



American Board of Emergency Medicine

Medical Toxicology Maintenance of Certification Program
Effective 2009

OVERVIEW OF PROGRAM

The American Board of Medical Specialties (ABMS) approved a program to promote continuous learning and periodic assessment throughout the length of diplomates' certifications.

To maintain certification beyond their current certificate's expiration date, Medical Toxicology diplomates must participate in each of four components of the Medical Toxicology MOC program:

- Professional Standing: Physicians must continuously maintain medical licensure in compliance with the ABEM [Policy on Medical Licensure](#) – **Pg. 2**
- Lifelong Learning and Self Assessment (LLSA): Physicians must pass four LLSA tests based on designated readings within each ten-year certification. – **Pg. 3**
- Assessment of Cognitive Expertise: Physicians are required to take and pass a comprehensive, secure, proctored Medical Toxicology cognitive expertise examination in or before the year in which their certificates expire. – **Pg. 5**
- Assessment of Practice Performance (APP): Diplomates who are clinically active must participate in national, regional, or local practice improvement activities that meet Medical Toxicology APP requirements. They must report completion of these activities three times during their ten-year certification. The APP component will be phased in starting in 2011. – **Pg. 7**

Physicians whose Medical Toxicology certification has expired have options for regaining certification through the MOC program. – **Pg. 10**

Medical Toxicology diplomates who are certified in Emergency Medicine (EM) are not required to maintain their EM certification but must participate in the Medical Toxicology MOC program to maintain valid Medical Toxicology certification.

Component 1: Professional Standing

REQUIREMENTS

- Physicians who are participating in the Medical Toxicology MOC program must continuously hold a current, active, valid, full, unrestricted, and unqualified license to practice medicine in at least one jurisdiction in the United States, its territories, or Canada and in each jurisdiction in which they practice.
- Physicians may hold additional licenses to practice medicine, each of which must be valid, full, unrestricted, and unqualified, or voluntarily inactive.
- Physicians who are participating in the Medical Toxicology MOC program must report to the Board all licenses they currently hold, and any licenses previously held that do not meet the ABEM [Policy on Medical Licensure](#).

ABEM continuously receives medical license information from a third party verification agency for all ABEM diplomates and former diplomates.

The ABEM [Policy on Medical Licensure](#) is available on the ABEM website, www.abem.org.

PROCEDURES

Physicians may update their medical licensure information through their Personal Access Page on the ABEM website, www.abem.org.

During the registration process for an LLSA test or Medical Toxicology cognitive expertise examination, physicians whose Medical Toxicology certification is through ABEM will be asked to confirm medical license information. If physicians confirm that their license(s) complies with ABEM policy, they can move to the next step of registration.

Physicians who have reported issues with their medical license(s) or for whom ABEM has received information from a third party verification agency regarding actions against a license, will be blocked from registering for an LLSA test or Medical Toxicology cognitive expertise examination. ABEM will investigate the issues and notify physicians concerning their test or examination registration status.

Component 2: Lifelong Learning and Self Assessment

The purpose of the Medical Toxicology Lifelong Learning and Self-Assessment component is to promote diplomates' continuous learning by periodically identifying a set of readings to guide them in self-study of recent Medical Toxicology literature, and to verify that they have attained an understanding of the content of the readings by requiring successful completion of four self-assessment tests based on those readings during their ten-year certification.

REQUIREMENTS

Diplomates must pass four LLSA tests during their ten-year Medical Toxicology certification. They are limited to taking LLSA tests that are posted online during their ten-year Medical Toxicology certification.

KEY FEATURES OF LLSA TESTS

- An LLSA test will be posted online every other year and will remain online for four years.
- Each LLSA test consists of 20 to 30 multiple-choice questions based on biennial reading lists
- LLSA tests are designed to be taken online
- A passing score is achieved by answering 85% of the test questions correctly

PROCEDURES

- A list of 10 to 15 readings based on [The Core Content of Medical Toxicology](#) will be selected and posted on the ABEM website approximately 15 months before the LLSA test associated with those readings is posted.
- An online self-assessment test will be posted on the ABEM website on June 1 of odd-numbered years beginning in 2009.
- Physicians register for and take each LLSA test online. PC users should use Internet Explorer, Netscape, or Firefox as their browsers. Apple/MacIntosh users should use Firefox as their browser.
- A physician has up to three opportunities per registration to pass an LLSA test. An opportunity to pass is defined as clicking the **Score Test** button, which submits the test for scoring.
- An incomplete test can be saved and resumed an unlimited number of times before it is submitted for scoring, provided that test is available to the physician; i.e., the four year period during which the test is posted online has not expired, and the physician has not renewed certification since registering for the test.
- A physician may register for an LLSA test as many times as necessary to pass it, as long as the test is available to the physician.
- LLSA tests will be scored immediately after they are submitted for scoring and physicians will be able to view their scores online, and print or email a certificate of completion.

INFORMATION ABOUT LLSA TEST CONTENT

The Medical Toxicology Subboard recently decided to eliminate the quantified link between the Medical Toxicology LLSA content specifications and the Medical Toxicology Core Content, essentially getting rid of the designated and non-designated content distinction within the Medical Toxicology LLSA reading lists. This allows the LLSA editors to select the best recent literature for each biennial LLSA reading list without having to restrict their choices to designated vs. non-designated areas. The 2015 Medical Toxicology LLSA Reading List will therefore be reflective of the entire Core Content for Medical Toxicology, rather than specifically designated areas.

The Medical Toxicology Subboard solicits readings from outside organizations and individual diplomates. Diplomates who wish to submit suggestions for future LLSA readings can find [submission forms](#) and [instructions](#) on the ABEM website, www.abem.org.

The Subboard will use the following criteria for selecting LLSA readings:

- Focus on recent advances or current issues in the practice of Medical Toxicology
- Be drawn from peer-reviewed Medical Toxicology journals, other peer-reviewed journals, textbook chapters, or updated practice guidelines
- Be published within the seven years immediately preceding the test date, in printed or electronic form
- Relate directly to one or more of the content areas with [*The Core Content of Medical Toxicology*](#).

Component 3: Assessment of Cognitive Expertise

REQUIREMENTS

- Diplomates must take and pass the Medical Toxicology MOC assessment of cognitive expertise examination to renew their Medical Toxicology certifications for another ten years.
- To be eligible to take the cognitive expertise examination in the year their certificates expire, diplomates must pass four LLSA tests during their ten-year Medical Toxicology certification.
- LLSA requirements for diplomates to take the Medical Toxicology cognitive expertise examination will be phased in between 2010 and 2018. See the section, “Phase-in of LLSA Requirements to be Eligible for the Cognitive Expertise Examination” for details.
- Diplomates may take the cognitive expertise examination before the year in which their certificates expire. LLSA requirements are pro-rated based on the number of years since the diplomate’s last certification date. See the section, “LLSA Requirements for Taking the Cognitive Expertise Examination Early” for details.
- Physicians who are certified in both Medical Toxicology and Emergency Medicine can use LLSA tests they complete to meet the requirements of both programs, as described in the section, “Medical Toxicology and Emergency Medicine LLSA Reciprocity”.
- Former diplomates may take the cognitive expertise examination to regain certification if they meet the requirements described in the section on Page 10, “Regaining Certification after Certification has Expired”.

KEY FEATURES OF THE MEDICAL TOXICOLOGY COGNITIVE EXPERTISE EXAMINATION

- The Medical Toxicology cognitive expertise examination is a secure, proctored 6.5 hour examination administered at over 200 computer-based Pearson VUE testing centers around the United States and Canada on a single day every two years.
- The examination consists of approximately 300 multiple-choice questions.
- The questions are derived from [*The Core Content of Medical Toxicology*](#) and focus on what the practicing Medical Toxicologist needs to know.
- The examination is analogous to the former recertification examination and has the same look and feel
- A score of 66 or greater is required to pass the examination. The examination standard is determined using the same process that is used for the certification examination and that was used for the former recertification examination.

PHASE-IN OF LLSA REQUIREMENTS TO BE ELIGIBLE FOR THE COGNITIVE EXPERTISE EXAMINATION

LLSA requirements will be phased in between 2010 and 2018, as illustrated in the following table.

Year of Cognitive Expertise Exam	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
# of LLSA Tests Required to Register for the Cognitive Expertise Examination		0		1		2		3		4

LLSA REQUIREMENTS FOR TAKING THE COGNITIVE EXPERTISE EXAMINATION EARLY

Diplomates may choose to take the cognitive expertise examination early. If they take and pass the cognitive expertise examination early, they will receive new certificates that expire ten years after the year in which they passed the examination.

For diplomates who renew their Medical Toxicology certification in or after 2010, the following table illustrates the number of LLSA tests they must pass prior to registering for the cognitive expertise examination, depending on the number of years between their last certification date and the date of the cognitive expertise examination administration.

Years Since Certification Date	Number of Required LLSA Tests
2	0
4	1
6	2
8	3
10	4

Diplomates whose current Medical Toxicology certificates were issued in or before 2008 may take the cognitive expertise examination early during the phase-in period by completing the number of LLSA tests required for that examination as shown in the phase-in schedule above.

MEDICAL TOXICOLOGY AND EMERGENCY MEDICINE LLSA RECIPROCITY

Medical Toxicology LLSA tests a physician passes will count toward any Emergency Medicine LLSA requirements current at the time they passed the test, if they are certified or formerly were certified in Emergency Medicine.

Emergency Medicine LLSA tests a physician passes will count towards any Medical Toxicology LLSA requirements current at the time they passed the test, if they are certified or formerly were certified in Medical Toxicology through ABEM.

Physicians whose primary certification is through another ABMS board may have a similar reciprocity arrangement available to them and should check with their primary certification board for details.

Component 4: Assessment of Practice Performance

Beginning in 2011, clinically active Medical Toxicology diplomates must participate in the assessment of practice performance (APP) component of the MOC program. The purpose of this component is to ensure diplomate involvement in ongoing practice improvement activities.

REQUIREMENTS

- Clinically active Medical Toxicology diplomates will be required to complete three improvement activities during their ten year certification, and will attest that they have completed those activities as follows.
 - Attest to completion of one patient care practice improvement activity by the end of the fourth year of their certification
 - Attest to completion of one patient care practice improvement activity between the fifth and the end of the eighth year of certification
 - Attest to completion of a communication/professionalism improvement activity by the end of their eighth year of certification.
- Clinically active Medical Toxicology diplomates must complete APP activities that meet conditions acceptable to ABEM. These conditions are described in the sections, “Description of Acceptable Patient Care Practice Activities” and “Description of Acceptable Communication and Professionalism Activities.”
- Diplomates engaged in APP activities are required to identify an independent verifier of the diplomate’s APP activities. The verifier must be someone with oversight or knowledge of practice performance. Ten percent of APP attestations will be randomly selected for verification. Verifiers will be asked to affirm that the diplomate’s APP activities meet ABEM requirements.
- APP requirements will be phased in to allow diplomates sufficient time to complete their required activities. The phase-in schedule is described in the section, “Phase-In of Medical Toxicology APP Requirements”.
- APP activities may count toward both Emergency Medicine and Medical Toxicology requirements. The section, “Medical Toxicology and Emergency Medicine APP Reciprocity” provides more detail.

DEFINITION OF CLINICAL ACTIVITY STATUS

Medical Toxicology diplomates who provide direct or consultative patient care, or who work primarily with patient population issues, and can meet the requirements for the number of patients to include in data collection for an APP activity are considered to be clinically active.

Because APP is designed for diplomates involved in patient care activities, diplomates who do not see or consult on behalf of sufficient patients to complete required APP activities and who are not involved with issues related to patient populations will not have an APP requirement. These diplomates will be designated as clinically inactive.

Clinically inactive diplomates will be able to maintain their Medical Toxicology certification by participating in the first three components of the Medical Toxicology MOC program.

DESCRIPTION OF ACCEPTABLE PATIENT CARE PRACTICE IMPROVEMENT ACTIVITIES

Patient care practice improvement activities within the APP component are those focused on improvement in some aspect of patient care other than communication or professionalism, although feedback from patients relating to the clinical care given can be included.

Medical Toxicology APP patient care practice improvement activities must include the following four steps:

1. Initial data collection to identify the physician's current level of performance with respect to a patient care issue
 - Review patient clinical care data from ten patients
 - The data must be related to a single presentation, disease, or clinical care process that is part of [The Core Content of Medical Toxicology](#)
 - Group data is acceptable if the individual diplomate's data is included
 - Patient data include any of the following
 - Clinical care processes
 - Feedback from patients that relates to the clinical care given
 - Outcomes of clinical care
 - Access to care
 - Health parameters for a patient population, patient population processes, or the services to patients provided by a health-related organization.
2. Comparison of the collected data to evidence-based guidelines for the patient care issue. If such guidelines are not available, diplomates may use expert consensus or comparable peer data.
3. Development and implementation of a practice improvement plan intended to improve the patient care issue. This may be an individual or group effort. The practice improvement plan could include a change in a process, adding clinical reminders, personal education, etc.
4. Collection of new data from ten additional patients with the same presentation, disease, clinical process, or service as the first patient data review to assess the degree to which the intervention improved the patient care issue being addressed.

Diplomates may use practice improvement or quality improvement programs in which they already participate if they meet the requirements described above.

DESCRIPTION OF ACCEPTABLE COMMUNICATION/PROFESSIONALISM ACTIVITIES

Communication/professionalism activities within the APP component involve administration of an instrument to obtain feedback from patients, or in some instances peers, about the physician's communication and professionalism skills.

Communication/professionalism activities that will meet Medical Toxicology APP requirements have the following characteristics:

- Feedback data is collected from a minimum of 10 patients using a patient survey. If the diplomate does not provide direct patient care to a sufficient number of patients to meet this requirement, diplomates may use a peer review survey with feedback data from a

minimum of 10 peers. A minimum of one physician behavior must be measured from each of the following three categories:

- Communications/listening, for example, communicating clearly with patients and other medical staff by listening carefully and couching language at the appropriate level for the listener
 - Providing information, for example, explaining the clinical impression and anticipated management course to the patient and the patient’s family, providing information about tests and procedures, and giving the patient options
 - Showing concern for the patient, for example, showing respect to the patient and other medical staff, making the patient feel comfortable by asking if they have any questions or concerns and acting to address their concerns, and asking the patient about adequate pain relief.
- Diplomates may use existing patient surveys or peer surveys such as those that are part of a 360° evaluation process.

PHASE-IN OF MEDICAL TOXICOLOGY APP ATTESTATIONS

The table below shows the phase-in of attestations of patient care practice improvement (PI) and communication and professionalism (CP) activities completed, for each certification expiration year from 2010 through 2020.

Year Certificate Expires	APP Requirements
2010 and 2012	<ul style="list-style-type: none"> ● No APP requirement until after certification is renewed
2014	<ul style="list-style-type: none"> ● Attest to completion of one PI activity by the end of 2012 ● No other APP requirements until after certification is renewed
2016	<ul style="list-style-type: none"> ● Attest to completion of one PI activity by the end of 2014 ● No other APP requirements until after certification is renewed
2018	<ul style="list-style-type: none"> ● Attest to completion of one PI activity by the end of 2012 ● Attest to completion of one PI activity between 2013 and the end of 2016 ● Attest to completion of one CP activity by the end of 2016
2020	<ul style="list-style-type: none"> ● Attest to completion of one PI activity by the end of 2014 ● Attest to completion of one PI activity between 2015 and the end of 2018 ● Attest to completion of one CP activity by the end of 2018

MEDICAL TOXICOLOGY AND EMERGENCY MEDICINE (EM) APP RECIPROCITY

Physicians who are maintaining their certification in both EM and Medical Toxicology will be able to use EM or Medical Toxicology improvement activities to satisfy the APP requirements of both programs under the following two conditions.

- Any Medical Toxicology APP activity to which a diplomate attests during a period of time in which the diplomate has an EM APP requirement will count toward fulfillment of the EM requirement if the improvement activity meets the guidelines of the EMCC program.
- Any EM APP activity to which a diplomate attests during a period of time in which the diplomate has a Medical Toxicology APP requirement will count toward fulfillment of the Medical Toxicology requirement if the improvement activity meets the guidelines of the Medical Toxicology MOC program.

Regaining Certification After Certification Has Expired

Diplomates who do not take or take but do not pass the cognitive expertise examination in or before the year in which their certificates expire are former diplomates and are no longer certified in Medical Toxicology. Certificates cannot be extended for any reason.

Starting in 2012, former diplomates have three options for regaining certification, depending on their circumstances.

1. Former diplomates who took and failed the cognitive expertise examination in the tenth year of their certification and those who did not take the cognitive expertise examination but completed the required number of LLSA tests before their certificates expired may regain certification through the Medical Toxicology MOC program by doing the following.
 - They must take and pass the first LLSA test that becomes available after their certificates expire.
 - They must then take and pass the first cognitive expertise examination that is administered after their certificates expired.

If they do not complete both of these activities, former diplomates must take and pass the Medical Toxicology certification examination to regain certification.

2. Former diplomates who missed one or two LLSA tests by the time their certificates expired can regain certification by completing the required number of LLSA tests and then registering for, taking, and passing the next available cognitive expertise examination. This option must be completed within two years following the expiration of their certificates.

Former diplomates who do not take, or take but do not pass, the next available cognitive expertise examination administered after they complete their missing LLSA tests, must take and pass the Medical Toxicology certification examination to regain certification.

3. Former diplomates who completed two or fewer LLSA tests during their ten-year certification must take and pass the Medical Toxicology certification examination to regain certification.

Prior to 2012, Medical Toxicology former diplomates who wish to regain certification will continue to do so by taking the Medical Toxicology cognitive expertise examination at least once every other administration of the examination. If they do not take the examination at least once every other administration, they must regain certification by taking the Medical Toxicology certification examination.