

American Board of Pediatrics
Subspecialty Board in Pediatric Hospital Medicine

Where are we and what does this mean for me?

Erin Fisher, MD, FAAP, MHM
Daniel Rauch, MD, FAAP, SFHM

ListServ Live Webinar Series
Hosted by the AAP Section on Hospital Medicine



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Objectives

- Review the basic ABP subspecialty board **process**
- Describe **new steps** in this process affecting PHM, and highlight the benefits of these



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- Use **case examples** to review how pediatric hospitalists may engage in the subspecialty board



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- Review the basic ABP subspecialty board **process**
- Describe **new steps** in this process affecting PHM, and highlight the benefits of these
- Use **case examples** to review how pediatric hospitalists may engage in the subspecialty board
- Briefly summarize the process for **fellowship accreditation**



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Some terms

- **Certification** = for an individual
- **Accreditation** = for a training program



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 - American Board of Pediatrics = for peds/peds subs
 - Other Boards = for others e.g. Medicine, Genetics
 - American Board of Medical Subspecialties = over all
<http://www.abms.org/member-boards/specialty-subspecialty-certificates/>
 - "I am board certified in X"



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 - “I am board certified in X”
- **Accreditation** = for a training program
 - Accreditation Council for Graduate Medical Education (ACGME)
 - “I am the (residency/fellowship) director for XYZ ACGME accredited program”



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The ABP process



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The ABP process

The Committees and Members

- Practice Analysis
- Practice Pathway
- EPAs
- Credentials
- Subboard
- Medical Editor

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The ABP process

The Committees and Members

- **Practice Analysis:** Survey of existing practice
- **Practice Pathway:** Criteria for practicing PHM
- **EPAs:** develop Entrustable Professional Activities
- **Credentials:** Review applicants
- **Subboard:** 1st exam, MOCA, overall
- **Medical Editor:** works with ABP



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The new ABP process

- **Practice Analysis:** benefit = real world view
 - Development of PHM 'core'
 - Will result in survey of PHM community for validity
 - Drives certifying exam content
- **MOCA** from the inception of subboard: benefit = up to date questions



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The new ABP process

- Everyone has to take the exam
 - Two Paths to exam eligibility
 1. Training (fellowship)
 2. Practice Pathway (I am already practicing)

Practice Pathway is available for the 1st 3 tests:
2019, 2021, 2023



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The new ABP process

- Training:
 - 2 year (or longer) PHM fellowship within the last 7 years of applying for eligibility
 - 1 year PHM fellowship within the last 7 years plus 2 years of practice in the last 4 years
- Practice:
 - Within the 4 most recent years in PHM
 - 50% time in PHM related activities
 - 25% time clinical PHM



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Who am I?

Fellowship?

- At least 2 year fellowship within the last 7 years*?

* From time of your application

No fellowship?

- At least 4 years in PHM before June 2023?



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Who am I?

Fellowship?

- At least 2 year fellowship within the last 7 years?

YES: Use FELLOWSHIP PATHWAY

NO: USE PRACTICE PATHWAY

No fellowship?

- At least 4 years in PHM before June 2023?

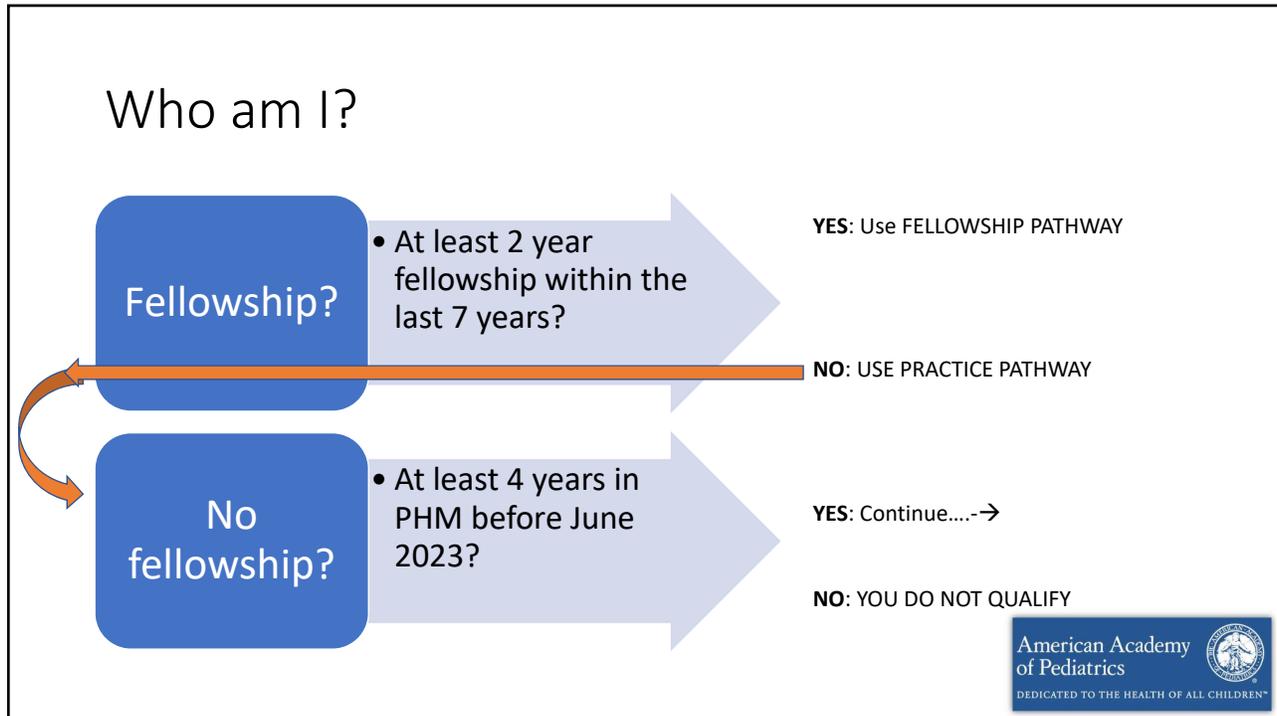
YES: Continue....->

NO: YOU DO NOT QUALIFY

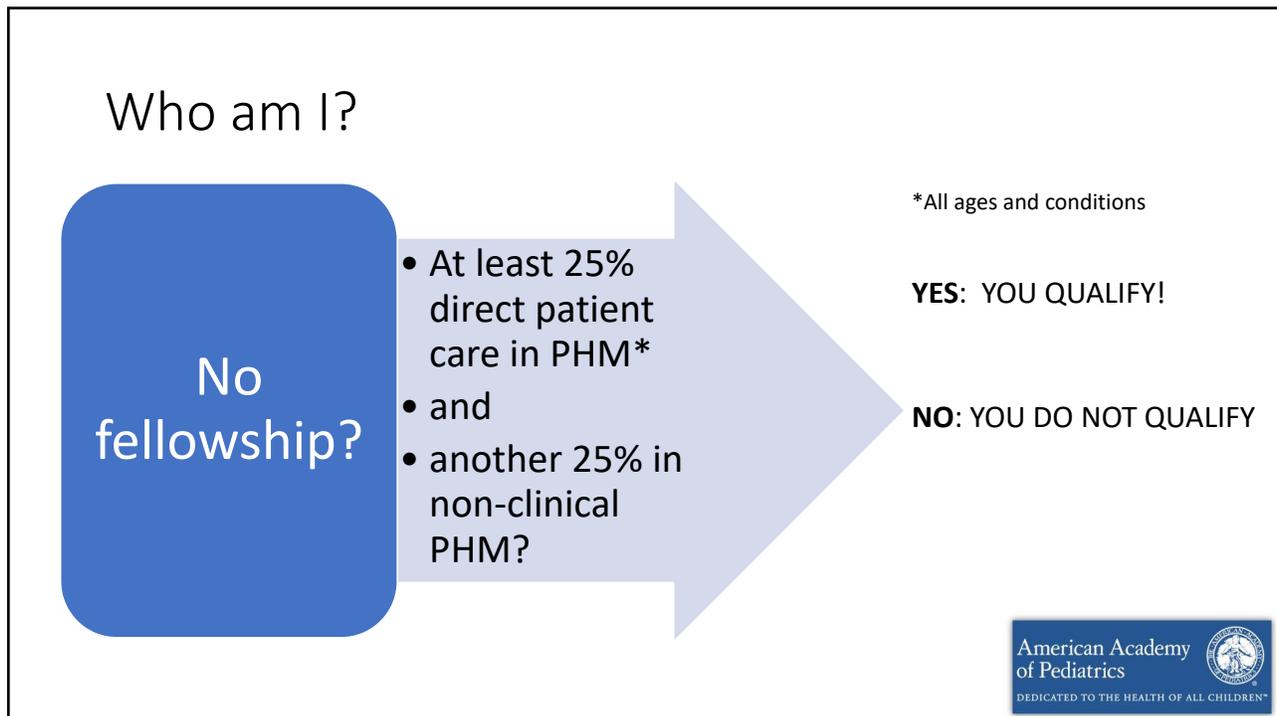


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The new ABP process

- Timing – Clock starts July so for 2019 exam criteria must be met by July 2019
 - 7/15-6/19 for 2019 test
 - 7/17-6/21 for 2021 test
 - 7/19-6/23 for 2023 test **Note these dates for current residents*
- Duration of eligibility: 7 years (= 3 tests) from the time you gain eligibility
 - Eligibility can only be lost by time



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Special Circumstances

- **Part time:** still must meet total time expectation of 50%/25% so if total 50%FTE then all your time must be PHM and half of that must be clinical
- **Med/Peds:** 50% PHM activities can include HM work but 25% clinical PHM is necessary
- All MUST be ABP Gen Peds certified



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Details

- Maintaining Gen Peds Boards – not necessary
- MOC
 - same requirements as Gen Peds and no extra MOC2 or 4 if Gen Peds (or any other boards) maintained.
 - Only additional cost is added test
 - ABIM and ABP MOC credit can be used for ABP



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More Details

- Studying for the test
 - ABP publishes test content
 - Study materials developed by others: AAP PREP
- GAP fellowships – may be substituted for PHM fellowship if clinical training was PHM



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The ACGME process

- In parallel to subboard
- Will create criteria for fellowship content
- What is new: This is the 1st training program approved for a 2-year duration
- Will be based on “EPAs” = Entrustable Professional Activities
 - Some are “core” to all Peds subspecialties
 - 6 are unique to PHM



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Fellowships

- Currently 43 with several in development
- Participates in Fall Match (41 programs)
- All will be at least 2 years soon – some offer 3rd year to obtain additional degree
- <http://phmfellows.org/>



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Case 1

- Dr Giboney has been out of pediatric residency for 12 years. She practices at a community hospital. Her daily work includes care for any pediatric ward patient, newborns, and Labor and Delivery. Although rare, she occasionally provides ED consults as well.
- She is not clear on how much time she spends between each of these services.



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- She is not clear on how much time she spends between each of these services.
- Can Dr Giboney sit for the PHM subboard?
- What may Dr Giboney consider when making this decision?



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Case 2

- Dr Tajani completed Med/Peds residency 4 years ago and since that time has provided care to both adult and pediatric patients. He spends 1/3 of his time in the care of hospitalized pediatric patients.



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- Can Dr Tajani sit for the PHM subboard?
- What may Dr Tajani consider when making this decision?



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Case 3

- Dr Jaxon has been working as a pediatric hospitalist in a community site in a rural area for over 20 years. He wants to continue his work for about 10 more years, but is not certain if he needs to take the subboard test. His local medical staff states there will not be any requirement for board certification for those already practicing hospital medicine but there will be for future physicians once fellowships are accredited.



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Case 3

- Dr Jaxon has been working as a pediatric hospitalist in a community site in a rural area for over 20 years. He wants to continue his work for about 10 more years, but is not certain if he needs to take the subboard test. His local medical staff states there will not be any requirement for board certification for those already practicing hospital medicine but there will be for future physicians once fellowships are accredited.
- Can Dr Jaxon sit for the PHM subboard?
- What may Dr Jaxon consider when making this decision?



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Questions?

Thank you for your engagement in Pediatric Hospital Medicine



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Thank You

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<http://www.sohmlibrary.org/webinars.html>



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