The MD Program

Oceania University of Medicine

OCEANIA UNIVERSITY OF MEDICINE INTERNATIONALLY ACCREDITED



CEANIA UNIVERSITY OF MEDICINE was granted formal accreditation by the Philippine Accrediting Association of Schools, Colleges and Universities (PAASCU) in 2010. Founded in 1957, PAASCU is a service organization that accredits academic programs to meet standards of quality education. Since 1991, PAASCU has been a full member of the International Network for Quality Assurance Agencies in Higher Education, which is composed

OUM Accreditation and Official Designations of 200 accrediting agencies in more than 90 different countries. PAASCU also is a founding member of the Asia-Pacific Quality Network. PAASCU has linkages with the Council for Higher Education Accreditation, which is a private, nonprofit national organization that coordinates accreditation activity in the United States.

PAASCU is one of 20 accrediting bodies recognized by the U.S. Department of Education's National Committee on Foreign Medical Education and Accreditation (NCFMEA) which reviews standards to accredit medical schools in foreign countries and determines whether those standards are comparable to those used to accredit medical schools in the United States. PAASCU will evaluate OUM for re-accreditation in 2013. If granted, the medical school's next evaluation would be in 2018.

Throughout the accreditation process and beyond, OUM remains listed by the World Health Organization (WHO) in its Directory of World Medical Schools and in the International Medical Education Directory (IMED), a publication of the Education Commission for Foreign Medical Graduates (ECFMG) and its Foundation for Advancement of International Medical Education and Research (FAIMER). Being listed in these publications is a prerequisite for many foreign medical school graduates who apply for licensure in the United States, as is the earning of ECFMG Certification.



The MD Program

a Oceania University of Medicine

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B ECOMING A DOCTOR has been a lifelong dream for many individuals who seek a medical education. Sadly for some, a dream postponed. But today, prospective medical students can attend medical school without leaving friends and family for extended periods, quitting jobs, and moving to a college town.

Founded in 2002 on the South Pacific island of Samoa, Oceania University of Medicine (OUM) derived from a local mission to better meet the health needs of underserved island communities. With many rural areas throughout the world facing physician shortages, healthcare providers and others looking to upgrade or change careers saw OUM's blend of distance-learning and clinical training in local teaching hospitals as a way to address the issue. The school's flexible curriculum also provided the opportunity for those with personal or professional barriers to finally pursue their dream of becoming a physician.

As the first and only internationally accredited medical school in the South Pacific, OUM boasts a curriculum that continuously evolves, changing with advances in medicine and medical education. Earned in 2010, accreditation also makes OUM eligible to compete for education and research grants from international organizations, also opening student access to philanthropic and bank-offered financial aid. Accreditation has identified OUM's programming as comparable to traditional, more established institutions.

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Background

OUM operates through a public/private partnership between e-Medical Education, LLC, an international software and health science education company, and the Government of Samoa (formerly Western Samoa), deriving its authority from the Oceania University of Medicine Act which was ratified by the Parliament of Samoa.

The faculty and administration provide a high-quality academic curriculum in all three of its programs, the Doctor of Medicine (MD), Graduate-Entry Bachelor of Medicine Bachelor of Surgery (MBBS), and Undergraduate MBBS. Students holding a bachelor's degree may elect to pursue either the MD or Graduate-Entry MBBS, depending upon the requirements in their country of residence. OUM also offers a five-year undergraduate MBBS program, customary in British Commonwealth countries, which does not require a bachelor's degree as an admissions requirement.

As all physicians must master the vast knowledge base needed by the medical profession, OUM integrates the latest information technology into the curriculum and the student learns to incorporate these tools into daily practice. Computer-assisted learning programs will enable the student to enter a career as a physician, armed with the tools to engage in the constantly evolving practice of medicine.

Prime consideration is given to developing a sense of responsibility, an understanding of the patient's need for a compassionate, knowledgeable physician, and a commitment to continuing medical education, research, self-directed learning, improvement of skills, and the acquisition of new ones.

MD CURRICULUM

OUM's overall academic goal is to produce well-rounded graduates with the foundation knowledge, attitudes, behavior, and skills to foster success in postgraduate training, as well as to maintain professional competence throughout their careers. MD students are expected to master the curriculum objectives listed in the table below by the end of their full course of study.

OUM's MD curriculum is a four-to-five-year program divided into two main phases, preclinical and clinical as follows:

- 20 weeks of Introduction to Medicine
- 72 weeks of preclinical modules (nine 8-week modules)
- 72 weeks of clinical clerkships.
- Up to 40 weeks of e-Foundation basic science modules (if needed, based upon e-ITM performance)

OCEANIA UNIVERSITY OF MEDICINE ~ DOCTOR OF MEDICINE (MD) PROGRAM																							
PHASE	PRE-CLINICAL MODULES (92 Weeks)								⁴ CLINICAL MODULES (72 Weeks)														
LENGTH (WEEKS)	20	8	8	8	8	8	8	8	8	8		8	8	8	4	4	8	8		8	8	8	
TERM	1	2	3	4	5	6	7	8	9	10	s	11	12	13	1	4	15	16		17	18	19	
TERMS Problem-based learning	Introduction to Medicine	Respiratory System	Gastro-Intestinal System	Cardiovascular System	Musculoskeletal System	Neurology and Neurosciences	Psychosocial Sciences (4 weeks) Renal System (4 weeks)	Heme-Immune System	Endocrine System	Reproductive System	^a USMLE Part 1 & Clinical Skill Bridging Course	Internal Medicine	Pediatrics	Obstetrics and Gynecology	Emergency Medicine	Psychiatry	Community Medicine	Surgery	USMLE Part 2 CK & CS	Advanced electives	Advanced electives	Advanced electives	GRADUATION
See #	See #1 See #2 e-Foundation Science modules • Biochemistry • Medical Statistics • Pharmacology • Microanatomy/Cell Biology • Neuroanatomy • Microbiology • Behavioral Medicine									1 so be 2 th Ea ba 3 (co	For stu ciences e passi Upon s ie stud ach fou asic sc Studer purse b	idents s, the c ed pric succes ent ma ur-wee ience ience ience offore	with w corresp or to be sful co ay enro k e-Fo discipli st pass progre	eakne oondin eginnin ompleti oll in th undati ine wh s USM ssing t	sses ir g e-Fo ig syst on of t e first on Sci ich wil LE Ste to the	n one c oundati em-ba the req systen ence n I be cc p 1 an clinica	or more on Sci used st uired I n-base nodule overed d clinic	e of the ence r udy. Founda d mod cover in USI cal skil al mod	e e-ITN nodule ation S lule (m s in de MLE S ls brid ules.	I's bas (s) mu ccience odule odule tep h a tep I. ging	ic st s, #2).		

Students complete course modules, and performance is assessed on a variety of criteria at the close of each module. OUM recognizes that problem-based learning (PBL) is the cornerstone of modern medical school teaching and has adopted this

style in developing its curriculum content. The program utilizes more than 90 PBL case studies with each featuring a virtual patient presentation (or scenario) and following the patient through the following stages:

- Patient presentation
- History & physical examination
- Differential diagnosis
- Laboratory tests & diagnostic imaging
- Provisional diagnosis
- Short-term management
- Long-term management

Together with the patient-based information, each case includes basic or clinical science learning issues. Preclinical PBL case studies link basic sciences with the development of clinical reasoning through virtual patient scenarios. PBL cases provided during the clinical phase of study focus on patient management and other patient care issues and concepts. All PBL cases reference current core medical and basic science textbooks, journal articles, and verified websites.

OUM's curriculum is presented using Moodle, a licensed software and course content package with cases, exhibits, and assessments developed by leading Australian and American academics and medical scholars. Highly qualified online faculty guide students through the learning process, utilizing small student groups in regular tutorial sessions, independent learning, and formative assessment. The PBL cases integrate basic science material with clinical content from the very beginning of the program.

Through its virtual classroom via Elluminate Live, OUM students and teachers interact online in a live real-time teaching environment for lectures and classroom discussion, as well as the opportunity to record lectures for future reference. Students are able to raise their hands to ask questions, send messages to the instructor, and view slides and other presentation materials.

In conjunction with case-based studies, OUM supplies students with curriculum material in a variety of additional formats including:

- Live lectures and small group discussions (all lectures recorded and available after live delivery as an audio only podcast – MP3 format – as well as full video/audio format)
- Pre-recorded audio lectures (voice over PowerPoint presentations)
- Extensive module review notes
- Specialized lecture notes (clinical & preclinical)

PRECLINICAL MODULES Introduction to Medicine (e-ITM) – Module 1

Introduction to Medicine, or e-ITM, is the first module taken in the medical program and begins the preclinical phase of study. Entering students are oriented to OUM's self-directed learning system (Moodle) during the e-ITM module taught online using Elluminate Live. The module's focus is to provide a solid background and understanding of the basic sciences.

Offered online over 20 weeks, the e-ITM is a rapid-fire overview of the basic science disciplines required to pass United States Medical Licensing Exam (USMLE) Step 1. The e-ITM begins with a required orientation day held at one of the clinical training sites/teaching hospitals in the U.S. The orientation will present strategies for success in medical school, an introduction to required IT modalities, and a "meet and greet" forum for students, faculty, administrators, and academic advisors. The major basic sciences are presented via Elluminate in two-week blocks, and the minor basic sciences are combined in two-week blocks, as follows:

- biochemistry
- molecular biology and medical genetics
- physiology
- anatomy, neuroanatomy, and embryology
- microanatomy and cell biology
- pharmacology
- microbiology
- immunology
- pathology
- behavioral medicine and biostatistics.

The course introduces the student to the language and major concepts of each basic science discipline. Each block will be taught Monday-Friday for one hour daily and 2.5 hours each on Saturday and Sunday. At the end of each two-week block, the student will be administered a final examination. Because mastery of the basic sciences is essential to passing USMLE Step 1, students scoring less than a 75 percent on the examination will be required to take the corresponding e-Foundation Science course, which presents fundamentals of the topic over four weeks.

Students who have been exposed to the basic sciences will likely find e-ITM to be a review and will likely move forward to the system-based modules. Those who have had limited exposure to the basic sciences will likely find the e-ITM challenging and will be able to supplement their basic science knowledge in the e-Foundation Sciences modules.

e-Foundation Sciences

Students who need additional time to master the basic sciences will be directed to take one or more e-Foundation Science modules. This will be determined by the academic advisor through evaluation of the student's performance during the e-ITM. More extensively covering the same basic science disciplines taught during the e-ITM, e-Foundation Science modules are four weeks in duration and also delivered via Elluminate on a combined weekday/weekend schedule.

As the e-Foundation Science modules are intensive expansions of the e-ITM blocks, the following material is covered:

Biochemistry. Classic and molecular biochemistry, including structure, function, and biosynthesis of macromolecules, metabolic interrelations and control mechanisms, and biochemical genetics. Application of recent advances in knowledge of molecular bases for cellular function to disease states (diagnosis, prevention, and treatment).

Molecular Biology. The study of the structure and function of the genetic material, including DNA structure, DNA replication and recombination, regulation of gene expression, and protein synthesis. Both prokaryotic and eukaryotic systems are examined, including contemporary recombinant DNA technology and applications of molecular cloning procedures.

Medical Statistics. Introduction to statistical methods used by medical researchers, including descriptive statistics, hypothesis testing, analysis of variance, regression, and correlation.

Physiology. Functional features of the major organ systems in the human body. Emphasis is on homeostasis and the interactions of organ systems in health & disease.

Pharmacology. The various classes of drugs that are used in medicine, particularly those used in specific or symptomatic treatment of disease states, are covered. Drugs of abuse are also covered. Emphasis is on the mechanisms of action of drugs at the organ and system level and on their use in medicine.

Medical Genetics. An introduction to human genetics. Topics include human gene organization and expression, chromosome structure, karyotyping, chromosomal aberrations, sex determination and sex chromosome abnormalities, patterns of single gene inheritance, linkage analysis, human gene mapping, inborn errors in metabolism, human population genetics, polymorphic cell surface antigens, multifactorial inheritance genetics of cancer, prenatal diagnosis, and uses of recombinant DNA in medical genetics.

Microanatomy/Cell Biology. Microanatomy is designed to provide students with knowledge of the major features of the structural organization of cells, tissues, and organs, and how that organization is related to function. Cell biology involves an analysis of the basic structure and function of human cells, with an emphasis on the regulation of cellular processes. The basic features of membranes, cellular compartmentalization, protein trafficking, vesicular transport, cytoskeleton, adhesion, signal transduction, and cell cycle are covered.

Anatomy. A systems approach to the analysis of human structure. Molecular, cellular, tissue, organ, and organ system levels of structure and organization are integrated throughout.

Neuroanatomy. How neuroscience uses tools of many disciplines, from imaging to behavior, to develop and test hypotheses about functions of specific parts of the brain. Basic organization of nerve cells and the human nervous system, methods of visualizing nerve cells, neural connections, and neural activity patterns are covered.

Embryology. Embryologic development from ovulation through birth is covered and is organized by organ systems. Topics are integrated with human anatomy to facilitate understanding of anatomic relationships, selected birth defects, and anatomic variants.

Microbiology. Comparative metabolism of small molecules and cell structure and relationship to microbial classification are covered, including macromolecule synthesis and regulation, cell division, growth, and effects of antibiotics.

Immunology. A study of humoral and cellular immunology. Topics include lymphoid systems, cells, antigens, antibodies, antibody formation, cellular immunity, and tumor and transplantation immunology. Diseases and altered immune states associated with each topic are discussed in detail.

Behavioral Medicine. Lectures in normal human development and psychopathology. The course focuses on biological, psychological, and social substrates of normal and pathological human behavior, including the diagnosis and treatment of psychiatric disorders.

Pathology. Provides an overview of the molecular mechanisms of human diseases, including neurologic, hematologic, neoplastic, and infectious diseases.

System-Based Preclinical Study – Modules 2 Through 10

The nine systems-based modules are eight weeks in length and combine the basic and clinical sciences in a case format. Along with a detailed case presentation, the student will receive a live Elluminate lecture from the faculty, participate in a live Elluminate lecture which covers key concepts (formerly written tasks), and engage in directed independent study.

Cardiovascular. The cardiovascular cases include chest pain, acute angina pectoris, essential hypertension, epidemiology, arrhythmia, infective endocarditis, and congenital heart disease.

Endocrinology. The endocrinology cases include thyroid disease, parathyroid disease, pituitary disease, adrenal disease, and diabetes mellitus.

Gastrointestinal. The gastrointestinal cases include esophageal disorders, gastric and duodenal disorders, intestinal disorders, hepatic disorders, ascites and fluid balance, and pancreatic and biliary disorders.

Hematology-Immunology. The hematology-immunology cases include immunodeficiency disorders, autoimmune disorders, leukemia, lymphoma, anemia, and bleeding disorders and thrombosis.

Musculoskeletal. The musculoskeletal cases include rheumatoid arthritis, osteoarthritis, osteomyelitis, fractured humerus, gout, osteoporosis, and cervical spondylosis.

Neurology & Neuroscience. The neurology and neuroscience cases include multiple sclerosis, bacterial meningitis, hemiparesis, epilepsy, Alzheimer's disease, and Parkinson's disease.

Psychology & Renal. The psychology and renal cases include glomerulonephritis, renal failure, dehydration, renal calculi, mood disorders, psychoses, and child psychiatry and psychosocial issues.

Reproduction. The reproduction cases include sexual development, antenatal care, disorders of pregnancy, labor and the puerperium, ectopic pregnancy, infertility, and vaginal bleeding.

Respiratory. The respiratory cases include asthma, tuberculosis, HIV/pneumonia, breathlessness, lung cancer, and heroin/adult respiratory distress syndrome.

During each week of the module, a new PBL case and its supporting materials are accessed online through Moodle and fully examined as the basis for classroom discussion. Seven cases are covered each term with Week 8 dedicated to exam study and review. Throughout the module, online preclinical instructors (with



advanced degrees of MD, PhD or MBBS) explore and discuss content related to the weekly cases. Live teaching sessions (lectures/tutorials) also are held each week via Elluminate, allowing students and instructors to interact in a content-rich, real-time environment.

Basic science disciplines covered throughout the preclinical modules and integrated into PBL cases are Anatomy, Biochemistry, Behavioral Science, Cell Biology, Embryology, Genetics & Cell Biology, Histology, Immunology, Microbiology, Pathology, Pharmacology, and Physiology.

As students progress through each preclinical module, they develop and improve skills of clinical reasoning as they apply their expanding knowledge to virtual medical scenarios depicting unique, as well as common, human conditions and ailments. These skills are essential to success during the clinical clerkships.

For each module, the study materials supplied via Moodle and Elluminate include: case studies, detailed overview notes, specialized topic notes, module-specific drug lists, physiology animations, and prerecorded audio lectures. Each module also runs a laboratory problem session for students to discuss physiological concepts (equations & graphical data), analyze clinical laboratory data, and discuss clinically relevant case data in the form of clinical multiple choice questions (MCQs).

The preclinical modules are benchmarked to cover much of the content required by USMLE Step 1. After completion of the tenth and

final preclinical module, MD students must pass the USMLE Step 1 to be eligible to proceed into the clinical phase of study.



Academic Advisors

OUM constantly strives to provide multiple opportunities for its distance-learning students to stay connected with each other, with faculty, and to campus. The primary contact for MD students regarding their academic status and program progression is their academic advisor, assigned to them at the time they enroll.

Academic advisors will:

- make regular contact with students via telephone/e-mail/Skype;
- guide students through the high volume of required readings assigned during each module;
- assess the student's knowledge as applied to material in the current module and as a whole, in light of other modules taken;
- interact with instructors and/or physician mentors, if necessary, to gain insight into academic or clinical performance;
- make assignments to facilitate learning or to supplement formal instruction;
- regularly provide sample USMLE exam questions for students to complete;
- maintain contact with students who are taking off a module and make appropriate assignments to enhance knowledge retention;
- establish a means by which to document and assure comprehension, and assess the student's fund of knowledge;
- conduct weekly quizzes and cumulative basic science exams for MD students prior to the end-of-module final examination;
- transition into a preparatory coach during study for USMLE Step 1 at the end of the preclinical curriculum.

All of OUM's academic advisors hold an MD, MBBS, or PhD in one of the basic sciences. They will also have familiarity with medical licensure exam requirements in their respective country.

Talofa Student Peer Mentors

All entering OUM students will be assigned to a "seasoned" volunteer student mentor as part of the Talofa program to impart knowledge, provide guidance and camaraderie with the ultimate goal of increasing satisfaction, retention, and overall student success.

In the Samoan language, "talofa" is a sign of respect and means "hello" or "welcome." The "seasoned" student will be referred to as "pa'aga" rather than mentor. "Pa'aga" in the Samoan language means "buddy," "mentor," "teammate," or "friend." In addition to all incoming students, preclinical students may join the Talofa program, and students on academic probation will be required to participate in the Talofa program. Pa'aga will reside in the same country as his/her mentee, and where possible, the same geographic area.

Pa'aga should be able to assist with:

- Classroom mechanics Moodle, Elluminate, remote proctoring system, etc.
- Overcoming barriers commitments, time management, etc.
- Support system
- Study tips

Bridging Course: Transition from Clinical Theory to Clinical Rotations

Graduating students with superior clinical skills is a key educational objective of OUM's MD program. In order to assure that these skills are in place prior to the start of clinical rotations, OUM delivers a three-part clinical skills course midway through the preclinical curriculum to bridge the theory taught during beginning modules with the hands-on training taught during rotations. Upon completion, students should demonstrate professional behavior and skills needed to interact with patients in both hospital and outpatient settings.

The course is designed to prepare students to be able to examine patients and to communicate effectively and professionally with patients and family members. It also prepares students for the order and review of diagnostic tests and pathology reports, especially in hospital scenarios.

The Bridging Course is divided into three distinct sessions:

- (1) Introduction to Clinical Skills,
- (2) Physical Examination, History Taking and Patient Interviewing Skills and
- (3) Basic Laboratory Skills.

OUM offers the Bridging Course over one weekend of intense study at a US clinical site. While cost of the course is covered in current tuition, students are responsible for associated travel and overnight accommodations.

Upon completing their fifth preclinical module, students will be contacted by administrative staff to complete a bridging course application and indicate their time and date preferences. At that time, students are also required to produce current Basic First AID and CPR certificates from an appropriate/certified training body before beginning the course.

An additional advanced clinical skills workshop is held midway through clinical rotations to prepare students for licensing board examinations and residencies. It also assures that upon graduation, students have mastered a systematic approach to physical diagnosis.

Time Commitment : Preclinical Phase

Each preclinical module includes an extensive amount of information in an eightweek time period. Students may enroll in only one module at a time, because they are designed as a full-time study workload averaging 40 hours per week for completion. Students must pass each module before progressing to the next.



Each 40-plus hour week during preclinical studies requires students to dedicate:

- 2 hours to online interaction with the academic instructor and fellow students;
- 2 hours to live lectures and/or tutorials;
- 1 hour to interact with an OUM instructor and academic advisor;
- 1 hour of interaction with personal physician mentor;
- Approximately 34-plus hours to reading assigned text material and other resources related to cases, completing course assignments, and other self-directed learning.

Given the intense workload, it is unlikely that students will be able to complete the OUM program in less than four years and many may take five years.

CLINICAL MODULES

Upon passing the USMLE Step 1, MD students become eligible to begin 72 weeks of clinical clerkships/rotations. Core clinical rotations cover 48 weeks, followed by 24 additional weeks of advanced medical/surgical and general electives.

Students are required to begin clinical rotations within six months of passing the USMLE Step 1.

During these eight-week rotations (some electives are four-week rotations), students acquire and maintain skills needed to provide total patient care by gaining an:

- understanding of the therapeutic nature of the patient-doctor relationship;
- ability to listen to and identify concerns of patients and their families and to respond to those concerns;
- ability to systematically elicit and interpret clinical signs/symptoms by interviewing and examining patients with sensitivity;
- understanding the necessary steps of evaluating difficult situations and making decisions in uncertain circumstances.

During core rotations, students are assigned to the clinical supervisor at an OUM-affiliated teaching hospital to complete clerkship training. Together with the hands-on training, students complete five PBL cases, directed learning activities, and supportive lectures associated with the clerkship (five cases for eight-week rotations; less for four-week rotations). This portion of the clinical curriculum is designed both to highlight important learning objectives and to complement knowledge acquired during rotations. OUM expects personal dedication to scholastic achievement and active participation in completing the learning activities outlined in each case. The goal of these problem-based cases and directed-learning activities is to bring specific issues forward in an appropriate clinical context. At the completion of each core rotation, students will be evaluated using a variety of assessment tools.

Clinical students will have an opportunity to train in both ambulatory and in-patient settings. The time spent on each will differ from module to module and from one affiliated hospital to another, but these differences are not significant in terms of enabling students to meet the module objectives. In addition, students will participate in Journal Club, Grand Rounds, and other clinical learning opportunities. As illustrated on the MD Curriculum Chart on page 6, the core clinical clerkships are as follows:

INTERNAL MEDICINE

Students learn the steps necessary for proper patient diagnosis and treatment, including taking complete medical, personal, and family histories. Students also learn how to perform a diagnostic work-up and develop a plan for managing patient care. Students participate in clinical conferences where they learn to report findings and conclusions logically and succinctly.

SURGERY

Students acquire knowledge, skills, and attitudes necessary for the recognition and management of patients with disorders that require surgical evaluation and surgical interventions. In the process, they become familiar with the principles, clinical reasoning, techniques and tools used by surgeons, and with operating room policies/procedures.

PEDIATRICS

Students acquire special skills and knowledge required for the treatment of infants, children, and adolescents. Students gain an appreciation of acute pediatric illnesses, assessment of child health, pediatric outpatient care, and community pediatrics.

OBSTETRICS AND GYNECOLOGY

Students learn about the body's response to pregnancy, labor, delivery, and the postpartum period – both normal and abnormal. They also become familiar with the diagnosis and treatment of major gynecological disease and various family planning methods.

COMMUNITY/FAMILY MEDICINE

Students acquire the principles of family medicine and their application to community practice. Emphasis is placed on continuous and comprehensive healthcare for people of all ages within the context of their families, social groups and communities, and on understanding influential factors in a population's health and the respective roles of health promotion, prevention and treatment of disease.

EMERGENCY MEDICINE (4 WEEKS)

Students familiarize themselves with the key principles, such as assessment of acutely ill patients, triage, trauma management, and resuscitation.

PSYCHIATRY (4 WEEKS)

Students become familiar with the major categories of mental illness, including diagnosis and methods of therapy. In the process, they learn how to take a psychiatric history and to evaluate mental status.

The order of core clinical modules may vary. Modifications may be necessary to accommodate more established clerkship programs at affiliated teaching hospitals.

Didactic Sessions

Didactic sessions are devoted to enhancing the breadth and depth of medical knowledge and skills already acquired. These lectures are designed to supplement key clinical concepts and apply to all disciplines. Topics include medical ethics and law, communications skills, patient management, etc. Sessions are presented as:

- Live sessions (e.g. lectures, tutorials) delivered by content experts via Elluminate Live
- Pre-recorded audio lectures prepared by content experts and available via Moodle
- MS PowerPoint lectures containing detailed notes sections and video located on Moodle

Arranging Clinical Rotations

Midway through the pre-clinical modules, students are encouraged to contact the student affairs staff to begin making decisions about their clinical training. Options will be discussed with the student, including an update on current OUM clinical affiliations and the rotations available at each site. Depending on the student's plan, preparation will commence based upon the student's needs. Students gather documents commonly requested by clerkship site staff: immunization records, current CV/resume, secure background checks, and other essential information. Upon receipt, OUM staff forward them to each of the student's rotation sites.

Students are asked whether they intend to complete clerkship training at the National Hospital in Samoa, where all core and elective rotations are available, or at one of the regional teaching facilities where OUM has established a formal relationship. A third option, requiring significant collaborative effort between the student and school, is for clinical rotations to be arranged at a facility closer to the student's home. In that instance, the student is asked to recommend hospitals, which OUM staff will research to identify available rotations and whether that facility is an accredited teaching institution. Physician mentors and other physician colleagues may help identify prospective clinical training sites and the appropriate administrative contacts. OUM's clinical faculty may contact these physician connections to discuss possible opportunities.

OUM generally will not make arrangements with a US facility that is not an accredited teaching hospital by the Accreditation Council for Graduate Medical Education (ACGME, also referred to as "green book" hospitals). Medical centers without the official infrastructure in place to enroll, evaluate, and document student rotations may not be able to verify training should a licensing body contact them in the future. Many US states will not license physicians who did not train in accredited

teaching hospitals. The Dean will contact these accredited teaching hospitals, and every effort will be made to accommodate a student's location preference.

Prior to OUM students beginning clinical rotations, the University will negotiate an affiliation agreement with the teaching hospital to ensure that OUM students train with the same academics, privileges, and procedures as all other medical students training at that hospital. OUM students should not contact the teaching hospital directly or attempt to negotiate any aspect of affiliation. Since affiliation agreements can take several months to finalize, students are encouraged to begin dialogue with their physician colleagues and OUM staff as early as possible. Students furthest along in their preclinical curriculum will take priority in clerkship research and negotiation.

NOTE: Students are required to complete at least one four-week clinical clerkship at OUM's teaching hospital in Samoa. Community/Family Medicine is recommended, but it is suggested that students discuss the Samoa clerkship with their Dean prior to beginning the clinical modules.

Time Commitment: CLinical Phase

Between hands-on rotations and completing the clinical curriculum assignments, students will spend 50-60 hours per week completing their clinical modules. Students are advised to discuss their expected schedule with both their on-site clerkship supervisor and the clinical module coordinator. Given the intense workload, students should plan on devoting full time to clinical clerkships – other employment may not be possible or advisable.

Advanced Electives

Upon completion of the core clinical rotations, MD students will take 24 weeks of electives (typically four four-week rotations) for a total of 72 weeks of clinical clerkships. Electives may expand further study into core subjects or introduce students to new areas, focusing on patient management problems, exposure to the specialties, and the acquisition of additional procedural skills prior to beginning a residency program. Electives cover one of three areas:

- Medical elective options include exposure to medicine at a higher level, integrating other specialties and introducing internal medicine subspecialties such as endocrinology, rheumatology, and infectious diseases, as well as pediatric specialties, pain management, and clinical pharmacology.
- Surgical electives provide continued development of surgical techniques and patient management, as well as exposure to subspecialties such as anesthesiology, trauma medicine, orthopedics, ophthalmology, and plastic surgery.
- General electives provide exposure to a broad range of medical and healthcare specialties ranging from forensic medicine and medical ethics to sleep medicine, occupational health, and biostatistics.

ADMISSIONS AND ENROLLMENT

OUM welcomes students from all backgrounds. Students are selected without regard to age, gender, race, religion, national origin, or sexual orientation. While OUM reserves the right to vary requirements based upon standards in a student's country of origin, a basic set of requirements and procedures is applied to all candidates for admission.



Prospective students are encouraged to speak with an OUM admissions counselor early in the admissions process. The counselor will answer questions regarding the medical school's unique curriculum, the timeline for completing medical school and postgraduate training, and can put prospective students in contact with current members of the student body. Upon one's first phone call or e-mail to the Office of Admissions, prospective students are assigned to an admissions counselor who will walk them through the application process and advise them throughout the enrollment process. To speak with an OUM admissions counselor, call the school's US agent toll free at 877-463-6686, or e-mail info@oceaniamed.org.

a) Academic Prerequisites

Applications are accepted from students with all undergraduate majors. A science major is not a prerequisite at OUM, and the University will strongly consider the overall quality and scope of all successfully completed undergraduate work.

All MD candidates must have completed a bachelor's degree, or higher, at an appropriately accredited tertiary educational institution. US students seeking a medical degree also must have completed a full year of college chemistry. As a general rule, for medical school success, applicants are expected to have a credit-level degree or GPA of at least 3.0 on a 4.0 scale, or its equivalent.

b) Admission Tests: MCAT

All candidates are required to sit for the Medical College Admission Test (MCAT), unless granted an exemption by the OUM Admissions Committee. If a candidate has at least five years of clinical experience as a healthcare professional, i.e. a nurse practitioner, physician assistant, respiratory therapist, etc., the standardized admissions test may be waived upon application and the Admissions Committee's approval.

c) English Language Proficiency

All instruction at OUM is in English, and students must be fully fluent in the language. Normally, fluency will be assumed if English is the applicant's first language. Otherwise, fluency may be demonstrated through the applicant's achieving a minimum score on a standardized test administered by IELTS (International English Language Testing Service - at www.ielts.org) or TOEFL (Test of English as a Foreign Language at www.toefl.com). Please see the OUM Catalogue for further details.

d) Application Procedure

The OUM application is online at www.oceaniamed.org. Applicants are required to have an e-mail address for accuracy and ease of communication regarding the status of their application.



In addition to the completed online application, the following items must be submitted in order to apply for admission to Oceania University of Medicine:

- \$100 non-refundable application fee
- Certified or official academic college transcripts (from all institutions where coursework was completed)
- MCAT results or a pre-approved waiver (for healthcare professionals with 5+ years of experience)
- Confirmation of English proficiency (TOEFL score), if not a native speaker
- Essay on why you want to become a physician
- Three original or certified letters of recommendation, on letterhead, dated, and signed (at least one from a physician)
- Professional resume.

The following original documents are required after acceptance to Oceania University of Medicine: (Please see OUM Catalogue for details.)

- Background check or Letter of Good Conduct from State police or federal law enforcement authorities on official letterhead
- Health certification from physician, including immunization records.

The application is submitted electronically and the additional documents should be sent to:

Oceania University of Medicine Box #4573 616 Corporate Way, Suite 2 Valley Cottage, NY 10989-2050

The application fee may be paid by credit card or check made payable to Oceania University of Medicine and sent to:

Oceania University of Medicine P.O. Box 10406 Uniondale, NY 11556-0406. This address is for payments ONLY; no correspondence please.

Applications are not reviewed until all documentation and fees have been received. Applicants with questions should contact the Admissions Office at 1-877-463-6686 (toll free in the USA) or e-mail admissions@oceaniamed.org.

e) Official Transcripts and Recommendation Letters

In addition to the online application, prospective students must provide transcripts for all earned college-level credits, regardless of whether or not a degree was completed at the institution. Transcripts should be forwarded directly to OUM from all of the applicant's colleges and/or graduate schools. Under certain circumstances, official or certified transcripts may be accepted.

Three letters of recommendation from those who know the candidate's academic ability and personal strengths/weaknesses should be forwarded with the application. At least one letter from a physician or surgeon discussing the candidate's potential to practice medicine will strengthen the application. These letters must be original documents on letterhead and include the date and the referee's signature.

f) Selection Interview

If an applicant successfully meets the basic admission requirements, he or she meets with the Registrar via a video Skype screening session. Then, the final component in the admission process is a semi-structured interview, routinely conducted as a telephone conference call with members of the admissions staff and faculty. The interview focuses on personal qualities and attributes agreed to





be essential to both the study and practice of medicine, based on internationally accepted criteria for medical school selection, as well as clinical application. The qualities assessed during the interview are:

- Motivation to become a physician
- Empathy
- Decision-making
- Teamwork
- Flexibility in learning style
- Communication skills

g) Application Review and Acceptance

The University strives to make the application process simple and inexpensive for its applicants. Applications are reviewed upon receipt of all required documents. Official decision regarding acceptance is typically made approximately ten days following the semi-structured interview. The OUM Admissions Committee's decision is final.

Applications will be continuously reviewed until the Introduction to Medicine (ITM) class is filled. Candidates placed on a waiting list will be selected to fill positions that may open up prior to the first day of classes. Students will be notified of acceptance as early as possible prior to the term start date. It is in the applicant's best interest to apply as far in advance as possible to guarantee his/her preferred start date. Completing an application at least eight weeks prior to the desired start date is recommended.

The successful applicant must respond to a letter of acceptance within two weeks and include a non-refundable matriculation fee (10 percent of the first module's tuition fee), which is credited to the first term's tuition. Students must pay the tuition balance for the first term's fees one month before the Introduction to Medicine module begins.

TUITION

OUM aims to keep tuition fees at a constant level in order for the student to budget accordingly. When students matriculate into the program, the current tuition rate remains in effect for the student's first two years (preclinical modules) and for clinical rotations taken in Samoa, as long as the student maintains full-time status and remains in good standing with the University (see below).

New students are required to pay a ten percent non-refundable matriculation fee at the time of acceptance to secure their choice of an Introduction to Medicine (ITM) module enrollment date. The remainder of the ITM tuition must be paid at least 30 days before the term begins.

As tuition fees are set on an annual basis for entering students, please see the enclosed OUM Fact Sheet or the OUM website at www.oceaniamed.org for the current rates. While tuition may be paid individually for each module, advanced payments are discounted. For example, students who pay for five modules in a single advance payment receive a five percent discount.

All tuition fees for modules 2-18 are due four weeks before the term begins, during Registration Week. Invoices are sent to each student via his/her OUM e-mail address four weeks prior to Registration Week, to allow time for questions, arrangements, etc. Students who have not made suitable arrangements by the end of Registration Week may not be able to take the next term. Sufficient time is needed to assign students to appropriate modules, distribute curriculum materials, and provide access to information on Moodle, OUM's Learning Management System. Likewise, students need enough time to acquire textbooks and finalize their mentor visit schedules for the coming term.

Good Standing

Pre-clinical students must enroll in at least 24 weeks, generally three of the five modules, offered during the student's academic year. In addition, there are time requirements for completion of the ten preclinical modules, USMLE Step 1 study period, and clinical modules, to ensure sufficient progress toward graduation. See the OUM Catalogue for more information.

Tuition Payment

Tuition is payable in US dollars by personal check (US banks only), bank draft, money order, wire transfer, or credit card. Payment plans are also available and detailed below. Checks are to be made payable to Oceania University of Medicine (not OUM). Payment must include the student's name and term number. Post-dated checks are not accepted. Checks, bank drafts, or money orders should be sent to:

Oceania University of Medicine P.O. Box 10406 Uniondale, NY 11556-0406 The address above is for payments only; no correspondence please.

A non-refundable convenience fee is charged for all credit card payments. The Credit Card Authorization Form is available on the OUM website at www.oceaniamed.org.

FINANCIAL AID AND PAYMENT PLANS

Financial aid is available to OUM students in the form of scholarships and institutional loans (US students only). All OUM students in good standing are also eligible for payment plans which give students the flexibility to budget and pay for medical school as they progress through the curriculum. Scholarship applications should be e-mailed to the Bursar's Office (bursar@oceaniamed.org), and American students requesting institutional loans may submit applications and supporting materials to e-Med Finance (address on page 27). Prospective students with financial aid questions should contact their admissions counselor or the Office of Admissions at 1-877-463-6686.

SCHOLARSHIPS

A limited number of scholarships are available to incoming students, based on previous academic performance, and to current students who excel during preclinical study. Scholarships may be awarded to incoming students for up to a one-year period (five modules). The student must be a full-time student (taking five modules per year) and excel academically in order to retain the scholarship throughout its full term. Scholarships are available only for the pre-clinical modules (1-10) and not clinical rotations/modules.

INSTITUTIONAL LOANS (US students only)

Creditworthy American students who demonstrate financial need are eligible to receive loans from e-Med Finance to cover as much as 50 percent of tuition. Students on a full scholarship are not eligible for institutional loans during their scholarship period.

To qualify for an institutional loan, an applicant must:

- Be a US citizen or legal permanent resident with a permanent US address;
- Be accepted for admission to Oceania University of Medicine;
- Be enrolled in good standing, successfully completing at least three terms each year;
- Maintain satisfactory academic performance;
- Have a valid Social Security Number; and
- Not be in default on any previous personal or student loans.

Institutional Loan Terms

The interest rate is prime (as published in the Wall Street Journal on January 2 of each year) plus two percent. Rates may change annually, based on prevailing market conditions. Re-payment begins two years after graduation, in monthly

installments calculated over a 10-year period. Should a loan recipient cease to be a student in good standing at OUM, his/her loan immediately matures and becomes payable in full.

Credit Policy

It is policy that the responsibility for funding medical school lies with the student. The student is solely responsible for the payment of tuition regardless of aid eligibility. It is not policy to provide institutional loans or scholarships to students with serious credit problems.

No Influence Upon Acceptance

Credit history or financial aid eligibility is not a defining factor in a candidate's acceptance of admission into OUM. Difficult financial situations, past or present, should not discourage a prospective student from submitting an admissions application. OUM administration is prepared to counsel qualified applicants on deferring admission or selecting payment plans that may allow gifted students to work toward a medical degree.

Loan Application Procedure

Prospective OUM students must submit the loan application together with or after the Application for Admission at least two months before their proposed start date. Current students seeking loans submit the same materials one term before they intend financial aid to begin. Those materials must include OUM Student Loan Application, promissory note (for institutional loans), signed tax returns and W-2 forms for the previous two years (including his/her spouse, if married and filing separately), credit report reflecting the student's most recent credit history and listing credit score, and a copy of official photo identification card issued by a US government agency.

All financial aid documents – scholarship and loan applications, plus the promissory note – may be found at www.oceaniamed.org. Please e-mail scholarship application to bursar@oceaniamed.org and mail loan application and supporting documentation to:

e-Med Finance 9700 South Dixie Highway, Suite 620 Miami, FL 33156

Decision Making Responsibility and Process

The Financial Aid Committee will make its decision on loan applications and will notify applicants with results no later than 30 days after an applicant is accepted or after completed applications are received by e-Med Finance, whichever is later.

Payment plans

Payment plans are available to all OUM students, as long as the student is in good standing and has not abused the payment plan privilege in the past.

Option 1

OUM will accept payment on student accounts in installments as long as one-third of the balance is paid four weeks before classes begin, and the balance due is paid three weeks prior to the final course examination. The installment payment plan is:

- Four weeks before the term begins: one-third of balance
- Upon completion of one week of class: one-third of balance
- Upon completion of four weeks of class: final one-third of balance



Option 2

Monthly payments may be made by check, money order, bank draft, wire transfer, or credit card (American Express, Discover, MasterCard, or Visa). Students may spread tuition payments evenly over an entire 12-month period for the number of modules they plan to take during that time. Payments are due on the first of every month with the exception of the first payment, which is due upon signing the Monthly Payment Plan Agreement. For example, if a student plans to take three modules during a 12-month period, the monthly payment would be the total cost of three modules, divided by 12.



Students who participate in either option and default or fall behind on payments will not receive their module grade and may not register for another module until the account is settled. In addition, the opportunity to continue on a payment plan may be subject to review by the Bursar's Office.

PHYSICIAN MENTORS

Physician mentors play an important role in OUM's medical education program. Mentors do not teach case content or biomedical theory but offer clinical experience and advice relevant to the student's current module. They also are encouraged to participate in research projects and to emphasize the importance of research in professional development. In short, mentors act as a guide, coach, and student assessment aide. Mentors assist in the learning of basic clinical skills by demonstrating them to students. Mentors provide students with a positive role model and:

- explain the career paths, personal, professional, scientific and ethical aspects of life as physicians;
- explain how knowledge gained through case studies can be applied to the diagnosis and management of a patient's problem;
- demonstrate basic clinical skills related to each module's cases;
- complete a checklist assessment of the student's clinical skills, and monitor/report his/her knowledge and attitudes of practicing medicine.

MD students are responsible for finding their mentors and are not allowed to register for their first system-based preclinical module (after e-ITM or foundation year) until doing so.* Mentors must be registered/licensed physicians holding an MBBS or MD degree, in good standing, who are currently in or have completed postgraduate medical education. In the US, a Doctor of Osteopathy (DO) is also an acceptable mentor. The school provides materials for students to present to prospective mentors, who complete an application for review and approval by the Dean.

Students are expected to meet with their mentors at least one hour per week to discuss issues arising from the problem-based learning cases, as well as to observe patientdoctor interactions, and to become familiar with the local healthcare system. Each physician mentor must have Internet access and use e-mail regularly to communicate with the student and the school. Mentors receive a modest honorarium.

Mentors also monitor the student's behavior and attitudes toward patients, other healthcare professionals, and the practice of medicine, in general. This information is requested in the evaluation forms mentors complete at the conclusion of each module. Through the mentor, OUM may monitor student well-being. If a mentor identifies that his/her student appears to be excessively stressed or not coping with the workload, the mentor is asked to contact the school, which will arrange for counseling.

* In order to prevent a potential conflict of interest a student shall not be able to select as his/her mentor anyone related by blood or marriage, e.g., spouse, mother, father, son, daughter, brother, sister, grandparent, or cousin.

ASSESSMENTS AND EXAMINATIONS

OUM has developed a series of assessment and examination instruments to measure the competencies expected of its graduates.







a) Knowledge: Acquisition and Retention

- Weekly quizzes, a basic science qualifying examination, and a final examination at the end of each preclinical module
- United States Medical Licensing Exam (USMLE) Step 1
- Summative clinical knowledge exam during clinical modules
- Clinical Supervisor Reports during core rotations and electives
- USMLE Step 2 CK (Clinical Knowledge)

b) Clinical Skills Development

- USMLE Step 2 CS (Clinical Skills)
- Clinical Supervisor Reports
- Clinical Log Book Assessment
- Clinical Skills Assessment Task (CSAT)
- Introduction to Clinical Medicine Skills Exam (undergraduate) and Clinical Skills Workshop Exam

c) Personal Attributes and Behaviors

- Preclinical Student Assessment form, completed by the student's Physician Mentor
- Preclinical and foundation module faculty assessment
- Clinical Supervisor Reports
- Medical School Performance Evaluation (MSPE) for US residency applications

OUM has developed a pre-clinical question bank (QBank) of multiple choice questions (MCQs) modeled after USMLE Step 1 and Step 2 questions. Many of these questions involve a "clinical vignette" that requires each student to adopt a clinical reasoning process and to test basic science or clinical knowledge. This style of MCQ has been incorporated into OUM's formative and summative assessments, with practice exams available to enhance individual exam preparation.

Foundation and Pre-Clinical Module Assessment

Continuous Assessment

As physicians must perform well on the job every day, OUM medical students are evaluated on a continuous basis. Some of these continuous assessment parameters may include:

- Graded weekly assignments and interaction with fellow students and instructors,
- Weekly live lecture attendance and participation on Elluminate Live sessions, and
- Individual and group assignments including written and oral presentations.

MD students are also assessed by their instructors on the quality of their oral responses to tasks during each week's Elluminate discussion session.

Formative Assessment

MD students are assessed weekly during all preclinical modules in the form of a five-question, multiple-choice quiz based on that week's required reading. This assessment is intended to help the learner identify strengths and weaknesses and to confirm comprehension of the week's reading. Since the quizzes are administered on a weekly basis, the students have the opportunity to concentrate on areas that may need remediation. In this learning environment, students with differing strengths often help one another study and master the material.

Summative Assessment

A summative assessment (examination) is held at the end of each preclinical module. Preclinical module exams for the MD program contains 120 multiple choice questions, half of which are applied knowledge questions containing a clinical vignette and the remainder are recall questions, usually one-line questions assessing isolated facts.

MD students must meet specific criteria before they are allowed to take the preclinical module final exam at the end of each term. Based on an integration of learning objectives from the weekly cases together with other course readings, MD students will take the final exam when they

- meet online participation requirements during their Elluminate sessions,
- earn a score of 75 percent or greater on each weekly quiz administered by their academic advisors.

Students who do not qualify to take an end-of-term exam receive a grade of Incomplete for the module. They should refer to the OUM Student Handbook or the online catalogue's Student Policies and Regulations section for information on academic performance and how to proceed to the next module (www.oceaniamed.org).

Module final exams are administered online and proctored virtually by web-based testing software. Securexam[®] locks student computers into a testing program which monitors activity and prohibits access to browsers or other operating systems during the exam in order to preserve academic integrity.

Grading System

The grading system for OUM module assessments is as follows:

90 percent or above	=	High Distinction (HD)
80-89 percent	=	Distinction (D)
70-79 percent	=	Credit (C)
60-69 percent	=	Pass (P)
0-59 percent	=	Fail (F)

Assessment at the Completion of Preclinical Modules

MD students intending to complete clinical rotations and practice medicine in the United States must pass the USMLE Step 1 as a pre-requisite for entry into the clinical modules and as a graduation requirement. Students who fail the USMLE are not permitted to begin clinical clerkships until after their re-examination and subsequent passing of the USMLE Step 1.

To assist students in their preparation for the USMLE Step 1, OUM has created an intensive program combining proven external resources and internal review, bringing together special areas of emphasis from the curriculum with study strategies and test taking skills. In order to be certified to take USMLE Step 1, the student must score 80 percent or more on the in-house preparation exam.

Passing the USMLE examinations (Steps 1, 2, 3) is a requirement for obtaining a medical license in the United States. Step 1 is an online MCQ examination containing 350 questions covering basic science principles in anatomy, neuroanatomy, embryology, biochemistry, molecular biology, medical genetics, microanatomy, physiology, pathology, microbiology, immunology, pharmacology, behavioral science, and biostatistics. For more information, see www.usmle.org.

Clinical Module Assessment

At the end of each clinical module, OUM faculty and physicians at the affiliated teaching hospital use a four-part assessment tool to determine each student's grade for the completed rotation.

The assessment tools and their numerical breakdowns are as follows:

Clinical Knowledge (CK) Exam

The clinical knowledge exam is a single 45-minute exam of 35 "single best answer" multiple choice questions that derive their content from course objectives. Student mastery of clinical content is collectively assessed again when students take the USMLE Step 2 CK at the completion of their seven core clinical modules.

Clinical Log

Students are required to maintain a log of their clinical experiences during each rotation. A minimum number of entries must be recorded for each activity, including case histories taken, clinical procedures attempted, seminars attended, etc.

Clinical Supervisor's Report

At the completion of each clinical rotation, both core and elective, supervising physicians submit a student performance evaluation. The clinical supervisor awards quantitative marks based upon predetermined criteria including assessment of medical knowledge, clinical competency, skills, and professional behavior. In order to receive a passing grade for each clinical module, students must obtain a 60 percent score on their Clinical Supervisor Reports. If the supervisor report scores less than 60 percent, the student must repeat the entire clinical module at his/her own cost.

Clinical Skill Assessment Task (CSAT)

Given at OUM's affiliated teaching hospital or via Elluminate Live near the end of each module, the CSAT evaluates such clinical proficiencies as history taking, clinical data gathering, physical examination, investigation analysis, clinical problem solving, communication, written referral request, explanation of a routine procedure or disease, counseling and health education, among others. CSAT may be an unmanned station or it may involve a simulated or actual patient.

Clinical Module Final Grade

OUM's Clinical Module Evaluation Form brings together the four-part assessment scores to determine a student's final grade for each rotation. The clinical rotations coordinator notifies students of their final grade within two weeks of completing the clerkship.

Student Feedback

Student remarks are a vital component of the curriculum review process and such feedback helps the clinical curriculum team to improve the quality of rotations. All students in their clinical phase are strongly encouraged to complete the feedback survey.

Assessment at the Completion of Clinical Modules USMLE Step 2 Examination

Students planning to practice exclusively in the US are required to take the USMLE Step 2 CK and CS exams, generally upon completion of the core clinical clerkships. Step 2 Clinical Knowledge (CK) evaluates a student's clinical science understanding, primarily relating to physician task and disease categories. Step 2 Clinical Skills (CS) uses standardized patients, i.e. people trained to portray real patients. The CS case scenarios cover common and important situations that a physician is likely to encounter in clinics, doctors' offices, emergency departments, and hospital settings in the United States. Passing both parts is an OUM graduation requirement. For more information about the exam, visit www.usmle.org.

LICENSING REQUIREMENTS

Before enrolling in OUM, prospective students are encouraged to check with medical licensing authorities where they wish to practice to be certain that foreign medical graduates, in particular OUM students, are permitted to apply for licensure. Applicants should also ask if physicians are permitted to "mentor" foreign medical students in the country, state, or province where they plan to practice.

Attending a World Health Organization-listed medical school and completing certification by the Educational Commission for Foreign Medical Graduates (ECFMG) are the basic licensing requirements for applying to practice medicine in most countries, many US states and many Canadian provinces. OUM meets these requirements. That OUM is accredited by an internationally recognized and respected accrediting body, Philippine Accrediting Association for Schools, Colleges and Universities, will satisfy additional requirements in many jurisdictions.

Post-graduate medical training programs, such as residencies, are not arranged by OUM. Students should know the licensure requirements and procedures of the location where they intend to practice upon graduation. Plans for post-graduate training and medical practice should be discussed in advance with the Dean. Prospective students should ask their admissions counselor for information about post-graduation requirements by local medical licensing authorities and check the websites of those organizations directly.

SAMOA

OUM graduates may be registered to practice medicine in Samoa following a oneyear postgraduate internship. OUM's Samoan scholarship recipients are required to serve the country's health system for four years upon graduation. Citizens from other countries wishing to practice in Samoa must meet the country's immigration requirements and successfully apply to the Samoan Ministry of Health. In fact, being eligible to practice in a foreign medical school's home country helps to meet US licensing requirements in some states.

UNITED STATES

In the US, students who graduated from a school listed in the WHO directory or IMED publication, who have also passed the necessary USMLE examinations, are eligible to apply for licensure in many states. OUM has surveyed all 50 US states, and while each state has its own regulations for licensing physicians, many have indicated that OUM meets their basic requirements. For more information on licensing requirements in the US, see the Federation of State Medical Boards' website at www.fsmb.org.

Matriculation in OUM qualifies the student to sit for the three-part USMLE, and passage of Step 1 and Step 2 are graduation requirements for OUM students who plan to practice in the US. Passage of these exams ensures that the student has the necessary clinical knowledge and patient care skills to begin an internship or residency program under the supervision of an attending physician.

To help students excel on their respective licensing examinations, particularly the USMLE Step 1 and Step 2 exams since they are taken while students are still in medical school, OUM has established an intensive program of review and preparation. The program combines proven external resources with study strategies, test-taking skills, and special areas of emphasis from the medical school curriculum.

OUM also follows the guidelines set by the ECFMG and the Association of American Medical Colleges (AAMC) to prepare student credentials for the National Residency Match Program (NRMP). ECFMG facilitates match applications for foreign medical students, downloading materials into the Electronic Residency Application Service (ERAS). For additional information, visit the NRMP website at www.nrmp.org or the ECFMG site at www.ecfmg.org.

CANADA

Graduates wishing to gain licensure and practice medicine in Canada must earn their medical degree at a recognized medical school, one such as OUM, which is listed in the International Medical Education Directory (IMED) published by the Foundation for Advancement of International Medical Education and Research's (FAIMER). The Medical Council of Canada (MCC) administers the Medical Council of Canada Evaluating Examination (MCCEE) to all foreign medical graduates planning to practice in one of its provinces or territories. The MCCEE is offered at 500 sites in 70 countries through Prometrics testing centers. The MCC also provides a Self Administered Evaluating Examination to test readiness for the MCCEE which is available online 24/7 through the Medical Council of Canada website. Prior to taking the MCCEE, applicants are required to open an account with the MCC's Physician Credentials Repository which will verify one's medical diploma and share credentials with provincial/territorial medical regulatory authorities. Detailed information on the Canadian licensure process may be found through the Medical Council of Canada at www.mcc.ca. Individuals are also encouraged to contact the medical regulatory authority in the province or territory in which they would like to practice.

SAMOA AND THE OUM CAMPUS

Since all MD students are required to complete at least one clinical rotation on campus, they will travel to Samoa at some point before they complete the program. Samoa is a peaceful country of warm and friendly people, gaining its independence from New Zealand in 1962. While the diving is great, the nightlife and entertainment are quite different from that in the USA or most urban areas. American students may find it similar to visiting a Caribbean island nation. Since the medical school is operated in close cooperation with the Samoan government, its future is secure.







Located in the South Pacific, just south of the equator and to the east of the International Dateline, Samoa is a hot and humid country. Two-thirds of the population lives on Upolu, which is also where the capital, Apia, and the school are located. The country's population is approximately 181,000.

The climate is tropical, with an average temperature in Apia of 81.5°F. Relative humidity is high, and the average yearly rainfall is 114 inches and occurs during the wet season from November to April. Umbrellas are advisable, as short, sharp rainstorms are frequent throughout the year.

Dress is light and casual. Local Samoan custom dictates that women wear clothing that extends to or below the knees. Students are expected to wear an OUM student ID while doing patient rounds. Short shorts, short skirts, tank tops or other very casual dress are neither appropriate nor acceptable anywhere on the campus.





All students are given an orientation to local customs, including "dos and don'ts." In general, Samoan culture is very traditional with a strong Christian element. It is important for visitors to respect local customs, especially when traveling to villages and rural areas. Many villages have an evening prayer time that lasts for about 20 minutes.

These websites provide helpful information to students and prospective students:

- Government of Samoa's official web site: www.govt.ws
- Samoa tourism site: www.visitsamoa.ws
- US Department of State: www.state.gov/p/eap/ci/ws

Oceania University of Medicine operates a 10,000 square-foot dedicated teaching facility on the grounds of the National Health Complex in Apia, Samoa, together with the school's primary teaching hospital, Tupua Tamasese Meaole (TTM). The teaching facility houses classrooms, offices, a student lounge, the library, and kitchen facilities. A library located in the Department of Health is also available for OUM student use.

Through collaboration among the Government of Samoa, its Ministry of Health, and e-Medical Education, facilities of the entire Samoan healthcare system are available for teaching OUM's students. TTM is the system's flagship institution. In 2011, the Samoan government began construction of a new US\$32 million TTM Hospital, planned for completion in late 2012, which will include 200-plus patient beds, student accommodations, new teaching facilities and staff offices for OUM. In addition to training at TTM, OUM students rotate throughout the Samoan healthcare system, at small district hospitals, outpatient clinics and rural medical practices – all supervised by OUM clinical faculty and TTM medical staff. There are also eleven nurse-run health centers, seven on the island of Upolu and four on Savaii.



For more information

All prospective MD students interested in obtaining admissions information should direct inquiries to the Admissions Office in care of OUM's US Agent.

info@oceaniamed.org

+1-877-463-6686 (toll free in the US) Admissions Office Oceania University of Medicine Box #4573 616 Corporate Way, Suite 2 Valley Cottage, NY 10989-2050 USA

To reach a student or faculty member directly in Samoa: Oceania University of Medicine National Health Complex Motootua P.O. Box 232 Apia, Samoa Email: studentadmin@oceaniamed.org Telephone: +685-30422 Fax: +685-30291 6

The mission of Oceania University of Medicine is to produce physicians with the requisite knowledge, skills, and attitudes to improve the health of underserved communities in Oceania and beyond, via traditional and innovative instructional modalities to help individuals overcome distance, personal, and professional barriers to realize their calling to the medical profession.





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