

The Osteopathic Cranial Academy

MANUAL OF POLICIES, PROCEDURES & GUIDELINES

Revised as of 10/1/2023

Table of Contents

Section 1 - Board of Directors Code of Leadership	6
Section 1.1 - Attendance	
Section 1.2 - Other Methods of Voting	
Section 1.3 - The Executive Committee	
Section 1.3.1 - President	
Section 1.3.2 - President-Elect	
Section 1.3.3 - Secretary	
Section 2 - Membership Criteria	8
Section 2.1 - Regular Members	
Section 2.2 - Associate Members	
Section 2.3 - Affiliate Members	
Section 2.4 - Retired Members	
Section 2.5 - Life & Honorary Members	
Section 2.6 - Student Members	
Section 2.7 - Resident Members	
Section 2.8 - Termination of Membership Members	
Section 3 - Osteopathic Cranial Academy Committees	10
Section 3.1 - Standing Committees	
Section 3.2 - Other Committees	
Section 4 - Osteopathic Cranial Academy Committees - General Procedures	11
Section 4.1 - Executive Committee (Standing)	
Section 4.2 - Committee of the Chairs (Standing)	
Section 4.3 - Bylaws Committee (Special)	
Section 4.4 - Credentials Committee (Standing)	
Section 4.5 - Education Committee (Standing)	
Section 4.5.1 - Education Committee Structure	
Section 4.6 - Fellowship Committee (Standing)	
Section 4.7 - Finance and Investment Committee (Standing)	
Section 4.7.1 - Finance Committee Substructure	
Section 4.8 - Grievance Committee (Special)	
Section 4.9 - Nominating Committee (Standing)	
Section 4.10 - Information Technology Committee (Special)	
Section 4.11 - Membership Committee (Special)	
Section 4.11.1 - Membership Committee Substructure	
Section 4.12 - Publications Committee (Special)	
Section 4.13 - Marketing Committee (Special)	
Section 4.14 - Research Committee (Special)	
Section 5 - Dues and Assessments	16
Section 5.1 - Dues Schedule	
Section 5.2 - Dues Waiver	
Section 5.2.1 - Dues Waiver: Students at Colleges of Osteopathic Medicine	
Section 5.3 - Delinquency	
Section 5.4 - Legal Preparedness Fund	
Section 6 - Educational Curriculum	17
Section 6.1 - Educational Administration	
Section 6.2 - Educational Program Guidelines	
Section 6.2.1 - Course Schedule / Rotational Matrix	
Section 6.2.2 - International Course Schedule	
Section 6.3 - Faculty Guidelines	
Section 6.4 - Education Goals and Objectives	
Section 6.5 - Acceptable CME Topics	
Section 6.5.1 Additional Topics	

Section 6.6 – Quality Assessment of Programs	
Section 6.7 - Advertising and Promotion Policy	
Section 6.8 - Maintenance of CME Records	
Section 6.9 - Certification of CME Attendance	
Section 6.10 – Refund Policy	
Section 6.10.1 Cancellations by Attendees	
Section 6.10.2 – Course Cancellation by The Osteopathic Cranial Academy	
Section 6.10.3 – Grievances	
Section 6.11 - Disclosure Declaration Statement (prescribed by the AOA)	
Section 6.12 - Policy to Support Breastfeeding	
Section 6.13 – Policy on Course Admittance	
Section 7 - Annual Conference	22
Section 7.0 – Conference Schedule Template	
Section 7.1 - Site Selection	
Section 7.2 - Conference Director(s)	
Section 7.2.1 –Conference Director Compensation	
Section 7.3 – Annual Conference Registration	
Section 7.3.1 - Registration OCA Annual Conference Eligibility	
Section 7.3.2 - OCA Annual Conference Attendance: International Non-Physician Osteopaths	
Section 7.3.3 - Registration Fees	
Section 7.3.4 - Annual Conference Cancellation Policy	
Section 7.4 - Conference Speakers	
Section 7.4.1 - Conference Speakers Compensation	
Section 7.4.2 Speakers Attendance, when they do not meet criteria for regular attendance	
Section 7.5 – Conference Table Trainers	
Section 7.5.1 – Conference Table Trainer Compensation	
Section 7.6 - Conference Audio/Video Recording	
Section 7.7 – President and Board Member Attendance	
Section 7.8 - Carl Rathjen Scholarships	
Section 7.9 - Announcements	
Section 8 - Introductory Course in Osteopathy in the Cranial Field	26
Section 8.1 - Introduction	
Section 8.1.1 - Categories	
Section 8.1.2 - Minimum Requirements	
Section 8.1.3 - Introductory Course Content	
Section 8.2 - The Osteopathic Cranial Academy 40 hour Introductory Course in Osteopathy in the Cranial Field	
Section 8.2.1 - Introductory Course Faculty	
Section 8.2.2 - Introductory Course Director Responsibilities.	
Section 8.2.3 - Introductory Course Registration Requirements	
Section 8.2.4 - Grades and Certificates	
Section 8.2.5 - Introductory Course Financial Considerations	
Section 8.2.6 - Introductory Course Cancellation Policy	
Section 8.2.7 - Introductory Course Scholarships	
Section 8.2.8 – Faculty Auditing	
Section 8.3 - Legacy Organizations	
Section 8.4 - International OCA “Co-directed” 40 hour courses.	
Section 8.5 -The William Garner Sutherland Dental Study Group Introductory Course	
Section 8.6 Introductory Courses in OCF Offered at Osteopathic Colleges for Students	
Section 8.6.1 - Approved Attendance	
Section 8.6.2 - Auditing by Resident Physicians and COM Faculty	
Section 8.6.3 - Privileges for COM Students upon Successful Completion	
Section 9 - Continuing Studies - The Tiered Curriculum	32
Section 9.1 – Level 1 Courses	

Section 9.2 – Level 5 Courses	
Section 9.2.1 – Level 5 Course Structure	
Section 9.2.2 – Level 5 Course Content	
Section 9.3 – New Course Development Protocol	
Section 9.3.1 Continuing Studies Subcommittee Designed Courses – Review Process	
Section 9.3.2 - Member Designed Courses	
Section 9.4 – Course Approval Process	
Section 9.4.1 – Credentials Committee Review	
Section 9.4.2 – Finance Committee Review	
Section 9.4.3 – Approval by the Board of Directors	
Section 9.5 – Level 5 Course Faculty	
Section 9.5.1 – Level 5 – Course Director	
Section 9.5.2 - Level 5 - Associate Director	
Section 9.5.3 - Level 5 – General Faculty and Table Trainers	
Section 9.5.4 – Level 5 – Faculty Development	
Section 9.6 - Scheduling of Courses	
Section 9.7 - Special Courses	
Section 9.8 - Sponsorship of Non Osteopathic Cranial Academy Course offerings, including Study Groups	
Section 9.9 - Eligibility for Participation in Osteopathic Cranial Academy Post-Introductory Course Curricula	
Section 9.9.1 - OCA Continuing Studies Course: International Non-Physician Osteopaths	
Section 9.10 - Financial Considerations	
Section 9.10.1 - General Considerations	
Section 9.10.2 - Level 5 Course Faculty Compensation	
Section 9.10.3 - Special Circumstances	
Section 9.11 - Cancellation and Refund Policies for Level 5 and Level 1 Courses.	
Section 9.12 - Grievances	
Section 10 - Proficiency Examination	40
Section 10.1 - Eligibility for Proficiency Examination	
Section 10.2 - Fees	
Section 10.3 - Protocol	
Section 10.4 - Recognition of Proficiency	
Section 10.5 - Re-Examination	
Section 10.6 - Maintenance of the Proficiency Status	
Section 11 - Publications	42
Section 11.1 - Newsletter	
Section 11.2 – Journal of The Osteopathic Cranial Academy	
Section 11.3 - Advertising	
Section 11.4 - Permission to Reprint	
Section 11.5 - Membership Information Directory	
Section 11.6 - Copying Fees	
Section 12 - Web Site Guidelines	44
Section 12.1 - Website Mission Statement	
Section 12.2 - Website Structure and Content	
Section 12.3 - Website Management	
Section 12.4 - Website Links	
Section 12.5 – Other CME Events	
Section 13 - Recognition and Awards	45
Section 13.1 - Exceptional Service Award	
Section 13.2 - Sutherland Memorial Lecturer	
Section 13.3 - President's Plaque	
Section 13.4 - Fellow of The Osteopathic Cranial Academy Award	
Section 14 - Position Statements	50
Section 15 - Financial Matters	50

Section 16 - Mailing Lists	53
Section 17 – Member Information List	53
Section 18 - Procedures for Elections	53
Section 19 - The Osteopathic Cranial Academy Code of Ethics	54
Section 20 – Online Education	55
Section 20.1 – Introduction	
Section 20.2 – Online Education Curriculum Prerequisites	
Section 20.3 – Course Development	
Section 20.4 – Co-Sponsoring Online Courses	
Section 20.5 – Online Recording	
Section 20.6 – OCA Online Education: International Non-Physician Osteopaths	
Section 20.7 – Financial Considerations	
Section 20.4 – Grievances	
 APPENDIX A: SCHEDULE FOR NOMINATION SLATE	 60
APPENDIX B: ANNUAL CONFERENCE DEVELOPMENT PROTOCOL	61
APPENDIX C: DEVELOPMENT PATHWAY- INTRODUCTORY COURSE FACULTY	62
APPENDIX D: ANNUAL CONFERENCE TEMPLATE	66
APPENDIX E: ANNUAL CONFERENCE MEETING SPECIFICATIONS	68
APPENDIX F: OSTEOPATHIC CRANIAL ACADEMY COURSE DEVELOPMENT PROTOCOL	86
APPENDIX G - INTRODUCTORY COURSE REGISTRATION REQUIREMENTS	90
APPENDIX H - INTRODUCTORY COURSE CONTENT	91
APPENDIX I: POSITION PAPERS	
Statement of Respect for OCA	95
The Osteopathic Cranial Academy Position on Treatment of Otitis Media	
APPENDIX J: International Affiliate Members and Recognized Affiliate Societies	101

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 and or other support to the OCA 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 1.3 - 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 1.3.1 – President

The President shall chair the meetings of the Board of Directors, using the general principles of Roberts' Rules of Order to organize and conduct meetings. 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 from the OCA Executive Committee 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 1.3.2 - 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 1.3.3. - 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 1.3.4 - 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 2 – Membership Criteria

Section 2.1 Regular Members are osteopathic physicians and surgeons who practice medicine using the cranial concept based upon the principles of osteopathy.

Regular members shall:

- Have received a Doctor of Osteopathy degree granted by an American Osteopathic Association-approved educational institution
- Hold an unrestricted license for practice in any of the United States or its territories
- At the time of application, be a member in good standing of the American Academy of Osteopathy (AAO) and of the American Osteopathic Association (AOA)
- Have successfully completed 40-hour Introductory Course that has been approved for membership by the Osteopathic Cranial Academy
- Have completed and submitted an application for membership
- Have remitted appropriate dues annually
- Comply with the Code of Ethics of the American Osteopathic Association (AOA) and OCA Code of Professional Ethics

Section 2.2 Associate Members are Medical Doctors and Dentists who may apply the cranial concept within the scope of their practice. Associate Members shall:

- Hold a valid license for the practice of medicine or dentistry in any of the United States or United States territories;
- Have successfully completed an Osteopathic Cranial Academy approved 40-hour Introductory Course;
- Have completed and submitted an application for membership;
- Have remitted appropriate dues annually
- Comply with the Code of Ethics of the American Osteopathic Association (AOA) and OCA Code of Professional Ethics

Section 2.3 Affiliate Members are International osteopaths who may apply the Cranial Concept within the scope of their practice, as regulated by the governments of the country in which they practice and reside. Affiliate members shall:

- Be a member of an affiliate society recognized by the OCA
- Have successfully completed an Osteopathic Cranial Academy approved 40-hour Introductory Course;
- Have completed and submitted an application for membership;
- Have remitted appropriate dues annually
- Comply with the Code of Ethics of the American Osteopathic Association (AOA) and OCA Code of Professional Ethics

Section 2.4 Retired Members shall:

- Have been such a member in good standing as a Regular, Associate or Affiliate Member for at least ten (10) consecutive years prior to application;
- Have retired from practice i.e. is no longer treating or examining patients;
- Have submitted a request for retired status;
- Have remitted appropriate dues annually;
- Comply with the Code of Ethics of the American Osteopathic Association (AOA) and OCA Code of Professional Ethics

Section 2.5. Life and Honorary Life Members shall have been a Regular (or Associate?)

Member for at least five consecutive years and shall:

- Have submitted a request for life membership, or in the case of Honorary Life Members, been approved as such under the appropriate criteria by the OCA Board of Directors
- Have remitted appropriate due (if any)

- Continue to abide by all other requirements for membership, including complying with the Code of Ethics of the American Osteopathic Association (AOA) and OCA Code of Professional Ethics.

Section 2.6 Student Members shall

- Be student in good standing at a U.S.-accredited osteopathic or allopathic college
- Have successfully completed an Osteopathic Cranial Academy approved 40-hour Introductory Course
- At the time of application, is a member in good standing of the Student American Academy of Osteopathy;
- Have completed and submitted an application for membership;
- Comply with the Code of Ethics of the American Osteopathic Association (AOA) and OCA Code of Professional Ethics

Section 2.7 Resident Members are any DO or MD currently under contract to a residency program accredited by the ACGME and shall:

- Have successfully completed an Osteopathic Cranial Academy approved 40-hour
- Introductory Course;
- At the time of application, be a member in good standing of the Resident American
- Academy of Osteopathy;
- Have completed and submitted an application for membership;
- Have remitted appropriate dues annually;
- Comply with the Code of Ethics of the American Osteopathic Association (AOA) and OCA Code of Professional Ethics

Section 2.8 Termination of Membership.

Failure to adhere to any of the above criteria may result in termination of membership.

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
2. President-Elect
3. Chair of Fellowship Committee (or if unwilling or unable to serve, another non-board member of The Fellowship committee)
4. Member of Credentials Committee who is not the chair and is not a member of

- the Board of Directors
- 5. Non-FCA, proficiency recognized, general Member of The Osteopathic Cranial Academy.
- 6. Proficiency recognized or FCA member of The Osteopathic Cranial Academy who is not a member of the Board of Directors

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	\$235
Associate	\$210
Affiliate	\$210
Intern / Resident	\$75
Retired	\$65
Student	\$0
Life	\$3,525

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 6.12 - Policy to Support Breastfeeding. The Osteopathic Cranial Academy has a strict policy that only course participants are allowed to be in the classroom during courses and conferences. However, as OCA also wants to support our members who are nursing mothers, infants under 9 months will be allowed in the lecture hall with their mothers while actively breastfeeding, as long as there is no disruption for other learners. For any nursing mother, including those with infants over 9 months old, a quiet private space will be made available during breaks and meals for breastfeeding or pumping. Mothers should contact the OCA Executive Director well in advance to make sure we know this will be needed.

Section 6.13 – Policy on Course Admittance. The Board of Directors reserves the right to deny admission to any event, conference or course to anyone at any time if they believe it is in the best interest of the faculty and attendees. Anyone who meets the requirements but is denied admission will be entitled to a full refund of any registration fees paid.

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 at OCA approved introductory Course (includes international SCTF courses, etc.). Certificate or Letter from course director.
3. A copy of their diploma proving graduation from their COM or Osteopathic School.
4. Statement that their 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 7.3.4 - 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 conference director. This individual shall be available to demonstrate osteopathic manipulative treatment, and answer any questions.

This special category of speaker will not be allowed to lay down on the table and serve as a patient 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

Section 8.1 - Introduction

Section 8.1.1 - Categories

Categories of Osteopathic Cranial Academy approved introductory courses, include:

1. 40 hour introductory courses taught and administered directly by the Osteopathic Cranial Academy and its faculty (section 8.2)
2. Legacy organizations with a long established OCF curricula: Specifically the SCTF (domestic and international) and the OCC. (section 8.3)
3. International 40 hour introductory OCA courses, mentored by the Osteopathic Cranial Academy and its Recognized Affiliate Societies. (section 8.4)
4. 40 hour Introductory courses taught by the WGS Dental Study Group. (section 8.5)
5. College of Osteopathic Medicine 40 hour Introductory courses - open only to students of the COM, and taught by qualified local faculty. (section 8.6)

Any OCA approved course must be designated as belonging to a single category.

Section 8.1.2 Minimum Requirements

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 8.2 with the following minimal considerations:

- A. A faculty roster and course syllabus must be submitted to the Introductory Course Committee 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 is recommended.
 1. Grades and Certificates
 1. A ledger shall be provided and kept with a record of attendees' grades.
 2. A certificate shall be sent to those who passed and a letter of encouragement to those who did not pass.
- 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/Attendee Ratio must be 1:4
- F. All participants must be eligible for Osteopathic Cranial Academy membership (per bylaws Article IV).

Section 8.1.3 - Introductory Course Content

Course content for ALL Osteopathic Cranial Academy Approved courses must be pre-approved by the Introductory Course Committee. 40 hours of course material must be presented at a minimum. The Introductory Course must include lectures on the topics included in Appendix H: Introductory Course Content

The following sections address specific cases of OCA Approved 40 hour Introductory Courses.

Section 8.2 - The Osteopathic Cranial Academy 40 hour Introductory Course in Osteopathy in the Cranial Field

An Introductory Course in Osteopathy in the Cranial Field will be offered by the Osteopathic Cranial Academy, 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 8.2.1 - 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 Committee, Credentials Committee, and Board of Directors.

Section 8.2.1.1 - 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.
 - 1. Other acceptable qualifications:
 - a. OMM residency = Two (2) years clinical experience
 - b. OMM "plus 1" residency = One (1) year clinical experience
 - c. Undergraduate OMM fellowship = One (1) year clinical experience
 - d. Other residencies will be considered accordingly for OMM clinical experience.
- C. Completion of at least two (2) approved 40-hour Introductory Courses in Osteopathy in The Cranial Field. Audited courses will not qualify.
- D. Recommend one AOA approved Intermediate / Advanced course implementing the cranial concept.
- E. Currently licensed to practice osteopathy, osteopathic medicine, medicine or dentistry.
- F. Completion at least one OCA 40-hour Introductory Course in Osteopathy in the Cranial Field as a Faculty in Training. Potential physician faculty without this credential 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.

Introductory Course Lecturer [Keep this as is, because of the 5 year minimum]

- 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.
- F. 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 8.2.2 - Introductory Course Director Responsibilities.

[To Be Developed]

Section 8.2.3 - 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.

See Appendix G: Introductory Course Enrollment Requirements

Section 8.2.3.1 - 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. Statement that their 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

Section 8.2.4- Grades and Certificates

1. A written and practical examination is required for all Osteopathic Cranial Academy introductory courses. Passing the Introductory Course requires a minimum score of 70 percent on the written exams (cumulatively) in addition to a minimum score of 70 percent on the practical exam.
2. A ledger shall be kept with a record of attendees' grades.
3. A certificate of attendance and CME hours commensurate with participation shall be granted to all attendees regardless of examination status.
4. A group photograph and list of registrants shall be kept in the archives.

Section 8.2.5 - Introductory Course Financial Considerations

1. Financial oversight of the Introductory Course shall be vested with the Finance Committee and the Introductory Course Committee.
2. 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.
3. The reimbursed faculty shall be limited to the 1:4 faculty/student ratio plus the Course Director.
4. Only one faculty assistant will be budgeted for each course. Consideration should be given to a local student who would not require expense reimbursement.
5. No more than two extra treatment tables will be shipped to the Introductory Course for faculty use.
6. 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 8.2.5.1 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 8.2.6 - Introductory Course Cancellation Policy

See Section 6.10

Section 8.2.7 - 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 8.2.8 – OCA Faculty Auditing

OCA Introductory Course faculty are eligible to audit any introductory course. Auditing faculty would pay their own expenses including meals, lodging and transportation. The administrative cost of processing CME shall be covered by the OCA. Auditing faculty will have a treatment table to practice at, but would not be table trained. At times auditing faculty might have the option (as approved and coordinated by the Course Director and involved faculty) to shadow faculty during the lab sessions. Selection of specific auditing faculty and of the total number of auditing faculty allowed at a given course is to be at the discretion of the Introductory Course Director.

Section 8.3 - LEGACY Organizations

Because of the long history of an established, stable curriculum (1) the SCTF and (2) the Osteopathic Center for Children are allowed the autonomy to administer their courses and determine content and faculty. The following minimum requirements must be met:

1. All attendees must be eligible for OCA membership upon successful completion
2. The Faculty-Student ratio must be 1:4
3. There must be a written exam. A practical exam is recommended

Section 8.4 - International OCA “Co-directed” 40 hour courses.

TO BE DEVELOPED

Section 8.5 -The William Garner Sutherland Dental Study Group Introductory Course

- A. Course Directors and Table Trainers must hold a Cranial Dental Certificate of Proficiency. 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.
- B. 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.
- C. 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.
- D. 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 Introductory Courses in OCF Offered at Osteopathic Colleges for Students

When an introductory course in OCF is offered at an Osteopathic college for students 100% of the table trainers must be Osteopathic Cranial Academy members. At least 75% of faculty must be Regular members. 25% of faculty may be Student members. All requirements of Section 8.1.2 A-F as above.

40 hour Introductory Courses provided at the Colleges of Osteopathic Medicine do *not* meet the standards of the Introductory Courses provided by the OCA and SCTF. Therefore:

Section 8.6.1 - Approved Attendance

1. COM Students
 - a. Attending that particular school
 - b. Rotating with a preceptor who is serving as Course Faculty

Section 8.6.2 - Auditing by Resident Physicians and COM Faculty

Resident Physicians and Faculty of the COM may *only* AUDIT these COM courses

1. The 4:1 student/teacher ratio must be maintained. Auditors may not dilute this ratio.

2. Auditing of COM courses will not qualify for regular OCA membership
3. Auditing of COM courses will not qualify for progression through the OCA curriculum.

Section 8.6.3 - Privileges for COM Students upon Successful Completion

1. Successful completions of an approved COM 40-hour Student Introductory Course will allow COM student participants to qualify for OCA student membership and attendance at the Annual Conference, *only*.
2. Further matriculation through the OCA curriculum will require successful completion of either (1) or (2)
 - OCA, SCTF, or OCC Introductory (Basic) Courses as indicated in the specific prerequisites of each intermediate or advanced course.
3. In the event that an intermediate or advanced course requires (2) OCA approved introductory courses, a COM course may qualify as (1) of the (2), at the discretion of the (intermediate or advanced) course director, on a case by case basis.

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)
- C. Course Goals Development
 - 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 8.2.1.1.
- 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 8.2.1.1.
 - 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 8.2.1.1.

- 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 8.2.1.1, 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 8.2.1.1.
- 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, with allowed input from Continuing Studies Committee and Course 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 at OCA approved introductory course (includes international SCTF courses, etc.). Certificate or Letter from course director.
3. Statement that their 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 periodically either in print or electronically. 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 Proficiency 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 information about Osteopathy in the Cranial Field and practitioners thereof.
- To provide Osteopathic Cranial Academy information and communication for students, physicians, dentists, and other professionals.

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 its membership.
- Information, communication and services for Osteopathic Cranial Academy members.
- Educational information about Osteopathy in the Cranial Field in particular, and osteopathy in general, for the public, students, and other professionals.
- Information about
- A practitioner finder section to locate members of the Osteopathic Cranial Academy.
- A digital archive and reference source
- Access to sales of Osteopathic Cranial Academy items such as books, pamphlets, and tapes, and for course registration
- Online access for members to update information, register for courses, and pay dues

Section 12.3 – Website Management

- Website management will be the purview of Website Committee. The Website Committee shall consist of the President, President-Elect, Webmaster(s), and the Chairs of IT, Marketing, Membership, and Publications Committees.
- The Website Committee shall approve major changes/additions to the website (design, format, graphics, content and structural layout).
- The staff may make minor changes (spelling, grammar and formatting errors and updates).

Section 12.4 – Website Advertising

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

Section 12.5 Other CME events.

Courses listed on the Osteopathic Cranial Academy CME page should:

- Be generally considered eligible for CME credit (even if CMEs are not offered)
- Be of general interest to OCA members
- Have a US licensed DO or MD as Course Director
- Offer hands-on OMM training as the primary or sole purpose of the event

Exceptions may be considered on a case-by-case basis, and must be approved by the Website Committee.

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.

	Exceptional Service Award	Sutherland Memorial Lecturer	Fellow of The OCA Award	Honorary Lifetime Membership	Sutherland Medallion Lifetime Achievement Award
Summary	For outstanding contribution in research, teaching, practice or special service to The Osteopathic Cranial Academy.	To honor many years of service to, and the embodiment of Osteopathic Principles, expressed specifically by Sutherland, relative to the Cranial Field, in practice, teaching/education and life.	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.	To honor a member who has contributed continually to the OCA, and for reasons of health, gratitude, and appreciation for indebted service towards the OCA which otherwise could not be repaid.	To recognize a lifetime of contribution to The Osteopathic Cranial Academy and Osteopathy in the Cranial Field. To honor as a lifetime recognition in the service of Osteopathy in the Cranial Field and acting as its ambassador.

Complete Criteria	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).	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.	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,	A. Acknowledged and recognized member of the OCA community, through years of membership or contributions made. B. Board approved decision that an appreciation for unpayable debt to member, in appreciation for the duration of their life. This may arise for: a) financial b) health concerns c) gratefulness d) other especially compelling consideration	Considerations for the award include at least three of the following: - Contributions in Education - Outstanding leadership - Publications - Significant contributions in research - Financial contributions - Recipient must be a loyal member for at least 40 years with continuous contributions of the type mentioned above, preferably an FCA. This award is intended to recognize a lifetime of special service to The Osteopathic Cranial Academy and/or achievement in Osteopathy in the Cranial Field. It is not for service or achievement to the profession in general and not for a small period of time, but continuous contributions through the recipient's professional lifetime
---------------------------------	--	---	--	---	---

	Exceptional Service Award	Sutherland Memorial Lecturer	Fellow of The OCA Award	Honorary Lifetime Membership	Sutherland Medallion Lifetime Achievement Award
	G. An act or service for The Osteopathic Cranial Academy which may be classified as "extraordinary." 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.		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

15.1 Cash Management

Budgeted Expenses

Upon passing of the annual budget, the Board of Directors authorizes the expenditure of funds up to the budget amount, for the purposes delineated in the budget.

The Board of Directors may authorize additional expenditures at regular meetings throughout the year. All Committees and the Executive are encouraged to plan at least 3 months in advance to identify any area where additional funding may be needed, so that the Board can take appropriate action to increase authorized expenditures at its regular meetings. On an emergency basis, the President may obtain approval from the Executive Committee for additional expenses, to be ratified by the Board at its next regular meeting.

Non-budget Expenditures

Unbudgeted items less than \$1000 are at the discretion of the Executive Director. Unbudgeted items in excess of \$1000 require the approval the President and the Treasurer.

Expenditures for budgeted items in excess of authorized budget amounts must be approved in the following manner.

- A. Expenditures in excess of budgeted amount by less than \$1000 are at the discretion of the Executive Director.
- B. For expenditures that exceed the budgeted amount by more than \$1000 but less than 10% of the budgeted amount, the Executive Director must have approval in writing or by email from the Treasurer and the President.
- C. For expenditures that exceed the budgeted amount by more than \$1000 and more than 10% of the budgeted amount, the Executive Director must have approval from the Executive Committee.

Check Writing Authority

Payments for expenses up to \$10,000 may be made by check or electronic distribution under the signature authority of any one (1) of the Executive Director, President, or Treasurer of the Osteopathic Cranial Academy.

Payments for expenses in excess of \$10,000 require approval in writing or by email of any two (2) of the following: the Executive Director, President, or Treasurer of the Osteopathic Cranial Academy. Following such approval, such payment may be made by check or electronic distribution under the signature authority of any one (1) of the Executive Director, President, or Treasurer of the Osteopathic Cranial Academy.

15.2 Contract Liabilities

The Executive Director is authorized to enter into contracts for activities that have been approved by the Board. The Executive Committee must authorize any contracts outside of these parameters and approve all contracts with a financial value greater than \$15,000. When submitting the contract to the Executive Committee for approval, the Executive Director will include the minimum and maximum expenditure associated with the contract under normal conditions, and the liability (e.g., liquidated damages) to the organization of the contract.

15.3 Conflicts of Interest

All employees and members of the Board of Directors are expected to use good judgment, to adhere to high ethical standards, and to act in such a manner as to avoid any actual or potential conflict of interest. A conflict of interest occurs when the personal, professional, or business interests of an employee or Board member conflict with the interests of the organization. Both the fact and the appearance of a conflict of interest should be avoided, and disclosed to the Board of Director when unavoidable.

15.4 Portfolio and Cash Management Policy

The portfolio will be invested and managed:

- A. With the expectation that there is no mixing with the working capital of the organization,
- B. With a long-term buy-and-hold strategy, and
- C. Following generally accepted principles of prudent investment
- D. The OCA shall maintain a target level working capital in cash or cash equivalents (e.g. money market or CDs) for \$50,000 beyond all expected costs associated with all already-received revenues (courses, conferences, and office costs covered by member dues).
- E. Each fall, the Treasurer and Executive Director will estimate cash needs for the remainder of the calendar year to identify any need to transfer money from the investment portfolio to the working capital accounts of the OCA.
- F. Each spring, the Finance Committee will review the audited income from the prior year, current cash situation, and projected future cost streams. If appropriate (based on a positive net operating profit in the prior year), money may be transferred from liquid working capital to be invested in the portfolio in accordance with the investment policy.
- G. The Executive Director will monitor cash balances and may, on an emergency basis, request the Executive Committee approve a transfer of funds from the investment portfolio into working capital funds (see b, above), if necessary to meet OCA payment obligations.
- H. All withdrawals from, or deposits to, the investment portfolio must be approved by 75% of the Executive Committee and ratified by the Board of Directors.

15.5 Investment Policy

The purpose of this Investment Policy is to provide a clear statement of the Osteopathic Cranial Academy's investment objective, to define the responsibilities of the Board of Directors and any other parties involved in managing the Organization's investments, and to identify or provide target asset allocations and permissible investments and diversification requirements.

15.5.1 Investment Objective

The overall investment objective of the Osteopathic Cranial Academy (OCA) is to 1) preserve capital in order to meet ongoing operational expenses during a recessionary period, 2) create an income stream to mitigate operational losses given fluctuations in annual income, and 3) maximize the return on invested assets while minimizing risk and expenses. The OCA plans to meet this objective through a passive investment strategy using index funds to minimize expenses, and through a diversified portfolio of large and mid-size stocks and bonds.

15.5.2 General Provisions

- All transactions shall be for the sole benefit of the Organization
- The Board of Directors shall consider updating the Organization's investment policy on an annual basis.
- Any investment that is not expressly permitted under this Policy must be formally reviewed and approved by the Board of Directors
- The Directors will endeavor to operate the Organization's investment program in compliance with all applicable state, federal and local laws and regulations concerning management of investment assets

- Investments shall be diversified with a view to minimizing risk

15.5.3 Delegation of Responsibility

- The Board of Directors has ultimate responsibility for the investment and management of the Organization's investment assets

- The Board may delegate oversight over the Organization's investments to a properly formed and constituted Investment Committee, being a Board Committee comprised only of directors. Changes to the investment policy may only be made through a vote of the full Board of Directors, as recommended by the Investment Committee
- The Executive Director shall be responsible for ensuring that the portfolio is balanced to the designated target allocations at least once a year, in accordance with the Portfolio and Cash Management Policy and this Investment Policy of the OCA. The Executive Director shall also prepare the following reports for presentation on at least a quarterly basis to the Board of Directors
 - A. Schedule of Investments which includes schedule of performance since purchase or last 5 years, whichever is shorter
 - B. Interest and Dividend Income year to date
 - C. Current yield

15.5.4 General Investment Guidelines

- A cash account shall be maintained with a zero to very low risk tolerance to keep cash available for grant distributions, tax obligations and other anticipated expenses, and in accordance with the Portfolio and Cash Management Policy of the OCA

15.5.5 Permitted Investments

- Permitted investments include the following index funds, with target allocations which shall be balanced at least once per year back to the targets, in accordance with the Portfolio and Cash Management Policy, and also balanced back to the target whenever actual allocation falls outside of the allowable ranges.
 - Vanguard Long-Term Corporate Bond Fund (VWESX) – target allocation 33% (allowable range: 20-40%)
 - Vanguard Equity Income Fund Admiral Share (VEIRX) – target allocation 34% (allowable range: 20-45%)
 - Vanguard FTSE Social Index Fund (VFTSX) – target allocation 33% (allowable range: 20-45%)

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 to the membership via electronic mail in ample time to execute elections according to the timeline laid out in this section. The candidates nominated by the Nominating Committee shall also be posted on a designated OCA website page clearly navigable from the home page, with a statement of purpose from each candidate.

Following the report of the Nominating Committee, additional nominations for Board members may be made from the membership via a letter of nomination and recommendation from any member in good standing, to be sent to the Chair of the Nominating Committee. After ensuring that the nominee: 1) meets the required criteria, 2) has agreed to serve if elected, and 3) has signed the Board of Directors Code of Leadership (see Section 1), the Nominating Committee shall add the names and statement of purpose from each of the member-nominated candidates to the OCA website page.

The voting shall be by secure online ballot for each office separately, to commence no less than 14 days after the Nominating Committee report has been sent to the membership. The ballot shall include: 1) the names of only those candidates endorsed by the Nominating Committee, and 2) blank space for member nominations as write-in candidates for regular Board members.

Electronic voting shall be open for no less than 7 days (14 days recommended), and shall be completed no less than 14 days before the summer quarterly Board meeting.

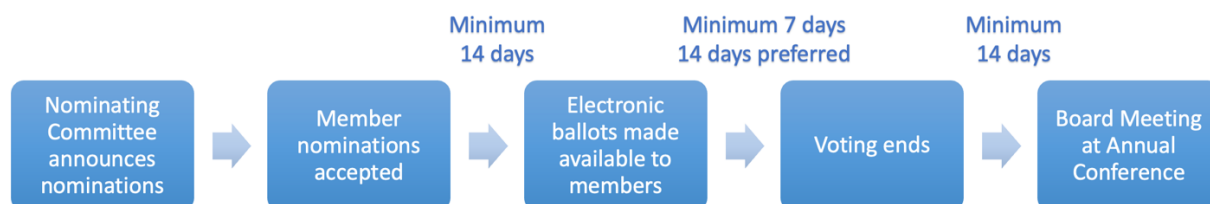


Figure 1. Nominations for Directors and Officers to be announced to the membership at least 6 weeks before the OCA Annual Conference.

Section 19 – The Osteopathic Cranial Academy Code of Professional 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;
- TO demonstrate through thought, word, and action the highest level of professional integrity and respect in all interactions with patients, colleagues, and fellow members 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.

Section 20 – Online Education

Section 20.1 – Introduction

The purposes of online education for the Osteopathic Cranial Academy (OCA) shall be to

- augment the in-person teachings of the OCA,
- provide opportunities for teachings that directly advance the practice of osteopathy and osteopathic medicine but may not directly incorporate osteopathy in the cranial field,
- provide learning opportunities for members who have constraints on their ability to travel, and
- make available additional training in osteopathic principles and practice to interested students, residents, and practicing physicians

The resource requirements from the OCA are significantly less for online education than for in-person courses. Therefore, as a matter of principle, the threshold to create and teach online content shall be less restrictive, and allow for more experimentation, than for in-person courses. This should be commensurate with the resources needed (i.e., hybrid courses are more resource-intensive than 100% online courses), and with adherence to the requirements of the AOA for CME content within the OCA curriculum.

Section 20.1.1 Definitions and Time Periods

Online education shall be defined as any course for which instructive or educational information offered in an online version, either via live-streaming or on-demand viewing and shall allow for the option of hybrid activities with some content – such as lab experiences – delivered in-person.

Live-streamed education shall require that participants be present in a Zoom or other online format for the delivery of the educational content. Live-streamed content shall be recorded and available for a limited time period to participants who were present for the live version for later review. The course director shall have the option to allow for on-demand access by other qualified participants beyond those who were present for the live-stream version.

On-demand education shall be recorded videos that are available for enrollees to view at their convenience. This may include recordings of educational content that was previously offered in a live-stream version.

Section 20.1.2 Online Course Duration

If offered for CME, on-demand video educational curriculum shall be available only for a limited time period, typically 60-90 days. Limited-time offerings of video curriculum may be repeated at later dates, again for limited time periods, subject to the limitations in Section 20.5.

Non-CME online products may be offered either in a limited duration, or for an unlimited period.

Section 20.2 – Online Education Curriculum Prerequisites

Requirements for entry into online education may vary, depending upon nature of the specific course offerings, and shall fall into three levels:

- A. **Level 1:** educational content that does NOT require completion of at least one OCA-approved introductory course. Level 1 educational offerings may or may not offer Category 1A CME. Eligibility criteria for each course shall be proposed by the course director or course faculty, and Chair of the Online Education Task Force on a course-by-course basis, subject to approval by the Board. All OCA members will be eligible for Level 1 content. For individual courses or other educational content, eligibility for Level 1 offerings may also include the following, or any subset thereof, even if they have not yet had an approved 40-hour course:
 - a. students in accredited DO or MD medical schools in the United States,
 - b. residents in ACGME-accredited residencies in the United States, and/or
 - c. licensed physicians and dentists (MD, DO, DDS, DMD) in the United States
- B. **Level 2:** educational content that requires completion of at least one OCA-approved 40-hour course on Introduction to the Cranial Field.

- C. **Level 3:** educational content that requires completion of at least one OCA-approved 40-hour course on Introduction to the Cranial Field AND has additional prerequisites.

Section 20.3 Course Development

Section 20.3.1 – Proposal Review Process

Courses developed by the Online Education Task Force may be proposed by individual members, initiated from within the committee itself, or the Board of Directors may charge the committee with creating a specific course. Course content for all Osteopathic Cranial Academy approved online courses must be pre-approved by the Online Education Task Force.

A faculty roster and course syllabus must be submitted to the Online Education Task Force at least 3 months prior to the proposed course for preliminary review, provided it has not been previously approved. Final course approval will be decided within 2 months of receiving a copy of the actual course syllabus, faculty roster (if applicable), and copies of lecture and laboratory session outlines.

Section 20.3.2 – Faculty Guidelines

Faculty, including course director, for online education shall be:

- 1) an established speaker or faculty with The Osteopathic Cranial Academy or AAO as vetted by the Credentials Committee, and an active member of the Osteopathic Cranial Academy.
- 2) Currently licensed to practice osteopathy, osteopathic medicine, medicine or dentistry.
- 3) 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 Education Committee chair and Credentials Committee chair. Potential physician faculty without the above credentials may be approved on an individual basis by the Education Committee and the Credentials Committee based on clinical and teaching experience.

Section 20.3.3 – Members Designed Course – Initial Proposal

A written proposal for the course must be presented to the Chair of the Online Education Task Force, and should include:

- A. A description of course content.
- B. A description of teaching objectives
- C. A copy of the course schedule
- D. A copy of the course syllabus.
- E. A list of reasons why this course will further the Academy's mission

All courses must meet faculty requirements to qualify for AOA-approved CME. It is the responsibility of the course director to know, understand, and ensure that the course proposal meets these requirements BEFORE bringing a proposal to the Online Task Force.

The course developer should also provide estimates of:

- A. Suggested course prerequisites (if Level 3)
- B. Projected class size
- C. A list of specific individuals for faculty, if necessary, including copies of their professional biosketch, resume or curriculum vitae

Final approval of all courses is by the Board of Directors.

Section 20.4 – Co-Sponsoring Online Courses

Osteopathic Cranial Academy does not sponsor or co-sponsor online courses put on by non-members.

Section 20.5 – Online Recording

No personal recording of online material by course participants is permitted.

Section 20.5.1 Member Designed Courses – Live Stream

Video recording of all online courses will be kept for archival purposes by the Osteopathic Cranial Academy. The Osteopathic Cranial Academy (OCA) maintains the copyright privileges and rights to video recordings of all livestreamed content. On request of the speaker in question, the OCA shall grant a non-exclusive, non-transferable license to the speaker for personal non-commercial use of any video or audio recordings created by the OCA of the speaker's educational activity. Speaker shall not publish video or audio recordings created by the OCA without written agreement by the OCA.

The speaker shall retain ownership of presentation slides, handouts, graphics or any other materials that were created by the speaker and shall retain unlimited rights to use them for any purpose.

Section 20.5.2 Member Designed Courses – On Demand Video

In return for honoraria paid to each speaker in OCA-sponsored member designed courses, the speaker shall grant a non-exclusive, non-transferable license to the Osteopathic Cranial Academy to use video recordings created by the speaker of the curriculum content, questions, and handouts and any paper or electronic copies of handouts created for the preparation or execution of the educational opportunity. This license shall be for unlimited use by the OCA, unless and until written notice of license withdrawal, sent by Certified Mail 90 days in advance, is received by the Executive Director.

The speaker shall retain ownership of video and audio recordings, presentation slides, handouts, graphics or any other materials that were created by the speaker and shall retain unlimited rights to use them for any purpose.

Section 20.5.3 OCA Designed Courses

OCA designed courses include Introductory Courses, Intermediate and Advanced curriculum as outlined in Section 9, Annual Conference proceedings, and any other curriculum developed by OCA committee, task force, sub-committee or any other group convened by the OCA Board of Directors.

Section 20.5.3.1 OCA Designed Courses – Live Stream

Video recording of all online courses will be kept for archival purposes by the Osteopathic Cranial Academy. The Osteopathic Cranial Academy (OCA) maintains the copyright privileges and rights to video recordings of all livestreamed content. On request of the speaker in question, the OCA shall grant a non-exclusive, non-transferable license to the speaker for personal non-commercial use of any video or audio recordings created by the OCA of the speaker's educational activity. Speaker shall not publish video or audio recordings created by the OCA without written agreement by the OCA.

The speaker shall retain ownership of presentation slides, handouts, graphics or any other materials that were created by the speaker and shall retain unlimited rights to use them for any purpose that does not conflict with the activities and purpose of the Osteopathic Cranial Academy.

Section 20.5.3.2 OCA Designed Courses – On Demand Video

In return for honoraria paid to each speaker in OCA-designed courses, the speaker shall grant a non-exclusive, non-transferable license to the Osteopathic Cranial Academy to use video recordings created by the speaker of the curriculum content, questions, and handouts and any paper or electronic copies of handouts created for the preparation or execution of the educational opportunity.

The speaker shall retain ownership of video and audio recordings, presentation slides, handouts, graphics or any other materials that were created by the speaker, and shall retain unlimited rights to use them for any purpose that does not conflict with the activities and purpose of the Osteopathic Cranial Academy.

Section 20.5.4 Online Platforms

All online CME courses will be presented in a secure, restricted-access platform appropriate to the format and content (e.g., live-stream vs on-demand). Non-CME educational materials may be made available with either restricted or unrestricted access, depending on content and intended audience(s).

20.6 - OCA Online Education: International Non-Physician Osteopaths

International non-physician osteopath who are Affiliate Members of the OCA qualify for admission to all online education in Levels 1 and 2, and qualify for admission to Level 3 courses contingent on meeting the prerequisites of the course.

In order to enroll in OCA online education, international non-physician osteopaths who are not OCA members must meet all the requirements for international membership and any other prerequisites of the course. They must provide the following far enough in advance of the course to allow ample time for the Credentials Committee to evaluate their credentials:

2. Curriculum Vitae, including
 - g. Osteopathic School of Graduation
 - h. Residence and location of Practice
 - i. Number of Years in Practice
 - j. Professional Memberships
 - k. Dates of Approved SCTF courses (or equivalent), with proof of attendance
 - l. List of OCF mentors
8. Proof of Attendance at an OCA-approved introductory course (includes international SCTF courses, etc.). Certificate or Letter from course director.
9. Statement that their practice is dedicated “exclusively” to osteopathy
10. A copy of their diploma proving graduation from their COM or Osteopathic School.
11. A certificate of membership in their OCA-recognized affiliate society or national osteopathic association.
12. A statement of their motivations for attending an OCF Post Introductory Course
13. Letter of recommendation from OCA Affiliate Member

Section 20.7 - Financial Considerations

Faculty honoraria for online educational teachings, whether live-stream or on pre-recorded video, shall be \$250.00 per hour for lectures and \$150.00 per hour for practical sessions (labs or other experiential curriculum). Any proposed honoraria in excess of the standard amounts shall require approval by the Board of Directors.

However, in all cases, total faculty honoraria including course director(s) shall not exceed 50% of the collected gross revenue for the course offering. In the event the collected revenue is less than 200% of the faculty honoraria, all honoraria shall be pro-rated for the initial offering, and the remainder of the normal honoraria may be distributed with later uses of the online content, as outlined in the end of this section.

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 Online Education Task Force, with the following used as general guidelines for an “average” course.

For member-designed courses or OCA-designed courses with only one speaker

- a. 4 hours lecture -- \$150 first offering by the OCA
- b. 8 hours lecture -- \$250 first offering by the OCA
- c. 12 hours lecture -- \$350 first offering by the OCA
- d. 20 hours lecture -- \$600 first offering by the OCA

Repeated offerings of the same (or substantially similar) content will not include a course director fee, as the curriculum is assumed to be largely unchanged and course development requirements are minimal.

For OCA-designed courses with multiple speakers

- a. 4 hours lecture -- \$200
- b. 8 hours lecture -- \$350
- c. 12 hours lecture -- \$475
- d. 20 hours lecture -- \$800

All honoraria to speakers and course directors will be made once to cover first-use and all additional uses of recorded video content, subject to the provisions in Section 20.5. Additional use of video recordings shall be at the sole discretion of the OCA. In the event that speakers and course directors were offered pro-rated honoraria, the OCA will pay the remainder of normal honoraria after any future revenue-producing use of the video content, still subject to the 50% maximum per course offering.

There shall be no reimbursement of any expenses related to the production of online content.

Section 20.7.1 - 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, specialty non-standard equipment or software, or exceeding the “50% rule”. Financial arrangements shall be explored by the Finance Committee, with final approval vested in the Board of Directors prior to approval of the online offering. In all cases, the total cost of any online course must be less than the revenue from the first time it is offered.

Section 20.8 - 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.

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 **OCA** 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 holds license to practice osteopathy, medicine or dentistry in the US or country that they practice in.

Level Ia Faculty in Training: Non-Physician International Osteopaths

The Osteopathic Cranial Academy supports training in Osteopathy in the Cranial Field to International limited license (non---physician) DOs.

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

- A Fulfill requirements A ---E as cited above in *Level I Faculty in training*
- B Are educators
- C Are members in good standing of the OCA
- D Practice in their country of registry (approved by the OCA)

They may serve as Faculty in Training at a US, OCA Introductory Course in order to train for teaching in their country of origin

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

- 1 Table train daily under the guidance of at least 3 different senior faculty (Potential faculty)
- 2 Works directly under senior faculty at the senior faculty's table with the senior faculty's students)
- 3 Co-mediate review for course participants Attend faculty meetings
- 4 Assist course director and faculty as needed

- 5 Assist in developing table assignments
- 6 Meet with 2 evaluating course faculty and course director for feedback by the end of the course.

Role & Responsibilities of Supervising Instructors

- 1 Teach potential faculty how to teach palpation of the mechanism, motion mechanics, qualities
- 2 of PRM, anatomical identification, motion mechanics
- 3 Teach potential faculty how to be aware of potential symptom reactions and how to avoid
- 4 these from arising in course participants
- 5 Supervising faculty fill out an evaluation/plan form on the potential faculty
- 6 4th night of course meet with faculty to make recommendation to the introductory course 7 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 Ia : Non---Physician International Osteopaths

Compensation - As above in Faculty In Training: Level I

Role & Responsibilities of Level I Faculty in Training- As above in Faculty In Training: Level I

Role & Responsibilities of Supervising Instructors

- 1 As above in *Role & Responsibilities of Supervising Instructors, #1*
- 2 As above in *Role & Responsibilities of Supervising Instructors, #2*
- 3 As above in *Role & Responsibilities of Supervising Instructors, #3*
- 4 4th night of course meet with faculty to make recommendation to the introductory course 5 education committee for board approval to:
 - Move the potential faculty to LEVEL IIa of pathway (for teaching in International courses)
 - Receive certificate as: International Introductory Course Table Trainer • Or plan for further development

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 holds license to practice osteopathy, medicine or dentistry in the US. or country that they practice in.

Development of Potential Faculty:

Faculty 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 feedback 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
- 4th 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 feedback 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

4th 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	
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	
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 (with allowed input from the Annual Conference Committee and the Conference Director) 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 15th 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†
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. †20 hours minimum required

Speakers

Lee (1)

Oschman (4)

Rosen (7)

Bell (10)

Fuller (2)

Blackman (5)

Goldman (8)

Stark (11)

Willard (3)

van der Wal (6)

Snyder (9)

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	
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
----------	---------------

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
--------	---------------

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
	• How and why it relates to osteopathy • Sutherland's and Sutherland's students ideas and references to embryology, esp. Becker • Still's ideas? • Include movement of CNS and embryologic origin- Gasser will go into detail (hopefully) • Explain why it helps where other approaches fail ○ Examples	
5:00 PM	L What are the principles in an embryologically mediated treatment?	Hankinson
	• Magoun tx principles/ Blechschmidt embryologic forces • Fulcrums • Midline • Hensen's node • Center that becomes differentiation into all fulcrums of body	
6:00 PM	P Tx Of All Participants	Hankinson
	1. Reference 1953 OCA Journal and take them to neutral	

Friday	June 19, 2009	
9:00 AM	L Blechschmidt's Embryologic Principles	Gasser
	• Blechschmidt's underlying Concepts • Embryologic forces • Fluid dynamics • Movement • Etc.	
10:00 AM	L CNS development	Gasser
	• Detail development of CNS • Development of cerebral hemispheres • Development of ventricles • Development of cerebellum • Development of spinal chord • Emphasize segmental structure • Importance of caudal eminence and what develops from it	

11:15 AM	P	Clinical Application of Embryologic Principles	Hankinson
		1. Fulcrums 2. Midline 3. Hensen's node	
1:45 PM	P	Ignition	K. Wu or Hankinson
		1. Familiarize with concept of ignition 2. Teach a simple method to evaluate and stimulate ignition	
2:45 PM	L	Organization and function of the Embryologic Midline	Blackman
		A. 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
		1. Practical applications of aforementioned concepts 2. Developing Tactile Skills	
4:45 PM	P	Embryologic Midline Organization (continued)	Blackman

Saturday	June 20, 2009
----------	---------------

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
		• Additional osteopathic aspects of extremity development • Principles of treatment	
3:15 PM	P	The Extremity: Treatment Using Embryologic Principles	Gill
		1. Philosophical guidelines for treating extremities 2. Tx of one extremity using aforementioned principles	
4:15 PM	L	Fluid segments and seams	Goldman
		• Define seams • Explain concepts of seams • Emphasize fluid segmental development giving numerous examples- face, vertebrae, extremities, sternum, etc.	
4:45 PM	P	Fluid segments and seams lab	Goldman
		• Treatment of a simple seam- vertebral segments • Teach principles to apply to any seam	

Sunday	June 21, 2009
--------	---------------

9:00 AM	L	Embryology of the Meninges	Gasser
		• Detail development of meninges with attention region of origin, seams and boundaries	
10:00 AM	L	Embryologic Matrix and the Midline through the Cranial Base	Blackman
		• Cranial Midline and meninges • Nasal septum • Anterior dural girdle • Pituitary • Pineal • Sphenoid- parts and whole • Anterior Dural Girdle	
10:30 AM	P	Cranial base midline treatment, Anterior and Posterior approach	Blackman
		• Practical treatment approach in reference to aforementioned items	
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, or in special circumstances on a case-by-case basis (see Appendix J, Section B).

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.”¹ 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 1951², with a number of important articles^{3,4,5,6} and books^{7,8} 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 Terminology⁹), 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.

References

1. Northup GW, ed. *Osteopathic Research: Growth and Development*. Chicago, Ill: American Osteopathic Association; 1987:40.
2. Magoun HI. *Osteopathy in the Cranial Field*. (1951, 1st edn, 2nd edn, 1966, 3rd edn, 1976) Kirksville, Mo: Journal Printing Company, 1951.
3. Magoun HI. The cranial concept in general practice. *Osteopath Ann* 1976;4:32-42.
4. Becker RE. Craniosacral trauma in the adult. *Osteopath Ann* 1976;8:213-225.
5. Frymann VF. A study of the rhythmic motions of the living cranium. *J Am Osteopath Assoc* 1971;70:1-18.
6. Lay EM. Cranial field. In Ward RC (Ed.) *Foundations for Osteopathic Medicine*. Baltimore, Williams & Wilkins. 1997:901-913.
7. Retzlaff EW, Mitchell FL Jr, (Eds.) *The Cranium and Its Sutures*. New York, Springer-Verlag. 1987.
8. Wales AL, Sutherland AS. (Eds) *Contributions of Thought: The Collected Writings of William Garner Sutherland, DO*. The Sutherland Cranial Teaching Foundation. Rudra Press, Portland, Oregon. 1998.
9. *2000/2001 Yearbook and Directory of Osteopathic Physicians*. American Osteopathic Association, Chicago, Ill. 2000:865.

Statement of Respect for OCA

Statement of Respect for OCA Courses

During this Course there will be practical sessions. Willingness to participate is implicit in your enrollment; however it is always appropriate to obtain permission from each other. We never know what past experiences, cultural background or personal beliefs may make a particular contact provoke an unwelcome response. Please ask your partner(s) whether there are any concerns about the contact in each lab. As a patient, do not hesitate to express any reservations to your partner and table trainer. Just as we learn from the tissue responses that we perceive, verbal feedback from a fellow practitioner is an invaluable source of information and education. Do give feedback about your experience; however please leave teaching to the faculty. The goal is to create an environment of mutual respect and open communication for optimal learning.

Statement of Respect for OCA Conferences

During this Conference there will be practical sessions. Willingness to allow hands on contact is implicit in your choice to participate; however it is always appropriate to obtain permission from each other. We never know what past experiences, cultural background or personal beliefs may make a particular contact provoke an unwelcome response. Please ask your partner(s) whether there are any concerns about the contact in each lab. As a patient, do not hesitate to express any reservations to your partner and table trainer. Just as we learn from the tissue responses that we perceive, verbal feedback from a fellow practitioner is an invaluable source of information and education. Do give feedback about your experience to your partner, table trainers if they are available, the workshop presenter, and or the program director. The goal is to create an environment of mutual respect and open communication for optimal learning.

The Osteopathic 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.¹

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.²

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 2000.³

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

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).⁶ It has a prevalence of up to 30%, and a cumulative incidence of 80% at the age of four years.⁷

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.⁸

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

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

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.¹

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

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.^{1, 12}

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.³

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

OME

Prescribing antibiotics for OME is *not* effective treatment according to numerous studies and reviews.^{8, 12, 14, 15}

Prophylactic treatment with antibiotics has been used for this problem in the past, however there is no evidence to support its effectiveness.^{16, 17, 18}

There is also insufficient evidence to support the use of decongestants, antihistamines or corticosteroids in OME.^{19, 20, 21}

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.^{8, 22, 23, 24} It cannot be recommended as the primary method of prophylaxis.

Prompt insertion of tympanostomy tubes with persistent middle ear effusion did *not* improve developmental outcomes in children up to 9 to 11 years of age.²⁵ 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.²⁰

Tympanostomy tubes significantly increase the cost of treatment and studies indicate that they are overused.^{18, 26, 27}

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.^{1, 28, 29, 30}

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.²⁰

Administering antibiotics does not reduce recurrence of OM.¹

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

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.³²

WW both with and without a prescription were often well accepted and reduced antibiotic use without compromising parental satisfaction.^{1, 33, 34, 35}

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.³⁶

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.^{33, 37} In addition, there are sound anatomic-physiologic models explaining the effectiveness of osteopathy in the cranial field.^{35, 38, 39, 40, 41, 42, 43}

Preventive Measures

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

- a. Eliminating food allergens^{44, 45}
- b. Reducing or eliminating pacifier use⁴⁶
- c. Nursing for at least the first 11 months of life⁴⁷

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.

References

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.

1. McCormick DP et al., Nonsevere Acute Otitis Media: A Clinical Trial Comparing Outcomes of Watchful Waiting Versus Immediate Antibiotic Treatment. Pediatrics: June 2005; 115; No. 6; 1455.
2. Dowell SF et al., Otitis Media—Principles of Judicious Use of Antimicrobial Agents. Pediatrics: Supplement January 1998; 101; No. 1; 166.
3. Spiro DM et al., Wait-and-See Prescription for the Treatment of Acute Otitis Media. JAMA: 2006; 296: 1235-1241.
4. Kozyrskyj A et al., Short course antibiotics for acute otitis media. Cochrane Database of Systematic Reviews: 2000; 2; Art. No. CD001095.
5. Alho H. Oja et al., Risk factors for chronic otitis media with effusion in infancy. Arch Otolaryngol Head Neck Surg: 1995; 121; 8; 839-843.
6. Tos M, Epidemiology and natural history of secretory otitis. Am J Otol: 1984; 5; 459-462.
7. Parrella A et. al., EarPopper™ for the treatment of Otitis media in children. ANZHSN, Horizon scanning prioritising summary Update Number 4, HealthPACT Secretariat, Department of Health and Ageing: February 2007.
8. Subcommittee on Otitis Media With Effusion, American Academy of Family Physicians, American Academy of Otolaryngology-Head and Neck Surgery and American Academy of Pediatrics, Otitis Media With Effusion—Clinical Practice Guidelines. Pediatrics: 2004; 113; 1412-1429.
9. Sanders S et al., Antibiotics for acute otitis media in children. The Cochrane Database of Systematic Reviews, 2004; 1; Art. No. CD000219. DOI: 10.1002/14651858.CD000219.pub2.
10. Little P et al., Pragmatic randomised controlled trial of two prescribing strategies for childhood acute otitis media. BMJ: 2001; 322; 336-342.
11. Agency for Healthcare Research and Quality (AHRQ), Management of Acute Otitis Media Summary Evidence Report. Technology Assessment: Number 15.

12. Cantekin EI, McGuire TW, Antibiotics Are Not Effective for Otitis media with Effusion: Reanalysis of Meta-Analyses. Otorhinolaryngol Nova: 1998;8; 214-222.
13. Rosenfeld RM et al., Clinical efficacy of antimicrobial drugs for acute otitis media: metaanalysis of 5400 children from thirty-three randomized trials. Journal of Pediatrics: 1994 124; 355-67.
14. Dowell SF et al. Otitis Media— Principles of Judicious Use of Antimicrobial Agents. Pediatrics 1998 Supplement: No 1; 101; 165-171.
15. Williamson I. Otitis Media with Effusion. BMJ Clin Evid: 2008; 01; 502; 3-4.
16. Koopman L et al. Antibiotic Therapy to Prevent the Development of Asymptomatic Middle Ear Effusion in Children With Acute Otitis Media. Arch Otolaryngol Head Neck Surg: 2008; 134(2); 128-132.
17. Damoiseaux RA. Antibiotic treatment of acute otitis media in children under two years of age: evidence based? Br J Gen Pract: 01-DEC-1998; 48(437); 1861-4.
18. Rasgon BM et al., Tympanostomy tubes for otitis media: quality-of-life improvement for children and parents. Ear, Nose & Throat Journal; July 2005; 84(7); 418, 420-22, 424.
19. Cantekin EI et al. Lack of efficacy of a decongestant-antihistamine combination for otitis media with effusion ("secretory" otitis media) in children. Results of a double-blind, randomized trial. N Engl J Med: 1983; 308; 297-301.
20. Roberts J, et al., Otitis media, hearing loss, and language learning: controversies and current research. J Dev Behav Pediatr: Apr 2004; 25(2); 110-22.
21. Coleman C, Moore M. Decongestants and antihistamines for acute otitis media in children. Cochrane Database Syst Rev: 16 Jul 2008; (3); CD001727.
22. Rosenfeld RM, Bluestone CD. Evidence-based otitis media. Hamilton(UK): B.C. Decker Inc; 2003.
23. Mattila PS et al. Prevention of otitis media by adenoidectomy in children younger than 2 years. Arch Otolaryngol Head Neck Surg 2003;129(2): 163-8.
24. Hammaren-Malmi S et al. Adenoidectomy does not significantly reduce the incidence of otitis media in conjunction with the insertion of tympanostomy tubes in children who are younger than 4 years: a randomized trial. Pediatrics 2005; 116(1): 185-9.
25. Paradise JL, Feldman HM et. al. Tympanostomy tubes and developmental outcomes at 9 to 11 years of age. N Engl J Med: 18 Jan 2007; 356(3); 248-61.
26. Kleinman LC et al., Evidence of Disproportionate Increase in the Use of Tympanostomy Tubes in US Children: 1996 to 2006, Pediatric Academic Societies (PAS) 2009 Annual Meeting; Abstract 4525.7. Presented May 4, 2009.
27. Roberts J et al., Otitis media may not substantially increase risk of delayed speech development in typically developing children. Developmental and Behavioral Pediatrics: 2004; 25(2); 110-122.
28. Ho D et al.,. The Relationship Between Acute Mastoiditis and Antibiotic Use for Acute Otitis Media in Children. Arch Otolaryngol Head Neck Surg: 2008; 134(1); 45-48.
29. Thompson PL, et al., Effect of Antibiotics for Otitis Media on Mastoiditis in Children: A Retrospective Cohort Study Using the United Kingdom General Practice Research Database. Pediatrics: 2009; 123; 424-430.
30. Browning GG, Mastoiditis and quinsy are too rare to support antibiotic prophylaxis. Clin Otolaryngol: 01-JUN-2008; 33(3); 253-4.
31. Serbetcioglu B, No association between hearing loss due to bilateral otitis media with effusion and Denver-II test results in preschool children. Int J Pediatr Otorhinolaryngol: 01-FEB-2008; 72(2); 215-22.
32. Rosenfeld RM. Observation Option Toolkit for Acute Otitis Media. Int. J. Pediatr. Otorhinolaryngol: 2001; 58; 1-8.
33. Chao JH et al., Comparison of Two Approaches to Observation Therapy for Acute Otitis Media in the Emergency Department. Pediatrics: 2008; 121; e1352-e1356.
34. Siegel RM et al., Treatment of otitis media with observation and a safety-net antibiotic prescription. Pediatrics: 2003; 112 (3 pt 1); 527-531.
35. Armengol CE et al. The Natural History of Acute Otitis Media by AAP Criteria during Colds in Young Children. Pediatric Academic Societies (PAS): 2009 Annual Meeting; Abstract 4315.4. Presented May 4, 2009.
36. Mills MV et. al., The Use of Osteopathic Manipulative Treatment as Adjuvant Therapy in Children With Recurrent Acute Otitis Media. Archives of Pediatric and Adolescent Medicine: Sep 2003; 157; 861-66.
37. Mills MV, The Use of Hands-on Treatment in the Treatment of Recurrent Otitis Media [dissertation]. Tulsa: Oklahoma State University College of Osteopathic Medicine.
38. Magoun HI, Osteopathy in the Cranial Field. 3rd ed. Kirksville, Mo: Journal Printing Co; 1976; pp. 98, 285-6.

39. Shaw HH, Shaw MB, Osteopathic considerations in the clinical specialties: ear, nose, and throat. In: Ward RC, exec ed. Foundations for Osteopathic Medicine. Baltimore, Md: Williams & Wilkins; 1997; 289-297.
40. Pulec JL, Eustachian Tube Lymphatics. Ann Otol Rhinol Laryngol: Jul-Aug 1975; 84(4 Pt 1); 483-92.
41. Degenhardt BF et al. Osteopathic Evaluation and Manipulative Treatment in Reducing the Morbidity of Otitis Media: A Pilot Study. JAOA: 2006; Vol 106; No 6; June; 327-334.
42. King HH, The Collected Papers of Viola M. Frymann, DO. American Academy of Osteopathy, Indianapolis, IN.. 1998; p. 110.
43. Bluestone CD. Impact of evolution on the eustachian tube. Laryngoscope: 2008 Mar; 118(3); 522-7.
44. François M, Otite séreuse et allergie. Archives de pédiatrie: 2009; 16; 84-87.
45. Lasisi AO, Early onset otitis media: risk factors and effects on the outcome of chronic suppurative otitis media. Eur Arch Otorhinolaryngol: 01-JUL 2008; 265(7): 765-8.
46. Rovers MM, Is pacifier use a risk factor for acute otitis media? A dynamic cohort study, Fam Pract: 01-AUG-2008; 25(4): 233-6.
47. Vogazianos E, The effect of breastfeeding and its duration on acute otitis media in children in Brno, Czech Republic. Cent Eur J Public Health: 01-DEC-2007; 15(4): 143-6.
48. Koivunen P et al. Adenoidectomy versus chemoprophylaxis and placebo for recurrent acute otitis media in children aged under 2 years: randomised controlled trial. BMJ: 28 Feb 2004; 328(7438); 487.
49. Lous J et al. Grommets (ventilation tubes) for hearing loss associated with otitis media with effusion in children. Cochrane Database Syst Rev: 25 Jan 2005;(1):CD001801.
50. Roark et al. Continuous twice daily or once daily amoxicillin prophylaxis compared with placebo for children with recurrent acute otitis media. The Pediatric Infectious Disease Journal: April 1997; Volume 16; Issue 4; 376-381.
51. Moresi AC, Otitis Media: An Osteopathic Approach, The Cranial letter: 1995; Vol. 8; Issue 4.
52. Riding KH et al. Microbiology of recurrent and chronic otitis media with effusion. J Pediatr: Nov 1978; 93(5); 739-43.
53. Coco AS. Cost-Effectiveness Analysis of Treatment Options for Acute Otitis Media. Annals of Family Medicine: 2007; 5; 29-38.
54. Williamson IG et al. The natural history of otitis media with effusion--a three-year study of the incidence and prevalence of abnormal tympanograms in four South West Hampshire infant and first schools. J Laryngol Otol: Nov 1994;108(11); 930-4.

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, or in special circumstances on a case-by-case basis (See Section B);
 - 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. OCA International Affiliate Membership Without Membership in a Recognized Affiliate Society

When a Recognized Affiliate Society is not available, international non-physician osteopaths who meets the following minimum requirements may apply for OCA affiliate membership:

1. Practices in a country that does not formally recognize the profession of osteopathy.
2. Has completed at least 3 years of exclusive osteopathic practice.
3. At least 3 years of OCA Annual Conference attendance.
4. Dedication to Continued Osteopathic Education, as demonstrated by attendance at multiple intermediate and advanced courses in Osteopathy in the Cranial Field.
5. Graduation from a full-time Osteopathic school in a Country with a Recognized Affiliate Society will be highly valued.

Applicants must provide the following documents to the International Membership Subcommittee:

1. Curriculum Vitae, including
 - a. Osteopathic School of Graduation
 - b. Residence and Location of Practice
 - c. Number of Years in Exclusive Osteopathic Practice
 - d. Professional Memberships
 - e. Dates of Approved SCTF courses (or equivalent)
 - f. Dates of all Osteopathic Post-graduate courses
 - g. List of OCF Mentors
2. Proof of Attendance at an OCA approved Introductory course (includes international SCTF courses, etc).

Certificate or Letter from course director.

3. Statement that their 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 becoming an OCA Affiliate Member
7. Letter of recommendation from (2) OCA Regular members and (1) OCA International Affiliate Member

Applicants must be vetted by the International Membership Subcommittee and the Credentials Committee with final approval by the OCA Board of Directors.

C. 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.

D. 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.

E. 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 and Credentials Committee shall vet each applicant, with final approval by the Osteopathic Cranial Academy board of directors.

1. 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. Statement that their 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

2. 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 at OCA approved introductory course (includes international SCTF courses, etc.). Certificate or Letter from course director.
3. Statement that their 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

3. 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 at OCA approved introductory courses (including international SCTF course, etc.). 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