



ORTHOPEDICS

BOC Orthopedic Specialty Certification Update

Michael Hudson

PhD, LAT, ATC

Chair

BOC Specialty Council

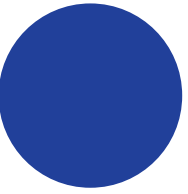


BOC Orthopedic Specialty Certification

- Launched October 2021
- BCS-O credential holders: 31
- Next exam: August 2022
- Exam Eligible Applicants: 14

Why Specialty?

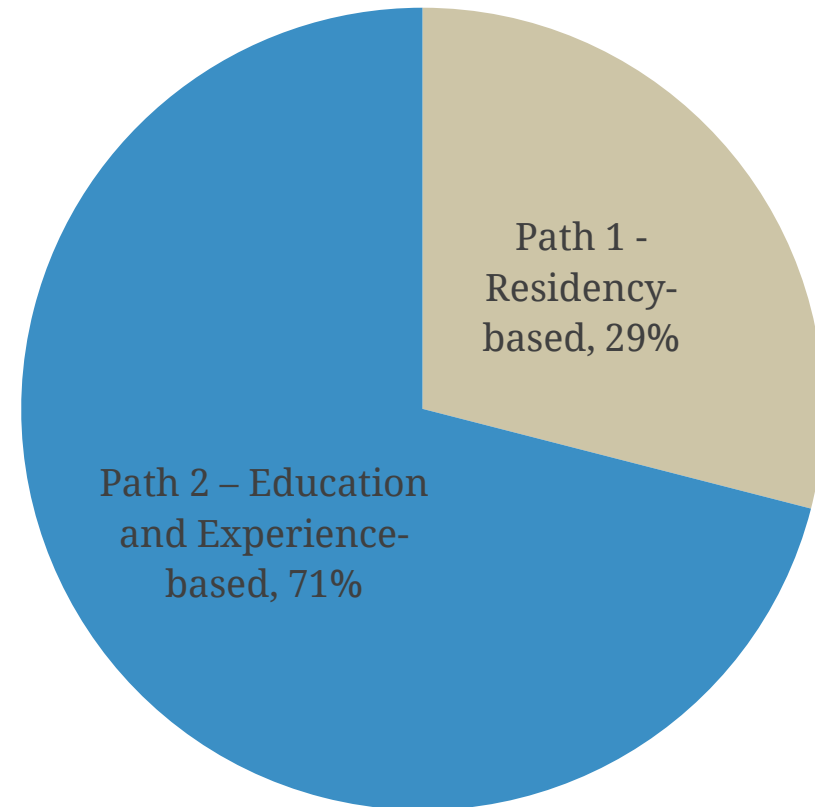
- Value to profession
- Impact for Athletic Trainers
- Promote to employers



Eligibility

- Path 1: Residency-based
- Path 2: Education and Experience-based

Eligibility Path - Oct 2021 and Feb 2022

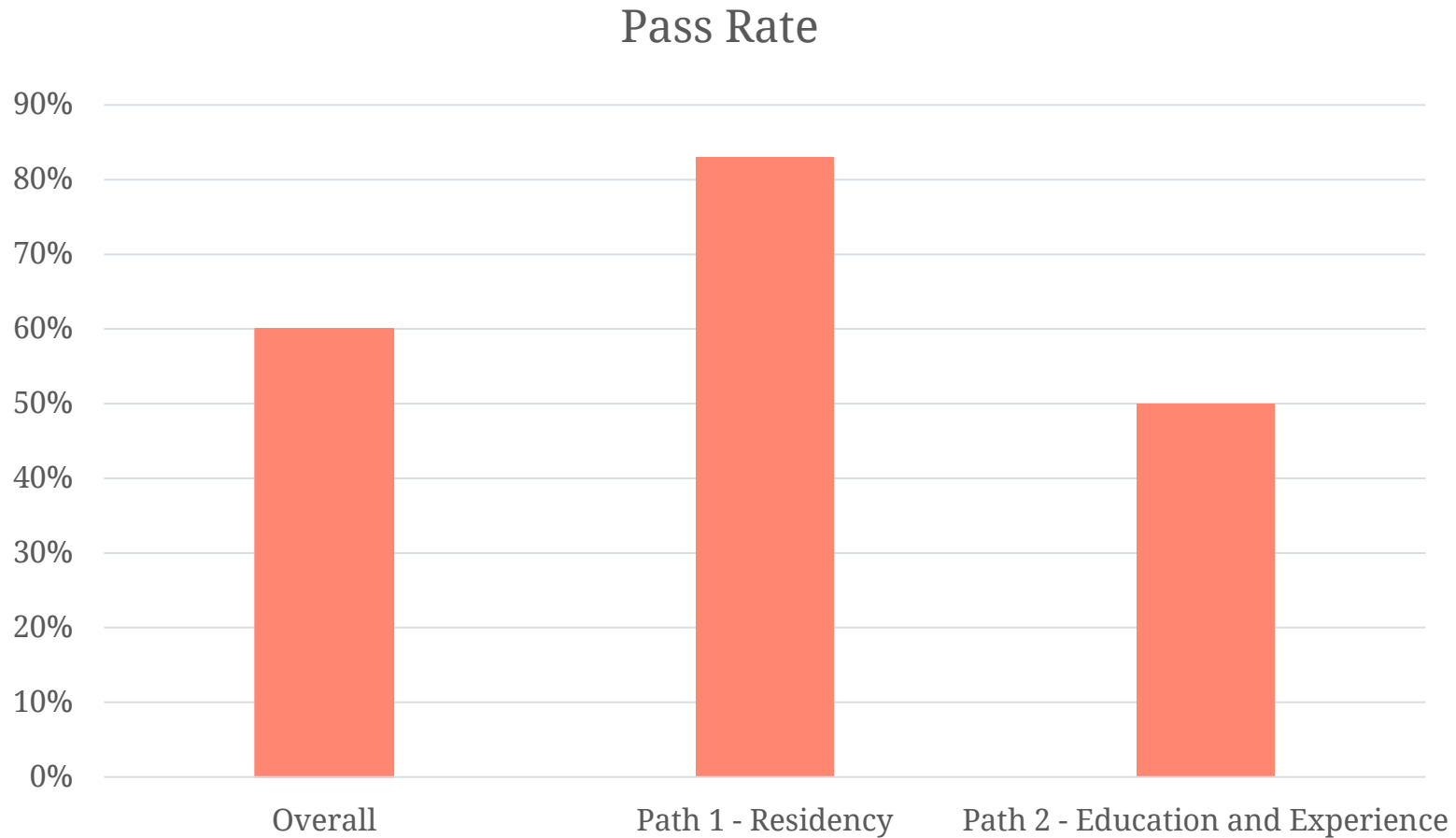
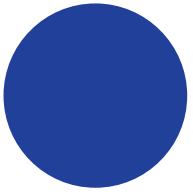


Orthopedic Specialty Exam

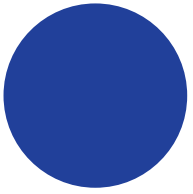
- Aligned with the “BOC Orthopedic Practice Analysis”
- Resources/Tools
- Ongoing exams – August and February each year



Exam Pass Rate (Oct 2021 and Feb 2022)

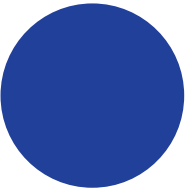


Continuing Specialty Certification



- Requirements align with ATC[®] credential
- 50 CEUs total to maintain ATC[®] and BCS-O
- BCS-O earned in 2021
 - Minimum of 10 of 50 CEUs must fall within domain/tasks of the BOC Orthopedic Practice Analysis
- BCS-O earned in 2022
 - Minimum of 5 of 50 CEUs must fall within domain/tasks of the BOC Orthopedic Practice Analysis

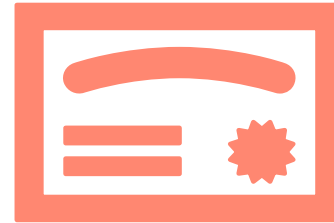
Continued Promotion of Specialty



Value to profession



Impact for ATs



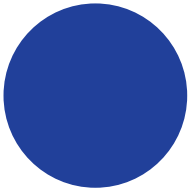
**Promoting the
credential**

Marketing to ATs
BCS-O Toolkit



**Outreach to
employers**

Cohort Tracking and Promotions



- Engage, develop and maintain relationships with BCS-O credential holders
- Survey touchpoints – quantitative and qualitative
- Goals:
 - Provide ongoing support
 - Boost awareness of the orthopedic specialty certification – ATs and employers
 - Prompt registration for subsequent exams



Cohort Feedback

"The BCS-O credential has given me the confidence and measurable competencies to elevate the Athletic Trainer here at St. Luke's as an orthopedic specialist, beyond the usual level of knowledge. This also provides a tangible continued pursuit for further clinical and professional development. Which in turn demonstrates my contributions to value-based medicine, further adding value to my role."

Christopher Servian LAT, ATC, BCS-O, OT-SC
Athletic Trainer
St. Luke's University Health Network
Warren-Campus

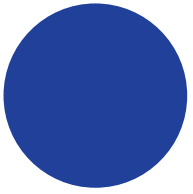


Employer Feedback

"As a surgeon, having an assistant with a BCS-O credential means that I can trust that individual is well trained and capable of adding great value to our team. I feel very fortunate that Chris has worked hard to learn how to handle the complexities of our day-to-day orthopedic practice, both in the office and in the operating room. His added certification helps him to stand out amongst his peers."

Nick Avallone, M.D.
St. Luke's Orthopedic Care

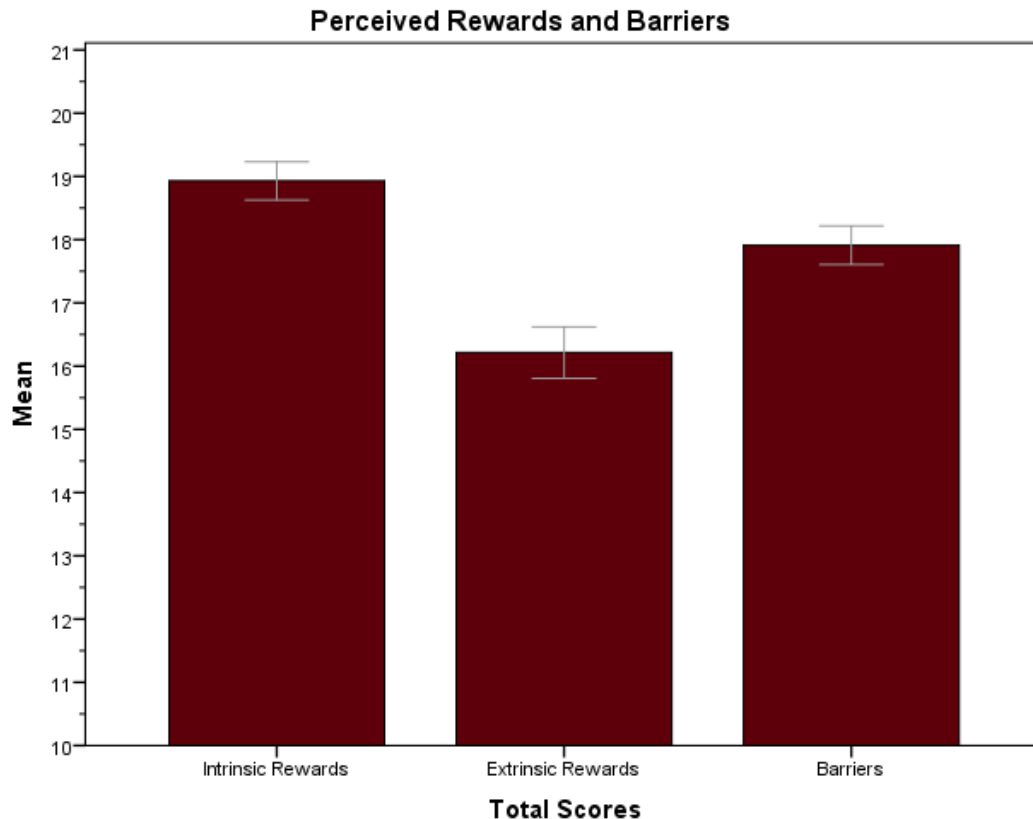
Future Considerations- Knowledge



Only 2 of 9 specialty certification knowledge questions were answered correctly by more than 50% of the AT participants.

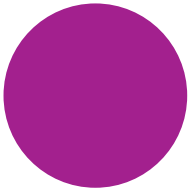


Future Considerations- Perceived Rewards



ATs perceived the intrinsic rewards of a specialty certification significantly higher than barriers and extrinsic rewards

Future Considerations- Perceived Barriers



Perceived Barriers to Taking the Exam (*Preliminary Unpublished Findings*)

BEFORE taking the exam

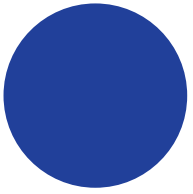
- Cost of specialty exam too high
- Limits in educational path opportunities
- Time needed to prepare



AFTER taking the exam

- Cost too high to maintain credential
- Specialty certification:
 - Not suitable to work setting
 - Does not expand scope of practice
 - Not valuable to employer
 - Not valuable to AT

Future Considerations- Practice Acts and Certification Boards



- Federation of State Medical Boards

- “State licenses are undifferentiated, meaning physicians in the United States **are not licensed based upon their specialty or practice focus**, and certification in a medical specialty is not absolutely required in order to obtain a license to practice medicine.”¹
- To receive full licensure to practice medicine, applicants **should provide** medical boards a list and current status of all specialty certifications²

- Medical Specialty Certification Boards

- “The development and history of medical specialty boards **suggest that proscribing specific legal activities is probably within the concept of their responsibility** to define professionalism.”³

1. Federation of State Medical Boards. Understanding medical regulation in the United States module 1: an introduction to medical regulation [Internet]. Federation of State Medical Boards; 2018. Accessed November 13, 2020. <https://www.fsmb.org/siteassets/education/pdf/best-module-text-intro-to-medical-regulation.pdf>

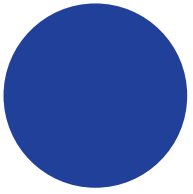
2. Federation of State Medical Boards. Guidelines for the structure and function of a state medical and osteopathic board [Internet]. Federation of State Medical Boards; 2021. Accessed June 30, 2022. <https://www.fsmb.org/siteassets/advocacy/policies/guidelines-for-the-structure-and-function-of-a-state-medical-and-osteopathic-board.pdf>

3. Waisel DB. Revocation of board certification for legally permitted activities. *May Clin Proc*; 2014;89(7):869-872. Accessed June 30, 2022. <https://doi.org/10.1016/j.mayocp.2014.04.017>.

July 14, 2022



Future Considerations- New Specialty Certifications



- Petitioning to Validate a New Specialty Certification
 - Show the need, demand, and number of the new specialists
 - Describe their specialized knowledge, skills, education, and experience

Questions?

For more information, FAQs and updates,
visit the BOC website:

BOCATC.org
under the “AT Specialties” tab

Or email: Specialty@BOCATC.org