Letter to the Editor

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Educating our colleagues and hospital administrators regarding osteopathic medicine

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To the Editor,

I would like to commend many medical institutions for putting strong resources and efforts into diversity, equity, and inclusion (DEI) programs [1–5]. As a son of immigrant parents, I can appreciate wanting to feel welcomed based on one’s ethnicity or race. Furthermore, these DEI programs facilitate the inclusion of many people of diverse ethnicities, races, genders, cultures, and lifestyles [1–5].

However, despite being in a time where DEI programs are working hard to facilitate most everyone feeling appreciated, respected, and equal, by providing education about different religious holidays and traditions, strong training in DEI and against implicit bias, and promoting the use of welcoming proper pronouns, I feel there is a separate area of education in hospitals that is neglected [5], which is educating our colleagues and hospital administrators about osteopathic medicine and osteopathic physicians (DOs). This feeling of exclusion can be felt in daily meetings, verbiage, abbreviations used, and more. For example, it is not uncommon to still see the abbreviation “MD” used to refer to all physicians at an institution, without mention of DOs. Furthermore, in day-to-day conversations it is very common to hear administrators, faculty, or staff say things such as “who is the MD working today?” This occurs despite the rapidly growing number of osteopathic physicians [6]. This of course is a separate area of education and cannot be compared to or made equivalent to the significance and history regarding all social issues represented by DEI programs. Furthermore, osteopathic physicians, as a whole, are not part of a federally protected class, nor am I suggesting they should be. Federally protected classes include race/ color, national origin, religion, sex, gender identity, age, and disability [7, 8]. However, the importance of allowing all physicians to feel welcomed and included remains important.

I have even been told of some DOs whose badges, white coats, or even office doors all had MD written on them, since that was what that institution was used to. These actions could make DOs feel excluded, unequal, or that osteopathic medicine is not respected or accepted. Some have even heard staff making comments such as “it was some DO” in a demeaning and derogatory fashion. I believe that educational programs which successfully address these issues could decrease the potential for any osteopathic physician’s opinion, input, efforts, technical skills, and rendered diagnoses to be undermined for being a DO, by any faculty, staff, house staff, medical students, administrators, and potentially patients, but rather treated as equally important and valid.

I encourage all DOs to do any number of the following suggestions:

– As a DO, seek to be involved throughout your institution to represent osteopathic medicine.
– Encourage the use of neutral terminology such as “physicians” rather than “MDs” in meetings, verbal communications, emails, and job postings. For example, request that physician job postings state “MD or DO” rather than “MD or equivalent.”
– DOs can suggest that educational emails be sent out on the history of osteopathic medicine, the growing number of DOs and osteopathic medical schools in the United States (e.g., 81% increase over the past decade, one of the fastest-growing segments of healthcare, more than one in four medical students choose to attend an osteopathic medical school, etc.) [6]. Additionally, highlight the additional training that is unique to DOs, and the fact that DOs practice in every surgical and medical specialty, and have even served as US Surgeon General, physician to the president, in NASA, and in professional sports [6]. An excellent time for these emails to be sent would be National Osteopathic Medicine Week. This is typically every April and is an excellent time to celebrate osteopathic medicine.

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Osteopathic physicians can volunteer to provide educational presentations to the medical staff, hospital/clinic staff, administrators, and other groups outside of healthcare regarding osteopathic medicine.

Offer to work with your local, state, national, and specialty osteopathic organizations to provide educational information (e.g., presentations, informative material, statistics, website links, etc.) regarding the osteopathic medical profession that both healthcare professionals and the general public can access.

I strongly feel it is a good and opportune time to support and encourage the education of our colleagues and hospital administrators regarding osteopathic medicine and DOs. These actions could make workplaces more welcoming and potentially allow the better recruitment of DOs in the future.

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