by independent voluntary contributions. Disbursements are subject to a majority approval of the Board of Directors.

## **Section 6 - Educational Curriculum**

The Osteopathic Cranial Academy will sponsor continuing education programs according to its purpose and mission as stated in Articles II and III of the bylaws of The Osteopathic Cranial Academy.

### **LEVEL 1: INTRODUCTION TO OSTEOPATHIC PRINCIPLES (for MD's and DDS/DMD's)**

Introduction To Osteopathic Principles -- (16 - 20 hour course designed for M.D.'s)

Osteopathy And Dentistry -- (16 - 20 hour course designed for D.D.S./D.M.D.'s)

### **LEVEL 2: INTRODUCTORY COURSE IN CRANIAL OSTEOPATHY**

(40 hours of instruction – semi-annually)

### **LEVEL 3: ANNUAL CONFERENCE**

(Offered Each June)

### **LEVEL 4: PROFICIENCY EXAMINATION**

(see section 10)

### **LEVEL 5: INTERMEDIATE CURRICULUM**

(20 hour weekend courses)

#### **CORE COURSES:** (for example)

Cranial Base

Face

Treating The Rest Of The Body

(Membranes; long fascial connections; posture; shock.)

Pediatrics

Key Postural Inputs: Vision/Dental Occlusion/Feet

Advanced Principles of Treatment

(Refining palpatory skills; screening; differential diagnosis.)

#### **ELECTIVE COURSES:** (for example)

Crash Recovery Course

Vision Advanced

Brain Course

Midline Course (Blackman)

Dental Advanced

Trauma Advanced

Autonomic Nervous System

Muscular Function

Fulford

More Specific Diagnostics

#### **Cranial Differential Diagnosis**

## **Section 6.1 – Educational Administration**

The Osteopathic Cranial Academy's Education Committees shall be established under The Osteopathic Cranial Academy's Board of Directors and shall be responsible for planning, administering and evaluating all continuing medical education (CME) activities conducted by The Osteopathic Cranial Academy. The Osteopathic Cranial Academy staff shall:

- A. Provide administrative support
- B. Ensure that proper facilities and equipment are provided to enable all presenters to teach effectively
- C. Promote and publicize programs
- D. Maintain accurate records
- E. Conduct other activities as necessary

## **Section 6.2 - Educational Program Guidelines**

All CME programs shall be planned and administered, in conjunction with The Osteopathic Cranial Academy staff, by the Education Committee and approved by the Board of Directors. All programs shall conform to the AOA's Uniform Guidelines as outlined in the Accreditation Requirements for Category 1-A CME Sponsors.

### **Section 6.2.1 - Course Schedule / Rotational Matrix:**

The Osteopathic Cranial Academy Curriculum is to be planned 2-3 years in advance by the Continuing Studies Educational Committee. (2) Introductory Courses, (1) Annual Conference, (1) Core Intermediate Course, and (1) Elective Intermediate Course will be offered each year with the following structure:

1. February: Mid Winter Introductory Course, immediately followed by a Core Intermediate Course
2. April / May: Reserved for additional regional course offerings (optional).
3. June: Summer Introductory Course, immediately followed by the Annual Conference
4. Late September / Early October: Elective Intermediate Course

The location of these courses may be rotated through 3 regions: West, Central and East.

Thus, Osteopathic Cranial Academy CME courses shall be scheduled so that they do not conflict with the Annual Conference or Introductory Course offerings in order to maximize attendance, staff time and fiscal responsibility. Every effort should be made to function within a scheduling matrix designed to coordinate with other major CME programs which interest members of The Osteopathic Cranial Academy, i.e. the AOA Convention, the AAO Convocation and the SCTF annual program. CME programs shall fulfill a core curriculum, and be developed based on a needs assessment, such as member surveys, which indicates a demand for the program, in accordance with AOA requirements. This schedule may be altered at the discretion of the Board of the Directors.

### **Section 6.2.2 - International Course Schedule**

Course offering outside the United States will be approved and scheduled by the Board of Directors and need not conform to the Rotational Matrix described above.

## **Section 6.3 – Faculty Guidelines**

Criteria for selection of faculty shall include:

- A. Speaker must be a member of AOA or appropriate professional society associated with his/her profession
- B. Speaker shall have demonstrated proficiency as a teacher by one of the following criteria:
  1. Affiliation with an AOA accredited college of osteopathic medicine, as a voluntary clinical faculty member
  2. Full-time faculty member of an AOA accredited college of osteopathic medicine
  3. Established proficiency for teaching by an AOA or JCAH accredited osteopathic hospital.
  4. Published appropriate articles in approved medical journals
  5. Have sufficient credentials certified by an affiliated professional association
  6. Be an established speaker with The Osteopathic Cranial Academy or AAO as vetted by the Credentials Committee
- C. AOA CME Guidelines for course content and faculty will be followed according to current AOA Standards, including the standard that at least 50 percent of the faculty shall be osteopathic physicians (DOs) or 50% of the presentations shall be provided by osteopathic physicians (DOs)

#### D. Diversity Sensitivity

The Osteopathic Cranial Academy membership, volunteers and staff represent diverse cultures, backgrounds and religious preferences. All speakers/authors should be sensitive to that diversity in all activities. Furthermore, all speakers/authors should be reminded in the speaker confirmation letter to be sensitive to such diversities.

#### **Section 6.4 – Education Goals and Objectives**

The goals and objectives of The Osteopathic Cranial Academy's CME Program are:

- A. To provide a forum in which interested participants shall receive exposure to and acquire practical skill in the science of cranial osteopathy;
- B. To provide information leading toward mastery in the diagnosis and treatment of dysfunction, diseases of the human body, and the restoration of health, utilizing a practical application of the cranial concept;
- C. To provide attendees with a detailed study method for the diagnosis and treatment relating to Osteopathy in the Cranial Field;
- D. To provide the exposure to the framework of knowledge necessary for adequate recording, reporting and communication of this knowledge to medical and non-medical personnel;
- E. To provide for the development of potential liaisons with the physicians in other fields of interest for mutual benefit.
- F. To ensure a standard of program quality, and safety of all course participants.

#### **Section 6.5 – Acceptable CME Topics**

Topics acceptable for CME may include:

- A. Anatomy, embryology, and physiology of the human body, emphasizing the cranial concept in relationships to health and disease;
- B. Physiological motion of the spine, extremities and cranium;
- C. Human physiology, particularly of the neuro-musculoskeletal system;
- D. Physical diagnosis emphasizing palpatory skills;
- E. Integration of medical diagnosis with physical findings and palpatory structural diagnosis;
- F. Recognition of personal, spiritual or psychological factors in health and disease;
- G. Impact of health care legislation and legal issues in the practice of osteopathy.
- H. Research in Osteopathy in the Cranial Field.

#### **Section 6.5.1 Additional Topics**

Additional topics may be approved by the Board of Directors as appropriate.

#### **Section 6.6 – Quality Assessment of Programs**

The Educational Committee shall evaluate all CME programs sponsored by The Osteopathic Cranial Academy. According to The AOA Accreditation Requirements for Category 1 CME Sponsors, Section 2.1 Quality Guidelines for CME, programs shall be based upon some type of needs assessment. Such as,

- A. Pre and post-testing of attendees
- B. Self determination of needs by individual participants.
- C. Relevance to clinical practice.
- D. Post course / conference evaluations
  - a. attendees evaluations: of course director, lecture faculty, lecture content, table training, and facilities
  - b. faculty evaluations: of speakers, lecture content, facilities

#### **Section 6.7 - Advertising and Promotion Policy**

All advertising shall be appropriate to a professional organization, stressing the educational aspects of the program. All promotional brochures and registration forms shall:

- A. Clearly state the educational objective of the program
- B. Define the audience (set pre-requisites) for which the program was intended
- C. Clearly state the registration fee, outlining the items included in the fee
- D. Clearly state the number of CME hours requested
- E. Include the names of speakers and topics which they will be presenting
- F. State cancellation, refund and attendance policies
- G. Comply with

- a. Federal, state and local statutes
- b. AOA, AAO, and The Osteopathic Cranial Academy guidelines

### **Section 6.8 - Maintenance of CME Records**

All CME records (registration forms, attendance forms, etc) shall be in accordance with the AOA Accreditation Requirements Category 1 CME Sponsors Checklist (Section 7), filed with the AOA and retained by The Osteopathic Cranial Academy for a period of six (6) years.

### **Section 6.9 - Certification of CME Attendance**

Credit hours shall be pro-rated for attendees in accordance with actual hours in attendance. No credit is given to individuals who fail to register or attend. Registrants are required to sign an attestation statement indicating the number of hours actually attended, as currently required by the AOA. Certificates of attendance shall not be issued until all registration fees have been paid.

### **Section 6.10 – Refund Policy**

#### **Section 6.10.1 Cancellations by Attendees**

All promotional brochures shall include a cancellation/refund policy. The cancellation policy shall be specific to the student / faculty ratio of each course provided. These cancellation fees are subject to adjustment on an individual basis by the decision of the Board of Directors for special circumstances only.

##### **A. FOR COURSES WITHOUT AN INTENSIVE FACULTY TO STUDENT RATIO:**

1. Annual Conference
2. Intermediate Courses

All Cancellation must be received in writing and are subject to administrative fee of 15% of the total registration fee if received on or before 21 days prior to the first day of the course. Refunds will not be made for cancellations after this date, or for failure to attend. Meal Tickets included with the registration are non-refundable. No discount will be provided for individuals not participating in food functions.

##### **B. FOR COURSES WITH A 1:4 OR 1:6 FACULTY TO STUDENT RATIO:**

1. Introductory Courses
2. Intermediate Courses

All Cancellation must be received in writing and are subject to administrative fee of 15% of the total registration fee if received at the office of The Osteopathic Cranial Academy on or before 90 days prior to the first day of the course. Cancellations received between 90 and 15 days prior to the course are subject to an administrative fee of 25% of the total registration fee, provided that the spot is filled. The entire registration fee will be forfeited for cancellations received 14 days or less prior to the first day of the course or for failure to attend. Meal Tickets included with the registration are non-refundable. No discount will be provided for individuals not participating in food functions.

#### **Section 6.10.2 – Course Cancellation by The Osteopathic Cranial Academy**

The Osteopathic Cranial Academy may cancel a course, should it not meet its attendee requirements by reasonable deadlines. Should it appear that The Osteopathic Cranial Academy will sustain a loss on the course, the course may either be offered, or cancelled – with the recommendation of the Executive Director, and the discretion of the Board or the Executive Committee. If The Osteopathic Cranial Academy cancels an education session, all fees will be refunded.

#### **Section 6.10.3 - Grievances**

Individuals with a grievance should consult directly with the Course Director, President, Grievance Committee or the Executive Director. When necessary, the board of directors may be included. Refunds may be provided on an individual basis to attendees if they have a significant grievance. If CME credits are provided, no refund will be issued.

**Section 6.11 - Disclosure Declaration Statement (prescribed by the AOA)**

It is the policy of The Osteopathic Cranial Academy to insure balance, independence, objectivity and scientific rigor in all its educational programs. All faculty participating in any Osteopathic Cranial Academy sponsored programs are expected to disclose to the program audience any real or apparent conflict(s) of interest that may have a direct bearing on the subject matter of the continuing education program. This pertains to relationships with pharmaceutical companies, biomedical device manufactures, or other corporations whose products or services are related to the subject matter of the presentation topic. The intent of the policy is not to prevent a speaker with a potential conflict of interest from making a presentation. It is merely intended that any potential conflict should be identified openly so that the listeners may form their own judgments about the presentation with the full disclosure of the facts. It remains for the audience to determine whether the speaker's outside interests may reflect a possible bias in either the exposition or the conclusions presented. To ensure cooperation with this standard, a Disclosure Declaration Statement shall be sent to each speaker when the speaker confirmation letter is sent. The signed Disclosure Declaration Statement must be returned to the office of The Osteopathic Cranial Academy before the program is presented. No CME will be recorded nor will speaker expenses be paid until the signed Disclosure Declaration Statement is received by The Osteopathic Cranial Academy.

## **Section 7 - Annual Conference**

The Osteopathic Cranial Academy shall sponsor and manage an annual conference, the development and execution of which shall be overseen by the Annual Conference Subcommittee.

### **Section 7.0 – Conference Schedule Template**

The Osteopathic Cranial Academy Annual Conference Director shall follow the schedule template (Appendix D) provided by the Annual Conference Subcommittee. The curriculum must be approved by the Annual Conference Subcommittee and the Board of Directors. Faculty must be approved by the Credentials Committee and the Board of Directors.

*See Appendix D: Annual Conference Template*

### **Section 7.1 - Site Selection**

The potential conference sites should be selected with input from the Annual Conference Subcommittee, the conference director and the Executive Director. The annual conference site shall be consistent with the recommended regional rotation schedule. Hotel accommodations should be secured at least two years in advance with the approval of the Executive Committee. Final approval is contingent upon vote of the board of directors.

### **Section 7.2 - Conference Director(s)**

A Conference Director shall be appointed by the Annual Conference Subcommittee with input from the President. A Conference Co-Director or Assistant Director may also be appointed. Conference Directors in conjunction with the Annual Conference Subcommittee shall select topics and speakers and shall plan the conference in accordance with the established guidelines (Section 6). Final approval is contingent upon vote of the board of directors.

#### **Section 7.2.1 –Conference Director Compensation**

**Registration Fee:** The registration fee shall be waived for the Conference Director.

**Honoraria:** The Conference Director shall be entitled to an honorarium equivalent to the standard honorarium provided to the Introductory Course Director. When a Conference has both Conference Director and Associate Director the total honoraria could be split in different percentages between the Director and Associate Director with the Associate Director receiving a minimum of \$400.00.

**Per Diem:** The Conference Director shall be entitled to a per diem equivalent to the standard per diem established for the conference speakers.

**Transportation:** The Conference Director shall also be entitled to transportation by 21 day advance purchase coach airfare or mileage at the Internal Revenue Service established rate not to exceed the 21 day advance purchase coach rate. The Conference Director shall also be entitled to ground transportation from the airport to the Conference venue.

**Hotel and Food Expenses:** Reimbursement for hotel expenses for the days necessary to attend and manage the Conference. Lunch and banquet tickets for the Conference Director will be provided by The Osteopathic Cranial Academy.

## **Section 7.3 – Annual Conference Registration**

### **Section 7.3.1 - Registration OCA Annual Conference Eligibility**

Each registrant shall have successfully completed one Osteopathic Cranial Academy Approved 40-hour Introductory Course: Osteopathy in the Cranial Field.

### **7.3.2 - OCA Annual Conference Attendance: International Non-Physician Osteopaths**

In order for international non-physician osteopaths to qualify for admission, they must meet all the criteria of section 7.3.1 and provide the following:

1. Curriculum Vitae, including
  - a. Osteopathic School of Graduation
  - b. Residence and location of Practice
  - c. Number of Years in Practice
  - d. Professional Memberships
  - e. Dates of Approved SCTF courses (or equivalent), with proof of attendance
  - f. List of OCF mentors
2. Proof of Attendance in approved SCTF course. Certificate or Letter from course director.
3. A copy of their diploma proving graduation from their COM or Osteopathic School.
4. Proof that practice is dedicated “exclusively” to osteopathy
5. A certificate of membership in their National Osteopathic Association.
6. A statement of their motivations for attending an OCF Post Introductory Course
7. Letter of recommendation from OCA affiliate member

### **Section 7.3.3 - Registration Fees**

#### **Section 7.3.3.1 - Participating Registrants Fees**

Conference registration fees shall be recommended by the Annual Conference Subcommittee and Treasurer with final approval by the Board of Directors. An early registration discount may be offered to members of The Osteopathic Cranial Academy. All persons attending The Osteopathic Cranial Academy Annual Conference (except the Conference Directors) shall register and pay the appropriate registration fee. *Only registered participating attendees may attend the technical sessions.*

#### **Section 7.3.3.2 - Non-Participating Registrants Fees**

Conference registration fees shall be recommended by the Annual Conference Subcommittee and Treasurer with final approval by the Board of Directors. Non-participating attendees may attend lectures, but not participate in practical sessions. Registration fees for nonparticipating registrants structure shall be reduced to reflect the limited participation.

Non-participating Students: \$300

Non-participating Interns and Residents: \$350

Non-participating Physicians and Dentists: \$650

Should Non-participating Physicians and Dentists register to attend an OCA Introductory Course within 2 years of the Annual Conference, \$150 of the Non-participating Registration Fee shall be applied to that OCA Introductory Course.

#### **Section 7.3.3.3 - Registration Fees – Waivers**

A complimentary registration for the annual conference may be offered to the SCTF president (or a SCTF trustee selected by the SCTF president) and the AAO president.

### **Section 7.3.3 - Section 7.3.3 Annual Conference Cancellation Policy**

See Section 6.10

## **Section 7.4 - Conference Speakers**

All conference speakers must submit an abstract of their presentation to the Conference Directors at least 30 days prior to the conference. All speakers must be approved by the Credentials Committee

### **Section 7.4.1 - Conference Speakers Compensation**

Registration Fee: The registration fee shall be equivalent to the student fee.

Honoraria: Conference speakers shall be entitled to an honorarium of \$250.00 per lecture hour, (prorated for partial hours). Conference speakers shall be entitled to an honorarium of \$150.00 per lab hour, (prorated for partial hours). When more than one speaker presents either a lecture or lab the appropriate fee share be equally divided among all speakers.

Per Diem: The Conference Speaker shall be entitled to a per diem equivalent to the standard per diem established for the conference.

Transportation: A Conference Speaker shall also be entitled to transportation of a 21-day advance purchase coach airfare or mileage at the Internal Revenue Service established rate not to exceed the round trip advanced purchase coach rate.

Hotel and Food Expenses: A Conference Speaker shall be entitled to reimbursement for room and tax at the host hotel for the days that the Speaker presents to the Conference. Lunch and banquet tickets for a Conference Speaker will be provided by The Osteopathic Cranial Academy.

Faculty and others traveling at Osteopathic Cranial Academy expense should be made aware that travel expenses may not be reimbursed if our guidelines are not followed.

### **Section 7.4.2 Speakers Attendance, when they do not meet criteria for regular attendance**

Speakers (who are experts in their specific fields, but do not qualify for regular attendance to our conference) may be present through the entirety of the conference. They will explicitly not participate in practical sessions, and will not be receiving any formal training in the practice of osteopathic medicine. The intent is to provide context so that they may provide a more relevant presentation and be available for dialogue with conference attendees.

This special category of speaker is to be assigned a “contact person” by the course director. This individual shall be available to provide treatment, and answer any questions.

This special category of speaker will not be allowed to lay down on the table and serve as patients during practical sessions, as this may be construed as “participating.”

## **Section 7.5 - Conference Table Trainers**

Table trainers for the Annual Conference shall be chosen by the lecturer, and program chairperson, with approval of the Annual Conference Subcommittee. Qualified table trainers should be Regular Members or MD Associate Members of The Osteopathic Cranial Academy and/or Faculty of the SCTF, preferably holding a Recognition of Proficiency. Names of table trainers who do not meet the established criteria should be submitted to the Credentials Committee for approval before a written or verbal invitation to table train is extended. Documentation for special exception should be included with the request. Qualified osteopathic students may be used as table trainers for student attendees at the conference.

### **Section 7.5.1 - Conference Table Trainer Compensation**

Registration Fee: Table Trainers, wishing to attend the conference and earn CME credit may register for the conference at the lowest registration fee available (usually the student fee).

Table trainers not wishing to earn CME credit are not required to pay a registration fee, and may purchase social event tickets separately. Lunch will be provided to all table trainers.

### **Section 7.6 - Conference Audio/Video Recording**

All lectures and practical sessions should be audio/video recorded for Osteopathic Cranial Academy archiving, and potential publication. The Osteopathic Cranial Academy may employ an agent to make audio/video recordings, with the written consent of the conference speaker(s), with The Osteopathic Cranial Academy retaining the right to the recordings. The Osteopathic Cranial Academy maintains the copyright privileges and rights to The Osteopathic Cranial Academy conference material. Conference recordings may be sold, with written consent of the speaker to conference registrants. Individuals who meet pre-requisites to attend but did not register for the conference, may also purchase recordings. Recordings may be priced higher for those who did not attend the conference. At the Board's discretion, discounts may be offered to members who purchase recordings. No personal recording is permitted.

### **Section 7.7 - President and Board Member Attendance**

The President:

The President's travel, hotel expense and conference registration fee shall be paid to attend the Annual Conference. The President's air travel reimbursement shall be at the 21 day advance coach fare or mileage reimbursement shall be paid at the maximum rate permitted by the IRS not to exceed the 21 day advance purchase coach fare.

Board of Directors:

One night's hotel room and tax shall be paid by The Osteopathic Cranial Academy for Board of Director members attending the opening Board of Directors meeting at the Annual Conference. Receipts are required for all expense reimbursements.

### **Section 7.8 - Carl Rathjen Scholarships**

The Osteopathic Cranial Academy may offer one scholarship, called the Carl Rathjen Scholarship, to a student at each osteopathic college for each Osteopathic Cranial Academy Conference. The head of the OMM Department is to be contacted by March 1st of each calendar year, and the scholarship offered to a student who has had an approved 40-hour introductory course.

### **Section 7.9 - Announcements**

All announcements made during the Annual Conference about events or organizations that are outside of The Osteopathic Cranial Academy or its affiliated societies must be submitted in writing to the Executive Director for approval at least one week in advance of the Annual Conference. Last minute announcements must be vetted by ALL of the following: The Annual Conference Subcommittee chair, Executive Director, and Osteopathic Cranial Academy President.

## **Section 8 - Introductory Course in Osteopathy in the Cranial Field**

An Introductory Course in Osteopathy in the Cranial Field will be offered, at least once per year as a foundation for a comprehensive educational matrix. The Introductory Course must meet all standards established under Section 6 - Educational Programs, with differences as specified below.

### **Section 8.1 - Introductory Course Faculty**

The faculty/student ratio must be at least 1:4. The Credentials Committee should be contacted at least one month prior to an Introductory Course offering if faculty approval is needed. Alternative pathways to faculty admission are subject to approval of the Introductory Course Subcommittee, Credentials Committee, and Board of Directors.

#### **Section 8.1.1 - Introductory Course Faculty Requirements**

See Appendix C: *Pathway for Development of Introductory Course Faculty*.

The Introductory Course faculty must meet the following criteria:

#### **Introductory Course Table Trainer**

- A. Active Member of The Osteopathic Cranial Academy.
- B. Minimum of three (3) years of clinical experience, recommended 5 or more years.
- C. Other acceptable qualifications:
  1. OMM residency = Two (2) years clinical experience
  2. OMM "plus 1" residency = One (1) year clinical experience
  3. Undergraduate OMM fellowship = One (1) year clinical experience
  4. Other residencies will be considered accordingly for OMM clinical experience.
- D. Completion of at least two (2) approved 40-hour Introductory Courses in Osteopathy in The Cranial Field.
- E. Recommend one AOA approved Intermediate / Advanced course implementing the cranial concept.
- F. Currently licensed to practice osteopathy, osteopathic medicine, medicine or dentistry.

#### **Introductory Course - Lecturer**

- A. Active Member of The Osteopathic Cranial Academy
- B. Minimum of five (5) years of clinical experience.
- C. Completion of at least two (2) approved 40-hour Introductory Courses in Osteopathy in The Cranial Field.
- D. Currently licensed to practice osteopathy, osteopathic medicine, medicine or dentistry.
- E. Hold either a Recognition of Proficiency or be a Fellow of The Osteopathic Cranial Academy (FCA). Potential physician faculty with AOBSPOMM; NMM/OMM or FAAO recognition, or having been in practice prior to the granting of AOBSPOMM (1990) may be approved on an individual basis by the Course Director and the Introductory Course Committee chair and Credentials Committee chair. Potential physician faculty without the above credentials may be approved on an individual basis by the Course Director and the Chair of the Introductory Course Committee based on clinical and teaching experience.

- A. Completion of at least one AOA approved Intermediate / Advanced course implementing the cranial concept.

#### **Introductory Course Director-in-Training**

- A. Regular or MD Associate member of The Osteopathic Cranial Academy
- B. Minimum of seven (7) years of clinical experience.
- C. Participation (as student, faculty or table trainer) in at least five (5) approved Introductory Courses in Osteopathy in The Cranial Field.
- D. Currently licensed to practice osteopathic medicine or medicine.

- E. Hold either a Recognition of Proficiency or be a Fellow of The Osteopathic Cranial Academy (FCA). Potential physician faculty with AOBSPOMM; NMM/OMM or FAAO recognition, or having been in practice prior to the granting of AOBSPOMM (1990) may be approved on an individual basis by the Course Director and the Introductory Course Committee chair and Credentials Committee chair. Potential physician faculty without the above credentials may be approved on an individual basis by the Course Director and the Chair of the Introductory Course Committee based on clinical and teaching experience.
- F. Completion of at least one (1) AOA approved Intermediate / Advanced course implementing the cranial concept.
- G. Previous lecture experience.
- H. Recommendation of a current Introductory Course Director.

#### **Introductory Course Assistant Director**

- A. Meets all requirements listed under Director-in-Training.
- B. Has served as Director-in-Training on at least one (1) occasion.
- C. Recommendation of a current Introductory Course Director.
- D. Approval by the Board of Directors.

#### **Introductory Course Associate Director**

- A. Meets all requirement listed under Introductory Course Assistant Director.
- B. Has served as Assistant Director on at least one (1) occasion.
- C. Recommendation of a current Introductory Course Director.
- D. Approval by the Board of Directors.

#### **Introductory Course Director**

- A. Meets all requirement listed under Introductory Course Associate Director.
- B. Has served as Associate Director on at least one (1) occasion.
- C. Recommendation of a current Introductory Course Director.
- D. Approval by the Board of Directors.

### **Section 8.2 - Introductory Course Director Responsibilities.**

[To Be Developed]

### **Section 8.3 - Introductory Course Registration Requirements**

The Osteopathic Cranial Academy supports and encourages educating the health care community about the principles and practices of osteopathic medicine. In order for our students to learn the scope of practice of cranial osteopathy in a comprehensive fashion and in order for them to apply this form of practice in a manner that is both safe and appropriate, it is crucial that they meet the necessary prerequisites for the Introductory Course.

#### **8.3.1 - OCA Introductory Course Attendance: International Non-Physician Osteopaths**

In order for international non-physician osteopaths to qualify for admission, they must meet all the criteria of Appendix G and provide the following:

1. Curriculum Vitae, including
  - a. Osteopathic School of Graduation
  - b. Residence and location of Practice
  - c. Number of Years in Practice
  - d. Professional Memberships
2. A copy of their diploma proving graduation from their COM or Osteopathic School.
3. Proof that practice is dedicated “exclusively” to osteopathy
4. A certificate of membership in their National Osteopathic Association.
5. A statement of their motivations for attending an OCF Introductory course
6. Letter of recommendation from OCA affiliate member

*See Appendix G: Introductory Course Enrollment Requirements*

## **Section 8.4 - Introductory Course Content**

(40 hours teaching minimum) Course content must be pre-approved by the Introductory Course Subcommittee. The Introductory Course must include lectures on the following topics: See *Appendix H: Introductory Course Content*

## **Section 8.5 - Introductory Course Approval**

To obtain Osteopathic Cranial Academy approval, an Introductory Course in Osteopathy in the Cranial Field must meet faculty and course content requirements already established for Osteopathic Cranial Academy offerings in Section 8.1 and 8.4 with the following minimal considerations:

A. A faculty roster and course syllabus must be submitted to the Introductory Course Subcommittee at least three month prior to the proposed course for preliminary review, provided it has not been previously approve. Final course approval will be decided within two months of receiving a copy of the actual course syllabus and faculty roster in addition to copies of lecture and laboratory session outlines.

B. The Course Director must either hold a Recognition of Proficiency, FCA or FAAO. AOBSPOMM or NNM/OMM holders and physicians who have been in practice prior to the granting of AOBSPOMM (1990) may receive exemption by The Osteopathic Cranial Academy Credentials Committee.

C. For any course participant to have successfully completed an Osteopathic Cranial Academy approved Introductory Course, he/she must pass a written exam administered by the course faculty at the time of the completion of the course (or pass the written portion of The Osteopathic Cranial Academy Proficiency Examination). A practical exam must also be given.

D. Once a given group, organization or college has received approval for a Introductory Course, approval for subsequent Introductory Course offerings will not require receipt of copies of lecture and laboratory session outlines provided that course content remains unchanged. This approval will remain at the discretion of the Credentials Committee.

E. The Faculty/Student Ratio must be 1:4

F. All participants must be eligible for Osteopathic Cranial Academy membership (per bylaws Article IV).

### **Section 8.5.1 - Introductory Course in OCF Offered at Osteopathic Colleges for Students**

When an introductory course in OCF is offered at an osteopathic college for students, at least 75 percent of the table trainers must be Osteopathic Cranial Academy members (Student or Regular). Table trainers who are not members of The Osteopathic Cranial Academy must have completed an approved course in Osteopathy in the Cranial Field. All requirements A-F as above.

40 hour Introductory Courses provided at the Colleges of Osteopathic Medicine may not meet the standards of the Introductory Courses provided by the OCA and SCTF. Therefore, (2) two levels of OCA approval for Introductory Courses at COMs have been established.

#### **LEVEL I:**

When a COM 40-hour Student Introductory Course does not meet all the standards of a fully approved OCA 40 hour course, it may be considered for LEVEL I approval. Each case will require review of the Credentials Committee, and OCA Board approval. An approved LEVEL I COM 40-hour Student Introductory Course shall qualify for OCA membership, and attendance at the Annual Conference, ONLY.

When Intermediate and Advanced Continuing Studies Curriculum requires a prerequisite of an OCA approved Introductory 40 hour courses, an approved Level I 40-hour COM Student Introductory Course shall not be considered adequate qualification for advancement through the continuing studies curriculum.

## LEVEL II:

If all requirements in Sections 8.1, 8.4 and 8.5 are met, a COM 40-hour Student Introductory Course may be designated an approved Level II course and may be considered eligible as a prerequisite for attendance at Intermediate and Advanced courses.

When the Intermediate and Advanced Continuing Studies Curriculum requires a prerequisite of (1) OCA approved Introductory 40 hour course, an approved Level II course may qualify for advancement through the continuing studies curriculum.

When the Intermediate and Advanced Continuing Studies Curriculum requires a prerequisite of (2) OCA approved Introductory 40 hour courses, an approved Level II COM Student Introductory Course may qualify for only 1 of the 2 introductory courses required for advancement through the continuing studies curriculum.

### **Section 8.5.2 The William Garner Sutherland Dental Study Group Introductory Course**

- A. Course Directors and Table Trainers must hold a Cranial Dental Certificate of Competency.
- B. Course Practice sessions must have a minimum Table Trainer/Student ratio of 1:4. The Course Director and 100% of these Table Trainers must have successfully completed a 40 Hour Introductory Course in Osteopathy in the Cranial Field that was taught by either The Osteopathic Cranial Academy or the Sutherland Cranial Teaching Foundation.
- C. For any course participant to have successfully completed an Osteopathic Cranial Academy-approved Introductory Course, he/she must pass a written exam administered by the course faculty at the time of the completion of the course. A practical exam must also be given.
- D. The WGSTD Introductory Course Lecture and Lab outlines had been previously approved by The Osteopathic Cranial Academy Credentials Committee. Any substantial changes in these should be forwarded to the Credentials Committee for review.
- E. All active members of this faculty must come into compliance with Section B by March 2011. The WGSTD Study Group should provide The Osteopathic Cranial Academy with updates on the training status of these faculty as changes occur. When additional faculty are added to the WGSTD faculty roster, their names and qualifications should be forwarded to the Academy's Credentials Committee for review.

### **Section 8.6 - Grades and Certificates**

A ledger shall be kept with a record of attendees' grades.

A certificate shall be sent to those who passed and a letter of encouragement to those who did not pass.

A group photograph and list of registrants shall be kept in the archives.

### **Section 8.7 - Introductory Course Financial Considerations**

- A. Financial oversight of the Introductory Course shall be vested with the Finance Committee and the Introductory Course Subcommittee.
- B. A half-day faculty meeting commencing after lunch may be scheduled with no per diem for the participants except the Course Director who may elect to arrive the night before in order to make adequate preparation for the meeting.
- C. The reimbursed faculty shall be limited to the 1:4 faculty/student ratio plus the Course Director.
- D. Only one faculty assistant will be budgeted for each course. Consideration should be given to a local student who would not require expense reimbursement.
- E. No more than two extra treatment tables will be shipped to the Introductory Course for faculty use.
- F. Daily food and beverage expense at the Introductory Course shall be limited to two beverage breaks and lunch. The food service provider shall be instructed to add no additional items. Exceptions may be made with the approval of the Executive Director.

### **Section 8.7.1 Introductory Course Compensation**

Receipts are required for all expense reimbursements. Faculty and others traveling at Osteopathic Cranial Academy expense should be made aware that travel expenses may not be reimbursed if Osteopathic Cranial Academy guidelines are not followed. A half-day faculty meeting on the day preceding day 1 of the course may be scheduled. There is no per diem on that day, but a faculty dinner within a reasonable food allowance is encouraged.

Director Honoraria: Introductory Course Director \$1,100.00 Associate Director \$400.00 at the discretion of the Course Director, the total honoraria of \$1,500.00 could be split in different percentages between the Director and Associate Director with the Associate Director receiving a minimum of \$400.00.

Faculty Honoraria: \$250.00 per hour for lectures; \$150.00 per hour for practical sessions; \$200.00 per day for table training. Honoraria in excess of the standard amounts shall require approval by the Board of Directors.

Per Diem: Faculty per diem shall be up to the cost of a standard room including tax at a designated hotel plus \$40.00 and is intended to cover the cost of meals, lodging and incidentals.

Lodging: Reimbursement shall be limited to faculty who require a room and shall be prorated for those who elect to share a room. An additional nights lodging may be reimbursed for attending the faculty meeting, subject to approval of the executive director.

Transportation: Ground transportation to and from the airport to the course venue may be reimbursed. Air travel reimbursement shall be at the 21 day advance coach fare or mileage reimbursement shall be paid at the maximum rate permitted by the IRS not to exceed the 21 day advance purchase coach fare.

### **Section 8.8 - Introductory Course Cancellation Policy**

See Section 6.10

### **Section 8.9 - Introductory Course Scholarships**

Introductory Course scholarships are funded through The Cranial Academy Foundation, Inc. Terms and conditions of distribution are set by the Board of Directors of The Cranial Academy Foundation, Inc.

## **Section 9 - Continuing Studies - The Tiered Curriculum**

The Continuing Studies Subcommittee is responsible for the design and implementation of both Level 1 and Level 5 of The Osteopathic Cranial Academy Tiered Curriculum (defined in section 6). The overall goal of the tiered curriculum is to provide a pathway to mastery of the principles and practices of Osteopathy in the Cranial Field.

Level 1 courses provide an Introduction to Osteopathic Principles to MD's and DDS/DMD's.

Level 5 courses provide an Intermediate and Advanced Curriculum, beyond the Introductory Course in Osteopathy in the Cranial Field.

### **Section 9.1 – Level 1 Courses**

To be developed

### **Section 9.2 – Level 5 Courses**

#### **Section 9.2.1 – Level 5 Course Structure**

Level 5 courses include:

- A. Core Level 5 Courses
  - i. Developed by the Continuing Studies Subcommittee
- B. Elective Level 5 Courses
  - i. Developed by the Continuing Studies Subcommittee
  - ii. Member Designed Courses
    - i. Courses by general Academy members, in cooperation with the Subcommittee

#### **Section 9.2.2 – Level 5 Course Content**

- A. Course content shall meet the requirements of Section 6.5.
- B. Course content must be pre-approved by the Continuing Studies Subcommittee.
- C. Initial course proposals must be reviewed and approved by the Board of Directors.

### **Section 9.3 – New Course Development Protocol**

Goal: The curriculum development process shall be consistent and easily replicated.

Overview:

- A. Course Structure and Content shall be developed by Continuing Studies Subcommittee
- B. Course Faculty shall have final approval of the Credentials Committee
- C. Course Financial Considerations shall have final approval of the Finance Committee
- D. Approval by the Board of Directors will be required at the following stages of Course development:
  - i. When a course is first presented in concept
  - ii. When a course has reached its final stage of development
  - iii. When a course is scheduled for the calendar year.

#### **Section 9.3.1 Continuing Studies Subcommittee Designed Courses – Review Process**

- A. Initial Course Development:
  - i. Courses developed by the Continuing Studies Subcommittee, may be initiated
    - a. From within the committee itself, or
    - b. The Board of Directors may charge the committee with creating a specific course.
  - ii. The Continuing Studies Subcommittee (CSS) shall then determine the sequence in which courses should be developed.
- B. Course Curriculum Coordinators (CC)
  - i. No more than two course CCs shall be selected to lead the course development process.
- C. Course Goals Development
  - i. The CCs shall produce a rough draft of course goals
  - ii. The Subcommittee shall deliberate and comment upon the rough draft

- iii. The CCs shall refine these goals until consensus is reached.
- D. Course Outline Development
  - i. The CC shall develop a draft course outline, establishing:
    - a. Specific goals for each lecture and lab.
    - b. Course prerequisites.
    - c. Faculty/Student ratio
    - d. Maximum class size.
  - ii. The Subcommittee shall review the outline for comments and suggestions.
  - iii. The draft outline and specific goals shall be rewritten by the CCs, and sent again to the Subcommittee for final Subcommittee review
    - a. This process may require several cycles
    - b. The Subcommittee shall be involved in the entire process.
- E. Final Course Design
  - i. The final document shall require formal Subcommittee approval.
  - ii. Upon final approval by the Subcommittee, the final course design shall be forwarded to the Board of Directors for review and approval.
- F. Timelines
  - i. Timelines, with deadlines for Subcommittee reviews are to be determined by the Subcommittee for each round of the process.
  - ii. The deadlines for completion of the course design process must allow ample time for marketing of a course, including
    - a. publication of flyers that include a course schedule,
    - b. promotion in the newsletter
    - c. registration (See Section 9.7 - Scheduling of Courses)
    - d. other needs

### **Section 9.3.2 - Member Designed Courses**

Courses developed by Academy members (outside the subcommittee structure) may also become Osteopathic Cranial Academy offerings. The Osteopathic Cranial Academy does not co-sponsor courses put on by non-members.

#### **Section 9.3.2.1 – Members Designed Course – Initial Proposal**

- A. A written proposal for the course must be presented to the Chair of the Continuing Education Committee, and should include:
  - i. A description of course content.
  - ii. A description of teaching objectives.
  - iii. A copy of the course schedule.
  - iv. A copy of the course syllabus.
  - v. A list of reasons why this course will further the Academy's mission.
- B. The course developer should also provide estimates of:
  - i. Suggested course prerequisites.
  - ii. Projected class size.
  - iii. Number of faculty and table trainers required.
  - iv. A list of specific individuals for faculty, if necessary, including:
    - a. Copies of their biosketches or curriculum vitae.
    - b. A list of potential future dates when this faculty might be available to teach the course.
  - v. Equipment needs.
  - vi. Possible specific location and site requirements.

### **Section 9.3.2.2 Member Designed Course – Continuing Studies Review Process**

- A. Members with course proposals (Course Developers) are to be informed that the committee process requires at least 2 years time, before any course may be made available to the membership. The Osteopathic Cranial Academy plans its schedule of CME offerings two years or more into the future.
- B. The Continuing Studies Subcommittee shall assess the proposal for appropriateness and quality of course content.
  - i. If the Subcommittee favors the idea of the course, but feels that the proposal needs further development, the Course Developer shall be informed of further actions required.
  - ii. The Course Developer may work either independently or in conjunction with members of the Subcommittee.
- C. Upon Subcommittee approval for Academy Sponsorship, a rough draft of the proposal shall then be forwarded to the Board of Directors for *approval in concept*.
- D. Upon Board of Directors approval the Subcommittee shall make the following determinations:
  - a. Appropriate course prerequisites, class size, and faculty/student ratio.
  - b. Approximate geographic region allowing the course to fit harmoniously with the rest of The Osteopathic Cranial Academy's course scheduling matrix.

### **Section 9.4 – Course Approval Process**

#### **Section 9.4.1 – Credentials Committee Review**

Upon approval in concept by the Board of Directors, the proposed faculty of all courses must be approved by the Credentials Committee.

#### **Section 9.4.2 – Finance Committee Review**

Upon approval by the Credentials Committee, the course proposal shall be reviewed by the Finance Committee.

- A. The Finance Committee shall work with the Executive Director to draft a course budget, and determine the economic feasibility of the course.
- B. The Finance Committee shall consider registration fee, estimated expenses, minimum necessary enrollment, and faculty honoraria to ensure a “reasonable” minimal net income for The Osteopathic Cranial Academy.
  - i. On rare occasions the intrinsic value of a particular course may allow for an occasional “reasonable” net loss. Final determination resides with the Board of Directors.
- C. Faculty compensation shall follow a similar compensation structure to that used in The Osteopathic Cranial Academy Introductory Course. The Finance Committee may also consider an alternate compensation structure based on course enrollment, with total compensation not exceeding the hourly compensation rate of Introductory Course Faculty. [see Section 9.11.3]
- D. The Finance Committee shall return its recommendation with an estimated budget to the Chair of the Continuing Studies Subcommittee, who shall submit the course proposal to the Board of Directors.

#### **Section 9.4.3 – Approval by the Board of Directors**

Final approval of all Level 5 courses shall be determined by The Osteopathic Cranial Academy Board of Directors.

#### **Section 9.5 – Level 5 Course Faculty**

All Faculty shall be approved by the Continuing Studies Subcommittee and vetted by the Credentials Committee. Established Faculty need only preliminary evaluation. New Faculty require thorough evaluation by the Credentials Committee. Curriculum Vitae of all faculty, must be updated to within 5 years, and on file in The Osteopathic Cranial Academy Office. Final faculty approval rests with The Osteopathic Cranial Academy Board of Directors.

## Section 9.5.1 – Level 5 – Course Director

- A. Committee Designed Courses
  - i. The Continuing Education Sub-Committee shall appoint a Course Director (CD).
  - ii. The Course Coordinator (CC), involved in the course design process, may or may not be considered a potential candidate for course director.
  - iii. The CD shall meet the same qualifications for Introductory Course Director described in Section 8.1.1.
- B. Member Designed Courses
  - i. An individual who has created the new course material will typically become the designated Course Director (CD).
  - ii. Duties shall include developing the curricular content and making basic choices about eligibility of other faculty.
  - iii. There may be times when the course creator does not meet the qualifications for Introductory Course - Course Director described in Section 8.1.1.
    - a. Under these circumstances the duties of the Associate Director (AD) will assume the responsibilities of the Course Director.
- C. The responsibilities of the Course Director shall include:
  - i. The CD shall confer with the CC, the Associate Director (AD), and the Sub-Committee Chair regarding course design issues, including:
    - a. Adjusting the course schedule as needed
    - b. Determination of appropriate faculty/student ratio
    - c. Choice and vetting of faculty, table trainers, and assistant table trainers.
    - d. Designing appropriate training for the aforementioned table trainers and assistant table trainers.
    - e. Ensuring that the design, administration, and presentation of the course is consistent with Osteopathic Cranial Academy policies and practices.
  - ii. The CD shall coordinate with the subcommittee and The Osteopathic Cranial Academy staff regarding structural and administrative matters before and at the course.
  - iii. The CD shall take responsibility for handling problems at the course, including:
    - a. Handling Treatment Reactions not adequately resolved by table trainers at the tables.
    - b. Addressing new and unforeseen administrative issues that arise at the course (in consultation with the Executive Director, if present).
    - c. Addressing grievances that arise at the course.
      - 1. The Executive Director or The Osteopathic Cranial Academy Staff, when present at a course, may address issues of general course administration and paperwork, but should not substitute for the role of the CD and/or AD in addressing grievances during the course.
  - iv. The CD shall encourage constructive feedback regarding course content and procedures.
  - v. The CD shall delegate responsibilities to the Associate Director at the course, as he or she deems appropriate.
  - vi. The CD shall include the Associate Director in the decision making process when practical, both before and during the course (as part of the AD's training process).

### **Section 9.5.2 - Level 5 - Associate Director**

Each Level 5 course shall have one faculty member designated as Associate Director (AD). The AD should meet the qualifications for Introductory Course Associate Director described in Section 8.1.1.

- A. The responsibilities of the Associate Director shall include:
  - i. The AD shall confer with the CD regarding all issues that arise during the course planning process.
  - ii. The AD shall assist the CD with the CD's responsibilities at the course, as requested by the CD.
  - iii. In the event of the CD's absence or unavailability the AD shall assume all the CD's responsibilities.
  - iv. At the direction of the CD:
    - a. The AD may assist the Executive Director (if present) with general course administration and paperwork.
    - b. In the absence of the Executive Director or The Osteopathic Cranial Academy staff, the AD may take ultimate responsibility for handling course paperwork and other strictly administrative matters.
    - c. The AD may perform any other tasks necessary to allow a course to run smoothly.
  - v. When the Course Director is giving the majority of lectures and labs at the course, the Associate Course Director should meet the qualifications to be a Course Director, and assume course director responsibilities described in Section 9.4.1 (Thus allowing the CD to focus on coordinating the didactic mission of the course.)
  - vi. Should the Course Developer of Member Designed Course not meet the qualifications for Introductory Course Director described in Section 8.1.1, the Assistant Director should meet the qualifications for Course Director and assume Course Director responsibilities in 9.6.1.

### **Section 9.5.3 - Level 5 - General Faculty and Table Trainers**

- A. The CD is responsible for selecting course faculty, table trainers, and table trainers in training.
- B. Faculty shall meet the criteria described in Section 8.1.1.
- C. All faculty that participate in Level 5 Courses must be approved by the Credentials Committee.
- D. Course Faculty and Table Trainers shall be selected with the following considerations:
  - i. Familiarity with topic.
  - ii. Skill as a practitioner, table trainer and lecturer.
  - iii. Seniority as faculty at Osteopathic Cranial Academy courses.
  - iv. Proficiency Recognized.
  - v. Number and type of courses attended as faculty and student.
  - vi. Number of years in practice.
  - vii. Geographic location relative to course venue.

### **Section 9.5.4 – Level 5 – Faculty Development**

Level 5 courses serve an educational function for both students and faculty. Participation shall provide students with the skills and confidence that they need to participate as faculty in future Introductory and Post-Introductory Courses.

#### **Table Trainers in Training**

- A. Table Trainers in Training (TTT) should be included in all Level 5 Course for the purpose of training potential new faculty.
  - i. Each course shall not have more than one TTT per senior faculty member.
- B. Proposed Table Trainers in Training (TTT) shall meet the qualifications defined in the “Faculty Development Pathway -- Introductory Course” for Level I Faculty in Training (Appendix C). The position of TTT can be filled by any faculty member.
- C. Responsibilities of the Table Trainer in Training include:
  - i. Working with a different senior faculty each day, as assigned by the Course Director.
  - ii. Staying with the assigned tables and faculty, unless otherwise instructed.
  - iii. Participating at the tables as guided by the supervising senior faculty.
  - iv. The Table Trainer in Training shall refrain from treating any students, and especially avoid handling treatment reactions, deferring to senior faculty’s judgment.

### **Section 9.6 - Scheduling of Courses**

- A. The Continuing Studies Subcommittee shall plan the schedule of Level 1 and Level 5 Courses (see Section 6.2.1), with a goal of planning at least two years in advance.
- B. The Subcommittee shall have the authority to schedule up to four courses a year:
  - a. An Elective Level 5 Course in September or early October
  - b. A Core Level 5 Course in February, on the weekend following the February Introductory Course.
  - c. One or two regional Level 5 Courses in April or May.
- C. Additional Level 5 or Level 1 courses may be scheduled at the discretion of the Subcommittee, subject to the approval of the Board of Directors.
- D. Course locations should generally be rotated between 3 regions (West, Central, East).
  - i. The Executive Director shall be responsible for arranging course venues.
  - ii. These venues shall be reserved well in advance, planning for course sizes of up to 40 participants for the Fall Elective and February Core offerings. Smaller numbers of participants may be planned for with the regional courses in April/May.

### **Section 9.7 - Special Courses**

The Osteopathic Cranial Academy may wish to put on special courses taught by experts who are not members of the Academy (for example, a course on embryology).

- A. Initial review and approval of the content of such courses should be performed by the Continuing Studies Subcommittee.
- B. If the Continuing Studies Subcommittee approves the course in concept, then course development should proceed as outlined in Section 9.3.2.2 (Member-Designed-Courses – New Course Development Protocol).

### **Section 9.8 - Sponsorship of Non Osteopathic Cranial Academy Course offerings, including Study Groups**

All educational programs sponsored by The Osteopathic Cranial Academy must comply with AOA policy. AOA policy does not provide for co-sponsorship of courses outside The Osteopathic Cranial Academy’s educational curriculum. All educational programs sponsored by The Osteopathic Cranial Academy must occur within The Osteopathic Cranial Academy’s educational curriculum.

## **Section 9.9 - Eligibility for Participation in Osteopathic Cranial Academy Post-Introductory Course Curricula**

- A. Registration for post-introductory courses offered by The Osteopathic Cranial Academy is open to any member of The Osteopathic Cranial Academy.
- B. Requirements for entry into Post-Introductory Courses may vary, depending upon nature of the specific course offerings.
- C. Attendance at *all* Post-Introductory Courses will require, at a minimum, successful completion of one Osteopathic Cranial Academy-approved 40 hour Introductory Course.
- D. Post-Introductory Courses may require one of the additional listed pre-requisites:
  - a. Successful completion of another Post-Introductory Course
  - b. Successful completion of two Osteopathic Cranial Academy-approved 40 hour Introductory Courses.
- E. The following qualifications may be recognized as a substitute for a second required 40 hour Introductory Course:
  - a. 3 years clinical practice (80% cranial or greater, as listed in our directory)
  - b. Completion of OMM residency (2 yr or "+1") or OMM undergraduate fellowship.
  - c. FCA, FAAO, or current The Osteopathic Cranial Academy Proficiency Recognition.
  - d. One approved equivalent Level 5 course from outside The Osteopathic Cranial Academy curriculum (eg. the SCTF intermediate course curriculum).
  - e. Exceptions: Under exceptional circumstances an individual who does not meet established eligibility for a second required 40 hour Introductory Course may be permitted to a course. Such admission shall require approval of all of the following:
    - i. The Course Director (or AD when indicated)
    - ii. The Chair of the Credentials Committee
    - iii. The Chair of the Continuing Studies Subcommittee.

### **9.9.1 - OCA Continuing Studies Course: International Non-Physician Osteopaths**

In order for international non-physician osteopaths to qualify for admission, they must meet all the criteria of section 9.9 and provide the following:

1. Curriculum Vitae, including
  - a. Osteopathic School of Graduation
  - b. Residence and location of Practice
  - c. Number of Years in Practice
  - d. Professional Memberships
  - e. Dates of Approved SCTF courses (or equivalent), with proof of attendance
  - f. List of OCF mentors
2. Proof of Attendance in approved SCTF course. Certificate or Letter from course director.
3. Proof that practice is dedicated "exclusively" to osteopathy
4. A copy of their diploma proving graduation from their COM or Osteopathic School.
5. A certificate of membership in their National Osteopathic Association.
6. A statement of their motivations for attending an OCF Post Introductory Course
7. Letter of recommendation from OCA Affiliate Member

## **Section 9.10 - Financial Considerations**

### **Section 9.10.1 - General Considerations**

- A. Upon Final Course Approval by the Board of Directors, the Executive Director shall then negotiate contracts with Faculty, Hotel, and Conference Site.
- B. Upon signing of all contracts, The Osteopathic Cranial Academy shall proceed with course promotion and presentation, and arrangement of CME accreditation. The Osteopathic Cranial Academy will collect all course income, and will pay all contracted course expenses, using procedures similar to those used in Introductory Courses.
- C. Financial oversight of Level 5 Courses shall be vested with the Finance Committee, in consultation with the Continuing Studies Subcommittee.
- D. The financial budget for the course shall be developed by the Finance Committee in consultation with the Executive Director, with final approval by the Board of Directors.
- E. The reimbursed faculty shall be limited to the course's faculty/student ratio plus the Course Director.
- F. One qualified faculty AV assistant shall be budgeted for each course. Consideration should be given to a local student who would not require expense reimbursement.
- G. A half-day faculty meeting commencing after lunch on the day before the course may be scheduled.
- H. No more than two extra treatment tables will be shipped to the Course for faculty use.
- I. Access to a treatment space with tables should be available for student and faculty use outside of course hours.
- J. Daily food and beverage expense at the Introductory Course shall be limited to two beverage breaks and lunch. The food service provider shall be instructed to add no additional items. Exceptions may be made with the approval of the Executive Director.

### **Section 9.10.2 - Level 5 Course Faculty Compensation**

- A. All honoraria are subject to approval by the Board of Directors.
- B. Course Director honoraria may vary, depending upon the administrative burdens of the course, and other factors. Honoraria shall be determined by the Finance Committee in consultation with the Executive Director and the Chair of the Continuing Studies Subcommittee.
- C. Faculty Honoraria: \$250.00 per hour for lectures; \$150.00 per hour for practical sessions; \$200.00 per day for table training.
- D. Lodging: Reimbursement shall be up to the cost of a standard room including tax at a designated hotel. Reimbursement shall be limited to faculty who require a room and shall be prorated for those who elect to share a room. Distant faculty whose travel schedule requires arrival the night prior to the faculty meeting may be reimbursed for the extra night's lodging, at the discretion of the Executive Director.
- E. Faculty Per Diem: \$40.00 for each day that the course is in session, intended to cover the cost of meals and incidentals. There is no faculty per diem on the day of the pre-course faculty meeting, but a faculty dinner within a reasonable food allowance is encouraged.
- F. If the Course Director elects to arrive on the night before the faculty meeting, in order to make adequate preparations for the meeting and course, he/she shall be reimbursed for an extra day's lodging and per diem.
- G. Transportation: Reasonable ground transportation to and from the airport - to the course venue may be reimbursed. Air travel reimbursement shall be at the 21 day advance coach fare or mileage reimbursement shall be paid at the maximum rate permitted by the IRS not to exceed the 21 day advance purchase coach fare.
- H. Receipts are required for all expense reimbursements. Faculty and others traveling at Osteopathic Cranial Academy expense should be made aware that travel expenses may not be reimbursed if Osteopathic Cranial Academy guidelines are not followed.

### **Section 9.10.3 - Special Circumstances**

Other financial arrangements may be required under special circumstances. Such circumstances may include courses offered by The Osteopathic Cranial Academy utilizing a non-member expert in an approved area of study. Financial arrangements shall be explored by the Finance Committee, with final approval vested in the Board of Directors.

**Section 9.11 - Cancellation and Refund Policies for Level 5 and Level 1 Courses.**

See Section 6.10

**Section 9.12 - Grievances**

Any Grievances which cannot be resolved at the course by the Course Director in consultation with the Executive Director should be handled as described in Section 6.10.3 of this policy manual.

## Section 10 - Proficiency Examination

The Osteopathic Cranial Academy Proficiency Examination has been established to designate those in The Osteopathic Cranial Academy membership who have the clinical skills in osteopathic diagnosis and treatment, utilizing the cranial concept. A separate Dento-Cranial Examination has been developed by the Dental Associate Members and is recognized by The Osteopathic Cranial Academy. [A separate International Affiliate Examination has been developed by the International Affiliate Members and is recognized by The Osteopathic Cranial Academy.](#)

### Section 10.1 - Eligibility for Proficiency Examination

1. Regular and MD Associate Members of The Osteopathic Cranial Academy are eligible to sit for the examination.
2. The examination may be taken only after:
  - a. A minimum of three years of clinical practice (5 recommended). OMM Residency and OMM Teaching Fellowships may be applied toward the clinical practice requirement, provided they occur *after* the successful completion of the first Introductory Course. Internships and non-OMM residency training will not qualify for the clinical practice requirement.
  - b. Successful completion of 2 approved 40-hour Introductory Course in Osteopathy in the Cranial Field.
  - c. 100 hours of 1-A AOA Continuing Medical Education credits related to Osteopathy in the Cranial Field. These 100 hours may *not* include the first 40-hour Introductory Course.

### Section 10.2 - Fees

There shall be an application fee and a testing fee. Fees shall be set by the Finance Committee and reviewed annually. The current Application Fee (See Appendix 1)

### Section 10.3 - Protocol

#### I. Case Presentation:

- A. This document shall be of a quality ready for journal publication
- B. A Thorough History and Physical Examination.
- C. Pertinent Laboratory Tests.
- D. A Thorough Structural Evaluation including Cranial Findings.
- E. Initial Assessment / Interpretation of Findings.
- F. A Medical, Surgical and Structural Diagnoses (inclusive of ICD9 codes)
- G. Discussion of Initial Treatment.
  1. Include naming of specific techniques and areas of application.
- H. Discussion of Course of Treatment:
  1. Subsequent evaluations and treatment
    - a. Mention specific somatic dysfunctions with techniques utilized in treatment.
- I. Overview of Case
  1. Relate structural findings to overall diagnosis and management of the patient.
    - a. Whole Body Diagnosis – Explain the symptom and disease picture.
  2. Include appropriate applications of osteopathic principles to this patient
    - a. Viscerosomatic, Somatovisceral, Chapman's Reflexes, etc.
- J. Note atypical findings.
- K. Use of Citations and Bibliography Format of JAOA Guidelines for References.
- L. Use of Standard Terminology.

#### II. Examination

The examination shall consist of a written, oral and practical section.

##### A. Written Examination

The written examination shall be drawn from a pool of questions, including the basic anatomy, physiology, primary respiratory mechanism and clinical applications of cranial osteopathy, submitted by the Credentials Committee and approved by the Board of The Osteopathic Cranial Academy. A score of 70 percent or higher is passing.

#### **B. Oral Examination**

The oral examination shall consist of questions designed to verify that the candidate's clinical diagnosis and treatment methods show understanding of the cranial concept. Questions based on the candidate's case study submitted as one of the prerequisites for testing may be included. The questions shall be selected by the Credentials Committee. The exam shall be conducted by two or more members of the Credentials Committee or their designates. Passing shall be by agreement of the examiners.

#### **C. Practical Examination**

The practical examination shall consist of the evaluation of the candidate's ability in diagnosis and treatment. The examination shall be conducted by two or members of the Credentials Committee or their designates. Passing shall be by agreement of the examiners.

#### **Section 10.4 - Recognition of Proficiency**

A Recognition of Proficiency shall be granted to those passing the written, oral and practical examinations. Successful candidates shall be designated in the Membership Information Directory.

#### **Section 10.5 - Re-Examination**

If a candidate fails to meet the standards for all parts of the Proficiency Examination, he/she will be allowed to apply for retesting. If a candidate fails any one portion of the examination, he/she is entitled to one retest within two years of that portion at no additional fee. If a candidate fails two or more portions, he/she must reapply, pay the appropriate fees and retake the entire examination.

#### **Section 10.6 - Maintenance of the Proficiency Status**

To keep the Proficiency status current, membership in The Osteopathic Cranial Academy must be maintained. Attendance at The Osteopathic Cranial Academy Conference or 25 hours of Category 1-A cranial-related CME acceptable to the Credential Committee is required at least once every three years. This three-year cycle is to coincide with the continuing medical education program of the American Osteopathic Association. Failure to comply shall result in the loss of the Proficiency status and reinstatement shall require retaking the written portion of the proficiency examination. If a greater than five-year period has elapsed, re-application to take the written, oral and practical examination must be made.

## **Section 11 - Publications**

### **Section 11.1 - Newsletter**

A newsletter shall be published quarterly. Dates of publications are the 15th of February, May, August and November. All articles and material relevant to the cranial concept and the work initiated by William Garner Sutherland, DO, and any information which relates to professional issues involving practitioners of Osteopathy in the Cranial Field and materials which would be of interest to the members of The Osteopathic Cranial Academy are acceptable for publication.

It is recommended that authors submitting articles for publication adhere to the *JAOA* or *AAOJ* guidelines for authors. Authors will be encouraged to transfer the copyright under a standard copyright agreement, but articles will be considered for publication if the author does not want to assign copyright.

The names of all contributors to The Cranial Academy Foundation shall be published in the newsletter. The bylaw requirement of membership in the AAO to be a member of The Osteopathic Cranial Academy should be published annually in The Osteopathic Cranial Academy newsletter.

Non-member subscriptions to the newsletter are \$75.00 per year.

Each UAAO President shall receive a complimentary *Cranial Letter* if requested.

Materials to stimulate further investigation, research, evolution, clarification and dissemination of the philosophy, principles and techniques taught by William Garner Sutherland, DO (DScHon) may be recommended by committees and published under the auspices of the Board of Directors.

### **Section 11.2 – Journal of The Osteopathic Cranial Academy**

The Journal of The Osteopathic Cranial Academy is to be developed as an annual peer-reviewed and indexed journal that contains material relevant to the cranial concept. International contributors from the osteopathic profession will be welcomed for publication. Publications from outside the osteopathic profession may be acceptable. All contributions must be approved by the Publications Committee and the Board of Directors.

### **Section 11.3 - Advertising**

Advertising space may be sold in *The Cranial Letter* and the Member Information Directory. No advertising shall be accepted for the Journal of The Osteopathic Cranial Academy. Rates shall be set by the Finance Committee and reviewed annually. All advertisements are subject to approval. The Osteopathic Cranial Academy reserves the right to reject any advertising on the basis of form, content or unavailability of space. Therefore, no advertising is deemed accepted until approved by the editor of The Cranial Letter and the Publications Committee Chairperson. Ads will be accepted on a first come, first served, space available basis. All ads must be camera-ready with the exception of "Coming Events." Ads that are not camera-ready may be accepted; however, there will be an additional surcharge in the amount of 50 percent of the ad price to set the ad. Paid advertising may not exceed 20 percent of the newsletter. Advertising may be accepted for CME provided that the CME sponsor is an approved AOA CME sponsor.

Advertising rates are as follows:

Full page .....	\$450.00
Half page .....	\$250.00
One fourth page.....	\$150.00
One eighth page or less .....	\$100.00

In lieu of payment complimentary space in a similar publication may be acceptable.

**Section 11.4 - Permission to Reprint**

If The Osteopathic Cranial Academy holds the copyright, permission to reprint will be granted only after evaluation by and approval of the Print Media Committee and the Editor. The article must be reprinted in its entirety and note be made that reprint permission was granted by The Osteopathic Cranial Academy. There will be a charge determined by the Finance Committee for reprint approval to “for profit” organizations. If The Osteopathic Cranial Academy does not own the copyright, any such requests need to be made to the author.

**Section 11.5 - Membership Information Directory**

The Directory shall include alphabetical and geographical listings of Regular and Associate members. International Affiliate Members and Student Members shall be listed separately. Members who have been awarded The Osteopathic Cranial Academy Recognition of Proficiency or the Dental Competency Exam shall be designated. The Membership Information Directory may also include The Osteopathic Cranial Academy Bylaws, a listing of Board members, Committee members, Sutherland Memorial Lecturers, Past Presidents, Exceptional Service Award recipients and other information determined appropriate by the Board of Directors.

**Section 11.6 - Copying Fees**

Copying fees shall be set as follows:

Service charge	\$15.00
First 30 copies	\$ .74 per page
Additional copies	\$ .54 per page

## **Section 12 - Web Site Guidelines**

### **Section 12.1 - Website Mission Statement**

The mission of The Osteopathic Cranial Academy Website will be:

- To support The Osteopathic Cranial Academy's mission: "To teach, advocate, and advance Osteopathy, including Osteopathy in the Cranial Field, as envisioned by Andrew Taylor Still MD and William Garner Sutherland DO."
- To provide Osteopathic Cranial Academy information, communication and services for members.
- To provide the public with education about Osteopathy in the Cranial Field.
- To provide Osteopathic Cranial Academy information and communication for other professional organizations.

### **Section 12.2 - Website Structure and Content**

The Structure and Content of The Osteopathic Cranial Academy website will consist of:

- Database support for infrastructure of The Osteopathic Cranial Academy and it's membership.
- Information, communication and services for Osteopathic Cranial Academy members.
- Educational information for the public about Osteopathy in the Cranial Field.
- A practitioner finder section to locate members of The Osteopathic Cranial Academy.
- A digital archive
- A repository for research on Osteopathy in the Cranial Field.
- Access to sales of Osteopathic Cranial Academy items such as books, pamphlets, and tapes.

### **Section 12.3 - Procedures For Website Changes And Additions**

- Major changes/additions to the website (design, format, graphics, textual context) require approval of the Information Technology Subcommittee and the Board of Directors.
- Minor changes (spelling, grammar and formatting errors and updates) may be made by the staff.

### **Section 12.4 - Website Links**

- The Osteopathic Cranial Academy website may create links with the AOA, AAO, SCTF and affiliated societies of AOA, AAO and The Cranial Academy Foundation.
- The Osteopathic Cranial Academy website will contain a statement saying: "If you wish to link to this website, please contact The Osteopathic Cranial Academy for permission."

### **Section 12.5 - Website Advertising**

- The Osteopathic Cranial Academy does not accept advertising for its website.

## **Section 13 - Recognition and Awards**

The Osteopathic Cranial Academy from time to time may recognize individuals deserving of special recognition. The Nominating Committee shall be responsible for developing criteria for awards and recommending to the Board of Directors individuals worthy of such honors.

### **Section 13.1 - Exceptional Service Award**

An Exceptional Service Award may be given to one or more individuals each year to recognize an outstanding contribution in research, teaching, practice or special service to The Osteopathic Cranial Academy. Considerations for the award include contributions to The Osteopathic Cranial Academy such as:

- A. Course development (i.e., creation of a new course).
- B. Outstanding leadership (i.e., an act which changed the direction of the organization).
- C. Development of a new member benefit program (i.e., Proficiency Examination).
- D. Contributions which enhance learning opportunities (i.e., the slides of dissections provided by Frank Willard, PhD, or video of cranial bone motion.)
- E. Extraordinary gift of time and talent without financial gain, that is, above and beyond what is normally expected of Board and committee members.
- F. Significant contribution in the area of publications (i.e., regular contributor to the newsletter over a period of time, transfer of copyright of a publication, development of patient brochures).
- G. An act or service for The Osteopathic Cranial Academy which may be classified as "extraordinary."

Other considerations:

1. This award "MAY" be given annually. If there is not a candidate who satisfies the above criteria, the award would not be given that year.
2. This award is intended to recognize special service to The Osteopathic Cranial Academy - not to the profession in general.
3. The recipient does not have to be a member of The Osteopathic Cranial Academy.

### **Section 13.2 - Sutherland Memorial Lecturer**

The criteria for the selection of the Sutherland Memorial Lecturer includes:

- A. Shows evidence of actively using and promoting the cranial concept in practice (or did before retirement).
- B. Promotes the cranial concept through teaching (including patients and students).
- C. Has studied the life and methods of William Garner Sutherland, DO.
- D. Shows commitment to osteopathic principles and loyalty to the osteopathic image.
- E. Has acceptable presentation skills.

### **Section 13.3 - President's Plaque**

At the annual conference the retiring President will be presented with a plaque denoting the year(s) of his/her presidency.

### **Section 13.4 - Fellow of The Osteopathic Cranial Academy Award**

The Fellow of The Osteopathic Cranial Academy Award was established in 1995 to recognize the true leaders of The Osteopathic Cranial Academy. It is an honorary award intended to recognize outstanding physicians and to honor members of The Osteopathic Cranial Academy who have distinguished themselves by providing exemplary leadership, dedication in teaching, advocating and advancing osteopathy including Osteopathy in the Cranial Field.

The Fellowship committee shall be responsible for developing criteria for the Fellow of The Osteopathic Cranial Academy (FCA) and recommending to the Board of Directors individuals worthy of this honor.

Consideration in nominating fellowship candidates include:

- A. Currently licensed and in good standing or retired with previous license void of disciplinary action
- B. Active membership in The Osteopathic Cranial Academy for a minimum of ten years
- C. Osteopathic Cranial Academy Recognition of Proficiency or equivalent
- D. Compliance with The Osteopathic Cranial Academy's code of ethics
- E. Meritorious service to The Osteopathic Cranial Academy and osteopathic profession in all three areas:
  - 1. Minimum of three years of teaching Cranial Osteopathy to students, physicians and dentists
  - 2. Advocating Cranial Osteopathy in business and professional life to the public, patients, students, physicians, dentists government and other business organizations.
  - 3. Minimum of three years of advancing Cranial Osteopathy through published article(s) or research and/or leadership service to The Osteopathic Cranial Academy.

**Section 14 - Position Statements**

The Osteopathic Cranial Academy may adopt position statements regarding the education and practice of Osteopathy in the Cranial Field. See Appendix I: Position Statements.

**Section 15 - Financial Matters**

Cash disbursements shall be paid by check signed by the Executive Director, or the Treasurer or the President singularly. Single signature by the Executive Director for budget items is approved up to \$2,500.00. Unbudgeted items over \$500.00 require approval of the President and the Treasurer.

Any funds deposited for special groups and/or for special purposes shall be held in the general fund or in other funds but accounted for separately and used exclusively for the designated purpose for which collected.

**Section 16 - Mailing Lists**

The Osteopathic Cranial Academy mailing lists or labels may be sold. All requests must be prepaid. The charges are as follows:

Members .....	\$300.00
Non-members .....	\$500.00

## **Section 17 – Member Information List**

It is the intention of The Osteopathic Cranial Academy to make available to the public and health care providers the names of individuals who have designated themselves by inclusion in the membership of The Osteopathic Cranial Academy as offering services of Cranial Osteopathy. Individuals may elect to be represented on The Osteopathic Cranial Academy website.

The Osteopathic Cranial Academy does not make any representation regarding the present or prior competence of individual members. Members who have received a “Recognition of Proficiency” have by written, oral and practical examination demonstrated skill in Osteopathy in the Cranial Field at that point in time; members holding Recognition of Proficiency are required to meet CME requirements as established by the Board of Directors in order to maintain the proficiency certification.

## **Section 18 - Procedures for Elections**

The report of the Nominating Committee shall be presented in open meeting at the Annual Business Meeting. Following the report of the Nominating Committee, nominations may be made from the floor.

All nominees shall meet the stated criteria, shall sign a letter of commitment and shall agree to serve if elected. Nominating speeches shall be limited to two minutes.

When the Nominating committee has reported and nominations from the floor have been closed, the Nominating Committee Chairperson shall have charge of the election. In the absence of the Nominating Committee Chairperson, the President shall preside. Each candidate shall have five minutes to address the membership.

The balloting shall be by secret ballot for each office separately; however, that if there be but one (1) candidate for any office or position when the nominations are closed, the Secretary shall cast a unanimous vote of the membership for such candidate without the formality of a regular ballot. All elections shall be by written ballot, with the candidate for the respective position receiving the greatest number of votes being declared elected.

## **Section 19 - The Osteopathic Cranial Academy Code of Ethics**

The Osteopathic Cranial Academy is a professional membership organization with a mission, a vision and defined core values. Mindful that they represent the Osteopathic medical profession, its members are expected to observe conscientiously these ethical standards;

- TO be in all their work, truly professional, teachers and experts whose lessons are inculcated by personal example as well as by precept;
- TO enrich and broaden their professional standing through further diligent pursuit of education and training;
- TO adhere to the vision and teachings of Andrew Taylor Still, MD and William Garner Sutherland, DO embracing the concept that Osteopathic treatment is part of a scientific body of complete medical care;
- TO utilize every opportunity to improve public understanding of Osteopathy and specifically Osteopathy in the Cranial Field, the principles on which it is based and its role in improving health and wellness;
- TO honor the public trust that Osteopathic Manipulation, as well as Osteopathy in the Cranial Field as taught by William Garner Sutherland DO, exist within the framework of the doctor-patient relationship and are guided by that tenet;
- TO respect the Code of Ethics of the American Osteopathic Association and the American Academy of Osteopathy, as members of a component group of these Associations;
- TO uphold the Articles of Incorporation and Bylaws of The Osteopathic Cranial Academy, to share freely with others their professional knowledge, to accept their share of leadership responsibility and to continually demonstrate integrity in their decisions and actions, seeking professional excellence honoring the legacy of our elders and the mission of The Osteopathic Cranial Academy;

Recognizing that each member has personal responsibility for the reputation and acceptance of Osteopathy in the Cranial Field, we, the members of The Osteopathic Cranial Academy, subscribe to these statements of ethical standards conducive to the principles and the general welfare of all.

## **APPENDIX A: SCHEDULE FOR NOMINATION SLATE**

- A. Each November a notice be published in The Osteopathic Cranial Academy Newsletter for suggestions to the Nomination Committee for the following:
  - a. Board of Directors positions for the June Business meeting elections (normally 2 slots).
  - b. Sutherland Memorial Lecturer
  - c. The Exceptional Service Award
  - d. Honorary Lifetime Membership
- B. The Osteopathic Cranial Academy Office should also solicit names from the Nomination Committee, Committee Chairs, and Board of Directors for the aforementioned awards and positions
- C. These should be assembled by The Osteopathic Cranial Academy office and a preliminary vote taken by the committee via email to narrow the number of nominees.
- D. These should then be discussed in a meeting and voted on with the results submitted to the Board of Directors.
- E. If the Fellowship Committee has an opening to be filled the following June, the Nomination Committee should solicit names from its committee members and the head of the Fellowship Committee by February.
- F. A meeting should be held in February or March to vote on all the issues mentioned above such that recommendations can be sent to the Board of Directors for their March-April meeting.

## **APPENDIX B: ANNUAL CONFERENCE DEVELOPMENT PROTOCOL**

1. Must approve conference:
  - a. Director
  - b. Title
  - c. Goals
  - d. Outline
  - e. Schedule
  - f. Lecture description
2. Work with Executive Director to find a conference location
3. Responsible for deadlines for all the above
4. Maintain a template from which to set up the conference and supply this and all needed information to the Conference Director in a timely manner
5. Submit the following to the BOD regarding the Annual Conference:
  - a. Progress reports
    - i. at each meeting
  - b. Location for approval
    - i. time frame 2 years in advance
  - c. Director
    - i. at least 2.5 years in advance
  - d. Title and goals
    - i. 2 years in advance
  - e. Outline
    - i. 1.5 year in advance
  - f. Rough schedule
    - i. 1 year in advance
  - g. Finalized schedule
    - i. At least  $\frac{1}{2}$  year in advance

## **APPENDIX C: DEVELOPMENT PATHWAY- INTRODUCTORY COURSE FACULTY**

Goal: Create and enlarge a competent introductory course faculty who are educated to teach the mechanics of bony, membranous, fluid and CNS phenomena and how to diagnose and treat dysfunctions using the body's mechanism of primary respiration.

### Entry Into Pathway:

Application for faculty development tract by potential faculty

Recommendation by Osteopathic Cranial Academy introductory course faculty person

### Qualifications

#### Level I Faculty in Training:

With approval of a course director, an applicant with clinical skills who fulfills ALL of the following qualifications, may enter into Level I development position.

- A. Active Member of The Osteopathic Cranial Academy.
- B. Minimum of three years of clinical experience.
- C. Other acceptable qualifications:
  1. OMM residency = 2 years clinical experience
  2. OMM (+ 1) residency = 1 year clinical experience
  3. Undergraduate OMM fellowship = 1 year clinical experience
  4. Other residencies will be considered accordingly for OMM clinical experience.
- D. Completion of at least two approved 40-hour Introductory Courses in Osteopathy in The Cranial Field.
- E. Recommend one AOA approved Intermediate / Advanced course implementing the cranial concept.
- F. Currently licensed in the US to practice osteopathy, medicine or dentistry.
- G. Non US educators will need to be a member in good standing of an Osteopathic Cranial Academy approved national registry.

#### Direct access to Level II Faculty in Training (Bypass Level I):

With approval of a course director, an applicant with ALL of the following qualifications may step directly into a level II faculty development position.

- A. Active Member of The Osteopathic Cranial Academy.
- B. 4 years experience using Osteopathy in the cranial field in practice
- C. 2 Introductory Courses (one by The Osteopathic Cranial Academy)
- D. 2 AOA approved Intermediate or Advanced courses using some form of the cranial concept/inherent motion
- E. Exceptional Clinical and Educational Skills
- F. Currently licensed in the US to practice osteopathy, medicine or dentistry
- G. Non US educators will need to be a member in good standing of an Osteopathic Cranial Academy approved national registry.

### Development Of Potential Faculty:

#### Faculty In Training: Level I

##### Compensation

Trainee does not pay for course

No reimbursement provided

CME given

##### Role & Responsibilities of Level I Faculty in Training

Table train daily under the guidance of at least 3 different senior faculty (Potential faculty works directly under senior faculty at the senior faculty's table with the senior faculty's students)

Co-mediate review for course participants

Attend faculty meetings

Assist course director and faculty as needed

Assist in developing table assignments

Meet with 2 evaluating course faculty and course director for feed back by the end of the course.

#### Role & Responsibilities of Supervising Instructors

Teach potential faculty how to teach palpation of the mechanism, motion mechanics, qualities of PRM, anatomical identification, motion mechanics

Teach potential faculty how to be aware of potential symptom reactions and how to avoid these from arising in course participants

Supervising faculty fill out an evaluation/plan form on the potential faculty

4<sup>th</sup> night of course meet with faculty to make recommendation to the introductory course education committee for board approval to

Move the potential faculty to LEVEL II of pathway

Receive certificate as: Introductory Course Table Trainer

Or plan for further development

#### Faculty In Training: Level II

##### Compensation

Paid travel and hotel + per diem

Get paid \$400.00 honorarium

CME given

Additional stipend for lecturing

##### Role & Responsibilities of Level II Faculty in Training

Receive Mentorship

Utilization of a Mentor from the time the course is initially organized

For clarification of information and teaching techniques.

Table Train own group of Students

2 to 4 students depending on experience

Access to other faculty as necessary

Lecture (as appropriate)

Lectures are to be discussed and reviewed with:

Mentor, Course Director, or other lectures of related topics, as needed

Lead Review Sessions

Primary reviewer or assist level I potential faculty

Attend faculty meetings

Assist course director and faculty as needed

Assist in developing table assignments

Receive feedback

Meet with 2 evaluating course faculty (mentor/course director encouraged) for feed back by the end of the course.

#### Role & Responsibilities of Mentor / Course Director / Evaluating Faculty

Be available to answer questions.

Review lab sessions with potential faculty level II

Assign one faculty to observe potential faculty level II during lab sessions.

All supervising faculty fill out a evaluation/plan form on the potential faculty level

4<sup>th</sup> night of course meet with faculty to make recommendation to the introductory course education subcommittee for board approval:

to move the potential faculty level II to next level of pathway

or plan for further development.

## Faculty Advancement

### Possible Outcomes

Recommend as Regular Faculty

Recommend as table trainer and further development as lecturer

If Necessary:

Require "Train the Trainer" Seminar

AV utilization, lecture, table training, technique skills.

Recommend repeat of Level II

### Approval Process

By Introductory Course Faculty

course director, mentor, senior and other observing faculty

By Introductory course sub-committee

Final approval by Osteopathic Cranial Academy Board of Directors

### Certificates

After completing level I as Osteopathic Cranial Academy Introductory Course Table Trainer

After completing level II as Osteopathic Cranial Academy Introductory Course Faculty

**APPENDIX D: ANNUAL CONFERENCE TEMPLATE**

Conference Title  
 CA 20xx Annual Conference  
 City, State

Directed by ...

L= lecture, S=small group discussion; P=practical session; M=meeting; O=other

Thursday	June	Speaker
8:30 AM	M CA BOD Meeting	President
11:00 AM	M Committee Chair Orientation	Dunn
1:00 AM	M LUNCH, Committee Meetings, Vendors	
2:00 PM	Registration	Staff
3:45 PM	L Welcome	President/ Director
4:00 PM	L Lecture title	
5:00 PM	L	
6:00 PM	P Treatment Of All Participants	
6:00 or 7:00 PM	P Student/Beginner Lab (may run concurrently with Tx of All participants Lab)	Moorcroft, Shadoan
7:00 PM or 8:00 PM	P Adjourn	

Friday	June	Speaker
8:00 AM	M Committee Meetings, Vendors	
9:00 AM	L	
10:00 AM	L	
11:00 AM	S Small Group Discussion, Vendors	
11:15 AM	P	
12:15 PM	M LUNCH, Committee Meetings, Vendors	-
1:45 PM	P	
2:45 PM	L	
3:30 PM	S Small Group Discussion, Vendors	
3:45 PM	P	
4:45 PM	P	
5:30 PM	O Adjourn	
5:45 PM	M Annual Membership Meeting	President

Saturday	June	Speaker
8:00 AM	M Committee Meetings	
9:00 AM	L	

10:00 PM L  
 11:00 AM S Small Group Discussion, Vendors -  
 11:15 AM L  
 12:00 PM M LUNCH, Committee Meetings, Vendors -  
  
 1:30 PM L Sutherland Memorial Lecture TBD  
 2:30 PM L  
 3:00 PM S Small Group Discussion, Vendors  
 3:15 PM P  
 4:15 PM L  
 4:45 PM P  
 5:45 PM O Adjourn  
 6:45 PM O Reception -  
 7:30 PM M Banquet -

Sunday	June
8:00 AM M	Committee Meetings
9:00 AM L	
10:00 AM L	
10:30 AM P	
11:00 AM S	Small Group Discussion -
11:15 AM P	
12:15 AM P	
1:15 PM O	Adjourn Conference Director/President
2:00 M	CA BOD Meeting BOD
5:00 O	Adjourn BOD Meeting

Lecture: Lab ratio should be about 50:50 or 60:40

At least 50% of speakers must be U.S. DO's OR at least 50% of all CME hours should be by U.S. DO's (to qualify for our AOA CME's)

At least one lecture slot should be given by a "new lecturer" – a D.O. who is has not presented to our CA Annual Conference before. This is usually done on the last day, but doesn't have to be.

## APPENDIX E: ANNUAL CONFERENCE MEETING SPECIFICATIONS

Sleeping rooms: 60 to 70, one complimentary suite or upgrade  
Registration: 100-120  
Meeting space: As a general rule, 40 sq. ft. per participant.  
Approximately 6000 sq. ft. plus one small room for committee meetings works well.

Thursday (Day 1): Board of Directors Meeting; conference style for 10 to 12 people  
Lunch for BOD  
Proficiency Testing  
Classroom style for 6 people (one per table, using our OMT tables)  
Registration  
Lecture/lab  
Classroom style for 100 to 115 using our OMT tables (each table requires 8' to 10' sq. ft.)  
Riser with podium; overhead projector/slide projector/screen  
Riser in back with recording equipment  
Water station  
One small room near lecture hall for private treatments  
Set remains until Sunday noon.  
Eight to ten exhibit tables in common area for Friday and Saturday only

Friday (Day 2): 8:00 a.m. to 5:00 p.m.  
AM and PM beverage breaks  
Buffet Lunch  
Meeting room for BOD 12 to 16 people set loosely

Saturday (Day 3): Same time; same set  
Buffet lunch  
Small room for BOD meeting during lunch  
AM and PM beverage breaks  
Banquet for 125 with entertainment

Sunday (Day 4): 8:00 a.m. to 12:00 p.m.  
Same set  
Beverage break  
No lunch

Days 1-4 One additional small meeting room available for small group meetings.

**We will need area for storage of shipping boxes for OMT tables.**

**Housemen Will Be Needed To Pack Treatment Tables And Take To Shipping Department.**

### Food Notes

Group prefers healthful foods, low carbohydrates; some vegetarians; some gluten intolerant; some lactose intolerant.

When possible, serve sauces on the side.

No MSG or soy sauce in entrees.

Incorporate tofu as appropriate.

Serve the dessert with afternoon break.

Desserts should include some healthful choices such as yogurt (no preservatives), oatmeal cookies, carrot cake; nuts; energy bars; granola bars; fresh fruit.

Use as much variety as possible over the five-day period.

## Timeline

3 years preceding

a. Annual Conference Subcommittee (ACSC) to discuss topics (title/concepts/director) for Annual conference. Considerations will include any proposed suggestions submitted to the ACSC chair, along with those submitted by the CA President. The CA President will submit suggestions for topics/concepts/conference directors, during each of the two years of his/her term.

2-2.5 years preceding

a. ACSC approves topic and director.

b. ACSC submits Proposed title, goals, and Conference Director (Director), to BOD for approval (Spring-June BOD meeting).

c. Executive Director (working with Committee chair and president) to propose conference site for BOD approval.

d. Proposed title and goals, director and conference site approved by BOD (June meeting 2 years preceding conference)

1.5 years preceding

a. Director to present *outline* of final schedule and speakers to ACSC.

1 year preceding

March-June

a. Final version of: title, goals, summary, schedule, and schedule with bullet points of lecture/lab descriptions and list of speakers submitted by conference director to ACSC for ACSC approval, before June BOD meeting.

i. Director to follow ACSC Meeting Specifications document in Appendix E of Policy Manual

b. Director works with Executive Director and ACSC Chair to choose conference graphic.

c. Director submits CV's of all speakers to Credentials committee for approval, in adequate time for Credentials Committee response to be submitted for BOD approval at June 2nd BOD meeting.

d. Nominating Committee selects a Sutherland Memorial Lecturer at their April meeting, and is responsible for notifying lecturer. The BOD approves the Sutherland Memorial Lecturer at their June meeting, 1 year before the Annual Conference. Once approved by the BOD, Nominating Committee will inform the ACSC of their choice for Sutherland Memorial Lecturer.

June

a. Above final versions of schedule with Tracking Table (see Appendix E) presented at June BOD's meeting for approval

b. Credentials committee submits report on CV's of all speakers to BOD by 2nd BOD meeting at June Conference.

• Note: This is important as the Director may need to find a replacement if a speaker is not approved, and any needed replacement should be completed by September.

August

a. Director works with ACSC Chair and Executive Director to design the "Save the Date" postcard, including graphics (Previously chosen), final title, format, etc. to be used for all promotions of the conference.

• Note: Absolute final deadline Sept 15.

September

a. Finalize schedule and speakers

b. Director sends CA office schedule, speaker list and, if necessary, speaker contact information (email, phone, address, etc.)

c. Director prepares a conference overview of ~5 lines describing the conference for use in brochures.

d. Director works with Executive Director regarding ideas and plans for entertainment, banquet, picnic, tours, etc.

## October

- a. Brochures posted to CA website
- b. Director sends the speakers:
  - i. *October Email* to all speakers (see APPENDIX E) including requests to:
    1. Become familiar with overall nature of the conference
      - Review conference schedule with lecture/lab goals and bullet point descriptions for content. (Attach to email)
      - Review conference goals and summary/overview. (Attach to email)
      - Review faculty timeline with submission dates for requested materials. (Attach to email)
    2. Coordinate their presentations with the lecture goals, conference goals, theme, and content
    3. Coordinate their presentations with ones that precede and follow theirs
      - a. If necessary, include similar or transitional information.
- c. Director asks two specific speakers for small (tickler) articles to be published in February and May Newsletters concerning their topic in order to promote the conference or writes one of them himself.
- d. CA office prints and mails "Save the Date" postcard before the end of the month.
- e. Brochures posted to OCA website

## November

- a. OCA office sends brochures to AOA November conference, osteopathic publications, colleges and UAAO, and OCA website
- b. OCA office sends AC speakers:
  - i. Contract to speak at AC
  - ii. Information on honorarium, reimbursed expenses
  - iii. Request for: Biosketch, short introduction for use at the conference (1-2 short to medium paragraphs), 2"x2" medium resolution JPEG photo, CV
  - iv. Notification of Jan. 1 deadline

## December

- a. Director sends *December Email* reminder to speakers (see APPENDIX E) of Jan. 1 deadline for submission the following:
  - i. 1 page outline of their presentation (sent to CA office and Director)
  - ii. Biosketch, introduction, photo, CV, signed contract

## January

- a. CA office sends brochure to membership with dues statements
- b. Biosketch, introduction, photo, CV, signed contract due from speakers (Jan. 1)

## February

- a. Director sends *February Email* to speakers: (see APPENDIX E)
- b. Director sends a separate reminder to those tardy with January submissions and to thank those on time.
- c. The Director will select a Leader for the Beginner's Lab\* with approval of the Chair of the Physicians In Training Committee
- d. The Executive Director, in consultation with the Conference Director and the ASCS chair, will choose an AV person, preferably a qualified osteopathic medical student trained in Audio Visual technique. It is recommended that the same individual be used to tape the June Introductory Course and the Annual Conference when available.

### \* **Beginners lab:**

- A Beginner's Lab is held usually at the end of the first day of the annual conference for new members, physicians-in-training, and any participant who is interested in attending.
- The Director will select a Leader for the Beginner's Lab with approval of the Chair of the Physicians-In-Training Committee.
- The Director will coordinate content of the lab with the Leader of the lab and the Chair of the Physicians-In-Training Committee.
- Table trainers for the beginner's lab will be selected by the Leader of the lab, with approval by the Annual Conference Director and Chair of Physicians-In-Training Committee, and input from the Executive Director about how many table trainers might be needed.

- The Chairs of Physicians in Training and Membership Committees will work to advertise this lab to new members and physicians in training, starting with the first Cranial Letter advertisement of the Annual Conference, as released by The Osteopathic Cranial Academy staff.

### **March**

- a. Director sends *March 15<sup>th</sup> Email* to speakers: (see APPENDIX E)
  - i. Deadline (April 1) for submission of handouts for conference manual
- b. Executive Director to finalize entertainment, if any, banquet ideas, picnic, tours, music, etc. with Director and inform ACSC
- c. Executive Director and/or Director to obtain lists of restaurants for participants to be placed in Conference Manual
- d. Promote conference at AAO Convocation
  - i. Rathjen scholarship information distributed
- e. CA office sends AV Permission form to speakers with April 1 deadline for submission

### **April**

- a. April 1 *final* deadline for speakers to submit:
  - i. Conference AV Permission form
  - ii. Presentation handout material for Conference Manual.
- b. Director sends all received handouts to all speakers so they can get the sense of continuity of conference/relevance of their lectures/labs- ongoing (hopefully by 4/30).
- c. Director proofs handouts as received and suggests changes, as necessary.
- d. Executive Director confirms the selection of the AV person (per directive listed under February above) and any AV requirements for the course, communicating this to the Conference Director and Chair of ACSC.

### **May**

- a. **Director**
  - i. **Proofs Conference Manual**
  - ii. **Checks in with CA office regarding any other details of Conference including entertainment**
  - iii. **Works to coordinate, streamline, etc.**
- b. **OCA Office prepares Conference Manual for printing and binding**

### **June**

- a. Pre-conference meeting with speakers immediately preceding Conference (Thursday)
  - i. Go over any last minute ideas, suggestions, problems
  - ii. Protocols for speaking
    1. 5 minute warning
    2. Lecture will end on time
  - iii. Speakers to meet with AV person
    1. Speakers to check computer compatibility with projector
    2. Explain how microphone works
    3. Explain do's and don'ts regarding computer and microphone
    4. Deal with any last minute or special requests
- b. Annual Conference protocol
  - i. President gives opening remarks and introduces Director/s
  - ii. Director/s introduce each speaker the first time that they speak
  - iii. Speakers given 5 minute warning by Director
  - iv. Lectures ended on time by Director
- v. Banquet run by President
  - vi. Announcements:
    1. Per Osteopathic Cranial Academy Policy Manual Section 7.9 , All announcements made during the Annual Conference about events or organizations that are outside of The Cranial Academy or its affiliated societies must be submitted in writing to the Executive Director for approval at least one week in advance of the Annual Conference. Last minute announcements must be vetted by ALL of the following: The Annual Conference Subcommittee chair, Executive Director, and Cranial Academy President.

## OCTOBER EMAIL TEMPLATE

Thank you for agreeing to participate as a speaker in the Cranial Academy's \_\_\_\_ (year) Annual Conference, \_\_\_\_\_ (title)

Enclosed find the following:

- 1) A list of conference Goals (Goals)
- 2) The most current version of the schedule (Schedule)
- 3) A detailed description of speaker topics (General Content)
- 4) Goals for each lecture and lab (Goals)
- 5) Timeline (Timeline)

Please:

- 1) Familiarize yourself with the overall nature of the conference
- 2) Coordinate your lecture with the theme and content of the conference
- 3) Try to provide continuity with the lectures immediately preceding and following yours
- 4) Fulfill all the goals concerning your lecture/lab topic in your presentation

Thank you in advance for keeping with the assigned topic. If you have additional ideas that you feel should be included in these synopses or any comments or questions about anything, please contact me. Part of my job is to make things easier for you.

Also, please send me a brief return email acknowledging receipt of this, including your contact phone numbers and any other preferred email address.

We need several short articles for the CA newsletter to help publicize this event and we look forward to your submissions.

Thanks again for agreeing to be one of our presenters. We have an excellent faculty and we are confident that it will, once again, be a great conference!

The following is an abbreviated timeline:

1. **November 1:** the Cranial Academy administrative office will send you speaker letters and contracts.
2. **January 1:** the CA will need to be in receipt of the following:
  - a. An outline of your presentation(s)
  - b. A biographical sketch for publication in the conference manual (no more than one page).
  - c. A short intro bio sketch (a few paragraphs) you wish us to use to introduce you at the conference
  - d. A 2x2 medium resolution photo (JPG Format) for publication in the conference manual
  - e. Your Curriculum Vitae for our records.
3. **April 1:** Handout materials are due for inclusion in the conference manual. In addition, your presentation can be sent to us in Keynote, PowerPoint, .pdf, or .doc format.
4. **May 1:** handouts will be sent to all the speakers so any last minute tweaks can be made to keep continuity with the conference and other presentations.
5. **May-Conference:** You will be contacted concerning any necessary changes, coordination of presentations, problems, fixes, etc.
6. **Conference:** Pre-Conference meeting with the AV person to check computer compatibility, answer other AV needs and questions.

## DECEMBER EMAIL TEMPLATE

Just a reminder on an upcoming deadline for information needed from you as we proceed with this conference's development. In November I emailed you the overall schedule of deadlines, and this is a reminder of the next deadline.

By January 1 the CA office and conference director will need to be in receipt of the following:

1. A rough outline of your presentation(s) so that all speakers can synchronize their lecture development. We suggest you begin with the lecture guidelines sent with the schedule and work from there. We realize that there will be constant revision.
2. A one page biographical sketch to be included in the conference workbook
3. A 2 paragraph biosketch to be used to introduce you during the conference
4. A 2x2 medium resolution photo (JPG Format) to be included in the conference workbook
5. Your Curriculum Vitae for our records.
6. Your *signed* speaker agreement

Let us know if there are any questions or if we can be of any help and remember to cc me on these emails.

Thanks, and I wish you all a very happy holiday time.

## FEBRUARY EMAIL TEMPLATES

Dear Drs. \_\_\_\_\_:

Thank you very much for sending us the outline(s) of your presentation(s) for our Cranial Academy's 2009 Annual Conference. I will be reviewing them soon, and letting you know more as we progress.

Remember that **April 1** is the deadline for your next submission, your lecture/lab handouts to be published in the conference manual.

We appreciate your promptness, and look forward to a wonderful conference.

Dear Drs. \_\_\_\_\_:

I'm writing with a reminder that outlines of your presentations for the Cranial Academy (year) Annual Conference were due on January 1, and we have yet to receive anything from you. If you have sent them, please accept our apologies and resend them.

Again, these outlines can be in rough form, and at this point do not need to be final. However, we really do need them so that all speakers can synchronize their lecture development, and we can continue working on integrating the conference. Please begin with the lecture guidelines sent previously with the conference schedule (See November email) and work from there.

We would really appreciate an outline of your presentation by February 15th at the latest via email. If you have any problems with this or we can be of any help, please contact me.

Remember that **April 1** is the deadline for your next submission, your lecture/lab handouts to be published in the conference manual.

Thanks so much for your time and efforts, and we hope this New Year is unfolding as a good one.

## APRIL 1 EMAIL TEMPLATES

Dear Drs. \_\_\_\_\_

Thank you for sending us your handouts for inclusion in the conference manual. We appreciate the hard work that you have done and by meeting the deadline, you make it much easier for me and the CA office. There is much work to be done assembling the manual and readying everything for the conference this June.

I will be in touch and circulating the handouts to the speakers.

Dear Drs. \_\_\_\_\_

I realize that you have had much to do and are very busy, however, the deadline for inclusion of your handouts in the conference manual was April 1st and we have yet to receive them from you. If you have already sent them, I apologize, and please *resend them to me*.

Your cooperation makes the whole process easier for me and the CA office. The absolute deadline is April 1. After that time, it may not be possible to include your materials in the manual.

Thank you for your understanding and I eagerly await your handouts.

## CONFERENCE GOALS EXAMPLE:

The 2009 Annual Conference, *Embryology and Osteopathy: Developmental Patterns and the Template of Health*, will allow the participant to gain insight into the current role of embryology in Osteopathy. Introductory concepts and practical clinical skills will be taught along within a framework that can be used in diagnosis and treatment in clinical practice.

- 1) Understand the role of embryology in OCF / Osteopathy
  - a. Forces
  - b. Movement
  - c. Boundaries
  - d. Spatial Dynamics
  - e. Concept of fluid fields
  - f. Idea of "perfect field" or template
- 2) Learn to diagnose and treat with the Breath Of Life
  - a. Open seam vs closed seam
    - i. Altered anatomy/ gap in the anatomy/ emptiness in anatomy
    - ii. Density of tissues
    - iii. Any seam open until the lesion is resolved
- 3) Generate interest so more people want to take our embryo courses
- 4) Have an introduction to concepts and how to apply them
- 5) Understand advantages of using this philosophy
- 6) Learn basic embryologic principles from Blechschmidt's perspective
- 7) Supply a framework with which to begin using this approach in diagnosis and treatment.
- 8) Attendee will learn and experience introductory concepts including practical clinical skills easily applied in their practice
- 9) Have fun
  - a. Avoid too much info
  - b. Make sure there is enough info
  - c. Keep some lectures simple and several more advanced
  - d. Barbeque ?
  - e. Entertainment at banquet ?
  - f. Tours ?
  - g. List of places to go and things to do- esp. good restaurants

## Porvaznik Tracking Table

Time	Type	Name	Lecture	Lab	Day
					Thursday
					Friday
					Saturday
					Sunday
Speaker Type	Number of speakers		Lecture	Lab	Total Hours
All Speakers	11 speakers→		12.00	9.25	21.25 <sup>†</sup>
US DO totals	7 DOs→		6.00	8.00	14.00
Non-US DOs*	1 Non-US DOs→		1.00	0.00	1.00
Ph.D	2 Ph.D.s		3.00	0.00	3.00
MD	1 MD		2.00	0.00	2.00
SGD	5 small group discussions		0.00	1.25	1.25

79% of hours from Physicians	16.00/20.25
69% of hours from US DOs	14/20.25 hours
64% faculty members US DOs	7/11
73% faculty members physicians	8/11 instructors
27% faculty members non-physicians	4/11 instructors
44%Lab, 56% Lecture	

\*Note: Non-DOs, Non-US DOs are in violet. US DOs are in black.

<sup>†</sup>20 hours minimum required

Speakers

Lee (1)

Fuller (2)

Willard (3)

Oschman (4)

Blackman (5)

van der Wal (6)

Rosen (7)

Goldman (8)

Snyder (9)

Bell (10)

Stark (11)

SCHEDULE TEMPLATE

Embryology and Osteopathy:  
Developmental Patterns and the Template of Health

CA 2009 Annual Conference  
Bethesda, Maryland

Directed by Ilene Spector, D.O. and Eric Dolgin, DO FCA

L= lecture, S=small group discussion; P=practical session; M=meeting; O=other

Thursday	June 18, 2009	Speaker
8:30 AM	M CA BOD Meeting	Rosen
11:00 AM	M Committee Chair Orientation	Dunn
1:00 AM	M LUNCH, Committee Meetings, Vendors	
2:00 PM	Registration	Staff
3:45 PM	L Welcome	Rosen/ Spector Dolgin
4:00 PM	L The relationship of Embryology to Osteopathy	Michael Burruano
5:00 PM	L Principles of an embryologically mediated treatment	Donald Hankinson
6:00 PM	P Treatment Of All Participants	Hankinson
7:00 PM	P Student/Beginner Lab	Neal, Ventimiglia
8:00 PM	O Adjourn	

Friday	June 19, 2009	Speaker
8:00 AM	M Committee Meetings, Vendors	
9:00 AM	L Blechschmidt's Embryologic Principles	Gasser
10:00 AM	L CNS development	Gasser
11:00 AM	S Small Group Discussion, Vendors	
11:15 AM	P Clinical Application of Embryologic Principles	Donald Hankinson
12:15 PM	M LUNCH, Committee Meetings, Vendors	-
1:45 PM	P Ignition	?
2:45 PM	L Organization and Function of the Embryologic Midline	Blackman
3:30 PM	S Small Group Discussion, Vendors	
3:45 PM	P Embryologic Midline Organization - treatment approach	Blackman
4:45 PM	P Embryologic Midline Organization - treatment approach (continued)	Blackman
5:30 PM	O Adjourn	
5:45 PM	M Annual Membership Meeting	Rosen

Saturday	June 20, 2009	Speaker
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8:00 AM	M	Committee Meetings	
9:00 AM	L	The Speech of the Embryo	van der Wal
10:00 PM	L	Embryo in Motion – Understanding ourselves as embryo	van der Wal
11:00 AM	S	Small Group Discussion, Vendors	-
11:15 AM	L	Embryologic Development of the Extremities	Gasser
12:00 PM	M	LUNCH, Committee Meetings, Vendors	-
1:30 PM	L	Sutherland Memorial Lecture	Miller
2:30 PM	L	The Extremities: Clinical Application of Embryologic Principles	Gill
3:00 PM	S	Small Group Discussion, Vendors	
3:15 PM	P	The Extremities: Treatment Using Embryologic Principles	Gill
4:15 PM	L	Seams and the Fluid Segmental Model	Goldman
4:45 PM	P	Palpation and Treatment with Fluid Segments and Seams	Goldman
5:45 PM	O	Adjourn	
6:45 PM	O	Reception	-
7:30 PM	M	Banquet	-

Sunday	June 21, 2009
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8:00 AM	M	Committee Meetings	
9:00 AM	L	Embryology of the Meninges	Gasser
10:00 AM	L	Embryologic Matrix and the Midline through the Cranial Base	Blackman
10:30 AM	P	Cranial base midline treatment, Anterior and Posterior approach	Blackman
11:00 AM	S	Small Group Discussion	-
11:15 AM	P	Cranial base midline treatment, Anterior and Posterior approach (continued)	Blackman
12:15 AM	P	Cranial base midline treatment, Anterior and Posterior approach (continued)	Blackman
1:15 PM	O	Adjourn Conference	Dolgin/ Spector
2:00	M	CA BOD Meeting	BOD
5:00	O	Adjourn BOD Meeting	

LECTURE AND PRACTICAL SESSION BULLET POINT TEMPLATE

Thursday	June 18, 2009	Speaker
4:00 PM	L The relationship of Embryology to Osteopathy	Burruano
	<ul style="list-style-type: none"> <li>● How and why it relates to osteopathy</li> <li>● Sutherland's and Sutherland's students ideas and references to embryology, esp. Becker</li> <li>● Still's ideas?</li> <li>● Include movement of CNS and embryologic origin- Gasser will go into detail (hopefully)</li> <li>● Explain why it helps where other approaches fail                             <ul style="list-style-type: none"> <li>○ Examples</li> </ul> </li> </ul>	
5:00 PM	L What are the principles in an embryologically mediated treatment?	Hankinson
	<ul style="list-style-type: none"> <li>● Magoun tx principles/ Blechschmidt embryologic forces</li> <li>● Fulcrums</li> <li>● Midline</li> <li>● Hensen's node</li> <li>● Center that becomes differentiation into all fulcrums of body</li> </ul>	
6:00 PM	P Tx Of All Participants	Hankinson
	0. <a href="#">Reference 1953 OCA Journal and take them to neutral</a>	

Friday	June 19, 2009	Speaker
9:00 AM	L Blechschmidt's Embryologic Principles	Gasser
	<ul style="list-style-type: none"> <li>● Blechschmidt's underlying Concepts</li> <li>● Embryologic forces</li> <li>● Fluid dynamics</li> <li>● Movement</li> <li>● Etc.</li> </ul>	
10:00 AM	L CNS development	Gasser
	<ul style="list-style-type: none"> <li>● Detail development of CNS</li> <li>● Development of cerebral hemispheres</li> <li>● Development of ventricles</li> <li>● Development of cerebellum</li> <li>● Development of spinal chord</li> <li>● Emphasize segmental structure</li> <li>● Importance of caudal eminence and what develops from it</li> </ul>	
11:15 AM	P <a href="#">Clinical Application of Embryologic Principles</a>	Hankinson
	<ul style="list-style-type: none"> <li>0. <a href="#">Fulcrums</a></li> <li>1. <a href="#">Midline</a></li> <li>2. <a href="#">Hensen's node</a></li> </ul>	

1:45 PM	P	Ignition	K. Wu or Hankinson
		0. Familiarize with concept of ignition	
		1. Teach a simple method to evaluate and stimulate ignition	
2:45 PM	L	Organization and function of the Embryologic Midline	Blackman
		. Principles of the embryologic matrix	
		○ A and P Midline concepts	
		○ Seams	
		○ Organization of Gut tube/neural tube	
		○ Caudal eminence	
		○ Sacral Hiatus	
		○ Umbilicus	
		○ Somites	
		○ Energetic emptiness concept	
		○ Etheric Body and Embryologic Matrix	
3:45 PM	P	Embryologic Midline Organization- treatment approach	Blackman
		0. Practical applications of aforementioned concepts	
		1. Developing Tactile Skills	
4:45 PM	P	Embryologic Midline Organization (continued)	Blackman

Saturday	June 20, 2009
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9:00 AM	L	The Speech of the Embryo	van der Wahl
		● The approach of the phenomenological morphology	
		● How to understand (not explaining) an embryo	
		● The Embryo's eloquent forms	
		● The language of forms and movements of the body as expressions of mind and spirit	
		● The behavior of the embryo	
		● Mind and body in the womb	
10:00 PM	L	Embryo in Motion – Understanding ourselves as embryo	van der Wahl
		● Human conception as the first appearance of the Breath of Life	
		● Polarity thinking as basis for a dynamic morphology of the human Gestalt	
		● Four phases in the embryo, four levels of human being (physical, biotic, emotional and mental body)	
		● The functional (not the physiological) body as 'substrate' for therapy	
11:15 AM	L	Embryologic development of the Extremities	Gasser
		● Embryologic development of extremities	
		● Segmental relationship	
1:30 PM	L	Sutherland Memorial Lecture	Miller

2:30 PM	L	The Extremities: Clinical Application of Embryologic Principles	Gill
		<ul style="list-style-type: none"> <li>• Additional osteopathic aspects of extremity development</li> <li>• Principles of treatment</li> </ul>	
3:15 PM	P	The Extremity: Treatment Using Embryologic Principles	Gill
		<ol style="list-style-type: none"> <li>0. Philosophical guidelines for treating extremities</li> <li>1. Tx of one extremity using aforementioned principles</li> </ol>	
4:15 PM	L	Fluid segments and seams	Goldman
		<ul style="list-style-type: none"> <li>• Define seams</li> <li>• Explain concepts of seams</li> <li>• Emphasize fluid segmental development giving numerous examples- face, vertebrae, extremities, sternum, etc.</li> </ul>	
4:45 PM	P	Fluid segments and seams lab	Goldman
		<ul style="list-style-type: none"> <li>• Treatment of a simple seam- vertebral segments</li> <li>• Teach principles to apply to any seam</li> </ul>	

Sunday	June 21, 2009
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9:00 AM	L	Embryology of the Meninges	Gasser
		<ul style="list-style-type: none"> <li>• Detail development of meninges with attention region of origin, seams and boundaries</li> </ul>	
10:00 AM	L	Embryologic Matrix and the Midline through the Cranial Base	Blackman
		<ul style="list-style-type: none"> <li>• Cranial Midline and meninges</li> <li>• Nasal septum</li> <li>• Anterior dural girdle</li> <li>• Pituitary</li> <li>• Pineal</li> <li>• Sphenoid- parts and whole</li> <li>• Anterior Dural Girdle</li> </ul>	
10:30 AM	P	Cranial base midline treatment, Anterior and Posterior approach	Blackman
		<ul style="list-style-type: none"> <li>• Practical treatment approach in reference to aforementioned items</li> </ul>	
11:15 AM	P	Cranial base midline treatment, Anterior and Posterior approach (continued)	Blackman
12:15 AM	P	Cranial base midline treatment, Anterior and Posterior approach (continued)	Blackman
1:15 PM		Adjourn Conference	



## **APPENDIX F: OSTEOPATHIC CRANIAL ACADEMY COURSE DEVELOPMENT PROTOCOL**

The Osteopathic Cranial Academy is continually developing an intermediate/advanced curriculum with multiple course offerings. Most of these are being developed within the Continuing Education Committee. The Osteopathic Cranial Academy does not co-sponsor courses put on by non-members. But some courses that have been developed by Academy members outside our committee structure have also become Osteopathic Cranial Academy offerings.

This document describes the process that must be completed in order for the Academy to sponsor a course that has initially been developed independently by a member of the Academy.

### **1. COURSE PROPOSAL:**

A written proposal for the course must be presented to the Chair of the Continuing Education Committee. This proposal should include a description of course content and teaching objectives, a copy of the course schedule, a copy of the course syllabus, and a discussion of the reasons that teaching this course material will further the Academy's mission of "teaching, advocating, and advancing Osteopathy, including Osteopathy in the Cranial Field".

The course developer should also provide estimates on suggested prerequisites required of students, projected class size, total number of faculty (table trainers) required and/or available, equipment needs, and any specific location and site requirements. If specific individuals are desired for the faculty, a list should be provided--with copies of their biosketches or curriculum vitae--along with a list of potential future dates when this faculty might be available to teach the course.

### **2. CONTINUING EDUCATION COMMITTEE REVIEW:**

The Continuing Education Committee will then consider the course proposal, assessing the appropriateness and quality of the proposed course content. The Committee will decide whether to recommend to the Board that The Osteopathic Cranial Academy put on this course.

If the Committee favors the idea of the course, but feels that the proposal needs further development, it will communicate to the proposer what further actions need to be taken by the proposer (working either independently or in conjunction with members of the Committee).

If the Committee approves the course for Academy Sponsorship, a list of proposed faculty will then be forwarded to the Credentials Committee for their review and approval of course faculty.

If the Committee approves the course content for Academy Sponsorship, it will also make a determination regarding appropriate course prerequisites and faculty/student ratio.

The Committee will also determine roughly when and in what geographic region the course should be put on, so that it will fit in harmoniously with the rest of The Osteopathic Cranial Academy's course offerings as determined by our long-range scheduling matrix.

### **3. CREDENTIALS COMMITTEE REVIEW:**

Once the content of a course is approved by the Continuing Education Committee, the proposed faculty of the course must be approved by the Credentials Committee. If the Credentials Committee approves the faculty of the course, then the course proposal goes to the Finance Committee.

#### **4. FINANCE COMMITTEE REVIEW:**

The Finance Committee will work with the Executive Director to determine economic feasibility of the course.

The Finance Committee will consider registration fee, estimated expenses, minimum necessary enrollment, and faculty honoraria to ensure a reasonable minimal net income for The Osteopathic Cranial Academy. (\$2000, for example).

Faculty compensation may follow a similar compensation structure to that used in The Osteopathic Cranial Academy Introductory Course. The Finance Committee may also consider an alternate compensation structure based on course enrollment, with total compensation not exceeding the hourly compensation rate of Introductory Course Faculty.

The Finance Committee will return its recommendation with an estimated budget to the Chair of the Continuing Education Committee, who will then bring the course proposal to the Board of Directors.

#### **5. CONSIDERATION BY THE BOARD OF DIRECTORS:**

The Osteopathic Cranial Academy Board of Directors will then review the course proposal, and decide if the Academy should if the course should be sponsored as an Osteopathic Cranial Academy offering. If the Board approves course sponsorship, the course proposal will go to the Executive Director.

#### **6. NEGOTIATIONS BY THE EXECUTIVE DIRECTOR:**

The Executive Director will then negotiate contracts with Faculty, Hotel, and Conference Site.

#### **7. COURSE MANAGEMENT BY THE OSTEOPATHIC CRANIAL ACADEMY OFFICE:**

Once contracts are signed, The Osteopathic Cranial Academy will proceed with course promotion and presentation, and with the arrangement of CME accreditation. The Osteopathic Cranial Academy will collect all course income, and will pay all contracted course expenses, using procedures similar to those used in our Introductory Courses.

#### **8. COURSE CANCELLATION PROCEDURES:**

If the course does not fill in a timely fashion, and it appears that the Academy will sustain a loss on the course, the course may be put on anyway, or it may be cancelled, at the discretion of the Board or (if time does not permit consultation with the Board) at the discretion of the Executive Committee.

#### **9. TIMELINE:**

Members who have course proposals should keep in mind that this committee process will take a considerable amount of time. Additionally, The Osteopathic Cranial Academy is working towards a goal of planning our schedule of CME offerings two years or more into the future. In the past few years, it has taken at least two years for new course proposals to make it through the pipeline and out into the light of day.

## **APPENDIX G - INTRODUCTORY COURSE REGISTRATION REQUIREMENTS**

The Osteopathic Cranial Academy supports and encourages educating the health care community about the principles and practices of osteopathic medicine. The Introductory Course is a hands-on program that builds upon medical knowledge and clinical experience. In order for our students to learn the scope of practice of Osteopathy in the Cranial Field (OCF), in a comprehensive fashion and in order for them to apply this form of practice in a manner that is both safe and appropriate, it is crucial that they meet the necessary prerequisites for the Introductory Course.

### **I. MEDICAL PHYSICIANS.**

Osteopathy and OCF are part of the practice of medicine. The Osteopathic Cranial Academy's Introductory Course is designed to teach the integration of OCF into the practice of medicine. This course assumes a strong background of education and training in the biomedical sciences and in the clinical observation and treatment of pathology in patients.

In order for students to learn this scope of practice in a comprehensive fashion and in order for them to apply this form of practice in a manner that is both safe and appropriate, it is crucial that they have received or be in an advanced stage of the process of acquiring a broad and comprehensive level of medical educational training. Such training should include two years of didactic training in the basic and clinical biomedical sciences as taught in accredited (AOA, COCA or LCME) medical and ADA-accredited dental schools. Such training should also include three years of intensive training in approved clinical teaching settings, including extensive training in hospital settings where students are exposed to addressing the diagnosis and treatment of patients who manifest a broad range both in type and severity of clinical pathology. This is the level of education and training which leads to a license for the unlimited scope and practice of medicine, as defined by medical licensing boards in each of the 50 states and the District of Columbia. Medical Physicians trained outside the US who reside and practice outside the US must be eligible for unlimited licensure within the United States.

### **II. DENTAL PHYSICIANS.**

Our organization has a long-standing professional relationship with members of the dental profession. Dentists are licensed to treat dental and dental occlusal problems and temporomandibular joint dysfunction, using dental, orthopedic, orthodontic, and surgical treatments. The application of these forms of treatment have a direct and immediate impact upon the relationships between the cranial bones and related structures, and in younger individuals, can have a dramatic and long term impact upon craniofacial and postural development.

It is essential for the well-being of our patients that we continue to maintain communication and develop mutual understanding with members of the dental profession. Dentists are encouraged to attend our courses so that they can understand the affects of dental treatments on the cranial mechanisms of our mutual patients, and so that they can learn to recognize how cranial somatic dysfunction can effect both the development and treatment of dental orthopedic and orthodontic pathology. This learning process involves training in osteopathic concepts. It also requires hands-on training in the palpatory skills which are required both to diagnose cranial somatic dysfunction and to recognize the effects of appropriate treatment upon the cranial mechanism.

By encouraging dental participation in our courses, the Academy hopes to encourage the ongoing development of dental practice that recognizes and works in harmony with the Primary Respiratory Mechanism. The Academy recognizes that dentists are not fully licensed for the unlimited scope and practice of medicine. However, dentists are the most fully trained and fully licensed professionals for treatment of dental, dental orthopedic, and dental orthodontic problems. For these reasons, The Osteopathic Cranial Academy allows and encourages licensed dentists to attend our Introductory Course.

### III. INTERNATIONAL OSTEOPATHIC GRADUATES

“International Osteopathic Graduates” refers to graduates of osteopathic educational programs outside the United States who practice and reside outside the United States.

The Osteopathic Cranial Academy is committed to advancing the teaching of cranial osteopathy throughout the world, and therefore welcomes qualified Doctors of Osteopathy or Registered Practitioners of Osteopathy practicing in countries other than the United States into the Introductory Course.

International osteopathic education does not follow the model used in the United States. While osteopaths trained in countries other than the United States may not receive the same basic science curriculum or level of clinical training required by colleges of osteopathic medicine, accredited by the American Osteopathic Association’s Commission on Osteopathic College Accreditation, these individuals are educated in and practice the principles of osteopathy.

An individual’s qualifications for practice, and the scope of practice, are determined by each country’s laws of licensure. There is a great deal of variation in the licensure requirements of different nations. Admission into The Osteopathic Cranial Academy Introductory Course requires that individuals who complete an osteopathic educational program and practice and reside outside the United States either possess unlimited licensure for the practice of medicine or are members in good standing of a national osteopathic registry or the appropriate governmental licensing authority, the standards of which have been reviewed and approved by The Osteopathic Cranial Academy.

The Osteopathic Cranial Academy will evaluate applications from International Osteopathic Graduates on a case-by-case basis. The Osteopathic Cranial Academy reserves the right to request additional information about the education and training of any International Osteopathic Graduate who applies for admission to the Introductory Course.

## **APPENDIX H - INTRODUCTORY COURSE CONTENT**

Course content must be pre-approved by the Credentials Committee. The Introductory Course must contain a minimum of 40 hours of instruction and include lectures on the following topics:

History of OCF

Conceptual and Palpatory Introduction

- Primary Mechanism and The Five Phenomena

- Inherent Therapeutic Process

Embryologic and Anatomic Relationships to Function:

- Cerebro-Spinal Fluid & Fluid Considerations

- Central Nervous System

- Reciprocal Tension Membrane

- Osteology (including suture anatomy):

  - Cranial Base: Occiput, Sphenoid, Ethmoid, Petrous temporals

  - Cranial Vault: Frontal, Parietals, Squamous Temporals, Squamous Occiput

  - Facial Bones

  - Cranio-Cervical Junction

  - Sacrum, Coccyx, and Pelvis

- Relevant Associated Structures:

  - Nerves

  - Fascia

  - Vessels

  - Muscles

  - Brain Tracts & Nuclei

  - Ventricular System

Physiologic and Non-Physiologic Patterns of the Cranial Base

- Including Etiology & Potential Clinical Sequelae

Treatment Process (including but not limited to):

- Fluid Dynamics;

  - Directing the Tide, V-Spread

  - CV4

  - Lateral Fluctuation

  - Venous Sinus Release

- Balanced Membranous Tension

  - Release of Boney Articulations

    - (e.g. Lifts, Spreads, Decompression, Intra-oral approaches)

  - Release of Dural Strains

- Balanced Ligamentous Release

  - Extremities

  - Sacro-Iliac

Osteopathic History & Structural Evaluation

Traumatic Influences

Obstetric and Pediatric Considerations

- Including Decompression of Occipital Condylar Parts

Clinical Correlations / Applications

## **APPENDIX I: POSITION PAPERS**

The following position statements represent the consensus of the Board of Directors:

### **1 – Definition: Osteopathy in the Cranial Field**

To be developed

### **2 – Mission, Vision, and Values Statements**

The Mission of The Osteopathic Cranial Academy, an international nonprofit membership organization, as established by the Board of Directors, is to teach, advocate, and advance Osteopathy, including Osteopathy in the Cranial Field, as envisioned by Andrew Taylor Still MD and William Garner Sutherland DO.

The Vision of The Osteopathic Cranial Academy is:

To promote mastery in the practice of Osteopathy in the Cranial Field

To support a vibrant professional environment so that Osteopathy can flourish

To establish Osteopathy, including Osteopathy in the Cranial Field, as a recognized cornerstone of complete patient care

The Osteopathic Cranial Academy and its members are committed to:

Honoring the natural forces that give form to all life

Seeking truth through lifelong learning

Pursuing research, scientific rigor, and intellectual honesty

Providing service with professionalism, respect and compassion

Continuing the legacy of hand-to-hand learning within a nurturing environment that honors our elders and welcomes our students

### **3 – Osteopathic Cranial Academy Membership**

The Osteopathic Cranial Academy is an organization composed of:

Regular Members: Osteopathic Physicians and surgeons who practice medicine using the cranial concept based upon the principles of osteopathy.

Associate Members: Medical Doctors and Dentists who may apply the Cranial Concept within the scope of their practice.

Affiliate Members: International Osteopaths who are regulated by the governments of the countries in which they practice and reside, and are members of a recognized affiliate society.

### **4 - Historical Background**

Osteopathy in the Cranial Field (Cranial Osteopathy) is a concept authored by William Garner Sutherland, DO (1883- 1954). The Osteopathic Cranial Academy is a component society of the American Academy of Osteopathy which is a specialty society for osteopathic manipulative medicine of the American Osteopathic Association which are considered to be authoritative bodies on osteopathic manipulative medicine and osteopathy. Osteopathic physicians and surgeons practicing Cranial Osteopathy have unlimited license to practice medicine and surgery in all 50 states and the military.

### **5 – Manual Therapies Provided By “Other” Health Care Providers.**

Physical Therapists are not by law allowed to make a medical diagnosis, nor to practice “osteopathic” manipulation.

Chiropractors hold a limited license. Centers for Medicare and Medicaid Services (CMS) state that manipulation by chiropractors is not comparable to that provided by Doctors of Osteopathy.

"Craniosacral Therapy" is not synonymous with Osteopathy in the Cranial Field. "Craniosacral Therapy" is a copyrighted term by John Upledger, DO, FAAO of the Upledger Institute. Programs are provided to physical therapists, massage therapists, "body workers" and lay persons. See CST comparison chart. "Craniosacral Therapy" is used as a therapy technique only. The Osteopathic Cranial Academy through its Credentials Committee does not acknowledge the courses offered by the Upledger Institute to be equivalent or comparable to courses offered by or approved by The Osteopathic Cranial Academy. Neither the American Academy of Osteopathy nor the American Osteopathic Association gives CME credit for these courses.

Be it resolved: Persons other than fully licensed physicians who receive education or training in manual techniques from osteopathic physicians shall not represent to the public that they offer osteopathic manipulative treatment services. Nor shall they promote themselves as an "osteopath," an "osteopathic practitioner," as having received "osteopathic training" or practicing "osteopathy" or "osteopathic medicine."

#### 6 - Definition of Somatic Dysfunction

From the 2006 AACOM/ECOP Glossary of Osteopathic Terminology: Impaired or altered function of related components of the somatic (body framework) system: skeletal, arthrodial, and myofascial structures, and related vascular, lymphatic, and neural elements; the positional and motion aspects of somatic dysfunction are best described using two parameters: 1) the position of a body part as determined by palpation and referenced to its adjacent defined structure; 2) the directions in which motion is freer and the direction in which motion is restricted; in either instance, the Cartesian, orthogonal or Euler coordinates are used as the reference axes of motion.

#### 7 - Anti-Discrimination Issues

The Osteopathic Cranial Academy recognizes the importance of the contributions of all individuals in part because of the diversity of thought promoted by differences in sex, race, gender, sexual orientation, disability, ethnic or national origin, religious affiliation or political ideology.

#### 8 - The Relationship of Osteopathy in the Cranial Field and Dentistry

Qualified osteopathic physicians have been teaching dentists the cranial concept since the early 1970s. It is extremely important for dentists to understand that the cranium is a pliable and viable mechanism.

The William Garner Sutherland Temporo-mandibular Cranio-Dental Group, formed in 1982, is working toward establishing a Cranio-Dental Specialty Board.

Be it resolved: The Osteopathic Cranial Academy continue to foster a close relationship with its dental members and the dental profession in general.

Be it resolved: The Osteopathic Cranial Academy promote the dissemination of Dr. Sutherland's cranial concept to the dental profession.

Be it resolved: The Osteopathic Cranial Academy Education Committee may promote courses for fully licensed medical and dental professionals. The credentials committee and Introductory Course Subcommittee in accordance with the policies established by the Board of Directors, will determine who can attend Osteopathic Cranial Academy Introductory courses. WGSTSG courses are approved for dentists only.

Be it resolved: Both the osteopathic and dental members should increase each other's awareness of the overlap of philosophies, but not be in the position of teaching dentists to practice osteopathy or teaching osteopaths to practice dentistry.

Be it resolved: When feasible, dental input be included in the annual Cranial Conference.

Be it resolved: Our dental members appoint, with approval of the president and board of directors, an active associate member to fill the dental associate representative position on the Cranial Board.

Be it resolved: Our dental members should refrain from using terms not ordinarily considered part of the Dental Practice Act, such as “body alignment.”

Be it resolved: Persons other than fully licensed physicians who receive education or training in manual techniques from osteopathic physicians shall not represent to the public that they offer osteopathic manipulative treatment services. Nor shall they promote themselves as an “osteopath,” an “osteopathic practitioner,” as having received “osteopathic training” or practicing “osteopathy” or “osteopathic medicine.”

## 9 - Practice Guidelines

Osteopathy in the Cranial Field (OCF) was developed within the osteopathic profession by William Garner Sutherland, DO (1873-1954). Sutherland was an original thinker, and his application of Still’s philosophy is recognized as “one of the most innovative ideas advanced by a member of the osteopathic profession.”<sup>1</sup> The principles and practice of OCF, commonly referred to as Cranial Osteopathy (CO), were developed by Sutherland and taught within the osteopathic profession by The Osteopathic Cranial Academy and Sutherland Cranial Teaching Foundation since the 1930s. A standard text was published in 1951<sup>2</sup>, with a number of important articles<sup>3,4,5,6</sup> and books<sup>7,8</sup> following.

Instruction in OCF/CO has been a part of standard training in departments of Osteopathic Principles, Practice, and Manipulative Medicine in all Osteopathic Medical Schools. Concepts and terminology pertaining to OCF/CO have been developed and defined by the Educational Council on Osteopathic Principles (ECOP) of the American Association of Colleges of Osteopathic Medicine (AACOM) and have been published in the Glossary of Osteopathic Medical Terminology which appears annually in American Osteopathic Association *Yearbook and Directory of Osteopathic Physicians*.

As the federally recognized accrediting body for residency training programs within the osteopathic medical profession, the AOA has approved the Basic Standards for Residency Training in Neuromusculoskeletal Medicine and Osteopathic Manipulative Treatment. OCF/CO is one of the osteopathic manipulative treatment models within these basic standards. The AOA also is the federally recognized body charged with approval of certifying boards within the osteopathic medical profession. The AOA has chartered the American Osteopathic Board of Neuromusculoskeletal Medicine. This certifying Board administers written, oral and practical examinations which include items relating to OCF/CO.

The following practice guidelines have been adopted by The Osteopathic Cranial Academy as the model for application of the principles and practice of OCF/CO in the training and clinical practice of osteopathic medical students and osteopathic physicians in their daily use of OCF/CO.

### **Practice Guidelines for Osteopathy in the Cranial Field/Cranial Osteopathy**

1. Training considered adequate for the practice of Osteopathy in the Cranial field/Cranial Osteopathy (OCF/CO) is the same as that for all Osteopathic Manipulative Treatment/Osteopathic Manipulative Medicine. Such training shall be that obtained in an accredited College of Osteopathic Medicine, and/or a Neuromusculoskeletal Medicine Residency, culminated by a introductory course in OCF/CO provided by The Osteopathic Cranial Academy or the Sutherland Cranial Teaching Foundation in which there is a student to teacher ratio of 4:1.

2. The practice of OCF/CO is an integral part of osteopathic medical practice and will be conducted in accordance with the general standard of medical practice. The standards for the practice of OCF/CO, as in all applications of OMT/OMM, are based on basic science and evidence-based research. These guidelines will be updated in light of new research.

3. All patients will be examined in the appropriate medical manner to fully assess the medical needs of the patient. In addition, osteopathic structural diagnosis will be carried out in the standard manner and documented. If the principles of OCF/CO are included in the structural examination, the findings will be noted in nomenclature consistent with the Glossary of Osteopathic Medical Terminology, and in such a form to be readily communicated to other physicians.
4. If the osteopathic structural examination reveals neuromusculoskeletal findings indicative of somatic dysfunction in the cranial, sacral, axial, appendicular skeleton and related soft tissue structures uniquely pertaining to the primary respiratory mechanism (defined in the Glossary of Osteopathic Medical Terminology<sup>9</sup>), such findings will be documented.
5. Documentation should include the nature of structural derangement in OCF/CO terms such as the strain pattern in the cranial bones, the quality of the motion of the primary respiratory mechanism (PRM), other asymmetry of the axial and appendicular structures, and a statement of the nature and goals of treatment utilizing the principles of OCF/CO.
6. The application of OMT/OMM utilizing the principles of OCF/CO may be carried out by a physician in accordance with the health needs of the patients. Contra-indications to application of OCF/CO (such as in patients immediately post-stroke) will be observed.
7. Upon the completion of the treatment utilizing the principles of OCF/CO, in accordance with standard OMT/OMM medical procedure, the patient's neuromusculoskeletal structure will be reevaluated. Measurement of change of position, quality of motion, alteration of asymmetry or strain pattern will be noted and recorded.
8. Observance of these practice guidelines reaffirms the commitment of osteopathic physicians who practice OCF/CO to high standards of care set out in governmental and professional standards for healthcare.

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# **The Cranial Academy Position on Treatment of Otitis Media**

## **Introduction**

The osteopathic approach to treating otitis media (OM) has traditionally utilized osteopathic manipulative treatment (OMT) primarily and appropriate adjunct measures secondarily (pharmacotherapy, nutrition, lifestyle, etc.). This has been based on sound anatomic-physiologic models and clinical experience applying osteopathic insight.

## **Background**

OM is the most common reason for prescribing antibiotics to pediatric patients. The number of office visits has increased out of proportion to the increase in population.

With the increase in prescriptions, a great deal of controversy has surfaced surrounding prudent treatment of this problem. Recently, concern about overprescribing antibiotics has been a lively topic for discussion especially with little change in outcome for all forms of OM from most prescribing habits.

In addition, there is great concern about antibiotic resistant strains of common pathogens and the contribution to this problem from frequent prescribing.<sup>1</sup>

## **Types of OM**

OM has been classified into several general types, acute otitis media (AOM) and otitis media with effusion (OME) being the most common:

AOM is defined as the presence of fluid in the middle ear in association with signs or symptoms of acute local or systemic illness. Accompanying signs and symptoms may be specific for AOM, such as otalgia or otorrhea; or nonspecific, such as fever.<sup>2</sup>

It is one of the most prevalent diseases in early childhood and the most common infection for which antibiotics are prescribed in the US, accounting for more than 13 million prescriptions in the year 2000.<sup>3</sup>

50% of children have at least one episode of AOM by age 7,<sup>4</sup> and 50% of all cases of AOM end up developing middle ear effusion (MEE).<sup>5</sup>

OME is defined as the presence of fluid in the middle ear in the absence of signs or symptoms of acute infection. OME occurs in about 90% of children before school age, most often between 6 months and 4 years old (with pathology present in 80% of the individuals' ears).<sup>6</sup> It has a prevalence of up to 30%, and a cumulative incidence of 80% at the age of four years.<sup>7</sup>

By 1 year old more than 50% of children will experience OME; by age 2 years this will increase to more than 60%. Most episodes resolve spontaneously by 3 months, however 30%-40% of children have recurrent OME with 5%-10% of these episodes lasting 1 year or longer.<sup>8</sup>

OME may occur spontaneously because of poor Eustachian tube function or as an inflammatory response following AOM.<sup>8</sup>

Some children may go on to develop chronic OM, language delays and behavioral problems.<sup>7</sup>

## **Osteopathic Causation**

Osteopathy in the Cranial Field (OCF) has posited that healthy function of the human ear is dependent on the inherent physiologic mobility of the temporal bones within the cranial mechanism and the relationship to all other anatomic structures to which they are connected, directly or indirectly.

## Pharmacotherapy

### AOM

AOM accounts for 60% of the antibiotics written for children.<sup>1</sup>

Studies have demonstrated that when treating non-severe AOM with antibiotics there is small or *no* benefit when compared to doing nothing.<sup>1, 9, 10, 11</sup>

In addition, there was no difference in:

Parent satisfaction

Days of work or school missed

Visits to doctors' offices or emergency rooms

Number of phone calls

Recurrence rate by day 30

2. Clinical examination of the children's eardrums at day 30.<sup>1, 12</sup>

Regarding antibiotic treatment for AOM, meta-analyses report that 15 to 17 children need to be treated (NNT=17) in order to eliminate otalgia in 1 child, 2 to 7 days after initial presentation to the physician.<sup>3</sup>

Another study reported 1 in 7 patients would suffer some side effect from antibiotic treatment.<sup>13</sup>

### OME

Prescribing antibiotics for OME is *not* effective treatment according to numerous studies and reviews.<sup>8, 12, 14, 15</sup>

Prophylactic treatment with antibiotics has been used for this problem in the past, however there is no evidence to support its effectiveness.<sup>16, 17, 18</sup>

There is also insufficient evidence to support the use of decongestants, antihistamines or corticosteroids in OME.<sup>19, 20, 21</sup>

## Surgical treatment

Several types of surgical procedures have been implemented to treat and prevent different forms of OM.

Adenoidectomy, as the first surgical treatment of children aged 10 to 24 months with recurrent acute otitis media, is not effective in preventing further episodes.<sup>8, 22, 23, 24</sup> It cannot be recommended as the primary method of prophylaxis.

Prophylactic insertion of tympanostomy tubes with persistent middle ear effusion did *not* improve developmental outcomes in children up to 9 to 11 years of age.<sup>25</sup> Though there may be possible short term improvement in symptoms, tympanostomy tubes have not been shown to make a difference in hearing in long term use.<sup>20</sup>

Tympanostomy tubes significantly increase the cost of treatment and studies indicate that they are overused.<sup>18, 26, 27</sup>

## Complications from OM

Proponents of antimicrobial therapy often state that complications such as mastoiditis, loss in language development, and reinfection, are significantly reduced with early prescribing, however studies have not demonstrated this to be true.

The incidence of mastoiditis is not significantly different between children who do and do not receive antibiotic treatment for AOM.<sup>1, 28, 29, 30</sup>

Hearing loss from OME is not the major factor with concomitant loss in language development and skills. It has been shown that parenting is a much greater factor than anything else.<sup>20</sup>

Administering antibiotics does not reduce recurrence of OM.<sup>1</sup>

Complications from tympanostomy tubes include perforation, scarring, infection, and early or delayed expulsion of tube.<sup>18</sup>

## Watchful Waiting

In the Netherlands, Sweden, and the state of New York, watchful waiting (WW) is an official policy. In many other areas it is recommended that parents of children diagnosed with AOM be taught to wait 48-72 hours before seeking treatment or prescribing antibiotics.<sup>32</sup>

WW both with and without a prescription were often well accepted and reduced antibiotic use without compromising parental satisfaction.<sup>1, 33, 34, 35</sup>

## Osteopathic Treatment

OM has traditionally been successfully treated using osteopathic methodology since the beginning of the profession.

It involves the use of specifically administered gentle perceptive OMT to restore uninhibited symmetrical physiologic inherent motion. In addition, it will improve venous and lymphatic drainage, enhance arterial blood supply and stimulate the body's own inherent healing process.<sup>36</sup>

This methodology has proven extremely safe for young children, especially for prevention. There are no adverse effects that have been reported in the literature for young children after approximately 70 years of application of Osteopathy in the Cranial Field. In fact, parents often report a general increase in health and well-being of their children.

Clinical experience (with documented cases) has demonstrated that OMT can effectively treat both AOM and OME.

Pilot studies have documented that there is therapeutic benefit implementing osteopathic treatment in cases of otitis media.<sup>33, 37</sup> In addition, there are sound anatomic-physiologic models explaining the effectiveness of osteopathy in the cranial field.<sup>35, 38, 39, 40, 41, 42, 43</sup>

## Preventive Measures

The following have been shown to be effective in decreasing the incidence of OM:

- a. Eliminating food allergens<sup>44, 45</sup>
- b. Reducing or eliminating pacifier use<sup>46</sup>
- c. Nursing for at least the first 11 months of life<sup>47</sup>

Though there are no published studies yet on the effectiveness of OMT in preventing OM, the previously mentioned anatomic-physiologic mechanisms allow OMT to be used for prevention as well as for treatment of otitis media.

## Conclusion

As:

Antimicrobial therapy has been shown to provide little benefit in the treatment of AOM and OME...

And as tympanostomy tubes, use of decongestants, antihistamines, or corticosteroids have demonstrated very limited benefit in the treatment of AOM and OME...

And as there is little to no difference in clinical outcome between WW for 72 hours and prescribing antibiotics for AOM...

And as OMT has proven to be clinically beneficial for treating otitis media and is the osteopathic approach...

It is the position of the Cranial Academy that:

Osteopathic treatment utilizing the principles of OCF should be the initial treatment in most forms of otitis media and included in the treatment of all forms of otitis media.

Patient education along with safe and proven preventive measures should be implemented whenever possible.

Antimicrobial treatment should be used in AOM only as an adjunct measure in patients who fail to respond adequately to osteopathic treatment after 72 hours, are high risk, or at the discretion of the physician with regard to clinical circumstances.

Tympanostomy tubes, decongestants, antihistamines, and corticosteroids should be used only under compelling clinical circumstances.

Children should be screened in the nursery for somatic dysfunction of the head that can contribute to or cause future cases of OM.

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Number needed to treat or NNT is an epidemiological term that indicates the number of patients that need to be treated in order to prevent one additional bad outcome.

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## APPENDIX J: International Affiliate Members and Recognized Affiliate Societies

### **A. OCA Affiliate Membership (From the Bylaws)**

According to the OCA Bylaws Affiliate Membership includes:

1. Any Medical Doctor or equivalent with a current unrestricted license to practice medicine, who:
  - a. has completed and submitted an application for membership;
  - b. has successfully completed a Osteopathic Cranial Academy approved 40-hour Introductory Course;
  - c. has been recommended by one Regular or Life Member;
  - d. has been recommended by the Credentials Committee for Affiliate Membership;
  - e. has remitted appropriate dues;
  - f. complies with Article XVI, Statement of Code of Ethics
2. Any Dentist with a current license to practice dentistry who:
  - a. has completed and submitted an application for membership;
  - b. has successfully completed a Osteopathic Cranial Academy approved 40-hour Introductory Course;
  - c. has been recommended by one Regular or Life Member;
  - d. has been recommended by the Credentials Committee for Affiliate Membership;
  - e. has remitted appropriate dues;
  - f. complies with Article XVI, Statement of Code of Ethics.
3. Any non-physician Osteopath who:
  - a. has completed and submitted an application for membership;
  - b. has successfully completed a Osteopathic Cranial Academy approved 40-hour Introductory Course;
  - c. has been recommended by either a Regular or Life Member;
  - d. is a member in good standing of a Osteopathic Cranial Academy approved Affiliate Society;
  - e. has remitted appropriate dues;
  - f. complies with Article XVI, Statement of Code of Ethics

Affiliate Members shall have all the rights of membership except the right to vote, serve as an officer or director or chair a standing committee.

### **B. Affiliate Advisors to the Board of Directors**

The Associate Dental Members, The Associate MD Members and the Affiliate Members may each elect one representative from their category to serve as advisors to the Board of Directors. In the absence of such elections, the President may appoint a representative from the Associate and Affiliate membership to serve as advisors to the Board of Directors. Such advisors shall be entitled to attend all regular and special meetings of Board of Directors, enter into discussions on any matters before the Board of Directors, and shall have the right to make motions and vote.

### **C. Recognized Affiliate Societies - Application Protocols**

The term "Affiliate Society" means a registry, association or other professional organization that has been approved by the Board of Directors.

An International Osteopathic Organization may become for Recognized as an OCA Affiliate Society via the following procedures:

#### 1. Prerequisite for Application

The organization has achieved a level of authorized recognition. Either:

1. The government recognizes and regulates osteopathy within that country. (ie. All members of that organization belong to a government recognized national registry)

or

2. The organization is a FULL member of the OIA.

2. Application (all documents must be submitted in English)

- a. A completed application form
- b. A statement of standards in the practice of osteopathy including philosophical, historical, educational, technical and ethical areas.
- c. A copy of governing documents, bylaws
- d. A current list of members.

3. Approval:

- D. The organization shall be vetted by the International Membership Subcommittee and Credentials Committee
- E. Final Approval by the OCA Board of Directors.

**D. OCA Educational Curriculum Participation for International Non-Physician Osteopaths**

Well trained proficient International Non-Physician Osteopaths may live in a country that does not recognize the practice of osteopathy as a unique independent profession. Such individuals are therefore incapable of creating an OCA Recognized Affiliate Society within their country, and thereby cannot qualify for OCA course attendance or affiliate membership.

It is therefore necessary to designate criteria by which competent individual international non-physician osteopaths may be determined as qualified for either OCA course attendance and/or affiliate membership.

The International Membership Subcommittee, Credentials Committee shall vet each applicant, with final approval by the Osteopathic Cranial Academy board of directors.

**OCA Introductory Course Attendance**

In order for international non-physician osteopaths to qualify for admission, they must meet all the criteria of Appendix G and provide the following:

1. Curriculum Vitae, including
  - a. Osteopathic School of Graduation
  - b. Residence and location of Practice
  - c. Number of Years in Practice
  - d. Professional Memberships
2. A copy of their diploma proving graduation from their COM or Osteopathic School.
3. Proof of practicing "exclusively" osteopathy
4. A certificate of membership in their National Osteopathic Association.
5. A statement of their motivations for attending an OCF Introductory course
6. Letter of recommendation from OCA affiliate member

**OCA Continuing Studies Course**

In order for international non-physician osteopaths to qualify for admission, they must meet all the criteria of section 9.9 and provide the following:

1. Curriculum Vitae, including
  - a. Osteopathic School of Graduation
  - b. Residence and location of Practice
  - c. Number of Years in Practice
  - d. Professional Memberships
  - e. Dates of Approved SCTF courses (or equivalent), with proof of attendance
  - f. List of OCF mentors
2. Proof of Attendance in approved SCTF course. Certificate or Letter from course director.
3. Proof of practicing "exclusively" osteopathy
4. A copy of their diploma proving graduation from their COM or Osteopathic School.
5. A certificate of membership in their National Osteopathic Association.
6. A statement of their motivations for attending an OCF Post Introductory Course

7. Letter of recommendation from OCA Affiliate Member

OCA Annual Conference Attendance

In order for international non-physician osteopaths to qualify for admission, they must meet all the criteria of section 7.3.1 and provide the following:

1. Curriculum Vitae, including
  - a. Osteopathic School of Graduation
  - b. Residence and location of Practice
  - c. Number of Years in Practice
  - d. Professional Memberships
  - e. Dates of Approved SCTF courses (or equivalent), with proof of attendance
  - f. List of OCF mentors
2. Proof of Attendance in approved SCTF course. Certificate or Letter from course director.
3. A copy of their diploma proving graduation from their COM or Osteopathic School.
4. Proof of practicing “exclusively” osteopathy
5. A certificate of membership in their National Osteopathic Association.
6. A statement of their motivations for attending an OCF Post Introductory Course
7. Letter of recommendation from OCA affiliate member