

AMERICAN OSTEOPATHIC BOARD OF PEDIATRICS

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[www.aobp.org](http://www.aobp.org)

TO: ALL CANDIDATES  
(Second Year Pediatric Residents)

FROM: FERNANDO GONZALEZ, D.O.  
AOBP Chairman

SUBJECT: ACOP RESIDENCY IN-SERVICE EXAMS

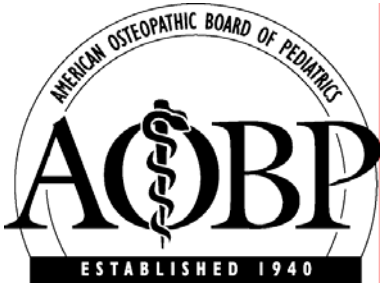
**PLEASE NOTE:**

Candidates from osteopathic and dual track programs, upon recommendation of their residency program director, will be allowed to sit for the exams. All applicants must have completed their second year of residency or be within 30 days of completing their second year.

The OMT and Pediatric residency in-service examinations have been created by the Residency Program Director's Committee of the American College of Osteopathic Pediatricians (ACOP). They are intended to be used as a tool to assess skills and knowledge that are expected to have been acquired by the end of the second year of residency. The American Osteopathic Board of Pediatricians (AOBP) is only providing technical and administrative examination support to the ACOP and is not responsible for the content of these examinations. An overall score will be reported to the ACOP as well as to the individual program director and each resident. Each examination is also broken down into system components and those component scores will also be reported. These scores may be used to assess overall program performance as well as indicate individual areas of strength and weakness. There will not be a cut score since there will be no pass/fail standard established. Any areas of special strength or weakness that may be identified will be addressed with the individual resident by their program director. The OMT in-service exam may be used as one of the requirements of the AOA evaluations for OMT.

**THE COMPLETED APPLICATION AND FEE MUST BE RECEIVED  
PRIOR TO TUESDAY, JUNE 30, 2009.**

**NO APPLICATIONS WILL BE ACCEPTED AFTER TUESDAY, JUNE 30, 2009.**



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## REFERENCE MATERIALS:

### OMT RESIDENCY IN-SERVICE ONLY

- 1) Osteopathic Medicine Recall, Andrew Mosier and Kohara
- 2) COMLEX OMM Review (Second Edition), William Thomas Crow, DO
- 3) <http://history.osteopathic.org/osteopathy.shtml>
- 4) ACOP POMT
- 5) Foundations for Osteopathic Medicine, Robert C. Ward & Barbara Peterson
- 6) An Osteopathic Approach to Diagnosis and Treatment, 3<sup>rd</sup> Edition, Eileen DiGiovanna, DO
- 7) [www.wheelessonline.com/ortho/barlowslower-test](http://www.wheelessonline.com/ortho/barlowslower-test)
- 8) Nelson's Textbook of Pediatrics
- 9) Pediatrics, Bird, et al.

### 2009 Residency In-Service Examination Fees

OMT Residency In-Service Examination <b>\$100.00</b>	_____
General Pediatric In-Service Examination: <b>\$100.00</b>	_____
Allergy In-Service Examination: <b>\$100.00</b>	_____
<b>TOTAL</b>	_____

**Payable via check or credit card.** Make all checks payable to: AOBP/CBS

Credit Card Type: \_\_\_\_\_

Name on Credit Card \_\_\_\_\_

Account Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Security Code (3 numbers found on the back of your card): \_\_\_\_\_



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**APPLICATION FOR EXAMINATION**

Submit completed application to:

**Program Coordinator**  
**A.O.B.P**  
**142 East Ontario Street**  
**Chicago, IL 60611**  
**(800) 621-1773 ext. 8267 phone**  
**(312) 202-8224 fax**

Name \_\_\_\_\_  
Last First Middle

Home Address \_\_\_\_\_  
Street

E-mail Address \_\_\_\_\_  
City State Zip

Telephone: Cell: \_\_\_\_\_ Work: \_\_\_\_\_  
Home \_\_\_\_\_

AOA #: \_\_\_\_\_

I hereby make application in:

\_\_\_\_\_ OMT Residency In-Service Exam  
\_\_\_\_\_ General Pediatric In-Service Exam  
\_\_\_\_\_ Allergy In-Service Exam

**Application for 2009**

**RESIDENCY DIRECTOR'S INFORMATION**

Residency Institution: \_\_\_\_\_

Address: \_\_\_\_\_

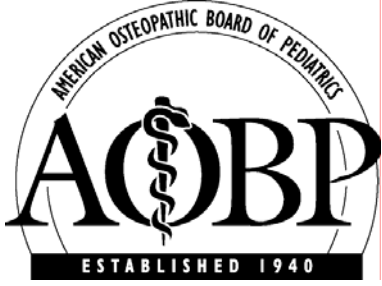
City and State: \_\_\_\_\_

Program Director's Name: \_\_\_\_\_

Program Director's Email: \_\_\_\_\_

Program Director's Phone Number: \_\_\_\_\_

Program Start Date: \_\_\_\_\_



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Scores will be reported to your residency program director as soon as available. To complete the application, please sign below.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

Date \_\_\_\_\_

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