GENERAL ELIGIBILITY CRITERIA FOR CERTIFICATION IN THE PEDIATRIC SUBSPECIALTIES

In addition to the training requirements, which are specific to each of the pediatric subspecialties, the following are required of candidates seeking certification in the pediatric subspecialties of adolescent medicine, cardiology, critical care medicine, developmental-behavioral pediatrics, emergency medicine, endocrinology, gastroenterology, hematology-oncology, infectious diseases, neonatal-perinatal medicine, nephrology, pulmonology, and rheumatology. Each candidate must be familiar with specific subspecialty training requirements as well as the policies stated in the current Booklet of Information.

A. Certification by the American Board of Pediatrics (ABP)

An applicant must be currently certified in general pediatrics to be accepted for a pediatric subspecialty certifying examination. Applicants whose time-limited certification will expire before the examination must complete the requirements for maintenance of certification at least 5 months before the examination date.

B. Licensure

An applicant must have a valid (current), unrestricted license to practice medicine in one of the states, districts, or territories of the United States or a province of Canada in which he or she practices or have unrestricted privileges to practice medicine in the US Armed Forces. If licenses are held in more than one jurisdiction, all licenses held by a physician should meet this requirement.

An applicant who is practicing the subspecialty abroad exclusively may be exempted from this license requirement upon presentation of proof of licensure in the country in which he or she practices. Candidates who practice or plan to practice abroad exclusively must submit a letter, in addition to the licensure, stating this fact. A copy of the license must accompany the application material.

C. Verification of Training

An applicant will be asked to list the program(s) where fellowship training occurred as well as the name(s) of the program director(s). The ABP will provide a Verification of Competence Form to the program director(s) for completion. (Note: For new subspecialties, alternatives to the usual training requirements, such as practice experience, will be acceptable as criteria for admission to the examination. Candidates should refer to the specific subspecialty eligibility criteria for details.) The role of the program director in the certification process is to verify completion of training, evaluate clinical competence including professionalism, and provide evidence of the trainee's meaningful accomplishment in research or scholarly activity.

An applicant must have the Verification Form(s) on file at the ABP in order to be admitted to the subspecialty examination. If an applicant's training is not verified or if the applicant receives an unsatisfactory evaluation in any of the competences (with the exception of professionalism alone), the applicant will be required to complete an additional period of subspecialty fellowship training before reapplying. The director of the program where the additional training occurred must complete a separate Verification of Competence Form. If the unsatisfactory evaluation is in professionalism only, the applicant will be required to complete an additional period of fellowship training or, at the program director's recommendation and at the ABP's discretion, a period of observation may be required in lieu of additional training. A plan for remediation must be submitted for review and approval by the ABP.

Appeals Process: Applicants who wish to appeal evaluations must proceed through institutional due process mechanisms. The ABP is not in a position to reexamine the facts and circumstances of an individual's performance.

Transfer of Fellowship Training: For continuity of training experiences, mentoring, and assurance of meeting training requirements, it is best that a fellow complete all training in the same program. Occasionally, a fellow may need to transfer to another program for compelling reasons. In such circumstances, it is incumbent that the program directors of the current program and the proposed program communicate to ensure that the fellow who transfers will meet all requirements if he or she desires to apply for a certifying examination in the subspecialty. A Fellow Transfer Information (FT11) form should be completed by the current program director and submitted to the ABP with a copy to the proposed new program. Fellow evaluations should be submitted to the proposed program as well. Months of credit for clinical experience and research or scholarly activity completed must be clearly communicated. For those fellows beginning training July 1, 2004, and thereafter, the ABP must be informed of the plan to ensure continued appropriate mentoring for scholarly activity upon transfer, including the role of the Scholarship Oversight Committee.

An applicant must satisfactorily complete all subspecialty training before the first day of the month in which the examination is administered. An applicant whose contracted training period does not expire before the first day of the month of the examination will not be eligible for that examination, even if all formal training has been completed earlier and the remaining time is used only for leave.

No credit will be given for subspecialty training during the core general pediatric residency or a chief residency.

An applicant seeking certification in another pediatric subspecialty or a non-ABP specialty (e.g., allergy/immunology) on the basis of practice and/or training may not apply the same period of time toward fulfillment of these requirements.

D. Research/Scholarly Activity

The ABP will continue to require scholarly activity during fellowship training, but the requirement for meaningful
accomplishment in research has been modified to accommodate a wider variety of academic scholarly activities. The new scholarly activity training requirements (as outlined in Section F below) will apply to fellows beginning subspecialty training July 1, 2004, and thereafter. Those fellows who have completed training by June 30, 2004, must meet the requirement for meaningful accomplishment in research, which was in place at the time they entered training (as outlined in Section E below).

The ABP will allow two options for those fellows who began training prior to July 1, 2004, and who will not have completed training by June 30, 2004. Examples of those who might be able to use either option would be those fellows with interrupted training or those who began training July 1, 2003. These options are:

1. Fulfill the requirement for meaningful accomplishment in research, which was in place at the time training began. Approval of the research submission will be made by the ABP.

2. Meet the new training requirements for scholarly activity provided there is a Scholarship Oversight Committee in place for a minimum of 24 months to oversee the activity and judge whether it meets the requirements of the ABP.

The program director is responsible for notifying all fellows of the research/scholarly activity requirements necessary for certification upon entry to the subspecialty training program. Furthermore, in the description of the candidate’s research performance or scholarly activity on the Verification of Competence Form, the program director must provide a description of the experiences on which the acceptable evidence of research or scholarly activity is based.

E. Principles Regarding the Assessment of Meaningful Accomplishment in Research (for those who began training prior to July 1, 2004)

1. The general requirements for research and scholarly activity in pediatric subspecialties approved by the ACGME for program accreditation must be met as evidence of research experience. Currently these are as follows:

"Subspecialty residents must be instructed in the scientific and ethical bases of clinical research, including study design, modeling and methodology, statistical concepts, and data collection and analysis. The institution must provide the support necessary for a subspecialty resident to participate in such scholarly activities.

Research experience must begin in the first year and continue for the entire period of training to allow adequate time for the development of research skills, completion of research projects, and presentation of results to the medical community. Each subspecialty resident must actively participate in the design, conduct, evaluation, and preparation for publication of a clinical or laboratory research project in his/her subspecialty area.

Subspecialty residents also should have experience and be given guidance in the critical evaluation of pertinent medical literature, the process of grant application, preparation of scientific articles, and medical writing. In addition, they should be required to conduct research seminars and prepare reports of their research activities. These efforts should be reviewed and evaluated by supervising faculty."

2. Additional evidence of meaningful accomplishment in research must be submitted, including one or more of the following:

a. First author of a hypothesis-driven research paper accepted for publication in a peer-reviewed journal deemed acceptable by the Subboard. A reprint of the paper, or a copy of the letter of acceptance by the journal and a copy of the manuscript, must be submitted. This paper should be a product of the fellowship training.

b. A PhD degree in a field of science. A copy of the degree certificate must be provided.

c. A thesis accepted as partial fulfillment of the requirements for a postgraduate degree in a field relevant to the subspecialty. The thesis or a research progress report as described in 2(e) must be submitted for review with documentation that the thesis was accepted and/or the degree awarded.

d. First author of a hypothesis-driven research paper that has been submitted but not yet accepted for publication in a peer-reviewed journal deemed acceptable by the Subboard. A letter and/or electronic communication from the journal confirming the receipt of the manuscript must be included, as well as a copy of the submitted manuscript.

e. A research progress report (signed by both the applicant and mentor) no more than five pages in length that must include (a) a statement of hypothesis, (b) delineation of methodology, (c) results and analysis, and (d) significance of the research. A research progress report may not be used to meet the requirement if an applicant is more than 2 years beyond completion of fellowship training unless there are extenuating circumstances that may have prevented submission of a manuscript.

The Credentials Committee of each subspecialty will review submitted research accomplishment materials and decide whether the requirement has been met.

F. Principles Regarding the Assessment of Scholarly Activity (for those who began training July 1, 2004, and thereafter)
In addition to participating in a core curriculum in scholarly activities, all fellows will be expected to engage in projects in which they develop hypotheses or in projects of substantive scholarly exploration and analysis that require critical thinking. Areas in which scholarly activity may be pursued include, but are not limited to: basic, clinical, or translational medicine; health services; quality improvement; bioethics; education; and public policy.

In addition to biomedical research, examples of acceptable activities might include a critical meta-analysis of the literature, a systematic review of clinical practice, a critical analysis of public policy, or a curriculum development project with an assessment component. Involvement in scholarly activities must result in the generation of a specific written "work product." Examples include, but are not limited to:

- A peer-reviewed publication in which a fellow played a substantial role
- An in-depth manuscript describing a completed project
- A thesis or dissertation written in connection with the pursuit of an advanced degree
- An extramural grant application that has either been accepted or favorably reviewed
- A progress report for projects of exceptional complexity, such as a multi-year clinical trial

Review of scholarly activity and the written work product will occur at the local level with each fellow having a Scholarship Oversight Committee responsible for overseeing and assessing the progress of each fellow and verifying to the ABP that the requirement has been met. The Scholarship Oversight Committee should consist of three or more individuals, at least one of whom is based outside the subspecialty discipline; the fellowship program director may serve as a trainee's mentor and participate in the activities of the oversight committee, but should not be a standing member.

Upon completion of training, the ABP will require:

- Verification from the training program director that the clinical and scholarly skills requirements have been met
- Submission by the fellow to the ABP of a comprehensive document describing the scholarly activity that includes a description of the fellow's role in each aspect of the activity and how the scholarly activity relates to the trainee's own career development plan
- Submission by the fellow to the ABP of the actual "work product" of the scholarly activity as described above
- Signature of the fellow, program director, and members of the Scholarship Oversight Committee on the submitted documents described above

Details of the scholarly activity requirement have been published by the ABP in a document entitled Training Requirements for Subspecialty Certification (January 2004). This document can be obtained directly from the ABP. Detailed information is also available on the ABP's Web site at www.abp.org.

Program Requirements for Residency Education in the Subspecialties of Pediatrics

Program Requirements for Residency Education in adolescent medicine, pediatric cardiology, pediatric critical care medicine, developmental-behavioral pediatrics, pediatric emergency medicine, pediatric endocrinology, pediatric gastroenterology, pediatric hematology-oncology, pediatric infectious diseases, medical toxicology, neonatal-perinatal medicine, pediatric nephrology, neurodevelopmental disabilities, pediatric pulmonology, pediatric rheumatology, and sports medicine have been approved by the ACGME or by the RCPSC. Copies of the Program Requirements and lists of accredited programs are available from the Office of the Residency Review Committee for Pediatrics, 515 N. State Street, Chicago, IL 60610 or on the ACGME web site: www.acgme.org, or the Office of Training and Evaluation, the Royal College of Physicians and Surgeons of Canada, 74 Stanley, Ottawa, Ontario, K1M 1P4. This information is published in the Graduate Medical Education Directory or in the RCPSC booklets of general information.

Training Leading to Dual Pediatric Subspecialty Certification

If an individual is certified in one subspecialty, he or she can become eligible to take another subspecialty examination after 2 years of additional training, of which at least 1 year must be broad-based clinical training. If the individual was not required to meet the meaningful accomplishment in research as a requirement for certification for the first subspecialty, he or she must meet the meaningful accomplishment in research or scholarly activity during the second fellowship training period.

An individual or program director(s) may petition the Credentials Committees of two pediatric subspecialties with a proposal for a 4- or 5-year integrated training program that would meet the eligibility requirements for certification in both subspecialties. This petition must be approved before subspecialty training begins or early in the first year of subspecialty training. Guidelines for dual subspecialty training may be obtained from the ABP or can be found on the ABP Web site: www.abp.org.

Training Leading to Eligibility for Combined Subspecialty Certification

An individual who has completed internal medicine/pediatrics training should contact the American Board of Internal Medicine and the American Board of Pediatrics regarding opportunities for combined training opportunities (ie, training in both the adult and pediatric subspecialties). Combined training petitions must be prospectively approved by both boards. All training in internal medicine and pediatric subspecialty training must be completed in order for an applicant to take a pediatric subspecialty certifying examination.

Subspecialty "Fast-Tracking"

A subspecialty fellow who is believed to have demonstrated accomplishment in research, either before or during residency, may have a part of the training requirement waived. Evidence of such accomplishment might include a PhD degree in a discipline relevant to the subspecialty or career path of the fellow, or sustained research achievement relevant to the subspecialty or career path of the fellow. The subspecialty program director may petition the Subboard to waive the research...
requirements or, for those beginning subspecialty training July 1, 2004, and thereafter, the requirement for scholarly activity, and to reduce the length of subspecialty training by as much as 1 year. This petition must be made either before the beginning of training or during the first year of training.

A candidate for this pathway must have satisfactorily completed 3 core years of pediatrics or approved combined pediatrics and other specialty training in an accredited program in the US or Canada. This pathway would also be available to candidates who have satisfactorily completed at least 3 years of non-accredited general pediatrics training (e.g., overseas) and qualified for a waiver of 1 year of general pediatrics training through the Policy Regarding Individuals with Non-Accredited Training. An individual who enters subspecialty training via the Special Alternative Pathway would not be eligible for subspecialty fast-tracking.

A subspecialty fellow who receives a waiver by the Subboard must complete at least 2 years of training in the subspecialty with at least 1 year of broad-based clinical training. In order for an individual to be eligible for subspecialty certification, all requirements for general pediatrics certification must be fulfilled.

It should be noted that these criteria and conditions are subject to change without notice. All applicants should be familiar with the current Booklet of Information. Applicants are advised to contact the ABP to ascertain whether the information they have is current.

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