APRIL 2015 MC-FP EXAMINATION

The 2015 Spring MC-FP Examination was administered earlier this month. The conditions listed below must be met no later than December 31, 2015, in order for certification to be awarded. Certification will be awarded effective as of the date on which the last of these criteria are met.

1. Must satisfactorily complete residency training no later than October 31, 2015.

2. Must obtain (and enter into your physician portfolio) a currently valid, full and unrestricted license to practice medicine in the U.S. or Canada and be continuously in compliance with the Guidelines on Professionalism, Licensure, and Personal Conduct no later than December 31, 2015. (institutional, temporary, or training licenses are not acceptable).

3. Verification from the program director that the resident has successfully met all of the ACGME requirements for residency training in family medicine must be submitted via the RTM System, upon completion of training but not later than December 31, 2015.

4. Successful performance on the ABFM MC-FP examination.

Please check the Program Alerts box in RTM periodically to see if you have any residents whose verification of satisfactory completion of training needs to be completed. Remember that verification of satisfactory completion of training is submitted electronically through RTM and can be submitted within 15 days of the resident’s completion date.

Exam results are tentatively set to be released to the examinees on June 5, 2015.
NOVEMBER APPLICANTS MUST COMPLETE RESIDENT MC-FP ENTRY REQUIREMENTS

The ABFM requires residents who entered family medicine residency training on or after June 1, 2012 (including those who received advanced placement credit for prior training in another specialty, including osteopathic training) to complete the Resident MC-FP Entry Process.

Please advise your residents that they should be working on their module requirements now, as the application for the November exam opens on July 24. In order to be approved to take the examination, which includes selecting a test date and location, all MC-FP Part II and Part IV requirements must be completed. However, if a resident should need additional time beyond July 24 to complete the modules, he/she may begin the application process and submit payment for the examination to avoid late application filing fees without having all the MC-FP Part II and Part IV requirements completed. The latest date to complete the MC-FP Part II and Part IV requirements for the November exam is September 15, 2015. In order to avoid late application filing fees, it is recommended that physicians start the application early. A full schedule of important dates for the November examination is displayed in this newsletter. In order to become certified by the ABFM, the following requirements must be met:

• Completion of 50 MC-FP points (prior to selection of test site and date) which includes:
  - Minimum of one (1) Self-Assessment Module (SAM)-15 points each
  - Minimum of one (1) Performance in Practice Module (Part IV) with data from a patient population—20 points each
  - Additional approved Part II or Part IV activities to reach a minimum of 50 points.
• Application and full examination fee for the MC-FP examination
• Attainment of a full, valid, unrestricted and permanent medical license and continuous compliance with the Guidelines on Professionalism, Licensure, and Personal Conduct
• Successful completion of family medicine residency training
• Successful completion of the MC-FP examination
In order to satisfy the minimum requirement of one Performance in Practice (Part IV) module, residents MUST complete one Part IV activity using data from a patient population. Examples include:

- Asthma PPM
- Comprehensive PPM
- Coronary Disease PPM
- Depression PPM
- Diabetes PPM
- Hand Hygiene PPM
- Heart Failure PPM
- Hypertension PPM
- AAFP Metric
- Self-Directed Practice Improvement Module (PIM)

Residents may complete one of the Alternative Part IV modules listed below to count toward the overall 50 point requirement. However, these Part IV activities do not count toward the minimum required Part IV activity with patient population data.

- Cultural Competency MIMM (15 points)
- Hand Hygiene Simulated PPM (20 points)
- Information Management MIMM (20 points)

Residents will be able to complete the above requirements for the Resident MC-FP Entry process during their residency training years and up to three calendar years after completion of training. If a resident does not fulfill all requirements within the three calendar years following training completion, he/she will have to go through the ABFM MC-FP Entry process which includes the above requirements plus CME and additional process fees to gain certification. Any activities started or completed during the Resident MC-FP Entry process will not count toward the ABFM MC-FP Entry process.
The 2015 Fall MC-FP Examination will be administered on November 16, 17, 18, 19, 20, and 21. The conditions listed below must be met no later than June 30, 2016, in order for certification to be awarded. Certification will be awarded effective as of the date on which the last of these criteria are met.

1. Must satisfactorily complete residency training no later than April 30, 2016.

2. Must obtain (and enter into your physician portfolio) a currently valid, full and unrestricted license to practice medicine in the U.S. or Canada and be continuously in compliance with the Guidelines on Professionalism, Licensure, and Personal Conduct no later than June 30, 2016. (institutional, temporary, or training licenses are not acceptable).

3. Verification from the program director that the resident has successfully met all of the ACGME requirements for residency training in family medicine must be submitted via the RTM System, upon completion of training but not later than June 30, 2016.

4. Successful performance on the ABFM MC-FP examination.

Please check the Program Alerts box in RTM periodically to see if you have any residents whose verification of satisfactory completion of training needs to be completed. Remember that verification of satisfactory completion of training is submitted electronically through RTM and can be submitted within 15 days of the resident’s completion date.

Exam results are tentatively set to be released to the examinees in December 2015.
IN-TRAINING EXAM

Purpose of the ITE

• Provide residents with a low-cost, low-stakes opportunity to take a test that has the same look and feel as the MC-FP Examination.
• Give residents and program directors meaningful feedback regarding the resident’s progress toward becoming ABFM certified.

How to use the ITE

It is not an optimal study guide, but it is a good measurement tool and it produces useful predictions about passing the MC-FP Examination.

 Delivering the test

Encourage residents to take the test as if it were the certification exam. Tell them:
• Do your best
• Do not ask friends what was on it before taking it (to inflate your score)
• It will degrade the predictive validity of the score. [You are misleading yourself and your program director.]
• It is an issue of professionalism

For more information from the PDW presentations, visit https://www.theabfm.org/cert/pdnewsletter.aspx

2015 IN-TRAINING EXAMINATION

The 2015 In-Training Examination will be administered on October 26, 27, 28, 29, and 30. The exam may be administered on any or all of the five days offered. You may choose to separate your residents into subgroups and administer several sessions on one exam day or utilize several of the dates.

Registration will open in late July and instructions and further details will be sent at that time. In the meantime, we recommend that you begin planning a location and computer access for the exam date you plan to administer the examination.
A REVIEW of ABFM POLICIES

Achieving Diplomate status

Certification will be awarded upon completion of the following requirements:

• Successful performance on the ABFM MC-FP Examination
• Completion of training with verification from the program director that the resident has satisfactorily met all ACGME requirements
• A currently valid, full and unrestricted license to practice medicine in the U.S. or Canada must be held and the candidate must be in compliance with the Guidelines on Professionalism, Licensure and Personal Conduct.

Common Deficiencies

• Training period does not span one year
• PGY2/PGY3 years not continuous or extended
• Medical license
• Not meeting the 50 MC-FP point requirement

Absence From Training

• Time away from the residency program for educational purposes, such as workshops or continuing medical education activities, are not counted in the general limitation on absences but annually should not exceed five days.
• Time away from the residency program due to FMLA still represents an absence and a break in continuity of care

Transfer/Advanced Level Entry

The process of accepting a resident with transfer/advanced placement credit requires two key pieces of information prior to entry:

• Written or electronic verification of previous educational experiences
• A summative competency-based performance evaluation
Absence From Residency

Should a resident exceed the maximum Excused Absence Time (vacation, illness, personal business, leave, etc.) of 1 month within an academic year (PGY-1, PGY-2, PGY-3):

• the additional absence time is to be made up before the resident advances to the next training level
• the time must be added to the projected date of completion of the required 36 months of education
• Program Directors are expected to inform the Board promptly by electronic mail of the date of departure and expected return date in cases where a resident is granted a leave of absence from the program, or must be away because of illness or injury
• All time away from training in excess of the allocated time for vacation and illness, should be recorded in the Resident Training Management (RTM) system
• Absences exclusive of vacation/sick time, and CME/workshop days, may interrupt continuity of patient care without penalty in each of the PG-2 and PG-3 years if the absence does not exceed 3 Months
• Residents will be permitted to take vacation time immediately prior to or subsequent to a leave of absence

Absence Greater Than 3 Months

An absence greater than 3 months is considered a serious violation of Continuity of Care (COC) requiring a review by the Credentials Committee of the ABFM. Programs must be aware that the Board may require the resident to complete additional COC requirements beyond what is normally required to be eligible for certification.

• May result in restarting the G-2 year.
• If there is evidence of a “Hardship,” a waiver of the requirement may be obtained

Definition of a Hardship

A debilitating illness or injury of an acute but temporary nature, or the existence of a threat to the integrity of the resident’s family, which impedes or prohibits the resident from making satisfactory progress toward the completion of the requirements of the residency program.
Absences Generally Recognized as Hardships:

- Complications during pregnancy
- Post delivery problems with the infant and/or mother
- Prolonged illness
- Injury/Accident
- The closing of a residency

Examples of Absences Not Recognized as Hardships

- Preparation for USMLE Exam.
- Decision by a resident to extend maternity leave as a personal choice.
- Absence Under the Family Medical Leave Act (FMLA).
- A request to transfer with >12 months of credit due to interpersonal conflicts with peers, director, faculty, or others.

Absences Greater Than 3 Months

ABFM will consider absences if:

- absence from COC does not exceed 12 months;
- excused absence time (vacation/sick time) for the academic year has been reasonably exhausted by the resident;
- condition causing absence from training is within the Americans with Disabilities act (ADA) definition of disability.
- for absence < 12 months, the amount of the 24-month COC requirement already completed is a factor

Absence from Training

Absence from the residency, exclusive of the one month vacation/sick time, may interrupt continuity of patient care for a maximum of three (3) months in each of the G-2 and G-3 years of training. Leave time may be interspersed throughout the year or taken as a three-month block.

Absence From Residency

Following a leave of absence of less than three months the resident is expected to return to the program and maintain care of his or her panel of patients for a minimum of two months before any subsequent leave.
RESIDENTS’ CONTACT INFO AFTER RESIDENCY COMPLETION

The ABFM frequently experiences issues with being able to contact residents after completion of training. Please remember to use the resident’s personal mailing address and email address when creating their portfolio. Do not use the mailing address or generic email address of the residency program. Please encourage your graduating residents to keep the ABFM informed of their new mailing addresses, phone numbers, and email addresses so that we are able to keep in touch with them concerning important matters. We receive many returned ABFM certificates marked as undeliverable or return to sender. Quite often we are unable to locate current mailing addresses or phone numbers to contact the individuals whose mail has been returned.

2015 In-Training Examination
Exam Dates – October 26 – 30
Online Testing Only

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Please let us know how we can improve this newsletter. Contact us at communications@theabfm.org with your thoughts.