BACKGROUND

The term clinically active is used by the American Board of Emergency Medicine (ABEM) for two purposes: determining whether an ABEM-certified physician is required to perform an Improvement in Medical Practice (IMP) activity for continuing certification, and to meet the criterion to be an ABEM volunteer. Volunteers must also meet the definition of providing meaningful care. This policy provides definitions for both terms.

POLICY

Definition of Clinically Active

For the purpose of determining whether an ABEM-certified physician has an IMP requirement, clinically active is defined as physicians who see more than 20 patients in a five-year span.

Definition of Meaningful Care

Meaningful care is defined as direct patient care or administrative oversight that has a material impact on patients that are seen in or being transported to an emergency department (ED). Specific characteristics and types of care include (but are not limited to):

- Any direct clinical responsibility for patient care by attending to patients in an emergency department either in-person or via telemedicine.
- Working in an urgent care center.
- Working in an observation unit directly connected to an ED.
- Administrative oversight of patient care activities that involve the practice of EM or a subspecialty of EM. This oversight must include responsibility for activities related to patient care such as medical control-authority of EMS and/or disaster management systems, as well as medical direction or staffing poison centers.
- Any direct patient care that is not in the ED, a critical care unit, or prehospital arena, must include seeing and treating some patients who are sufficiently ill or injured that they might reasonably require referral or transportation to the ED (e.g., an urgent care center).
- Teaching rounds (“guru shifts”) that occur in the ED and have a direct impact on the care provided to patients.
- Any other care that the Executive Committee deems is consistent with the intent of this definition and description.

Care or practice that does not meet the intended definition of meaningful care includes (but is not limited to):

- Administrative activities that would routinely be considered Health Care Administration, Leadership, and Management (HALM)–related, such as being a chief medical officer; vice president, medical affairs; department chair; or dean.
- Working in a wound care clinic.
- Insurance screening physical examinations.
- Working in an occupational medicine clinic.
- Teaching rounds that do not involve direct patient care.
PROCEDURES

Physicians who do not meet the criteria for being clinically active must contact ABEM in order to change their status to clinically inactive in order to remove the IMP requirement from their continuing certification requirements.

To meet the Meaningful Care definition requirements, physicians will be asked to verify their clinical practice in their initial volunteer application and through a regular process of verification. Physicians will attest to their type(s) of practice(s) and their length of service in each of those practices.

EXCEPTION

Physicians who retire with significant clinical practice and volunteer activity as determined by the Executive Committee can receive a three-year extension upon request.

Oral Examiners who have sufficient history of clinical work, sufficient history as an ABEM volunteer, and a history of quality contributions to ABEM yet no longer meet the Meaningful Care requirements can complete their current examiner term and may be eligible for reappointment to one additional three-year examiner term to be offered at the discretion of the Chair of the Test Administration Committee.

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