



AMERICAN BOARD OF
EMERGENCY MEDICINE

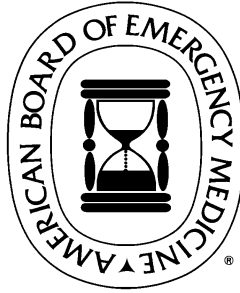
CERTIFICATION
POLICIES
AND
PROCEDURES
2011



The ABEM Logo

In 1977 the original Board of Directors chose a classic logo design which attempted to represent both the contemporary nature of the specialty yet acknowledged the traditional path it had taken in its development.

The hourglass and the proportion of sand remaining acknowledges that time is a critical factor for both practitioners of Emergency Medicine and their patients.



American Board of Emergency Medicine

Certification Policies and Procedures

2011

The mission of the American Board of Emergency Medicine is to protect the public by promoting and sustaining the integrity, quality, and standards of training in and practice of Emergency Medicine.

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Future Examination Dates Inside Back Cover

ABEM, at its discretion, reserves the right to add to, eliminate, or modify its credential requirements, categories of application, and fees. Appropriate notice of such alterations will be published as necessary.

This book is revised annually and supersedes all previous publications of the American Board of Emergency Medicine regarding policies and procedures.

Introduction

This book is published by the American Board of Emergency Medicine (ABEM) to outline the policies and procedures for the certification process.

Background

ABEM is a national medical specialty board that provides a certification process for physicians who successfully complete accredited training in Emergency Medicine. ABEM is a member board of the American Board of Medical Specialties (ABMS).

The ABEM Mission

The mission of the American Board of Emergency Medicine is to protect the public by promoting and sustaining the integrity, quality, and standards of training in and practice of Emergency Medicine.

The Board pursues that mission by being part of a process that provides the public with well-trained, high-quality emergency physicians. The Board believes that well-trained, high-quality emergency physicians will always be best for the American public.

In pursuit of the Board's mission, "it's not just the test... it's the training."

ABEM Policy on Bias

It is the policy of ABEM that each applicant or candidate for certification, recertification, or Maintenance of Certification (MOC) is entitled to, and will receive, an unbiased evaluation of his or her application and performance. All ABEM volunteers and staff are expected to maintain a standard of ethics that prohibits any misuse of position, protects the validity of the credentialing, examination, and MOC processes, and assures that each candidate will be evaluated solely on the merits of his or her application and performance. All such volunteers and staff are expected to refrain from comments or actions that could reasonably be perceived as discriminating against any applicant or candidate based on his or her age, race, gender, sexual preference, country of origin, or other status unrelated to the merits of his or her application and performance.

Steps to Achieve ABEM Certification

There are three steps to achieve certification:

- 1) Apply for certification and meet ABEM credential requirements;
- 2) Pass the qualifying examination;
- 3) Pass the oral certification examination.

Physicians who successfully complete these steps are certified as diplomates of ABEM for a period of ten years. To maintain certification beyond the ten years, diplomates must participate in the Emergency Medicine Continuous Certification program (EMCC), summarized in the EMCC section of this book, during their certification.

Overview of the Certification Application and Examination Process

The certification process begins with successful completion of an accredited residency program in Emergency Medicine. Residency graduates apply to ABEM for certification and submit an application fee. ABEM reviews their credentials and approves applicants who meet credential requirements.

When physicians' applications are approved, they may register with ABEM for the qualifying examination online and pay the examination fee, then schedule an appointment with ABEM's testing vendor to take the qualifying examination. ABEM will administer the computer-delivered qualifying examination Monday, November 7 through Saturday, November 12, 2011, in over 200 testing centers throughout the United States and Canada. ABEM scores and mails qualifying examination results within 90 days of the last day of the examination administration.

Physicians who pass the 2011 qualifying examination are randomly scheduled for one of the two oral certification examinations to be administered in 2012. The 2012 oral certification examination dates are April 28 - 30 and October 27 - 29. Physicians who pass the 2011 qualifying examination should keep these dates open, as assignment to the examination is random, and requests for specific seat assignments are not accepted.

Each physician who receives an oral certification examination assignment must accept the assignment by registering and paying the examination fee. ABEM scores and reports oral certification examination results within 90 days of the last day of the examination administration and issues a certificate to each physician who passes the oral certification examination.

Scope of this Book

The information, policies, and procedures described in this book apply to the certification application, qualifying examination, and oral certification examination processes outlined above. In addition, subspecialty certification and MOC processes are summarized.

Purposes of the American Board of Emergency Medicine

The American Board of Emergency Medicine is sponsored by the American College of Emergency Physicians, the Society for Academic Emergency Medicine, and the American Medical Association. The Board was formed for the following purposes as outlined in Article II of the ABEM Bylaws:

The ABEM purposes are scientific and educational:

- (a) To improve the quality of emergency medical care;
- (b) To establish and maintain high standards of excellence in the specialty of Emergency Medicine and its approved subspecialties;
- (c) To improve medical education and facilities for training emergency physicians and subspecialists in approved ABEM subspecialties;
- (d) To evaluate specialists in Emergency Medicine who apply for initial certification and continuous certification and subspecialists in approved ABEM subspecialties who apply for subcertification and continuous certification;
- (e) To grant and issue, to qualified physicians, certificates or other recognition of special knowledge and skills in Emergency Medicine and approved ABEM subspecialties and to suspend or revoke same;
- (f) To serve the public, physicians, hospitals, and medical schools by furnishing lists of those diplomates certified by the American Board of Emergency Medicine.

Organization of the Board

The Board of Directors of the American Board of Emergency Medicine (ABEM) is comprised of emergency physicians. Officers are chosen from among the Board members. The Board includes members who were elected from individuals nominated by each of the sponsors, other Emergency Medicine organizations, and ABEM diplomates. ABEM is a non-profit corporation, and the fees from physicians are used solely for defraying actual expenses incurred in conducting examinations and carrying out the business of the Board. The directors of the Board serve without compensation.

The following is a list of the Board directors and officers as seated at the close of the winter 2011 Board of Directors meeting, and ABEM executive staff.

Executive Finance Committee

Mark T. Steele, M.D., President
Richard N. Nelson, M.D., President-Elect
Debra G. Perina, M.D., Immediate-Past-President
John C. Moorhead, M.D., Secretary Treasurer
James H. Jones, M.D., Member-at-Large
J. Mark Meredith, M.D., Senior Member-at-Large

Directors

Michael L. Carius, M.D.	David A. Kramer, M.D.
Robert E. Collier, M.D.	Jo Ellen Linder, M.D.
Francis L. Counselman, M.D.	Catherine A. Marco, M.D.
Joel M. Geiderman, M.D.	Rebecca Smith-Coggins, M.D.
Barry N. Heller, M.D.	Robert W. Strauss, M.D.
Terry Kowalenko, M.D.	

Executive Director

Earl J. Reisdorff, M.D.

Associate Executive Directors

Susan K. Adsit - Academic and Board Relations
John H. Diephouse, SPHR - Operations
Anne L. Harvey, Ph.D - Evaluation and Research

Step 1: Certification Application

Overview of Step 1: Apply for Certification

Physicians with appropriate residency training in Emergency Medicine can apply to begin the process that leads to ABEM certification. Graduates of an accredited EM or an approved combined residency program may apply for certification. During the application phase, applicants, residency programs, and others provide information that enables ABEM to verify that applicants meet ABEM credential requirements. Physicians whose applications are approved may register for and take the qualifying examination.

2011 Certification Application Schedule and Fees*

Dates	Events/Actions	Fees
Mid-April 2011	ABEM sent certification applications to graduating residents via their program directors.	
Postmarked April 15 - June 30, 2011	Physicians return application materials to ABEM, including payment of application fee.	\$400 Application Fee
Postmarked July 1 - August 1, 2011	First late period for physicians to return application materials and late fees to ABEM.	\$550 Total Fee
Postmarked August 2 - September 30, 2011	Second and final late period for physicians to return application materials and late fees to ABEM.	\$1,235 Total Fee
Mid-July 2011	ABEM begins sending approval letters and qualifying examination registration information to physicians.	

*All fees are payable to ABEM in U.S. dollars; all dates and fees are subject to change without notice.

Credential Requirements

Physicians seeking ABEM certification must fulfill the following credential requirements.

Professional Education

The physician must have graduated from a medical school approved by the Liaison Committee on Medical Education (LCME) or the American Osteopathic Association's Commission on Osteopathic College Accreditation.

Emergency Medicine Residency

Each physician must have successfully completed a minimum of thirty-six (36) months of post-medical school training, under the control of an Emergency Medicine residency program, accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the Royal College of Physicians and Surgeons of Canada (RCPSC).

In cases where an Emergency Medicine residency program is longer than thirty-six (36) months, the physician must successfully complete all years of training for which the Emergency Medicine residency program is accredited to meet the Board's credential requirements for certification.

Physicians who began their Emergency Medicine training prior to July 1, 1987, should contact ABEM for eligibility requirements.

ABEM also recognizes specific combined training programs that have been approved in advance by the respective sponsoring boards:

- **Emergency Medicine/Internal Medicine Combined Training Program.** ABEM and the American Board of Internal Medicine (ABIM) have approved guidelines for five-year training programs that, when successfully completed, will provide physicians the option of certification in Emergency Medicine and Internal Medicine.
- **Emergency Medicine/Internal Medicine/Critical Care Medicine Combined Training Program.** ABEM and ABIM have approved guidelines for six-year training programs that will provide physicians the option of certification in Emergency Medicine, Internal Medicine, and Critical Care Medicine.
- **Emergency Medicine/Pediatrics Combined Training Program.** ABEM and the American Board of Pediatrics (ABP) have approved guidelines for five-year training programs that, when successfully completed, will provide physicians the option of certification in Emergency Medicine and Pediatrics.
- **Emergency Medicine/Family Medicine Combined Training Program.** ABEM and the American Board of Family Medicine (ABFM) have approved guidelines for five-year training programs that, when successfully completed, will provide physicians the option of certification in Emergency Medicine and Family Medicine.

Medical Licensure

Physicians who apply for certification more than one year after graduating from an Emergency Medicine residency program must hold a medical license that is current, active, valid, full, unrestricted, and unqualified in at least one jurisdiction in the United States, its territories, or Canada, and in each jurisdiction in which they practice. All licenses a physician holds must be valid, unrestricted, and unqualified.

Physicians who graduate from their EM residency programs after October 31, 2010, and apply for certification in 2011 are not required to hold a medical license when they apply for certification or when they take the qualifying examination if they take it in 2011.

Physicians who enter a fellowship program within six months of completing their EM residency, and are enrolled in the fellowship program at the time they apply for certification, are not required to hold a medical license for their applications to be approved. If these physicians are enrolled in the fellowship program when they take the qualifying examination, or if they graduate from the fellowship program the same year they take the qualifying examination, they are not required to hold a medical license when they take the qualifying examination.

Applicants who are not required to hold a medical license must report to ABEM they do not hold a medical license. If they hold one or more medical licenses, they must report those licenses to ABEM and those licenses must be valid, unrestricted, and unqualified.

ABEM uses a third-party agency to verify the status of applicants' and candidates' medical licensure.

For additional detail, see the ABEM [Policy on Medical Licensure](#), a link to which is also in the ***Certification-Related Policies*** section of this book.

Continuing Medical Education

Documentation of continuing medical education (CME) is not required if a physician applies to ABEM within one year after graduating from an Emergency Medicine residency.

Documentation of CME is required if a physician applies to ABEM more than one year following graduation from an Emergency Medicine residency. Starting one year after the physician's date of graduation and continuing until the year the physician submits an EM certification application, the Board requires that the physician complete and report for review an average of 50 hours of CME per year in Emergency Medicine.

CME hours reported can be within any category, including but not limited to, Category I credit. Approval by any specific organization is not required. CME can include continuing education courses, self-assessment examinations, journal readings, online or audio educational programs, and any similar educational activities. Applicants are required to list CME activities in the section provided on the certification application. Documentation such as certificates, printouts, etc., should not be included.

The CME requirement will be more specific for physicians who graduated from their residency programs after June 30, 2006, and who apply for certification more than three years after their graduation date. For these physicians, of the required CME, at least 50 hours per year must be completed in each of the three years immediately preceding the year in which the application is submitted. This requirement could affect some 2011 applicants.

Certification Application Process

Obtaining a Certification Application

Physicians applying for certification must complete and submit an original, notarized 2011 certification application. Only the 2011 certification application will be accepted.

ABEM prepared personalized application forms for residents graduating between November 1, 2010, and October 31, 2011, and sent the forms to residency directors in mid-April for distribution.

Physicians who graduated from an ACGME or RCPSC-accredited EM residency program prior to April 15, 2011, may request a 2011 application by calling the ABEM office.

Residents who expect to graduate between July 1 and October 31, 2011, should submit their applications during the regular 2011 application period, following the same process and deadlines as those who graduate before July 1. ABEM will make every attempt to complete the credentialing process so these physicians can register for, schedule, and take the 2011 qualifying examination.

Residents who do not graduate on or before October 31, 2011, are not eligible to apply for certification in 2011. If a resident submits a 2011 application, but does not graduate by October 31, 2011, the application will not be accepted, and the physician must reapply in a future year.

Completing the Certification Application

Instructions for completing the certification application are included with the application. It is extremely important the information on the application be typed or clearly printed, and every section bears an accurate entry.

Falsification of any part of the application or the required documentation may result in revocation of any certificate issued or other appropriate sanctions as described in the application.

Physicians who have questions about the credential requirements or any portion of the certification application should call the ABEM office for clarification and assistance before submitting the application.

Submitting the Application

ABEM strongly encourages physicians to submit their applications well before the deadline date and to submit them using a method that provides confirmation of delivery and provides ABEM with proof of postmark date.

Physicians should ensure the postmark date is clearly discernable, since the postmark date is used to determine whether the application will be processed within the regular application period, within a late period, or not at all in 2011. If the postmark is not legible, the date ABEM receives the application will be used instead of a postmark date.

The following items must be submitted for a certification application to be complete:

1. A completed, signed, and notarized original *Certification Application – 2011*.
2. The application fee in U.S. funds. Fees may be paid by using the *Credit Card Authorization* form, or by sending a check or money order payable to ABEM. Post-dated checks will not be accepted. Please see the *2011 Certification Application Schedule and Fees* section to determine the amount to submit. The application cannot be processed until ABEM receives the full fee. The application fee covers the cost of processing the application only. It does not cover the qualifying examination fee. **The application fee cannot be refunded under any circumstances.**
3. Additional items included in the application materials or referred to in the application instructions, if applicable. These may include: documentation of name change or an *Americans with Disabilities Act (ADA)* request form.

ABEM recommends physicians retain a photocopy of each form and supporting document submitted to the Board. Applications and related information become the property of the American Board of Emergency Medicine and will not be returned to the physician.

ABEM Application Processing

ABEM processes applications in the order in which they are received. Applications are not considered for approval unless they are complete and all required items have been submitted, including appropriate payment.

ABEM will verify physician credentials as part of application processing. ABEM reserves the right, at any time, to request additional documentation pertaining to the application and any information requested on the application. ABEM may solicit such information from sources listed on the application, any licensing board, other persons, and third party organizations. Should any questions or problems regarding credentials arise, ABEM will contact the physician.

Certification applications of physicians who meet ABEM credential requirements are approved. ABEM mails approval letters beginning in mid-July.

All credential decisions are communicated in writing (by email when possible) and signed by the president, secretary-treasurer, or as otherwise specified in ABEM policies and procedures.

Physicians whose applications cannot be approved by November 2, 2011, will not be able to take the 2011 qualifying examination. If an application is not approved by April 1, 2012, the application will be closed. Physicians with closed applications must submit new applications if they want to apply for certification. They must meet all the requirements in place at the time they submit the new application.

Late Certification Application Processing

Physicians whose certification applications are postmarked July 1 through August 1, 2011, are charged a late fee in addition to the regular certification application fee.

Physicians whose certification applications are postmarked August 2 through September 30, 2011, are charged a late fee and a deadline exception fee in addition to the regular certification application fee. Please see the **2011 Certification Application Schedule and Fees** for information.

Appeals

The American Board of Emergency Medicine maintains an application appeal process for physicians whose applications are determined not to fulfill the credential requirements. Instructions for following this process

are included in the letter notifying the physician that the application did not meet ABEM credential requirements.

Step 2: Qualifying Examination

2011 Qualifying Examination Schedule and Fees*

Dates	Events/actions	Fees
Qualifying Examination		
Late April – Late September 2011	ABEM sends qualifying examination registration information to physicians with approved, active, certification applications.	
April 29 – October 27, 2011	Qualifying examination registration is available online to physicians with approved, active, certification applications.	\$930 Examination Fee
October 28 – November 3, 2011	Qualifying examination registration is available online with a late fee.	\$1,900 Total Fee
April 29 – November 12, 2011	Physicians who have registered and paid, schedule examination appointments with ABEM's testing vendor, Pearson VUE.	No additional fee
November 7 – 12, 2011	ABEM administers the qualifying examination.	
Mid January 2012	ABEM mails qualifying examination results.	
Optional ABEM Computer-Delivered Testing Experience		
April 29 – November 10, 2011	Optional testing experience registration is available online.	\$125
April 29 – November 11, 2011	Physicians who have registered and paid, schedule appointments with Pearson VUE.	No additional fee
April 29 – November 11, 2011	ABEM administers the optional testing experience.	

*Fees payable to ABEM in U.S. dollars; fees subject to change without notice.

Veterans Administration (VA) GI Bill Benefit

As of 2003, the VA will reimburse qualified physicians for the qualifying examination fee and the oral certification examination fee. See the VA website, www.gibill.va.gov, for details and for reimbursement forms. Please note that this benefit is offered through the VA, not through ABEM.

About the Qualifying Examination

The qualifying examination is a comprehensive multiple-choice question examination that covers the breadth of Emergency Medicine. *The Model of the Clinical Practice of Emergency Medicine* (EM Model) forms the basis of the ABEM in-training, qualifying, and ConCert examinations. The qualifying examination is administered once per year at over 200 Pearson VUE professional computer-delivered testing centers throughout the United States and Canada.

Qualifying Examination Registration and Scheduling Procedures

Physicians whose certification applications have been approved and are active may register and pay online for the 2011 qualifying examination. After registration is completed, it can take up to 24 hours before the physician is authorized to schedule an appointment. When the physician is authorized, he or she can go online to the Pearson VUE website or call the Pearson VUE call center to schedule an appointment day, time, and location to take the examination.

ABEM strongly recommends physicians register for the qualifying examination as soon as they receive registration information from ABEM, and schedule an appointment as soon as they are authorized, to increase the chance of obtaining an appointment date and location of their choice.

Examination Registration Information and Timing

ABEM typically sends the information physicians need to register for the qualifying examination with the certification application approval letter. Current year residency graduates who complete their residency programs successfully and submit complete certification applications by June 30, 2011, should start receiving application approval letters and qualifying examination registration information by email in mid-July. ABEM will continue sending registration information to physicians when their applications are approved. ABEM will not send 2011 qualifying examination registration information to physicians whose applications are approved after November 2, 2011.

Previous year residency graduates who submit complete applications should start receiving application approval letters and qualifying examination registration information within two weeks after ABEM independently verifies the physician successfully completed EM residency training.

ABEM will send examination registration information to previous year candidates who have reactivated their status to take the qualifying

examination within two to three weeks of receiving complete reactivation requests.

Qualifying Examination Registration Procedures

Physicians must register online through the ABEM website, www.abem.org, on or before October 27, 2011, to avoid paying a higher examination fee. They may register October 28 through November 3, 2011, by paying the higher examination fee. Please see **2011 Qualifying Examination Schedule and Fees** for information.

Note that the ABEM registration system is not compatible with the Safari browser. Mac computer users should be able to use the Firefox browser, available free from www.mozilla.com.

During online registration, physicians select the examination for which they are registering, provide information about their medical licensure, verify their contact information, and pay for the examination. Physicians who prefer not to pay online will have the option of printing a payment form and sending it to ABEM by U.S. mail together with the examination fee. The payment form and fee must be postmarked on or before October 27, 2011, to avoid late fees, or October 28 through November 3, 2011 with late fees. Registration will not be complete until payment has been posted.

ABEM will send physicians who have registered for the examination an *Information for Qualifying Examination Candidates* book approximately four weeks prior to the first day of the qualifying examination administration.

Examination Scheduling Procedures

Upon completing registration for the qualifying examination, the ABEM online registration system will display the necessary information for scheduling an appointment to take the examination with Pearson VUE, ABEM's testing vendor. ABEM will also send one or two emails to physicians who have entered a valid email address during the registration process. The first email will be a confirmation of payment. The second email will be sent when Pearson VUE has accepted ABEM's authorization to allow the physician to schedule an appointment to take the examination. Physicians are responsible for removing any spam blockers so they can receive the emails.

Pearson VUE will only schedule physicians who have registered with ABEM and whom ABEM has authorized to schedule an appointment.

ABEM suggests physicians not plan activities that cannot be rescheduled during the week of the qualifying examination. In the event that ABEM or Pearson VUE must cancel a physician's appointment due to an

emergency, the physician may wish to be available for a rescheduled appointment.

After scheduling an appointment, Pearson VUE will send physicians an appointment confirmation email. This email includes important information about the time and location of the examination appointment. Physicians are responsible for removing any spam blockers so they can receive the email.

Examination Accommodations for Candidates with Disabilities

ABEM will consider requests for reasonable accommodations in its examination procedures for physicians with documented disabilities. All accommodations for the 2011 qualifying examination must be requested in writing with appropriate documentation of the disability and the accommodation requested, and must be approved by ABEM.

Physicians who want to request accommodations should notify ABEM immediately, but no later than September 12, 2011. Although physicians can notify ABEM during or after registering for the examination, it is best to notify ABEM prior to registration. ABEM will assist the physician to register for and schedule an appointment to take the examination.

ABEM will also consider reasonable requests for “courtesy” accommodations from physicians whose disabilities are not permanent or do not meet the legal definition of a disability.

The procedures for requesting ADA-related accommodations or courtesy accommodations are described in the [Policy on Americans with Disabilities Act](#), a link to which is also in the **Certification-Related Policies** section of this book.

Rescheduling, Cancelling, and Withdrawing

A physician may attempt to reschedule a qualifying examination appointment at any time during the same examination administration, providing appointments are available. Each time the physician reschedules less than 24 hours prior to the time of the existing appointment, ABEM may charge a \$130 rescheduling fee. If the physician attempts to reschedule an appointment and the desired appointment time and location are not available, the physician may keep the existing appointment, accept the new appointment offered, or cancel the existing appointment.

A physician may cancel an examination appointment at any time by calling Pearson VUE and asking to cancel. Physicians who cancel an appointment with Pearson VUE at least one day prior to the appointment

also have the option to withdraw from the examination and receive a partial refund of the examination fee. Physicians must send ABEM a written request to withdraw to receive a refund of the examination fee less a 10% administrative fee, postmarked or faxed no later than one business day prior to the appointment date. If the physician registered for the examination but did not schedule an appointment, the request to withdraw must be postmarked no later than November 11, 2011.

Physicians are required to appear for their qualifying examination appointments 30 minutes prior to the start of the appointment. This allows time for the check-in procedure. Pearson VUE may be able to accommodate candidates who arrive up to 30 minutes after their appointment time. After that, Pearson VUE will seat the physician the same day only if seats are available. The physician may attempt to reschedule to another day within the examination administration. If the physician is able to reschedule, ABEM may charge a rescheduling fee.

The [Policy on Fees](#) describes in more detail physicians' options for receiving a refund of qualifying examination fees. The [Policy on Examination Administration in Testing Centers](#) addresses late arrivals, missed appointments, interrupted, or cancelled examinations, and scoring and rescheduling options. Links to these policies are also in the **Certification-Related Policies** section of this book.

Declining the 2011 Qualifying Examination

Physicians whose 2011 certification applications are approved on or before November 2, 2011, are automatically assigned to the 2011 qualifying examination. Physicians who are assigned to the 2011 qualifying examination, but who have not registered for the examination by the final registration deadline, November 3, 2011, are considered to have declined their assignments. They must take the qualifying examination in or before 2014, or their application files will be closed, and they must reapply if they wish to take a future qualifying examination.

If physicians decline their 2011 examination assignments, their certification applications will become inactive. They must reactivate in order to take a future qualifying examination, following the reactivation schedule and paying the reactivation fees of the year in which they reactivate. ABEM will send reactivation materials to physicians with inactive applications between mid-April and mid-May each year.

The [Policy on Maintaining Open and Active Certification Applications](#) explains the three-year requirement to take the qualifying examination and describes the reactivation process. A link to it is also in the **Certification-Related Policies** section of this book.

Reactivating to Take the 2011 Qualifying Examination

Physicians whose certification applications are inactive in 2011 because they did not take the qualifying examination, or took but did not pass the qualifying examination in a previous year, may reactivate their applications to register for the 2011 qualifying examination.

2011 Reactivation Schedule and Fees

Dates	Events/actions	Fees
Mid-April to mid-May, 2011	ABEM sent reactivation materials to physicians whose applications were inactive.	
Postmarked through October 1, 2011	Physicians return reactivation materials to ABEM, including payment of reactivation fee.	\$220 Reactivation Fee
Postmarked October 2 - October 19, 2011	Physicians return reactivation materials to ABEM, including payment of late reactivation fee.	\$495 Reactivation Fee

Please see the section, **2011 Qualifying Examination Schedule and Fees**, for examination registration dates and fees.

Taking the Qualifying Examination

The qualifying examination is an eight-hour, secure, proctored examination administered on computers in Pearson VUE professional testing centers.

To protect examination validity and ensure a consistent, fair examination administration across all its testing centers, Pearson VUE maintains strict security measures, including tight restrictions on what personal items may be taken into the testing room. These security procedures also include multiple checks to confirm each examinee's identity, such as taking a digital signature, photograph, and palm vein pattern image. Note that this information is used solely for the purpose of confirming identity, is held in the strictest confidence by Pearson VUE, and is not released to any third parties.

Qualifying Examination Content and Format

The qualifying examination contains approximately 305 single-best-answer, positively-worded, multiple-choice questions. Between 10% and 15% of the questions will have a pictorial stimulus. Each examination appointment is approximately eight hours in length, with approximately six and one-half hours devoted to actual testing time.

The qualifying examination has a passing standard of 75.

ABEM reserves the right to conduct and report research studies of its examinations and its examination data to benefit the specialty and for purposes of quality control and examination development. Individual candidate confidentiality will not be violated or compromised.

ABEM also reserves the right to include in any examination certain questions or cases for the purposes of research and validation. These items will not enter into the scoring for the purpose of achieving certification.

Qualifying Examination Content Specifications

The EM Model forms the basis of the ABEM in-training, qualifying, and ConCert examinations. The lists that follow describe the relative weight given to different elements of the EM Model in constructing these examinations. The complete EM Model is published in *Annals of Emergency Medicine* [Ann Emerg Med. 2011 Mar; 57(3): e1-e15]. It is also available on the ABEM website, www.abem.org, under "Publications".

Listing of Conditions & Components

1.0	Signs, Symptoms and Presentations	9%
2.0	Abdominal & Gastrointestinal Disorders	9%
3.0	Cardiovascular Disorders	10%
4.0	Cutaneous Disorders	2%
5.0	Endocrine, Metabolic & Nutritional Disorders	3%
6.0	Environmental Disorders	3%
7.0	Head, Ear, Eye, Nose & Throat Disorders	5%
8.0	Hematologic Disorders	2%
9.0	Immune System Disorders	2%
10.0	Systemic Infectious Disorders	5%
11.0	Musculoskeletal Disorders (Non-traumatic)	3%
12.0	Nervous System Disorders	5%
13.0	Obstetrics and Gynecology	4%
14.0	Psychobehavioral Disorders	3%
15.0	Renal and Urogenital Disorders	3%
16.0	Thoracic-Respiratory Disorders	8%
17.0	Toxicologic Disorders	4%
18.0	Traumatic Disorders	11%
	Appendix I: Procedures & Skills	6%
	Appendix II: Other Components	3%
	Total	100%

Qualifying Examination Content Specifications continued...

Acuity Frames	Target ($\pm 5\%$)
Critical	27%
Emergent	37%
Lower Acuity	27%
None	9%

Physician Tasks

For this dimension, the Board has assigned the following specific percentage weights to the Modifying Factor of age:

Pediatrics: 8% minimum

Geriatrics: 4% minimum

Examination Preparation

The American Board of Emergency Medicine neither endorses nor makes any recommendation for specific conferences, textbooks, or other publications used as preparation and review for any Board examination.

The Board has no connection with, nor does it endorse or participate in the preparation of any of the following:

1. Any programs which involve mock training sessions for the qualifying or oral certification examination, or
2. Books or other publications which purport to instruct candidates how to take its examinations.

ABEM Optional Computer-Delivered Testing Experience

ABEM offers an optional, short, computer-delivered testing experience in Pearson VUE testing centers. This offering is designed for candidates who have not previously taken a computer-delivered examination in a testing center. Physicians have an opportunity to see how an actual ABEM examination is formatted on the computer, practice navigating a computer-delivered demonstration examination, and experience the same security procedures and opening and closing activities of an actual ABEM examination.

To allow candidates to practice navigating a computer-delivered examination, ABEM provides a 20-25 question demonstration test that candidates can take during the computer-delivered testing experience. The demonstration test is not designed to assist candidates in preparing for the content of an actual ABEM examination. The demonstration test will not be scored, and the questions do not represent the examination content, subject matter, or level of difficulty of an actual ABEM examination. Physicians may register for the optional testing experience online through the ABEM website, www.abem.org.

Notification of Results

Physicians will be notified of examination results in writing within 90 days of the examination administration. **To ensure the confidentiality of examination results, all information will be sent to physicians in written form, by mail only. Results will not be provided over the telephone, via fax, on the ABEM website, or by email.**

Physicians who wish to receive their results at a temporary or new address may update their address online, or provide a change of address in writing with the physician's signature, sent to ABEM either by mail or fax. ABEM will post on its website, www.abem.org, the date on which results are mailed.

Physicians who pass the qualifying examination are automatically scheduled for one of the two oral certification examinations administered in the following calendar year. Physicians who do not pass the qualifying examination will receive information on retaking the examination in their results mailing.

Retaking the Qualifying Examination

Physicians who do not pass the qualifying examination may retake it in a future administration. They may retake it as often as necessary, but may not retake it in the same administration in which they did not pass it.

The certification applications of physicians who do not pass the examination become inactive. Physicians must reactivate by submitting a written reactivation request and the reactivation fee for the year in which they want to retake the qualifying examination. Reactivation fees and deadlines will be published on the ABEM website, www.abem.org, by April of each year.

Physicians must retake the qualifying examination within three years of the examination administration in which they did not pass. The [Policy on Maintaining Open and Active Certification Applications](#), a link to which is also in the **Certification-Related Policies** section of this book, explains in more detail the requirement to retake the examination within three years and describes the reactivation process.

Verification of Status within the Certification Process

ABEM does not consider a physician's record to be in the public domain. When ABEM receives an inquiry regarding a physician's status in the certification process, a general but factual statement is provided indicating the physician's status within the application or examination process.

Status information is provided to a third party only when accompanied by a release signed by the physician and a processing fee. Contact ABEM for current fees. The Board's policies on confidentiality prohibit giving information regarding an individual's status within the certification process over the telephone, via fax, or by email.

ABEM does not recognize the term "board eligible" and asks physicians not to use the term in describing their status with ABEM.

Step 3: Oral Certification Examination

2012 Oral Certification Examination Schedule*

If Assigned to Spring Oral Examination April 28 – 30, 2012		If Assigned to Fall Oral Examination October 27 – 29, 2012	
Late January- Early February 2012	ABEM mails spring oral examination registration materials	Late January- Early February 2012	ABEM mails assignment letters to fall oral examination candidates
February 2012	Physicians assigned to the spring oral certification examination register for the examination	Mid-July 2012	ABEM mails fall oral examination registration materials
March 2012	Late period for physicians assigned to the spring oral certification examination to register for the examination (Note: higher fees apply)	August 2012	Physicians assigned to the fall oral certification examination register for the examination
April 28 - 30, 2012	Oral certification examination – spring administration	Early to Mid- September 2012	Late period for physicians assigned to the fall oral certification examination to register for the examination (Note: <i>higher fees apply</i>)
By July 27, 2012	ABEM mails spring oral examination results	October 27 – 29, 2012	Oral certification examination – fall administration
		By late January 2013	ABEM mails fall oral examination results

*Dates subject to change

Veterans Administration (VA) GI Bill Benefit

As of 2003, the VA will reimburse qualified physicians for the qualifying examination fee and the oral certification examination fee. See the VA website, www.gibill.va.gov, for details and for reimbursement forms. Please note that this benefit is offered through the VA, not through ABEM.

About the Oral Certification Examination

The oral certification examination is a standardized oral examination testing the application of Emergency Medicine knowledge using scenarios based on actual clinical cases. The examination requires approximately five hours to complete and includes seven simulated patient encounters: five single-patient encounters and two multiple-patient encounters. The oral certification examination is administered twice per year, only to those physicians who have passed the qualifying examination.

Assignment to the Oral Certification Examination

Notification of Assignment to the Oral Certification Examination

Physicians who pass the November 2011 qualifying examination will be randomly scheduled to one of the two oral certification examination administrations in 2012. Both administrations will be held at the Marriott Chicago O'Hare Hotel.

In January 2012, ABEM will send physicians notification of their spring or fall oral certification examination assignments. Physicians who receive assignments for the spring administration will also receive hotel information together with instructions for how to register for the examination. Those who are assigned to fall examination dates will be sent registration and hotel information in late June 2012.

Accepting the Oral Certification Examination Assignment

To take the oral certification examination, physicians must accept their examination assignments by the established registration deadline. Specific deadline and fee information will be included with the assignment mailing. To accept an assignment, physicians must register for the examination, including payment of examination fees.

Declining the Oral Certification Examination Assignment

To decline an assignment, physicians should complete the registration process by the established registration deadline indicating they will not accept the assignment.

Candidates not required by policy to accept the oral certification examination assignment and who decline their assignment, or do not respond to the assignment, are given an inactive status in the certification process and must reactivate in order to be included in the scheduling process for a future examination.

Candidates required by policy to accept the oral certification examination assignment and who decline their assignment, or do not respond to the assignment, will have their files closed.

Oral certification examination seats are limited. Candidates who have passed the previous fall's qualifying examination are assigned first. Reactivated candidates are assigned in the order of the date on which they postmarked their request to reactivate. ABEM recommends that inactive oral certification examination candidates reactivate their status promptly, since rescheduling for the oral certification examination may take up to one year or more from the date of the reactivation request.

See the [Policy on Maintaining Open and Active Certification Applications](#), a link to which is also in the **Certification-Related Policies** section of this book, for an explanation of the requirement for examination activity within three years and the oral certification examination reactivation process.

Oral Certification Examination Wait List

ABEM maintains a wait list for each oral certification examination administration, and physicians whose certification applications are active may request to be placed on a wait list. All requests to be placed on a wait list must be made in writing to the ABEM office. Candidates may request to be placed on a wait list for a specific oral examination administration: spring, fall, or both. Candidates cannot remain assigned to one examination administration while they are on the wait list for the other administration. Being on an examination wait list does not guarantee seating at that examination.

If candidates not required by policy to take the next examination assigned to them are on the wait list and are offered an assignment 30 days or more before the start of the examination but do not accept it, their application status will become inactive. They must reactivate, paying the appropriate reactivation fee, to be scheduled into a future examination. Refer to the [Policy on Maintaining Open and Active Certification Applications](#), a link to which is also in the **Certification-Related Policies** section of this book.

If candidates not required by policy to take the next examination assigned to them are on the wait list and are offered an examination assignment 29 days or less before the start of the examination but do not accept it, their application status will remain active for scheduling into a future examination.

If candidates required to take the next examination assigned to them are on the wait list and are offered an assignment, they must accept the assignment or their files will be closed.

Candidates who ask to be placed on a wait list may indicate, in writing, that they would be willing to accept an assignment less than 14 days before the start of the examination. If an assignment becomes available

less than 14 days before the start of the examination, these candidates would become first in line to be offered the assignment.

Postmark Date for Oral Certification Examination Reactivation and Wait List Requests

Physicians are responsible for ensuring postmark dates on reactivation and wait list requests are clearly legible. If a postmark date is not legible, the date ABEM receives the materials will be used instead of a postmark date. One way to ensure postmark date legibility is to use a method of mail delivery that provides the sender with proof of postmark.

Reactivation and wait list requests may also be faxed, in which case the fax date will be used instead of a postmark date.

Examination Accommodations for Candidates with Disabilities

Upon request, ABEM will make reasonable accommodations in its examination procedures for candidates with documented disabilities.

Requests must be in writing and should be submitted at least eight weeks prior to the candidate's assigned examination session.

Before requesting an accommodation, see the [Policy on Americans with Disabilities Act](#), which includes details about the request submission process, including the type of documentation required. A link to the policy also appears in the **Certification-Related Policies** section of this book.

Physicians may also request courtesy examination accommodations for temporary conditions, or disabilities that do not meet the legal definition of a disability. ABEM must receive courtesy requests at least eight weeks prior to the examination.

Oral Certification Examination Content Specifications

The oral examination blueprint functions as a general guideline for ABEM in constructing each examination. ABEM selects cases based on their clinical content as defined by *The Model of the Clinical Practice of Emergency Medicine* (EM Model), and cases appearing on the oral examination can originate from any content area within the EM Model. However, specific areas within the EM Model are routinely emphasized.

The lists that follow identify those content areas within each dimension of the EM Model that are typically emphasized on each oral examination and from which cases are routinely selected.

Oral Certification Examination Content Specifications, continued...

Listing of Conditions & Components

1.0	Signs, Symptoms and Presentations
2.0	Abdominal & Gastrointestinal Disorders
3.0	Cardiovascular Disorders
4.0	Cutaneous Disorders
5.0	Endocrine, Metabolic & Nutritional Disorders
6.0	Environmental Disorders
7.0	Head, Ear, Eye, Nose & Throat Disorders
8.0	Hematologic Disorders
9.0	Immune System Disorders
10.0	Systemic Infectious Disorders
11.0	Musculoskeletal Disorders (Non-traumatic)
12.0	Nervous System Disorders
13.0	Obstetrics and Gynecology
14.0	Psychobehavioral Disorders
15.0	Renal and Urogenital Disorders
16.0	Thoracic-Respiratory Disorders
17.0	Toxicologic Disorders
18.0	Traumatic Disorders
	Appendix I: Procedures & Skills
	Appendix II: Other Components

Bold = area of emphasis

Physician Tasks

The Modifying Factor of Pediatrics is routinely emphasized.

Acuity Frames

For purposes of examination development, ABEM defines critical patient acuity as a high probability of patient morbidity or mortality if immediate intervention is not begun, and emergent acuity as a high probability only for increased morbidity if immediate intervention is not begun.

Critical: approximately 2/3 of total cases

Emergent: approximately 1/3 of total cases

Examination Preparation

Approximately 30 days prior to the oral certification examination, ABEM will send each physician who has registered for the oral certification examination the *Examination Information for Candidates - Oral Certification Examination* book and a link to an online video illustrating the examination process. The mailing includes confirmation of examination seating, hotel and travel information, examination logistics, and information about the examination.

ABEM neither endorses nor makes any recommendation for specific conferences, textbooks, or other publications used as preparation and review for any Board examination.

ABEM has no connection with, nor does it endorse or participate in the preparation of any of the following:

1. Any programs which involve mock training sessions for the qualifying or oral certification examinations, or
2. Books or other publications which purport to instruct candidates how to take its examinations.

Examination Criteria

A physician will pass the oral certification examination by meeting either of two pass/fail criteria. First, the average of the physician's scores on the eight performance criteria for each case that is not a field-test case is computed. This average is then compared to ABEM's criterion of 5.75. The physician passes if the rating average is 5.75 or greater.

Second, the physician's scores on the eight performance criteria for each case which is not a field-test case are averaged to create six individual case scores. The highest and lowest case scores are averaged and the candidate passes if this score and the remaining four case scores are 5.0 or above.

ABEM reserves the right to include in any examination certain questions or cases for the purposes of research and validation. These items will not enter into the scoring for the purpose of certification.

Notification of Results

Physicians will be notified of examination results in writing within 90 days of the examination administration. **To ensure the confidentiality of examination results, all information will be sent to candidates in written form, by U.S. mail only. Results will not be provided over the telephone, via fax, on the ABEM website, or by email.** ABEM will post on its website, www.abem.org the date on which results are mailed.

Certificate and Diplomat Information

Certificate

All candidates who successfully complete both the qualifying and oral certification examinations are known as diplomates of the American Board of Emergency Medicine. Diplomates receive certificates with a start date that matches the date of the oral certification examination results letter or December 31 of the year in which the examination was taken, whichever is earlier. The certificate expires December 31 ten years from then. All diplomate certificates remain the property of the American Board of Emergency Medicine.

The certificate will display the physician's name and medical degree as entered on the original certification application, unless a request to change the name has been submitted subsequently.

Revocation of Certificate

Each certificate issued by ABEM is subject to revocation at any time according to current Board policies, procedures, and requirements.

Disclosure of Diplomat Information

In compliance with the bylaws of the American Board of Medical Specialties (ABMS), ABEM provides ABMS a list of new diplomates and diplomates who are renewing their certification. The list includes names, addresses, and other information as required by ABMS. ABMS provides diplomate information for publication in a directory, online at www.certificationmatters.org, and to other licensees according to defined protocols and guidelines. ABEM provides lists of diplomates to its sponsor organizations upon request; and ABEM responds to individual inquiries to confirm a physician's diplomate status.

Verification of Diplomat Status with ABEM

When ABEM receives an inquiry about a physician's status with the Board, ABEM states whether or not the physician is an ABEM diplomate and provides the certificate number and dates of certification. A fee is required for written status verifications mailed to a third party. Please call the ABEM office for current fees.

See the ABEM [Policy on Certificates](#), a link to which is also in the **Certification-Related Policies** section of this book, for additional information on certificates.

Emergency Medicine Continuous Certification

Physicians certified in Emergency Medicine must participate in ABEM's Emergency Medicine Continuous Certification (EMCC) program to maintain their ABEM certification. EMCC is an ABMS-approved Maintenance of Certification program.

The EMCC program entails a continuous process of learning and periodic testing. There are four components to the EMCC program:

- **Component 1:** Professional Standing – Diplomates must continuously maintain their medical licenses in compliance with the ABEM [Policy on Medical Licensure](#).
- **Component 2:** Lifelong Learning Self Assessment (LLSA) – Diplomates must take and pass eight LLSA tests, based on designated readings, within each ten-year certification. Phase-in of the LLSA component began January 1, 2004.
- **Component 3:** Assessment of Cognitive Expertise – Diplomates are required to pass a comprehensive, secure, proctored examination called the Continuous Certification (ConCert) examination in order to maintain certification beyond the year in which their current certificate expires.
- **Component 4:** Assessment of Practice Performance (APP) – Clinically active diplomates are required to begin, complete, and attest to completion of both patient care practice improvement and patient feedback activities within each ten-year certification. Clinically inactive diplomates are not required to participate in APP. Phase-in of the APP component began January 1, 2010. A description of APP requirements is available on the ABEM website, www.abem.org, under “Emergency Medicine Continuous Certification (EMCC)” at the left side of the screen.

Diplomates can use EMCC Online, ABEM's Internet-based system, to view their specific EMCC requirements, find LLSA reading lists, register for and take LLSA tests, register for the ConCert examination, and attest to completion of APP requirements.

Subspecialty Certification

Introduction

ABEM offers subspecialty certification in five subspecialties. To apply for certification in a subspecialty, physicians must meet ABEM eligibility requirements for that subspecialty. Eligibility requirements for each subspecialty are available on the ABEM website, www.abem.org. Application deadlines and fees and examination dates and fees are also displayed on the ABEM website.

If ABEM is aware a diplomate is in the final year of a fellowship program that could lead to certification in one of the five subspecialties it sponsors, an application packet will be sent to the fellowship program near the start of the application period. ABEM diplomates who believe they meet the eligibility requirements for a subspecialty may also call the ABEM office to request an application packet.

Hospice and Palliative Medicine

ABEM and nine other American Board of Medical Specialties (ABMS) member boards received approval in September 2006 to offer subspecialty certification in Hospice and Palliative Medicine. The other sponsor boards are the American Board of Internal Medicine (ABIM), the lead and administrative board; American Board of Anesthesiology; American Board of Family Medicine (ABFM); American Board of Obstetrics and Gynecology; American Board of Pediatrics (ABP); American Board of Physical Medicine and Rehabilitation (ABPMR); American Board of Psychiatry and Neurology; American Board of Radiology; and American Board of Surgery. To be eligible for this subspecialty examination, the physician must be certified by one of these boards and fulfill the eligibility criteria adopted by their respective primary board. The first examination was administered in the fall of 2008. The next examination will be administered October 4, 2012. There are two application pathways: a training pathway and a practice pathway. ABEM will accept applications March 1 – June 1, 2012. The practice pathway will end on June 1, 2012.

Medical Toxicology

ABEM, ABP, and the American Board of Preventive Medicine (ABPM) have established the joint Subboard of Medical Toxicology and subspecialty certification in Medical Toxicology. To be eligible for this subspecialty examination, the physician must be certified by ABEM, ABP, or ABPM, and fulfill the eligibility criteria adopted by their respective primary board. ABEM will accept and review applications from diplomates of other ABMS boards that are not sponsors of Medical Toxicology. The Medical Toxicology certification examination is offered

in even-numbered years. The next Medical Toxicology initial certification examination will be held November 12, 2012. ABEM will accept applications for this examination in March of 2012.

Pediatric Emergency Medicine

ABEM and the ABP have established the joint Subboard of Pediatric Emergency Medicine and subspecialty certification in Pediatric Emergency Medicine. To be eligible for this subspecialty examination, the physician must be certified in either Emergency Medicine by ABEM or Pediatrics by ABP. In addition to the general requirements, each primary board has adopted specific eligibility requirements. The Pediatric Emergency Medicine certification examination is administered every other year in odd-numbered years. The next examination will be administered in the spring of 2013. The application period for that examination will begin in late summer 2012.

Sports Medicine

ABEM, ABFM, ABIM, ABP, and ABPMR have established a joint examination committee to develop the examination for subspecialty certification in Sports Medicine. To be eligible for this subspecialty examination, the physician must be certified by ABEM, ABFM, ABIM, ABP, or ABPMR and fulfill the eligibility criteria adopted by their respective primary board. It is anticipated the Sports Medicine certification examination will continue to be offered every year. The next examination will be administered July 9, 11 - 15, and 18 - 22, 2011. ABEM will accept applications through June 1, 2011.

Undersea and Hyperbaric Medicine

ABEM and the ABPM have established a joint examination committee to develop the examination for subspecialty certification in Undersea and Hyperbaric Medicine. To be eligible for this subspecialty examination, the physician must be certified by ABEM or ABPM. In addition to the general requirements, each primary board has adopted specific eligibility requirements. It is anticipated the certification examination will continue to be offered every year. The next certification examination will be administered October 3 - 14, 2011. ABEM will accept applications through June 30, 2011. The practice-plus-training pathway to certification ended June 30, 2010.

Certification-Related Policies

[Policy on Fees](#)

[Policy on Medical Licensure](#)

[Policy on Emergency Medicine Certification Application
Continuing Medical Education \(CME\) Requirement](#)

[Policy on Americans with Disabilities Act](#)

[Policy on Maintaining Open and Active Certification
Applications](#)

[Policy on Examination Administration in Testing Centers](#)

[Policy on Oral Certification Examination Administration](#)

[Policy on Examination Irregularities](#)

[Policy on Candidate Illness](#)

[Policy on Disruptive Behavior](#)

[Policy on Scoring Candidate Examinations](#)

[Policy on Loss of Examination Data](#)

[Policy on Candidate Requests for Investigation of a
Certification or Maintenance of Certification Examination](#)

[Policy on Certificates](#)

[Policy on Privacy of Personal Information](#)

[Policy on J-1 Visa Recognition](#)

Initial Certification Examinations Dates and Locations

Qualifying Examination

2011

November 7-12, 2011

2012

November 12-17, 2012

Pearson VUE Professional Testing Centers

Oral Certification Examination

2011

Spring April 30 - May 3, 2011

Fall September 24 - 27, 2011

2012

Spring April 28 - 30, 2012

Fall October 27 - 29, 2012

Chicago Marriott O Hare Hotel

All fees and policies contained herein are subject to change.

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