INTRODUCTION
At the time pediatric board certification was established in 1933, a single certificate was awarded when written and oral examinations were successfully completed, and no further contact with the ABP was expected. These certificates were referred to as “Permanent”, or non-time-limited, certificates. In the mid-1980’s increasingly rapid changes in medical knowledge resulted in certifying boards moving to time-limited certification. By May of 1988, all certificates awarded by the ABP were time limited. A process called Maintenance of Certification (MOC), increasingly referred to as Continuing Certification, allowed diplomates of the ABP to maintain certification in general pediatrics and the pediatric subspecialties by completing specific activities. Permanent certificate holders are not required to enroll in or complete Continuing Certification activities but are encouraged to do so. For permanent certificate holders, participation in the Continuous Certification process does not affect the status of the original certificate. Continuing Certification requirements have evolved, and will continue to evolve, as the American Board of Medical Specialties (ABMS) model has evolved over time.

CONTINUING CERTIFICATION CYCLE
The ABP Continuing Certification cycle is 5 years in duration, during which completion of all required activities must be documented.

ABP Continuing Certification consists of four primary parts, each with specific required activities:

- **Part 1: Evidence of Professionalism**
  - Diplomates must attest to possession of an unrestricted medical license in at least one US state or Canadian province and must attest that they have no restricted or revoked medical licenses. [https://www.abp.org/content/policies#Licensure](https://www.abp.org/content/policies#Licensure)
  - Diplomates must not engage in unethical, unprofessional, or dishonorable behavior.

- **Part 2: Evidence of Lifelong Learning and Self-Assessment.**
  - Diplomates must engage in ABP-approved activities demonstrating lifelong learning and self-assessment, earning a minimum of 40 Part 2 points during the 5-year cycle. Activities may relate to any aspect of health/pediatric care that the diplomate feels is relevant to their professional practice.

- **Part 3: Evidence of Cognitive Expertise**
  - Diplomates must demonstrate ongoing cognitive expertise during each 5-year cycle in each area in which they wish to remain certified. This may be accomplished by passing MOCA-Peds ([https://www.abp.org/mocaped](https://www.abp.org/mocaped)), or by passing the secure examination in that area during the 5-year cycle.

- **Part 4: Evidence of Improvement in Professional Practice**
  - Diplomates must demonstrate engagement in efforts to improve professional practice, using quality improvement methods and science, earning a minimum of 40 Part 4 points during the 5-year cycle. These activities can relate to any aspect of the diplomate’s professional practice that is intended to improve the health of children.

Continuing Certification Points: During each 5-year cycle, diplomates must earn a minimum of 100 points, of which 40 must come from documentation of Part 2 activities, 40 must come from documentation of Part 4 activities, and the remaining 20 points may come from either Part 2 or
Part 4.

Pediatric subspecialists are not required to maintain their general pediatrics certification. Subspecialists desiring to maintain general pediatric certification may do so by passing MOCA-Peds for general pediatrics or by passing the secure examination in general pediatrics during the 5-year cycle. Diplomates certified in Pediatric Transplant Hepatology must maintain certification in Pediatric Gastroenterology. Regardless of how many ABP general and specialty certificates an individual diplomate holds, they still have the same licensure requirement and 100 point continuing certification requirement for Part 2 and 4. However, a diplomate must meet the Part 3 requirement for each certification they wish to maintain.

ENROLLMENT
Diplomates must complete all requirements in order to enroll in a new Continuing Certification cycle. Enrollment takes place during the final year of the current cycle; the new Continuing Certification cycle officially begins at the time of enrollment and continues through the end of the 5th calendar year following the year of enrollment. Points earned do not carry over into the next cycle, thus the new cycle begins with a zero-point balance (except for residents who can carry over Part 4 points from training into their first cycle). The 5-year fee may be paid in full at the time of enrollment, or may be paid on an annual basis, due before the enrollment deadline each year. https://www.abp.org/content/enrollment-and-fees

RECIPROCAL CREDIT
Reciprocal credit is available for ABP diplomates certified by another American Board of Medical Specialties (ABMS) member board. Diplomates of ABMS boards other than Internal Medicine (ABIM) will receive 50 points in Part 2 and 50 points in Part 4 upon providing evidence that the continuing certification requirements of that board have been completed. Diplomates of the ABIM who wish to receive reciprocal credit must also complete at least one ABP Part 4 or ABIM Practice Assessment activity within the previous 60 months.

Reciprocal credit is available for diplomates participating in MOC with the Royal College of Physicians and Surgeons of Canada (RCPSC). Diplomates will receive 50 points in Part 2 and 50 points in Part 4 upon providing evidence that they are meeting MOC requirement with RCPSC, they are listed on the RCPSC's website as a Fellow or Continued Professional Development (CPD) Participant and they have a Canadian mailing address listed in their ABP Portfolio.

ABP-certified diplomates who have completed additional training in an Accreditation Council for Graduate Medical Education (ACGME) residency or fellowship may receive 10 points in Part 2 and 10 points in Part 4 for each 12 months of additional training completed during their current MOC cycle.

CONTINUING CERTIFICATION: CO-SPONSORED CERTIFICATES
In general, the individual diplomate is responsible for meeting the Part 3 requirements of the board hosting the exam. As other ABMS Boards move to longitudinal assessments (i.e. MOCA-Peds), we are working towards new agreements with other ABMS Boards related to joint board exams.
Co-sponsored Examinations:
Other diplomates take the ABP Examination
- American Board of Internal Medicine take our Adolescent Medicine Exam (ABIM – ADOL)
- American Board of Family Medicine take our Adolescent Medicine Exam (ABFM – ADOL)
- American Board of Emergency Medicine take our Pediatric Emergency Medicine Exam (ABEM – EMER)

ABP diplomates take the examination of another certifying board
- American Board of Internal Medicine provides the Hospice and Palliative Medicine, Sleep Medicine, and Pediatric Transplant Hepatology exam (ABIM – HPAL, SLMD, & THEP)
- American Board of Psychiatry and Neurology provides the Neurodevelopmental Disabilities Exam (ABPN – NDEV)
- American Board of Family Medicine provides the Sports Medicine Exam (ABFM – SMED)
- American Board of Emergency Medicine provides the Medical Toxicology Exam (ABEM – MTOX)

PEDIATRIC RESIDENTS AND FELLOWS NOT YET CERTIFIED BY THE ABP
To enroll in the ABP Continuing Certification program, one must first pass the ABP initial certification exam. Therefore, residents and fellows who are not yet certified are not enrolled in Continuing Certification, however they may earn Part 4 credit that they can “bank” for use once they are certified. Upon passing the initial certification exam in general pediatrics, they become ABP certified and begin their first 5-year Continuing Certification activities cycle. Any Part 4 credit banked within the last 7 years is then added to their portfolio and counts towards their Continuing Certification requirements. During a diplomate’s first Continuing Certification cycle they must to accumulate 100 points in Part 2 and Part 4, maintain a valid, unrestricted medical license and may optionally participate in MOCA-Peds for general pediatrics for Part 2 credit.

FELLOWS ALREADY CERTIFIED BY THE ABP
Fellows who have already passed the general pediatrics exam are certified and are already in a Continuing Certification cycle. Being in a fellowship training program does not alter their Continuing Certification requirements. They are required to accumulate 100 points in Part 2 and Part 4 and maintain a valid, unrestricted medical license, and they will have access to optionally participate in MOCA-Peds for general pediatrics for Part 2 credit.

For every 12 months of ACGME-accredited fellowship training that a specialty fellow completes within their five-year MOC cycle, they will receive 10 MOC points in Part 2 and 10 MOC points in Part 4.

Becoming initially certified in a new subspecialty will extend their current cycle by 1 year allowing for additional time to complete requirements and pay the enrollment fees.

REGAINING CERTIFICATION AFTER EXPIRATION OF THE CERTIFICATE
A diplomate’s certificate will expire if they do not meet all requirements of continuing certification
by the end of their cycle or fail to pay at the time their annual payment is due. A diplomate can
regain certification by completing the necessary requirement (i.e. obtain valid and unrestricted state
license, complete Part 2 points, complete Part 4 points, pass exam, pay fee). Part 2 / Part 4 points
expire 60 months after they are earned.

DISCIPLINARY ACTION
Diplomates who experience disciplinary actions against a medical license or who engage in
unethical, unprofessional, or dishonorable behavior do not meet requirements for licensure and
professionalism; and may have their certificates revoked by the ABP. Diplomates can apply for re-
entry into Continuing Certification once disciplinary actions against their license have been resolved
and/or the terms imposed by the ABP Credentials Committee have been satisfied. Please refer to
the Disciplinary Policy and the Revocation Procedure for additional information.

SPONSOR ORGANIZATIONS
Many Part 2 and Part 4 Continuing Certification activities are available to physicians through
sponsor organizations. Sponsor organizations are permanent, identifiable entities external to the ABP. Activities developed
by such organizations are approved through a formal review process. These organizations include:
- Hospitals
- Healthcare organizations
- State or nationwide networks and collaboratives
- National professional societies
- Corporations

Sponsor organizations may develop Part 2 and 4 activities or a combination of both.
- Part 2 activities must be submitted through the Accreditation Council of Continuing Medical
  Education (ACCME) Program and Activity Reporting Service (PARS).
- Part 4 activities are either Web-based activities or quality improvement (QI) projects that are
  focused on improving professional practice. Physicians must attest to Meaningful
  Participation as part of a QI Project. Meaningful Participation is defined by the ABP as
  involving both an active role in the project, and participation over an appropriate period of
time. The ABP approves QI projects in which pediatricians are active participants in
implementing change.