

ABEM Disaster Medicine Eligibility Criteria

The general criteria for physicians seeking certification in Disaster Medicine (DM) are as follows:

1. Be certified by the American Board of Emergency Medicine, the American Board of Preventive Medicine (ABPM), or other Qualifying ABMS Board;
2. Successfully complete the Training pathway;
3. Complete and submit the application to ABEM; ABPM-certified physicians will apply to the ABPM;
4. Actively participate in the ABEM or ABPM continuing certification process;
5. Fulfill the [Policy on Medical Licensure](#); and
6. Comply with the [Policy on Board Eligibility for Subspecialties](#).

Additionally, the physician must fulfill the eligibility criteria for one of three application pathways:

1. Training Pathway
2. Practice-plus-Non-ACGME-Accredited DM Training
3. Practice-Only Pathway

The Practice-plus-Non-ACGME-Accredited DM Training and Practice-Only Pathway will close on December 31, 2033. Specifically, all eligibility requirements must be completed, and all applications received no later than December 31, 2033.

ELIGIBILITY CRITERIA

Training Pathway

The Training pathway requires that physicians successfully complete an ACGME-accredited DM fellowship. The ACGME accredits DM fellowships of 12 months in length. The physician must successfully complete all months of training for which the DM fellowship is ACGME-accredited to fulfill the Board's eligibility criteria. For physicians who apply through the Training Pathway, ABEM will seek independent verification of the physician's successful completion of the DM fellowship program from the DM fellowship program director. The physician must successfully complete the fellowship training by the examination date.

Practice-Only Pathway

The Practice-Only Pathway will end on December 31, 2033 (7 years after ABMS approval of the application). To apply for certification through the Practice-Only Pathway, a physician must meet all the following criteria:

- They must demonstrate that within the five years (60 months) immediately preceding the date on which they submit their application, they have held a position that demonstrates all of the following responsibilities and an equivalent title for at least 36 months (at least 200

hours per year, on average). The 36 months do not need to be contiguous. ABEM will require independent verification of the physician's DM experience from the physician's direct supervisor(s).

Credit for Certification

A physician may be eligible for 12 months of credit toward the practice experience requirements under the Practice-Only Pathway by the following:

- American Board of Emergency Medicine certification in Emergency Medical Services
- American Board of Preventive Medicine certification in Public Health & General Preventive Medicine

Practice-plus-Non-ACGME-Accredited DM Training

The Practice-plus-Non-ACGME-Accredited DM Training will end on December 31, 2033 (7 years after ABMS approval of the application). To apply for DM certification through Practice-plus-Non-ACGME-Accredited DM Training, a physician must meet all the following criteria:

- They must successfully complete a fellowship of at least 12 months that reasonably addresses the DM Core Content. An ACGME-accredited residency program or ACGME-accredited institution must sponsor the fellowship. ABEM will seek independent verification of the physician's successful completion of the non-accredited DM fellowship program from the DM fellowship program director.
- They must demonstrate that within the five years (60 months) immediately preceding the date on which they submit their application, they have held a position that demonstrates all of the following responsibilities and an equivalent title <hyperlink> for at least 24 months (at least 200 hours per year, on average). The 24 months do not need to be contiguous. ABEM will require independent verification of the physician's DM experience from the physician's direct supervisor(s).
- Practice experience completed during the 12 months of Practice-plus-Non-ACGME-Accredited DM Training. DM fellowship training does not count toward the practice experience requirement of 24 months (at least 200 hours per year, on average).

Credit for Certification

A physician may be eligible for 12 months of credit toward the practice experience requirements under Practice-plus-Non-ACGME-Accredited DM Training by the following:

- American Board of Emergency Medicine certification in Emergency Medical Services
- American Board of Preventive Medicine certification in Public Health & General Preventive Medicine

Acceptable Leadership Experience and Responsibilities for Practice Pathway and the Practice Portion of the Practice-plus-Non-ACGME-Accredited DM Training.

**ABEM will require verification of leadership-administration experience by an individual who served as a direct supervisor to the position/role during the same time as the experience occurred.*

The physician must demonstrate that she or he holds or previously held a position for at least 36 months (Practice-Only Pathway) or 24 months (Practice-plus-Non-ACGME-accredited DM Training Pathway) that incorporates significant aspects of disaster planning, response, and/or recovery. Additionally, of that total number of months, a minimum of 200 hours per year, on average, of the physician's time is/was devoted to Disaster Medicine through three or more of the following areas:**

- **Provision or Oversight of Direct Disaster Medicine Patient Care**
 - Provision of direct health care during a natural or manmade disaster in the physician's primary specialty practice of sufficient rigor. An additional narrative explanation of such care may be required.
 - Emphasis on high-impact and organizational experience
- **Academic Initiatives on Disaster Management**
 - Responsible for leading academic initiatives, could include education, research and/or quality improvement projects, on disaster medicine to physicians, health systems, community leaders, and government officials.
 - Examples of sufficient rigor include: Served as a first, second, or senior author on five or more peer-reviewed articles; presentation at a minimum of three different regionally-, nationally-, or internationally-based Disaster Medicine conferences; presentation of at least three Disaster Medicine lectures, outside of the physician's own department or institution, for which participants can receive CME credit.
 - For physicians who practice in non-academic settings, teaching a minimum of 10 hours (as verified by the department chair or similar person) of structured professional development lectures or workshops teams will be considered.
- **Operational Leadership** *(Must fulfill at least one of the following three criteria)*
 - Talent management
 - Oversight and management of disaster medicine physicians and other care providers during the phases of disaster management to include staff evaluations and indirect or direct supervision of care provided by emergency managers and clinical care providers.
 - Fiscal management

- Oversight and management of billing and coding, reimbursement, and financing of Disaster Medicine preparedness, response, recovery, mitigation, and prevention.
 - Participates in major negotiations with payers and state and federal legislative bodies to increase funding for care.
- Programmatic Leadership and Development
 - Development of preparedness and disaster response programs
 - High impact initiatives at regional, state, or national levels (e.g., disaster health response networks)
 - Strategic Leadership (regional, state, or national level)
 - Oversight of systems integration
 - Healthcare business continuity planning
 - Leading high-impact response initiatives
- **Regulatory and Policy Development**
 - Leading organizations through regulatory, accreditation, or certification processes, such as Joint Commission, SAMHSA, etc.
 - Design of disaster care standards, policies, and procedures at a hospital, system, state, or federal level
- **Care Coordination and Management**
 - Oversight and management of the care continuum within and between the phases of disaster care acute care intervention and transition to ongoing long-term care.

***ABEM reserves the right to request a copy of a job description, organizational chart, and/or CV/resume to provide clarifying information for any application.*

Examples of DM leadership positions that may be considered eligible, provided that the position meets the functional responsibility noted above, could include:

1. Medical Advisor for Disaster Policy
2. Health System Disaster Preparedness Consultant
3. Medical Director for Disaster Response
4. State or Federal Urban Search and Rescue Member
5. State or Federal Disaster Medicine Assistance Team Member
6. State or Federal Response Physician
7. Chief Medical Officer for Emergency Preparedness
8. Deputy Secretary of Health Preparedness and Community Protection
9. System Medical Director for Emergency Preparedness
10. COVID-19 Response Director
11. Director of (Public Health) Emergency Preparedness and Response
12. State Health Officer