COM Competencies and Objectives

The KCUMB graduates must demonstrate specific competencies and objectives to graduate.

	Competency	Foundations of Medicine	Musculoskeletal	Cardiopulmonary I	Cardiopulmonary II	Gastrointestinal	Renal	Osteopathic Clinical Skills I & II	Neuroscience I	Neuroscience II	Skin Blood & Lymph	Endocrine	Reproductive	Osteopathic Clinical Skills III &IV	Years III and IV
1.	Osteopathic Philosophy and Osteopathic Manipulative Medicine - Graduates are expected to demonstrate and apply knowledge of accepted standards in Osteopathic Manipulative Treatment (OMT). The education goal is to train a skilled and competent osteopathic practitioner who remains dedicated to life-long learning and to practice habits in osteopathic philosophy and manipulative medicine.	x	x	x	x	x	x	x	x	x	x	x	x	x	x
2.	Medical Knowledge - Graduates are expected to demonstrate and apply knowledge of accepted standards of clinical medicine in their respective specialty area, remain current with new developments in medicine, and participate in life-long learning activities, including research.	x	x	x	x	x	x	x	x	x	x	x	x	x	x
3.	Patient Care - Graduates must demonstrate the ability to effectively treat patients, provide medical care that incorporates the osteopathic philosophy, patient empathy, awareness of behavioral issues, the incorporation of preventive medicine, and health promotion.	x	x	x	x	x	x	x	x	x	x	x	x	x	x
4.	Interpersonal and Communication Skills - Graduates are expected to demonstrate interpersonal and communication skills that enable them to establish and maintain professional relationships with patients, families and other members of health care teams.	x	x	x	x	x	x	x	x	x	x	x	x	x	x
5.	Professionalism - Graduates are expected to uphold the Osteopathic Oath in the conduct of their professional activities that promote advocacy of patient welfare, adherence to ethical principles, and collaboration with health professionals, life-long learning, and sensitivity to a diverse patient population. Graduates should be cognizant of their own physical and mental health in order to effectively care for patients.							x						x	x
6.	Practice-based Learning and Improvement - Graduates must demonstrate the ability to critically evaluate their methods of clinical practice, integrate evidence-based medicine into patient care, show an understanding of research methods, and improve patient care practices.	x	x	x	x	x	x		x	x	x	x	x		X
7.	Systems-based Practice - Graduates are expected to demonstrate an understanding of health care delivery systems, provide effective and qualitative patient care with the system, and practice cost-effective medicine.	x	x	x	x	x	x		x	x	x	x	x		X

COM Educational Objectives

Below lists the 29 institutional objectives and the sections in which these are addressed through lectures, labs, and other learning activities. Also shown are those objectives addressed through clinical training with specific learning objectives. These were approved by the Curriculum Committee.

	Educational Objectives	Foundations of Medicine	Musculoskeletal	Cardiopulmonary I	Cardiopulmonary II	Gastrointestinal	Renal	OCS I	OCS II	Neuroscience I	Neuroscience II	Skin, Blood, & Lymph	Endocrine	Reproduction & Development	OCS III	OCS IV	Years III and IV
1.	Knowledge of the theories and principles that govern ethical decision making, and of the major ethical dilemmas in medicine, particularly those that arise at the beginning and end of life and those that arise from the rapid expansion of knowledge of genetics.		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
2.	Compassionate treatment of patients, and respect for their privacy and dignity.		X	X	X		X	X	X	X	X	X	X	X	X	X	X
3.	Honesty and integrity in all interactions with patients' families, colleagues, and others with whom physicians must interact in their professional lives.		X	X	X		X	X	X	X			X	X	X	X	X
4.	An understanding of, and respect for, the roles of other health care professionals, and of the need to collaborate with others in caring for individual patients and in			X	X			X	X	X	X		X	X	X	X	X

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	promoting the health of defined populations.																
5.	A commitment to advocate at all times the interests of one's patients over one's own interests.		X				X	X	X	X			X	X	X	X	X
6.	An understanding of the threats to medical professionalism posed by the conflicts of interest inherent in various financial and organizational arrangements for the practice of medicine.		X			X		X	X				X	X	X	X	X
7.	The capacity to recognize and accept limitations in one's knowledge and clinical skills, and a commitment to continuously improve one's knowledge and ability.			X	X		X	X	X	X		X	X		X	X	X
8.	Knowledge of the normal structure and function of the body (as an intact organism) and of each of its major organ systems.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
9.	Knowledge of the molecular, biochemical, and cellular mechanisms that is important in maintaining the body's homeostasis.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
10.	Knowledge of the various causes (genetic,	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X

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	developmental, metabolic, toxic, microbiologic, autoimmune, neoplastic, degenerative, and traumatic) of maladies and the ways in which they operate on the body (pathogenesis).																
11.	Knowledge of the altered structure and function (pathology and pathophysiology) of the body and its major organ systems that are seen in various diseases and conditions.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
12.	An understanding of the power of the scientific method in establishing the causation of disease and efficacy of traditional and non-traditional therapies.	X	X	X	X	X	X	X	X	X	X		X		X	X	X
13.	An understanding of the need to engage in lifelong learning to stay abreast of relevant scientific advances, especially in the disciplines of genetics and molecular biology.	X	X	X	X		X	X	X	X		X	X	X	X	X	X
14.	The ability to obtain an accurate medical history that covers all essential aspects of the history, including issues related to age, gender, and socio-economic status.			X	X		X	X	X	X	X		X	X	X	X	X

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15.	The ability to perform both a complete and an organ system specific examination, including a mental status examination.							X	X		X		X	X	X	X	X
16.	The ability to perform routine technical procedures including at a minimum venipuncture, inserting an intravenous catheter, arterial puncture, thoracentesis, lumbar puncture, inserting a nasogastric tube, inserting a foley catheter, and suturing lacerations.							X	X				X		X	X	X
17.	The ability to interpret the results of commonly used diagnostic procedures.	X	X	X	X	X	X	X	X	X		X	X	X	X	X	X
18.	Knowledge of the most frequent clinical, laboratory roentgenologic and pathologic manifestations of common maladies.		X	X	X	X	X	X	X	X		X	X	X	X	X	X
19.	The ability to reason deductively in solving clinical problems.		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
20.	The ability to construct appropriate management strategies (both diagnostic and therapeutic) for patients with common			X	X	X	X	X	X	X	X	X	X	X	X	X	X

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	conditions, both acute and chronic, including medical, psychiatric, and surgical conditions, and those requiring short- and long-term rehabilitation.																
21.	The ability to recognize patients with immediately life threatening cardiac, pulmonary, or neurological conditions regardless of etiology , and to institute appropriate initial therapy.			X	X		X	X	X				X		X	X	X
22.	Knowledge about relieving pain and ameliorating the suffering of patients.		X				X	X	X	X		X	X	X	X	X	X
23.	The ability to communicate effectively both orally and in writing, with patients, patients' families, colleagues, and others with whom physicians must exchange information in carrying out their responsibilities.		X				X	X	X	X			X	X	X	X	X
24.	Knowledge of the important non-biological determinants of poor health and of the economic, psychological, social, and cultural factors that contribute to the development and/or continuation of maladies.		X	X	X		X	X	X			X	X	X	X	X	X

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25.	Knowledge of the epidemiology of common maladies within a defined population, and the systematic approaches useful in reducing the incidence and prevalence of those maladies.		X	X	X	X	X			X	X	X	X	X			X
26.	The ability to identify factors that place individuals at risk for disease or injury, to select appropriate tests for detecting patients at risk for specific diseases or in the early stage of disease, and to determine strategies for responding appropriately.		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
27.	The ability to retrieve (from electronic databases and other resources), manage, and utilize biomedical information for solving problems and making decisions that are relevant to the care of individuals and populations.							X	X				X		X	X	X
28.	Knowledge of various approaches to the organization, financing, and delivery of health care.	X		X		X	X			X							X
29.	A commitment to provide care to patients	X		X		X	X			X							X

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	who are unable to pay and to advocate for access to health care for members of traditionally underserved populations.																