The Neurocritical Care subspecialty is devoted to the comprehensive multisystem care of the critically ill patient with neurological diseases/conditions. Like other intensivists, the neurointensivist assumes the primary care role for his or her patients in the intensive care unit (ICU). In order to do so, a neurointensivist must acquire the knowledge and skills to manage both the neurological and critical care aspects of care. The neurointensivist acts to defragment and harmonize the care of patients by taking responsibility for various integrated elements of ICU care that might otherwise be provided by multiple subspecialists. The ultimate goal of neurocritical care is to optimize care of a unique patient population that simultaneously requires expertise in the management of both neurological and critical care conditions. The published literature indicates that patients are best served when cared for by physicians with subspecialist training that addresses both these areas.

Certification in the subspecialty of Neurocritical Care (NCC) is available to American Board of Emergency Medicine (ABEM) diplomates who fulfill the eligibility criteria and pass the NCC subspecialty examination. ABEM co-sponsors this subspecialty with the American Board of Psychiatry and Neurology (ABPN), the American Board of Anesthesiology (ABA), and the American Board of Neurological Surgery (ABNS).

The ABPN is the administrative board for the NCC subspecialty. The ABPN develops and oversees the administration of the subspecialty examination. ABEM diplomates submit applications for certification in NCC to ABEM. ABEM reviews the applicant’s credentials to determine eligibility, reports the results of the examination, and issues certificates to its candidates. All applicants are encouraged to review the FAQs (when they become available) for more details about the application process and eligibility criteria.

The NCC eligibility criteria for ABEM diplomates were mutually determined by the co-sponsoring boards. These criteria cannot be appealed.

**ELIGIBILITY CRITERIA**

The general criteria for emergency physicians seeking certification in NCC are as follows:

- The physician must be a diplomate of ABEM
- The physician must be participating in the ABEM MOC program at the time of application and throughout the certification process
- The physician must fulfill the ABEM Policy on Medical Licensure

Additionally, the physician must fulfill the eligibility criteria of either the ACGME-accredited Fellowship Training Pathway or the Practice Pathway (Grandfathering Pathway).
APPLICATION PATHWAYS

ACGME-accredited Fellowship Training Pathway

These criteria pertain to ABEM or AOBEM diplomates who enter ACGME-accredited programs.

Emergency Medicine candidates applying for certification in NCC must have either completed one year of general ACGME-accredited anesthesiology, medical, or surgical critical care fellowship **AND** one year of an ACGME-accredited NCC fellowship;

    OR

They must have completed two years of an ACGME-accredited NCC fellowship.

Practice Pathway

During a “grandfathering” practice pathway period of six years, eligible ABEM diplomates may qualify to take the NCC examination if they:

- Are certified in NCC by the United Council for Neurologic Subspecialties (UCNS) or Committee on Advanced Subspecialty Training (CAST);

    OR

- Have completed a “fellowship” in NCC (UCNS, CAST, or an ABEM acceptable non-accredited neurology related fellowship);

    OR

Have documented one of the following:

- An average of at least 17 percent of their post-training clinical practice time spent in the practice of NCC (at least 7 hours per week) for the past 6 years*, or
- An average of at least 25 percent of their post-training clinical practice time spent in the practice of NCC (at least 10 hours per week) for the past 4 years*, or
- An average of at least 33 percent of their post-training clinical practice time spent in the practice of NCC (at least 13 hours per week) for the past 3 years*, or
- An average of at least 50 percent of their post-training clinical practice time spent in the practice of NCC (at least 20 hours per week) for the past 2 years*, or
- An average of at least 25 percent of their total post-training professional time spent in the practice of NCC (at least 10 hours per week) for the past 4 years**

* This calculation is based on an average work week of 40 hours. Physicians whose total practice exceeds 40 hours per week may still use 40 hours as the denominator of their percent calculation.

** This approach specially applies to academic program directors, administrators, or researchers, and provides them a pathway to qualification.

The “practice of NCC,” is strictly defined for the purpose of meeting this requirement. An acceptable practice of NCC must occur in a designated critical care unit such as a neurocritical care unit, surgical critical care unit, medical intensive care unit, or combined med-surg ICU. For purposes of NCC
eligibility, practices that occur in critical care areas in the emergency department do not count. The
NCC practice must involve scheduled time in the critical care unit when the physician has no other
clinical responsibility (e.g., seeing patients in the emergency department or elsewhere). Likewise, any
other venue that is not specifically designated as a critical care or intensive care venue that is also
not under the purview of a department of critical care medicine (CCM) or similar authority does not
count as a critical care unit for the purpose of meeting this practice requirement. In addition, providing
medical care to critically ill and injured patients in the emergency department does not, by itself,
constitute practicing NCC. Although emergency physicians care for critical patients daily, this does
not constitute the practice of NCC.

ABEM will also seek independent verification of the NCC practice a physician submits to fulfill the
NCC practice requirement and the physician’s clinical competence in NCC. ABEM will accept this
verification from the program director of the ACGME-accredited CCM fellowship program affiliated
with the hospital where the physician spends the majority of NCC clinical time. If an ACGME-
accredited CCM fellowship is not present at this hospital, ABEM will seek verification by the Chief of
Critical Care Medicine in the hospital where the physician spends the majority of CCM clinical time.
Should the physician who is applying be the Chief of Critical Care, verification will be accepted from
the Chief of Staff, Vice President of Medical Affairs, or someone in a similar position.

TIMING CONSIDERATIONS

Physicians seeking certification in more than one specialty or subspecialty may not apply the
same postgraduate training period or practice time toward fulfilling the requirements of more
than one specialty or subspecialty.

CERTIFICATION

ABEM diplomates who have met the NCC eligibility criteria and who pass the NCC Certification
Examination are recognized as being certified in the subspecialty of Neurocritical Critical Care
Medicine. Certification is for a period of ten years.

Certificates are dated from the day the examination results are made available to the physician
and expire December 31, ten years after.

Effective January 1, 2019