GENERAL PEDIATRICS

Overview of the Requirement:
Beginning with the examination administered in 2014, the American Board of Pediatrics requires that applicants have completed the training required for initial certification in general pediatrics within the previous 7 years (e.g., 2017 or later for examinations administered in 2024). If the required training was not successfully completed within the previous 7 years, the applicant must complete a minimum of 6 months of supervised practice. The purpose of the requirement is to provide the ABP with an independent assessment of the individual’s contemporary competence to practice pediatrics without supervision. Such verification of contemporary competence is required before the ABP will allow an additional 7-year window of eligibility to sit for the certifying examination. The supervised practice may be completed through one of the following pathways:

Supervised Practice/Training Program Pathway:
New applicants and re-registrants for the general pediatrics certifying examination who have completed residency training prior to the 7-year eligibility window must satisfactorily complete a minimum of 6 months of supervised general pediatrics practice in the environment of an accredited training program that offers a breadth of general pediatrics experience. This practice must be supervised such that the program director and faculty of the accredited program can assess the individual’s contemporary competence to practice pediatrics unsupervised. The program director of the accredited general pediatrics residency must submit the specifics of the planned experiences to the ABP for approval prior to initiation and then verify the individual’s competence at the conclusion of the supervised practice. The ABP allows flexibility in the design of the clinical experiences, but they must include inpatient experience, newborn care, emergency care, recognition and stabilization of the ill child, and outpatient experience. Details of these requirements are outlined in an accompanying document, Plan for Supervised Practice and Assessment of Competence in General Pediatrics in the Accredited Training Program.

Preceptor Pathway (For General Pediatrics Only)
The American Board of Pediatrics has approved programs for pediatricians to regain eligibility to the General Pediatrics Initial Certification Examination administered by two independent organizations, Center for Personalized Education for Professionals (CPEP) and the Knowledge, Skills, Training, Assessment and Research (KSTAR) program, which are organizations that provide assessment and education for physicians. The American Board of Pediatrics does not receive any financial benefit from CPEP or KSTAR or participants in these programs,

Applicants may participate in a pilot program that provides a pathway aided by a preceptor. Please note, to participate in CPEP or KSTAR, the applicant must be practicing in general pediatrics.

For additional information, please contact:

CPEP
info@cpepdoc.org
303-577-3232
Following the satisfactory completion of the period of supervised practice through either the training program pathway or the preceptor pathway, the candidate will have 7 years to become certified. If unsuccessful in becoming certified during the additional 7 years of eligibility, the applicant must enter an accredited general pediatrics residency program and complete 3 years of training in order to regain eligibility. When applying or re-applying for certification, the applicant must meet the requirements for acceptance in effect at that time.

For additional information, please visit the Plan for Supervised Practice and Assessment of Competence in General Pediatrics in the Accredited Training Program and the Questions and Answers page.
PEDIATRIC SUBSPECIALTIES

Overview of the Requirement:
Beginning with the examinations administered in 2014, the American Board of Pediatrics requires that applicants have completed the training required for initial certification in the pediatric subspecialties within the previous 7 years (e.g., 2017 or later for examinations administered in 2024) with one exception noted below.* If the required training was not successfully completed within the previous 7 years, the applicant must complete an additional period of supervised practice in a training program accredited by the ACGME in the US, or the RCPSC in Canada in order to apply for certification. The purpose of the requirement is to provide the ABP with an independent assessment of the individual’s contemporary competence to practice the pediatric subspecialty without supervision. Such verification of contemporary competence is required before the ABP will allow an additional 7-year window of eligibility to sit for the certifying examination.

Details of the Requirement:
New applicants and re-registrants for subspecialty certification who have completed fellowship (or were approved on the basis of practice) prior to the 7-year time limit must satisfactorily complete a minimum of 6 months of supervised clinical subspecialty practice in the environment of an accredited training program, with the breadth of experiences comparable to the clinical experiences in fellowship. The supervised practice must be in the discipline in which certification is sought. This practice must be supervised such that the program director and faculty of the accredited program can assess the individual’s contemporary competence to practice the subspecialty unsupervised. The program director of the accredited fellowship must submit the specifics of the planned experiences to the ABP for approval prior to initiation and then verify the individual’s competence at the conclusion of the supervised practice. The ABP allows flexibility in the design of the clinical experiences as long they allow comprehensive assessment in all aspects of the subspecialty discipline needed for unsupervised practice. Details of these requirements are outlined in an accompanying document, Plan for Supervised Practice and Assessment of Competence in a Subspecialty in the Accredited Training Program.

Following the satisfactory completion of the period of supervised practice, the candidate will have 7 years to become certified. If unsuccessful in becoming certified during the additional 7 years of eligibility, the applicant must enter an accredited subspecialty fellowship program and complete 2 years of training in order to regain eligibility. The requirement for scholarly activity is waived. When applying or re-applying for certification, the applicant must meet the requirements for acceptance in effect at that time.

Exception:
*The following provision may apply to individuals who completed subspecialty training in the US or Canada before completing the accredited general pediatrics training required for certification by the ABP. Most of these individuals will have completed nonaccredited pediatrics training overseas or osteopathic pediatric training in the US. The provision is as follows:

Individuals who, solely because of their sequence of training, will not have an opportunity to take a subspecialty examination before their subspecialty eligibility has expired will be permitted one opportunity to take a subspecialty examination, provided that no more than 10 years have elapsed.
since their subspecialty training was completed and the individual is currently certified in general pediatrics.

For additional information, please visit the Plan for Supervised Practice and Assessment of Competence in a Subspecialty in the Accredited Training Program and the Questions and Answers page.
OVERVIEW:
The purpose of the requirement is to provide the ABP with an independent assessment of the individual’s contemporary competence to practice pediatrics without supervision through a supervised practice experience.

- The supervised practice must involve direct patient care, with hands-on experience, in the environment of an ACGME (in the US) or an RCPSC (in Canada) accredited training program that offers a breadth of general pediatrics experience.

- The supervised practice must extend over a minimum of 6 months, but the required experiences as detailed below could be spread out over 12 months to accommodate personal needs.

- This experience must be under the consistent supervision of attending physicians as well as more senior residents if appropriate with a goal of providing sufficient exposure time per assessor in order to provide a valid assessment of the individual’s contemporary competence to practice pediatrics unsupervised. There must be a multifaceted method for the objective evaluation and documentation of clinical competence such as a multi-source evaluation (360-degree assessments) in which faculty, residents, fellows, nursing staff, patients, and families provide input.

- The Program Director of the accredited general pediatrics training program must submit the specifics of the planned experiences to the ABP for approval prior to initiation and then verify the individual’s clinical competence at the conclusion of the supervised practice.

SPECIFIC REQUIREMENTS:

- **Inpatient care experience:** This experience in an ACGME or RCPSC approved program must consist of blocks of no less than two weeks, five days a week and may or may not require night and weekend call, for at least 8 weeks in aggregate. The experience must consist of at least four weeks caring for general pediatrics patients or mixed non-intensive care subspecialty patients. The remaining time could include up to four weeks of intensive care in the PICU or NICU, or up to four weeks caring for patients in a single subspecialty.

- **Emergency Department experience:** This experience in an ACGME or RCPSC approved program must consist of blocks of no less than one week for at least four weeks in aggregate, working five days a week, with one 8-hour shift daily.

- **Newborn care experience:** This experience in an ACGME or RCPSC approved program must be of at least four weeks duration, with a minimum of two-week blocks. Two of the four weeks could be spent in the NICU or Level II nursery rather than the well-baby nursery if such an experience provides a greater opportunity for demonstrating skills in resuscitation.
spent in the NICU or Level II nursery cannot be double-counted with the inpatient care experience.

- **Outpatient practice experience**: This experience in an ACGME or RCPSC approved program must consist of supervised longitudinal care, including either one half-day of ambulatory general pediatrics experience per week for at least 6 months or a full-day experience once a week for at least 3 months.

- **Stabilization of the sick newborn or child**: This experience can be gained by the documented management of seriously ill children while working in the setting of the Emergency Room or the intensive care units (see above).

- **Additional Experience Relevant to Current Practice**: The remaining time to fulfill the 6-month requirement may include detailed assessment of clinical competence in the candidate’s usual site of practice if agreed to by the program director. This must include review of 10 de-identified case records by the Program Director and 360 degree assessments by at least 2 physicians and 2 nurses in the practice and 10 patients/families submitted to the Program Director for review. Alternatively, an experience within the accredited residency training program is at the discretion of the Program Director and the candidate. It may address areas of interest or deficiency.

**OUTCOME:**

- At the time the candidate applies for certification, the Program Director must submit documentation that clinical competency was assessed and verified based on evaluations from faculty and from practice site observers, if applicable, after the completion of a minimum of 6 months of supervised practice. Evaluations should be made available to the ABP if requested. If competence is not verified by the program director, the individual must enter an accredited general pediatrics residency and complete 3 years of training in order to regain eligibility.

- Following the satisfactory completion of the 6 months of supervised practice, the candidate will have 7 years to become certified. When applying or re-applying for certification, the applicant must meet the requirements for acceptance in effect at that time.

- If unsuccessful in becoming certified during the additional 7 years of eligibility, the candidate must enter an accredited general pediatrics residency program and complete 3 years of training in order to regain eligibility.
ABP Corporate Policy
Time Limited Eligibility for Initial Certification Examinations

Time-Limited Eligibility – Plan for Supervised Practice and Assessment of Competence in a Subspecialty in the Accredited Training Program

OVERVIEW:
The purpose of the requirement is to provide the ABP with an independent assessment of the individual’s contemporary competence to practice a subspecialty without supervision through a supervised practice experience.

- The supervised practice must involve direct patient care, with hands-on experience, in the environment of an ACGME- (in the US) or an RCPSC- (in Canada) accredited training program that offers a breadth of subspecialty experience.

- The supervised practice must extend over a minimum of 6 months but the required experiences as detailed below could be spread out over 12 months to accommodate personal needs.

- This experience must be under the consistent supervision of attending physicians, as well as more senior fellows if appropriate, with a goal of providing sufficient exposure time per assessor in order to provide a valid assessment of the individual’s contemporary competence to practice the subspecialty unsupervised. There must be a multifaceted method for the objective evaluation and documentation of clinical competence such as a multi-source evaluation (360-degree assessments) in which faculty, residents, fellows, nursing staff, patients, and families provide input.

- The Program Director of the accredited subspecialty training program must submit the specifics of the planned experiences to the ABP for approval prior to initiation and then verify the individual’s clinical competence at the conclusion of the supervised practice.

SPECIFIC REQUIREMENTS:
- The ABP will not delineate specific, detailed experiences for each subspecialty. The supervised practice must consist of core clinical experiences in the subspecialty, pursuant to the usual ACGME requirements. The Program Director should incorporate experiences that will allow assessment of the breadth of competence in the subspecialty. Neither research nor advanced subspecialty experiences are sufficient to fulfill this requirement.

- For intensive care subspecialties and emergency medicine, the candidate should spend sufficient time in the intensive care unit or in the emergency medicine department so that faculty can judge the candidate’s clinical competence. If less than 6 months is spent in the intensive care unit or emergency department, other relevant experiences are allowed.

- For procedural subspecialties, the candidate should undergo sufficient direct observation to allow the program director to assess competence. The number of procedures is not specified.
• In certain subspecialties, sufficient time must be allotted for continuity experiences that will allow continued care of the chronically ill child.

• If the site of practice is in the community and not at an academic institution with a fellowship training program, up to 1 month of supervised practice may take place in the practice site, if agreed to by the Program Director. This must include review of 10 de-identified case records by the Program Director and 360 degree assessments by at least 2 physicians and 2 nurses in the practice and 10 patients/families submitted to the Program Director for review. Alternatively, an experience within the accredited fellowship training program is at the discretion of the Program Director and the candidate. It may address areas of interest or deficiency.

OUTCOME:

• At the time the candidate applies for certification, the Program Director must submit documentation that that clinical competency was assessed and verified based on evaluations from faculty and from practice site observers, if applicable, after the completion of a minimum of 6 months of supervised practice. Evaluations should be made available to the ABP if requested. If competence is not verified by the program director, the individual must enter an accredited subspecialty fellowship program and complete 2 years of training in order to regain eligibility. The requirement for scholarly activity is waived.

• Following the satisfactory completion of the 6 months of supervised practice, the candidate will have 7 years to become certified. When applying or re-applying for certification, the applicant must meet the requirements for acceptance in effect at that time.

• If unsuccessful in becoming certified in the next 7 years, the candidate must enter an accredited subspecialty fellowship program and complete 2 years of training in order to regain eligibility. The requirement for scholarly activity is waived.