ATTENTION PROGRAM DIRECTORS! EMAIL UPDATES NEEDED!

It will be necessary for all residents who plan to take the ABFM MC-FP Exam to have a valid current email in the Resident Training Management (RTM) system. The ABFM uses email as the primary mode of contact with candidates regarding the Maintenance of Certification application and exam process. Residency Directors should not enter their own email as a substitute for their residents’ in the RTM system, as this will result in the Director receiving many email reminders and exam-related communications intended for the resident.

IN-TRAINING EXAM MOVES TO OCTOBER

The In-Training Examination (ITE) is moving from its traditional November dates and is now being offered during the last week in October. In 2011, this means that the ITE will be offered on October 26, 27, and 28.

The purpose of the examination is to provide an assessment of each resident’s progress, while also providing programs with comparative data about the program as a whole.

Scores are usually available within 6 weeks of the examination date. Program directors can access the scores through the ABFM’s Resident Training Management web page.
The dates for the April 2012 MC-FP Examination are:
April 6, 7, 9, 10, 11, 12, 13, 16, 17, 18, 19, 21

Residents can access the application for the April examination beginning December 1, 2011 at www.theabfm.org by logging in to their physician portfolio with their ABFM ID/Username and password and following the steps below. If a resident does not know his or her ABFM ID/Username and password, residency program coordinators should be able to provide this information, or the resident may contact the ABFM Support Center at 1-877-223-7437 or help@theabfm.org.

To activate the online application for the exam:
1. Review personal information and update if necessary
2. Click “MC-FP Examination” under “Track Your Progress”
3. Click “Request Application”
4. Click “Continue”
5. Click “Begin Application”

Residents who are in good standing and expected to complete training on or about July 1, 2012 are eligible to take the examination. A currently valid, full, and unrestricted license to practice medicine in the US or Canada is not required to apply for and take the April examination. Certification will be awarded when all of the criteria are met:

1. Successful performance on the ABFM MC-FP Examination
2. Verification by the Program Director that the resident has successfully met all of the ACGME program requirements
3. The candidate obtains a currently valid, full, and unrestricted license to practice medicine in the US or Canada

These conditions must be met by December 31, 2012, or the results of the examination will be invalidated, the fee will be forfeited, and the Resident will have to retake the examination.

The MC-FP Examination will also be offered in November for those residents in good standing who are expected to complete training on or about December 31, 2012.

The dates for the November 2012 MC-FP Examination are:
November 7, 8, 9, 10

As with the April exam, a currently valid, full, and unrestricted license to practice medicine in the US or Canada is not necessary to apply for and take the exam, but in order to be awarded certification, the same three criteria listed above must be met by June 30 of the following year or the results of the examination will be invalidated and the Resident will have to retake the examination.
The Health Resources and Services Administration (HRSA), with leadership from Dr. Kathleen Klink and her staff at the Bureau of Health Professions, continues to collaborate with the American Boards of Family Medicine, Internal Medicine, and Pediatrics to examine the needs of faculty teaching in primary care residencies in preparation for a possible faculty development program.

The three boards and HRSA recognize that the Patient-Centered Medical Home and other practice changes present new opportunities and challenges which require adjustments to training. Furthermore, an emphasis on improved evaluation and measurement of competencies is expanding expectations of residency faculty, and it is likely that many residency programs are receptive to some assistance with faculty development in some areas.

HRSA and the three participating Boards are sponsoring a national summit on January 12, 2012 in Washington, DC to focus on faculty development needs of primary care residencies and how they might be met. This invitational conference will include experts from all three primary care disciplines and other stakeholders and feature planning for the content and structure of a national program capable of assisting all primary care residencies. After this planning phase concludes, a pilot project involving a few locations is anticipated. Stay tuned for further reports as this effort advances.

Encourage your Residents and your Programs to follow us on Facebook and Twitter. We are beginning a Question of the Week feature on our Facebook page. We will post a question on Monday and follow-up with the answer (and references) later in the week.
SCENARIO:

Dr. Charles Jones (not his real name) entered his Family Medicine Residency Program on July 1, 2006 as a PGY1 resident. His training was uninterrupted until the beginning of the third year when he took a one-month leave of absence (7/1/08-7/31/08). Upon his return from leave, Dr. Jones completed two months of training through September 30, 2008, when he took a second leave for one month. Dr. Jones returned to training on November 1, 2008, but was terminated from the program on November 25, 2008. Shortly thereafter, the ABFM received notification from the Residency that Dr. Jones was dismissed because he had failed to complete a program requirement for residents to pass the USMLE Step 3 examination within the first three months of the PG3 year.

On March 28, 2009, the ABFM received a communication from the Residency Program that Dr. Jones had passed the USMLE examination, and authorization for his return to training at the point of departure was requested.

A meeting of the ABFM Credentials Committee was held in April, 2009. What policies of the ABFM are pertinent to this case, and what was the likely ruling of the Committee?

Policy: LONG-TERM ABSENCE

Leaves of absence in excess of three months are considered a violation of the continuity of care requirement. Programs must be aware that the Board may require the resident to complete additional continuity of care time requirements beyond what is normally required to be eligible for certification.

Policy: WAIVER OF CONTINUITY OF CARE REQUIREMENT

While reaffirming the importance of continuity of care in Family Medicine residency training, the Board recognizes that hardships occur in the personal and professional lives of residents. Accordingly, a waiver of the
ABFM Policies and Procedures cont.

continuity of care requirement or an extension of the leave of absence policy may be granted when a residency training program closes or when there is evidence of the presence of a hardship involving a resident.

A hardship is defined as 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.

(See the ABFM webpage https://www.theabfm.org/cert/absence.aspx for the complete policy on absence for residency and waiver of the Continuity of Care requirement.)

Decision by the Credentials Committee

It was the determination of the Credentials Committee that the leave of absence extending beyond three months was not due to a hardship as defined by the ABFM; thus, the request for a waiver of the Continuity of Care requirement was denied. The Program was advised that Dr. Jones was required to return to training at the beginning of the PG2 Year and to successfully complete 24 months of training, in continuity, in order to seek certification by the ABFM.

NEW PREREQUISITES FOR CERTIFICATION BEGIN IN 2012

The ABFM Board of Directors has determined that all PGY1 Family Medicine residents who enter training after June 1, 2012, must accumulate a combination of 50 MC-FP points to be eligible to sit for the 2015 examination. Points are accumulated by completing Part II (SAMs) and Part IV (PPMs, Metric, etc.) modules. At least one SAM and at least one Part IV activity must be included in the 50 points. Transition rules will apply to transfers.