ABIM, ABEM Agree on Critical Care Certification

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BY ALICIA AULT

In a long-awaited move, the American Board of Emergency Medicine and the American Board of Internal Medicine have agreed to cosponsor a pathway to certification in Internal Medicine Critical Care Medicine.

The agreement comes after decades of effort to develop an appropriate way for emergency physicians to receive certification in critical care medicine. Emergency physicians have been receiving advanced training through critical care fellowships since the late 1980s, but there was no pathway to board certification, Dr. Eric Holmboe, the ABIM's chief medical officer, Quality Research and Academic Affairs, said in an interview.

Many of those critical care fellows took an examination through the European Society of Intensive Care Medicine. Some hospitals accept such overseas credentialing, because of the lack of an equivalent U.S. examination, said Dr. Lillian L. Emlet, chair of the Critical Care Medicine section of the American College of Emergency Physicians.

The potential impact of the new cer-

tification is unclear, but "it's a very exciting thing for all of us," Dr. Emlet said in an interview. At a minimum, it should facilitate communication between the ABEM and the two other medical spe-

cialty boards that currently certify physicians in adult critical care medicine, the American Board of Surgery and the American Board of Anesthesiology, said Dr. Em-

let, of the University of Pittsburgh.

The availability of a 2-year fellowship and subsequent U.S. certification also will help produce more U.S.-trained intensivists, Dr. Emlet said. Currently, about 20 emergency medicine residents enter a critical care fellowship program each year, he said, pointing out the natural affinity between emergency medicine and critical care medicine.

In a recent survey of emergency physicians who participated in a critical care medicine fellowship program, 49% of the physicians who had completed their fellowship (36 of 73) were practicing both specialties (Acad. Emerg. Med. 2010;17:325-9). The number of emergency physicians who have completed

critical care fellowships rose from 12 over the 1974-1989 time period to 43 in 2000-2007, according to the survey.

Even so, Dr. Debra G. Perina, ABEM president,

said that there is a continuing shortage of critical care physicians in the United States—a problem that was discussed in a 2006 report by the Institute of Medicine called "The Future of Emergency Care in the United States Health System."

The current medical specialty boards are not supplying enough specialists to meet the demand in critical care medicine, Dr. Perina, an associate professor at the University of Virginia, Charlottesville, said in an interview.

A 2005 white paper—published by the

ACEP, the Council of Emergency Medicine Residency Directors, the Emergency Medicine Residents' Association, the Society of Academic Emergency Medicine, and the Society of Critical Care Medicine—urged an expansion of training to allow emergency physicians to become certified in critical care medicine.

The new certification program still requires approval from the American Board of Medical Specialties. At this point, "we're not aware of any issues that would keep this from coming to fruition," Dr. Perina said.

She and Dr. Holmboe said that they expect the first certification exam to be offered in 2012.

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