

Policy on Solicitation and Criteria for Selection of Readings for Lifelong Learning Self-Assessment Tests for Emergency Medicine

BACKGROUND

The American Board of Emergency Medicine (ABEM) wishes to involve the entire Emergency Medicine (EM) community in the process of developing reading lists for the Lifelong Learning and Self-Assessment (LLSA) tests of the ABEM Maintenance of Certification (ABEM MOC) Program. This policy documents this intention and describes the process for solicitation and development of reading lists for annual LLSA tests.

POLICY

It is the policy of ABEM that readings for LLSA tests should meet the following goals:

- 1. Focus on recent advances or current clinical knowledge in EM
- 2. Be clinically oriented in content
- 3. Be drawn from peer-reviewed EM journals, peer-reviewed journals from related primary specialty fields, textbook chapters, or updated practice guidelines, published in either printed or electronic form
- 4. Relate to content contained within the EM Model
- 5. Be widely available and easily accessible to ABEM diplomates
- 6. Be potentially suitable for serving as part of a Continuing Medical Education (CME) activity by filling a knowledge or practice gap

LLSA readings are designed as study tools and should be read critically. They are not intended to be all-inclusive and are not meant to define the standard of care for the clinical practice of EM.

ABEM will accept suggestions for LLSA readings from any EM organization or diplomate for the purpose of developing a reading list. ABEM will solicit readings annually from diplomates and from the following organizations: American College of Emergency Physicians (ACEP), Society for Academic Emergency Medicine (SAEM), Council of Residency Directors (CORD), and the American Academy of Emergency Medicine (AAEM.)

LLSA editors will select a final set of 10 to 15 readings on which the LLSA tests will be based. The Board or its designated editors will maintain final control in the selection of the annual LLSA readings.

PROCEDURES

ABEM will post instructions for submitting LLSA readings on its website. The instructions will include submission criteria and content specifications for the current cycle.

In addition to the organizations listed above, ABEM will typically solicit readings annually from the following organizations: Association of Academic Chairs of Emergency Medicine (AACEM), and National Association of EMS Physicians (NAEMSP.)

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Following the annual solicitation, the ABEM CME Task Force will help inform the LLSA test editors' selections for the annual reading list by reviewing and recommending possible LLSA readings for CME potential. The LLSA editors will review the readings and make their selections based upon the currency and clinical importance of the content, as well as item writing and CME potential. During the selection process, the editors may include additional readings that were not included in the original submissions resulting from the annual solicitation.

ABEM will distribute copies of the recommended readings to the designated group of LLSA item writers for writing LLSA test items.

ABEM will notify the following organizations when the final LLSA reading list will be posted on the ABEM website: ACEP, SAEM, CORD, AAEM, AACEM, and NAEMSP.

Each annual reading list will be maintained on the ABEM website as long as its associated LLSA test is active.

EXCEPTION

None

RELATED DOCUMENTS

The Policy on Content Specifications of Lifelong Learning and Self-Assessment Tests for Emergency Medicine will guide the Board's development of the annual LLSA tests and readings. The Policy on Acceptable Use of Lifelong Learning and Self-Assessment Test Materials defines the use of the copyrighted LLSA test materials. The Policy on Candidate Requests for Investigation of Lifelong Learning and Self-Assessment Tests and the Appeal Process Related to the Policy on Candidate Requests for Investigation of Lifelong Learning and Self-Assessment Tests outline the procedures for candidates wishing to protest the administration of LLSA tests.

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