United States Medical Licensing Examination® (USMLE®)

2022 USMLE Committees and Task Forces

A Joint Program of the FEDERATION OF STATE MEDICAL BOARDS OF THE UNITED STATES, INC., and NBME
# Table of Contents

## Contents

About USMLE Committees & Task Forces

USMLE Committees

- USMLE Budget Committee
- USMLE Committee for Individualized Review
- USMLE Composite Committee
- USMLE Management Committee
- USMLE Patient Characteristics Advisory Panel

USMLE Test Material Development Committees

- Acute Care TMDC
- Ambulatory Care TMDC
- Behavioral Health TMDC
- Biostatistics and Epidemiology TMDC
- Children’s Health TMDC
- Chronic Care TMDC
- Communications TMDC
- Computer-Based Case Simulations (CCS) Committee
- Gross Anatomy and Embryology TMDC
- Introduction to Clinical Medicine, Physical Diagnosis, Microbiology and Immunology TMDC
- Pathology and Genetics TMDC
- Patient Safety TMDC
- Pharmaceutical Advertisements TMDC
- Pharmacology and Biochemistry TMDC
- Physiology and Cell Biology TMDC
- Scientific Abstracts TMDC
- Women’s Health TMDC

Interdisciplinary Review Committees

- Cross-Step Interdisciplinary Review Committee
- Evidence-Based Medicine (EBM) Interdisciplinary Review Committee
Step 1 Interdisciplinary Review Committee ................................................................. 33
Step 2 CK Interdisciplinary Review Committee .......................................................... 35
Step 3 CCS Interdisciplinary Review Committee ....................................................... 38
Step 3 Interdisciplinary Review Committee ................................................................. 39
Forms Review .............................................................................................................. 43
Step 1 Forms Review .................................................................................................... 43
Step 2 CK Forms Review ............................................................................................. 44
Step 3 Forms Review .................................................................................................... 46
USMLE Task Forces ...................................................................................................... 48
  Legal/Ethical Task Force ......................................................................................... 48
  Multimedia Task Force ......................................................................................... 49
Standard Setting Panels ............................................................................................. 50
  Step 2 Standard Setting ......................................................................................... 50
About USMLE Committees & Task Forces

The United States Medical Licensing Examination® (USMLE®) program is both grateful and proud to list the names of the medical educators, academic researchers, practicing clinicians and other professionals who served as committee or task force members in 2022. Included you will find a list of cohorts comprising individuals whose expertise and dedication made it possible for the USMLE program to continue to serve the state and regional medical boards and the medical education community. These individuals enable the USMLE to achieve its goals of assessing a physician's ability to apply knowledge, concepts, principles and patient-centered skills.

In 2022, 331 individuals contributed to the USMLE examination program by creating and reviewing test materials. Of these, 50% identified as women and 45% as men. More than 24% identify as from a historically underrepresented racial and ethnic group.

![Racial/Ethnic Identity Chart]

Nearly 62% of members held a medical degree; more than 29% held both a medical degree and an additional advanced degree; 6% held a PhD alone; and 2.7% of these members held other degrees from various disciplines. Geographically, more than 31% of committee members were from the Southern United States; nearly 26% were from the Central United States; nearly 28% were from the Northeast; and more than 15% were from the West Coast. More than 21% of members speak one or more languages other than English.

Nearly 5% of committee members reported to be either current or former members of state licensing boards. Individuals from more than 123 organizations served on a USMLE committee.

1Sixteen (5%) USMLE committee and task force members did not report a gender identity.
USMLE Committees

USMLE Budget Committee
Financial arrangements for the USMLE program are managed jointly by FSMB and NBME through the USMLE Budget Committee, which consists of representatives appointed by FSMB and NBME. The committee meets annually to review and approve the statements of budgeted revenue and expenses and to review and revise, when needed, fees charged for USMLE examinations and ancillary fees.

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USMLE Committee for Individualized Review

The USMLE Committee for Individualized Review (CIR) is a standing committee appointed by the USMLE Composite Committee. It exercises the authorities and responsibilities described in the USMLE Policies and Procedures regarding irregular behavior, score validity and anomalous performance.

A majority of the committee’s time is spent reviewing cases of possible irregular behavior. Irregular behavior includes any action by applicants, examinees or others that could compromise the validity, integrity or security of the USMLE process. Examples of irregular behavior include, but are not limited to, communicating or attempting to communicate about test items, cases and/or answers; altering or misrepresenting examination scores or outcomes; or possessing unauthorized materials in the secure testing area. The CIR carefully considers all available pertinent information and evidence when rendering a decision. If the committee determines that an individual engaged in irregular behavior, an annotation to that effect will appear on applicable score reports and transcripts for that examinee. Further, the committee has the authority to report their findings to the Federation of State Medical Boards’ Physician Data Center and/or other legitimately interested entities as well as bar the individual from future administrations of USMLE.

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The USMLE Composite Committee was established jointly by the Federation of State Medical Boards and NBME to provide oversight for and direct the operation of the USMLE, including establishing policies and considering their fiscal impact upon the USMLE program. The Composite Committee is also responsible for approval of examination objectives and blueprints; test formats and changes in test length; score reporting policies; test administration policies; and policies for examination security and integrity, irregular behavior, score validity and anomalous performance.

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The USMLE Management Committee, with final approval from the Composite Committee, approves the design of each USMLE examination or its components; monitors and coordinates test development and review committees; oversees standard setting for each exam; advises on test administration and test accommodations issues; reviews and responds to reports from external groups; advises program staff on issues related to new test formats and changes to exams; reviews trends in examinee counts and performance; and monitors/evaluates implications of national trends in medicine and education. Committee members include individuals with experience on state medical boards, medical school faculty and governance leaders from schools across the United States, practicing physicians, residents and public members.

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The USMLE Patient Characteristics Advisory Panel provides guidance for USMLE governance and test development in regard to patient characteristics in exam materials.

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