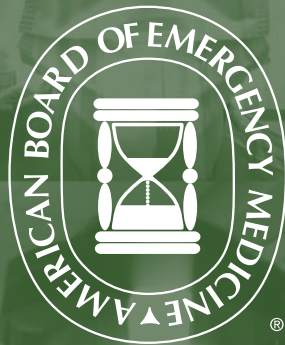


AMERICAN BOARD OF EMERGENCY MEDICINE

ANNUAL REPORT

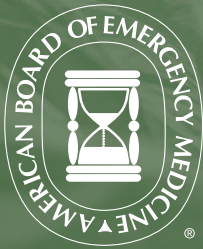


CELEBRATING **40** YEARS

YOUR EXCELLENCE • YOUR DEDICATION • YOUR SPECIALTY

2019-2020

ABEM'S MISSION TO ENSURE THE HIGHEST STANDARDS IN THE SPECIALTY OF EMERGENCY MEDICINE



ABEM'S PURPOSES¹

- To improve the quality of emergency medical care
- To establish and maintain high standards of excellence in Emergency Medicine and its subspecialties
- To enhance medical education in the specialty of Emergency Medicine and related subspecialties
- To evaluate physicians and promote professional development through initial and continuous certification in Emergency Medicine and its subspecialties
- To certify physicians who have demonstrated special knowledge and skills in Emergency Medicine and its subspecialties
- To enhance the value of certification for ABEM diplomates
- To serve the public and medical profession by reporting the certification status of the diplomates of the American Board of Emergency Medicine

¹ABEM holds the interests of patients and their families in the highest standing, particularly with regard to the provision of the safest and highest-quality emergency care. ABEM addresses its commitment to patients by supporting the physicians who provide care to the acutely ill and injured, and by working to transform the specialty of Emergency Medicine.

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PRESIDENT'S MESSAGE

When I began my term as ABEM President in July 2019, I set out to accomplish two very important goals: (1) create a future vision for ABEM through the development of a forward-thinking strategic framework, and (2) lead ABEM toward becoming a more diverse, equitable, and inclusive organization. At that time, I could not have imagined that the work of the Board of Directors and the ABEM staff would be disrupted in such a profound way eight months later. Last July, ABEM's high-priority activities were focused on continuing our assessment of a record number of physicians and the development of MyEMCert.

Then came COVID. Emergency departments were besieged with patients and emergency physicians experienced cognitive overload trying to learn how to care for these patients while protecting themselves. We have suffered significant stressors in our specialty related to declining emergency department volumes, elimination of jobs, and shortages of personal protective equipment. Emergency Medicine residency programs had to re-engineer their educational process, as well as the interview and match cycle, and assist our graduating residents to enter a very uncertain landscape. Our lives changed in totally unprecedented ways, both professionally and personally. Many of us, including myself, contracted the virus and some of our family members and colleagues have tragically died. But collectively, we as emergency physicians have stood resolute in treating our patients on the front lines and adapting to the changes that have been thrust upon us. We are nothing if not remarkably resilient.

ABEM was also resilient and was able to adapt to the changing environment in many of its operations. There were many difficult decisions that involved revisions in our



Jill M. Baren, M.D., M.S., M.B.A.

certification processes, but these were always made with the utmost consideration given to ABEM-certified physicians and without any compromise to our standards.

With the closure of Pearson VUE testing centers, we canceled the spring 2020 administration of the ConCert Exam, but were able to pivot to provide the exam online this past summer. The remaining administrations of ConCert will also be in an online, open-book format. This was not a simple change. Finding a compatible and stable testing platform, addressing security concerns, and other related issues had to be researched and resolved within a relatively short timeframe. I applaud the Board and staff for their willingness to adapt and respond so quickly and effectively.

We recognized that emergency physicians were working under extraordinary circumstances with disrupted schedules and situations beyond their control. ABEM extended the deadline for meeting continuing certification requirements by six months for physicians whose requirements were due at the end of 2020. We heard from residents that quarantine measures could jeopardize their ability to become

certified, so ABEM accommodated two-week quarantine periods without negatively affecting resident board eligibility.

The pandemic also forced ABEM to postpone both administrations of the 2020 Oral Certification Examination. The Board recognized that the career advancement of our board eligible candidates may have been negatively affected by the postponement, so ABEM provided them a letter for their employers documenting the passage of the Qualifying Examination and their pending assignment to an Oral Exam slot. Knowing that candidates were adversely affected, ABEM quickly formed a task force to aggressively pursue transitioning the current Oral Exam format to a virtual Oral Exam, which will be piloted and implemented in 2021.

During this time of rapid change, we increased our communications to keep all of our candidates and ABEM-certified physicians informed about changes in ABEM operations, providing alternatives and options, and guiding them through what the effect would be on each of them individually. ABEM sent emails tailored to each physician's circumstance, posted updates on its website and social media platforms, and responded one-on-one to the many phone calls and email questions we received from physicians.

In the midst of managing the effects of the pandemic on our everyday operations, on candidates, certified physicians, and volunteers, we did not lose sight of the two goals that I set out to achieve, which have the potential to transform the ABEM of the future. The Board formed a Diversity and Inclusion Expertise Task Force, which among other objectives is evaluating the representation of individuals on our Board, our staff, and in our volunteer pool. The Board approved a diversity statement and a statement on race. The Task Force will continue to explore other ways that we as an organization can become more diverse

internally and promote the values of diversity, equity, and inclusion within our specialty.

I am pleased that despite the pandemic and the high demand for change to our usual operations, we also engaged in a very robust strategic planning process that will result in increased focus and efficiency of Board activities. In fact, we were able to integrate real-time learning about disruptive change into the process as we worked on this concomitantly with the changes brought on from COVID. We are nearing the final stages of adopting a new strategic framework that contains clear commitments and strategies to advance our mission—to ensure the highest standards in the specialty of Emergency Medicine—well into the future.

All of these efforts illustrate how resourceful and resilient ABEM is, even in the face of uncertainty. I am so proud to have led an exceptional Board, whose members are all clinically active, who put in numerous hours to evaluate all aspects of each change driven by the pandemic, and made decisions based on thorough and thoughtful analyses. I am so grateful to the ABEM staff who worked diligently to provide the Board options for each situation we faced and who executed our decisions in the same highly professional manner that we are used to at ABEM.

We did this for you. We heard many of the stories about how you were managing and the challenges you were facing. We are overwhelmed by your dedication to treating emergency patients with grace under fire and to training the next generation of emergency physicians. Our goal was, and continues to be, to provide you with the reassurance to carry out your work knowing that ABEM supports you. As we continue to work through the pandemic and the changes it has brought to all of us, I wish you, your families, and your colleagues the best of health. Thank you again for all you do and thank you for the great honor of serving as ABEM's President.

LEADERSHIP

Board of Directors

Executive Committee

Jill M. Baren, M.D., M.S., M.B.A., *President*
Michael S. Beeson, M.D., M.B.A., *President-Elect*
Mary Nan S. Mallory, M.D., M.B.A., *Secretary-Treasurer*
Marianne Gausche-Hill, M.D., *Member-at-Large*
Robert P. Wahl, M.D., *Senior Member-at-Large*

Directors

Felix K. Ankel, M.D.
Yvette Calderon, M.D., M.S.
Wallace A. Carter, M.D.
Carl R. Chudnofsky, M.D.
Hala H. Durrah, M.T.A.
Diane L. Gorgas, M.D.
Deepi G. Goyal, M.D.
Leon L. Haley, Jr., M.D., M.H.S.A.
Ramon W. Johnson, M.D., M.B.A.
Samuel M. Keim, M.D., M.S.
John L. Kendall, M.D.
Lewis S. Nelson, M.D.
James D. Thomas, M.D.

Executive Staff

Earl J. Reisdorff, M.D., *Executive Director*
Melissa A. Barton, M.D., *Director of Medical Affairs*
Kathleen C. Ruff, M.B.A., *Chief Administrative Officer*
Susan K. Adsit, *Associate Executive Director, Organizational Services*
Timothy J. Dalton, *Associate Executive Director, Evaluation and Research*
Jennifer L. Kurzynowski, *Associate Executive Director, Operations*
Angela J. McGoff, *Associate Executive Director, Certification Services*
Michele C. Miller, *Associate Executive Director, Systems and Technology*



Front row: Felix K. Ankel, M.D.; Michael S. Beeson, M.D., M.B.A.; Jill M. Baren, M.D., M.S., M.B.A.; Leon L. Haley, Jr., M.D., M.H.S.A.; Diane L. Gorgas, M.D.; Carl R. Chudnofsky, M.D.; Yvette Calderon, M.D., M.S.

Middle row: Deepi G. Goyal, M.D.; Lewis S. Nelson, M.D.; James D. Thomas, M.D.; Samuel M. Keim, M.D., M.S.; Wallace A. Carter, M.D.; Marianne Gausche-Hill, M.D.

Back row: John L. Kendall, M.D.; Mary Nan S. Mallory, M.D., M.B.A.; Robert L. Muelleman, M.D.; Ramon W. Johnson, M.D., M.B.A.; Robert P. Wahl, M.D.

Not pictured: Hala H. Durrah, M.T.A.

ABEM-CERTIFIED PHYSICIANS

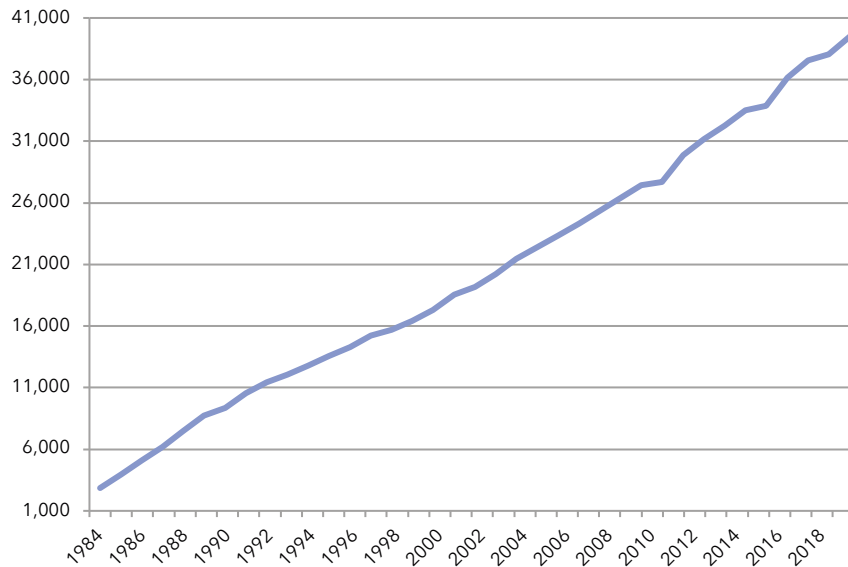
39,141 current ABEM-certified physicians

7% hold subspecialty certification

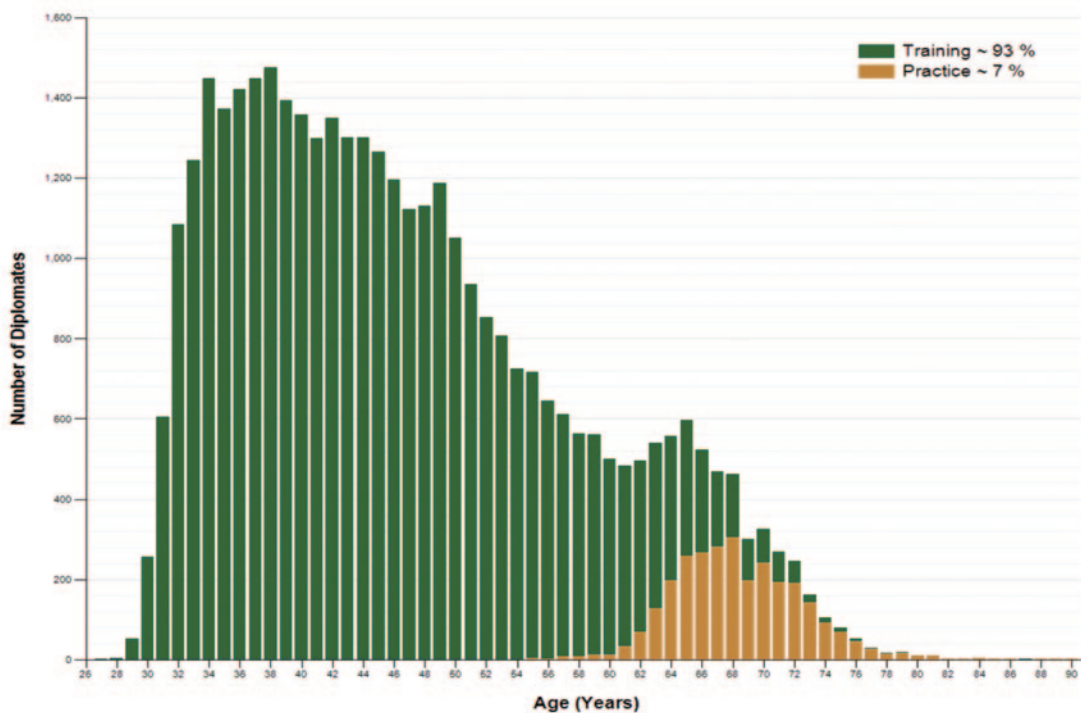
93% are residency trained

Data as of June 2020

Number of Current ABEM-certified Physicians



Distribution of ABEM-certified Physicians by Age and Training



EXAMINATION ACTIVITY

Changes in Exam Activity Resulting from the COVID-19 Pandemic

Oral Certification Examination

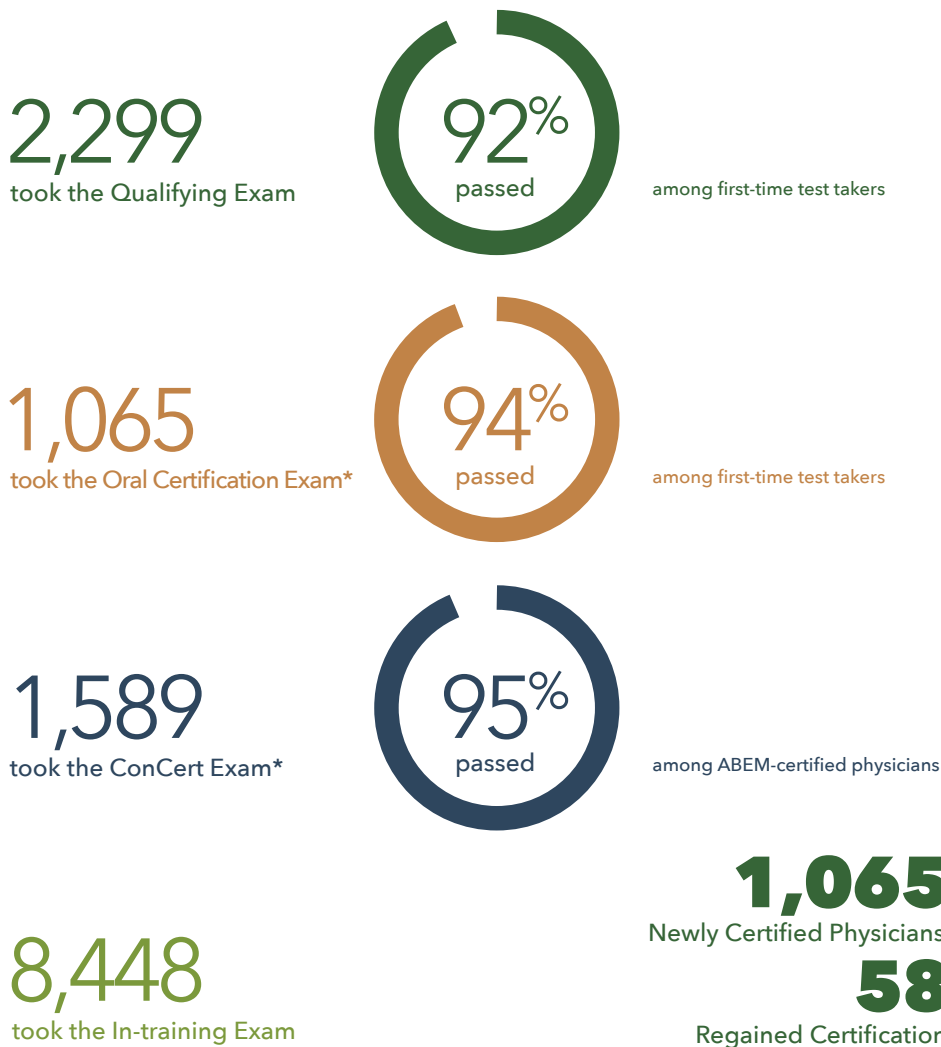
Due to the COVID-19 pandemic, the 2020 administrations of the Oral Certification Examination were postponed. The Board is pursuing the administration a virtual Oral Exam.

ConCert Examination

The spring administration of the ConCert Examination was canceled due to the closure of Pearson VUE testing centers. The examination was changed to an online, open-book assessment, with its first administration in summer 2020, with the online resource, UpToDate®, available to test takers.

Regular Exam Activity

In 2019-2020, nearly 14,000 proctored examinations were administered, and over 24,000 LLSA tests were completed.



* Due to the COVID-19 pandemic, only one administration of the exam was offered in 2019-20. Detailed, longitudinal statistics are available in the tables beginning on page 20, and on the ABEM website

STAYING CERTIFIED

The purpose of continuing certification is to maintain the highest standards of Emergency Medicine by partnering with physicians in their ongoing professional development; maintaining core knowledge, judgment, and skills; and integrating new medical advances in patient-centered care.

Protecting Your Certification

As a result of the COVID-19 pandemic, deadlines for completion of certification requirements for physicians whose Emergency Medicine certificates expire in 2020 were relaxed. They will have until June 30, 2021 to meet their requirements, which will provide an additional opportunity to take the online ConCert Exam in spring 2021, if needed.

Deadlines for physicians who had subspecialty certification requirements due in 2020 were also relaxed. They will have until either June 31, 2021 or December 31, 2021, to meet their requirements. The new deadlines are based on the policies of the board administering the recertification examination and how often those exams are offered.

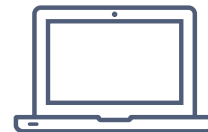
MyEMCert Development Continues

Significant progress has been made for the new MyEMCert assessment. The platform continues to be developed and the modules are being created. The pilot will take place in fall 2020, and MyEMCert is scheduled to launch in 2021.

New LLSA Test

The 2020 Emergency Medical Services LLSA reading list and test became available, which provides another opportunity for ABEM-certified physicians to tailor learning to their clinical practice.

ABEM believes that continuing certification assists physicians in realizing their intrinsic desire to be better clinicians, and deliver safe, high-quality care.



24,258

LLSA tests completed



16,260

LLSA CME activities completed

Improvement in Medical Practice (IMP) Activities

Emergency physicians are committed to raising the quality of care for their patients by participating in improvement in medical practice (IMP) activities. Those who participate can get credit for activities they are already doing by attesting through their Emergency Medicine Certification Page.

2019 Top Five Improvement in Medical Practice Activities

1,545	Time-related (throughput time, ED length-of-stay, and other process time measures)
883	Stroke-related
803	Infectious Disease-related
548	Communication - Patient Care
494	Cardiac-related
6,276	Total IMP Attestations

SUBSPECIALTY CERTIFICATION

2,735 ABEM-certified Physicians Hold a Subspecialty Certificate

In 2019-2020, ABEM issued 303 subspecialty certificates in seven subspecialties. ABEM-certified physicians also have access to subspecialty certification in Addiction Medicine, Brain Injury Medicine, Clinical Informatics, and Surgical Critical Care through other ABMS Boards.

Subspecialty	Certificates Issued in 2019-2020	Total Current Subspecialists
Emergency Medical Services*	204	831
Medical Toxicology	0*	433
Pediatric Emergency Medicine	34	283
Internal Medicine-Critical Care Medicine	36	233
Sports Medicine	13	213
Clinical Informatics	– **	190
Hospice and Palliative Medicine	0	168
Undersea and Hyperbaric Medicine	3	157
Addiction Medicine	– **	101
Anesthesiology-Critical Care Medicine	11	76
Surgical Critical Care	– **	37
Pain Medicine	2	12
Brain Injury Medicine	– **	1
Neurocritical Care	0 ***	0
Total	303	2,735

* Certification examination not offered in 2019.

** Information not available; certificates issued by other ABMS Boards.

*** First examination will be administered in 2021.

Protecting Your Certification

Deadlines for physicians with subspecialty certification requirements due in 2020 were relaxed. They will have until either June 31, 2021, or December 31, 2021 to meet their requirements. The new deadlines are based on the policies of the board administering the recertification examination and how often those exams are offered.

VOLUNTEERS

Over 500 clinically active physicians volunteered their services to ABEM this year, a force that we could not operate without. Hundreds of examiners attend the spring and fall Oral Exam administrations. Over 40 item writers produce new questions for multiple choice tests each year for Emergency Medicine certification, recertification, and subspecialty exams. Additional ABEM activities supported by volunteers include the following:

- Standard-setting panels review each multiple choice question or Oral Exam case, rate its difficulty, and assess its importance to the certification of emergency physicians
- Fairness and bias panels evaluate whether different outcomes (among different groups) on test questions or cases are due to knowledge or experience not relevant to the practice of EM
- Job analysis panels identify the tasks, skills, and responsibilities necessary in the practice of EM, the results of which are the basis for what is measured in an examination
- Other task forces and advisory groups, such as the LLSA CME reading group and the Stimulus Collection and Review Panel, assist in the certification and recertification processes

Each of these volunteer physicians donate their time and effort to help assure that anyone certified in EM or any of its subspecialties meets the high standards expected of our specialty. Thank you!

A complete list of ABEM volunteers is available on the ABEM website. (www.abem.org/volunteer)

484 Oral Examiners

42 Item Writers

95 Standard Setting Panel Participants

34 Subboard and Exam Committee Members

18 Members of the Board of Directors



Pictured top: 2019 Qualifying Exam Standard Setting Advisory Panel

Pictured bottom: Fall 2019 Oral Certification Exam Standard Setting Advisory Panel
[Captions on page 23]

Subspecialty Representatives – ABEM Appointees

Advanced Emergency Medicine Ultrasound Examination Committee

John L. Kendall, M.D., Chair, Editor
Srikar Adhikari, M.D.
John Bailitz, M.D.
Meghan Kelly Herbst, M.D.
Timothy B. Jang, M.D.
Robert A. Jones, D.O.
Megan M. Leo, M.D.
Andrew S. Liteplo, M.D.
Rachel B. Liu, M.D.
Terry Kowalenko, M.D., Editor Mentor

Emergency Medical Services Subboard

Peter T. Pons, M.D., Chair
Douglas F. Kupas, M.D., Chair-Elect
Mohamud R. Daya, M.D.
Sophia K. Dyer, M.D.
Jeffrey M. Goodloe, M.D.
Alexander P. Isakov, M.D.
Vincent N. Mosesso, Jr., M.D.
Katie L. Tataris, M.D.
Marianne Gausche-Hill, M.D., ABEM Director Liaison

Medical Toxicology Subboard

Theodore C. Bania, M.D., Chair
Robert G. Hendrickson, M.D., Chair-Elect
Tammi H. Schaeffer, D.O.
Joshua G. Schier, M.D.
Andrew I. Stolbach, M.D.
Lewis S. Nelson, M.D., ABEM Director Liaison

Neurocritical Care Examination Committee

Jordan B. Bonomo, M.D.
Evadne G. Marcolini, M.D.

Pediatric Emergency Medicine Subboard

David B. Burbulys, M.D.
Timothy A. Horeczko, M.D.
Nathan W. Mick, M.D.
Stacy L. Reynolds, M.D., Chair
Ramon W. Johnson, M.D., M.B.A., ABEM
Director Liaison

Sports Medicine Examination Committee

Andrew P. Perron, M.D.
Moira Davenport, M.D.

Undersea and Hyperbaric Medicine Examination Committee

Keith W. Van Meter, M.D.
Tracy L. LeGros, M.D.



Pictured top: Advanced Emergency Medicine
Ultrasound Examination Committee

Pictured middle: Emergency Medical Services Subboard

Pictured bottom: Medical Toxicology Subboard

[Captions on page 23]

2019-2020 HIGHLIGHTS

Reaction to COVID-19

Emergency physicians faced unprecedented circumstances as the result of the pandemic, and ABEM responded by making changes to support physicians. The changes implemented in 2019-2020 are listed below.

ConCert Examination

- Moved to an online, open-book format
- Added a summer administration
- Provided UpToDate® as a free, online resource during the exam

Oral Certification Examination

- Postponed the 2020 administrations
- Pursuing the administration of a virtual Oral Exam

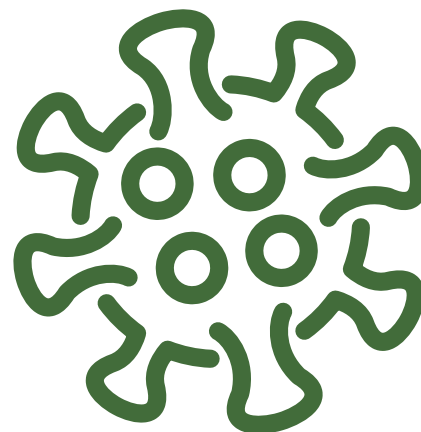
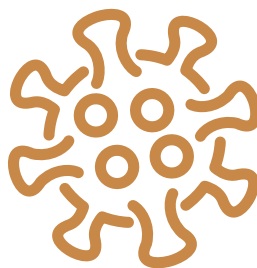
Protecting Board Eligibility and Certification

- Temporarily reduced the amount of training time for EM residency graduates by two weeks to account for residents who had to quarantine due to the virus

- Extended deadlines for physicians who have requirements due December 31, 2020, by six months to allow additional time to complete requirements, including the ConCert Exam

Online Medical Toxicology Examination

- The Medical Toxicology Subboard decided to administer the fall 2020 Cognitive Expertise Exam in an online, open-book format.



ABEM Diversity and Inclusion Expertise Task Force

In 2019, ABEM convened a Diversity and Inclusion Expertise Task Force to review and evaluate ABEM policies and practices that impact diversity and inclusion. The Task Force is also charged with recommending strategies and actions to improve and promote diversity and inclusion among directors, volunteers, and ABEM staff. One action taken during the year

was the Board's issuance of a statement on racism and a statement on diversity.

ABEM believes the decisions it will make going forward will include a broader spectrum of cultures, perspectives, and opinions—ones that reflect both ABEM-certified physicians and their patients.

Newly Elected Directors

The ABEM Board of Directors elected three new members in 2020: J. David Barry, M.D., and Suzanne R. White, M.D., M.B.A., as physician directors, and Hala H. Durrah, M.T.A., public member director. Dr. Barry's clinical practice is at the Long Beach VA Medical Center. Dr. White practices clinically at the John D. Dingell VA Medical Center. Ms. Durrah was elected as the Board's first public member director. She is a national speaker and patient/family-centered care consultant and advocate.



J. David Barry, M.D.



Hala Durrah, M.T.A.



Suzanne R. White, M.D., M.B.A.

Your Excellence, Your Dedication, Your Specialty

September 21, 2019, marked the 40th anniversary of the approval of the American Board of Emergency Medicine by the American Board of Medical Specialties, and Emergency Medicine becoming the 23rd recognized medical specialty. ABEM celebrated its 40th anniversary throughout the year by collecting stories from emergency physicians to recognize their great accomplishments in advancing our specialty and caring for people at a critical time in their lives.



CELEBRATING 40 YEARS

YOUR EXCELLENCE · YOUR DEDICATION · YOUR SPECIALTY

COMMB Statement on Pediatric Care in the ED

ABEM issued a statement on behalf of the Coalition on Medical Merit Badges (COMMB) against any requirement of additional short courses such as Pediatric Advanced Life Support (PALS) or Advanced Pediatric Life Support (APLS) for ABEM- or American Osteopathic Board of

Emergency Medicine-certified emergency physicians who are in good standing with their medical staff, and who are participating in a continuing certification program. The statement was signed by all major Emergency Medicine organizations.

Milestone Recognition of Nearly 700 Physicians

ABEM recognizes physicians who mark 30 years of being board certified in Emergency Medicine with a special certificate. This year's recipients included 697 physicians who had been board certified for 30 years as of December 31, 2019. Certificates are awarded annually to diplomates who achieve this milestone. ABEM applauds these physicians who have demonstrated a career-long commitment to excellence. A list of the 2019 recipients is posted on the ABEM website.



Letters of Support to Forego Short Courses in EUS

ABEM and AOBEM can now provide letters of support that may be submitted to hospital credentialers to forego the need for additional short courses or certifications in the use of Emergency Ultrasound by emergency

physicians. Physicians must be participating in the ABEM continuing certification process or the AOBEM Osteopathic Continuous Certification Program to obtain the letter. The letter is signed by most Emergency Medicine organizations.

2019-2021 ABEM NAM Fellow

The National Academy of Medicine (NAM) selected Yale School of Medicine's Arjun Venkatesh, M.D., as the 2019-2021 ABEM NAM Fellow. His research interest is in the development of performance measures designed to improve emergency department, hospital, and health system outcomes. Dr. Venkatesh is ABEM's third NAM fellow.



Resident Ambassador Panel

In May, ABEM selected the inaugural members of its Resident Ambassador Panel. They are Haig K. Aintablian, M.D.; Alaa M. Aldalati, M.D.; and William Spinosi, D.O. Panel members will provide a resident perspective to certain ABEM activities, such as applying for certification, the Residency Visitation Program, and the ABEM website. All members are PGY-2 or above and must serve their entire term during residency.

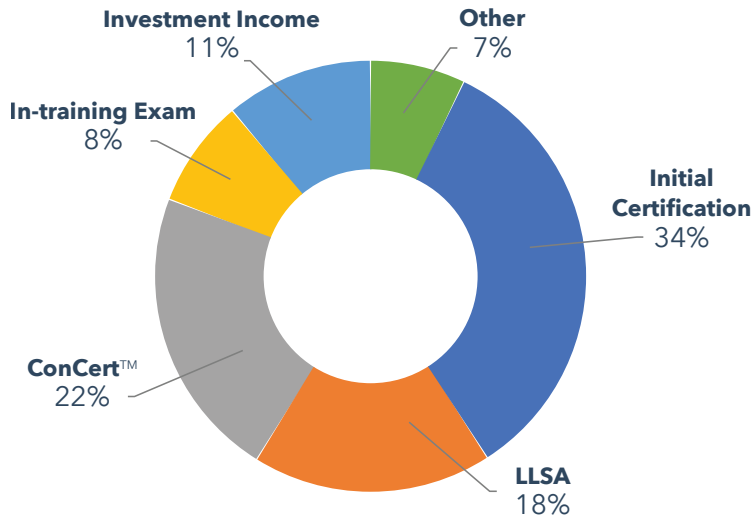
Each was nominated by a membership organization (American Academy of Emergency Medicine Resident and Student Association, Council of Residency Directors in Emergency Medicine, Emergency Medicine Residents' Association, or the Society for Academic Emergency Medicine Residents and Medical Students) and selected by ABEM.



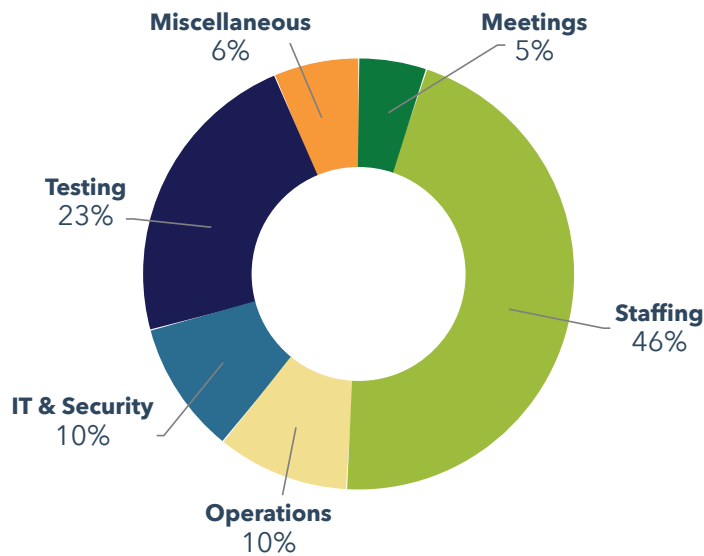
FINANCES

ABEM had a positive revenue from operations of \$495,899 in 2018. At the same time, \$1,597,991 in revenue came from investment income. This means that ABEM's net revenue totaled \$2,093,890. ABEM's 2019 Form 990 was not available at the time of this report.

Revenue by Category



Spending by Category



Audited Statement of Financial Position

June 30, 2019

Assets

Current assets	
Cash and cash equivalents	\$1,728,841
Accounts receivable	16,120
Accrued investment income	103,163
Investments	37,294,288
Prepaid expenses	209,991
Total current assets	39,352,403
Property, equipment, and software	8,327,543
Less: accumulated depreciation and amortization	(3,944,502)
Net property, equipment, and software	4,383,041
Other assets	
Deposits	34,160
Total assets	\$43,769,604

Liabilities and Net Assets

Current liabilities	
Accounts payable	\$225,919
Accrued payroll	136,032
Accrued payroll tax	8,902
Deferred revenue	2,719,081
Total current liabilities	3,089,934
Long-term liabilities	
Compensated absences	646,045
Total liabilities	3,735,979
Net assets	
Unrestricted and undesignated	40,033,625
Total liabilities and net assets	\$ 43,769,604

Revenues **\$19,294,969**

Expenses

Direct Certification Expense	\$7,396,402
Governance	2,187,960
International	11,100
Office administration	2,833,393
Outreach/liaison	1,310,912
Program development	936,937
Research	217,915
Subspecialties	777,312
Training/academic relations	699,243
Miscellaneous	209,110
Total expenses	\$16,580,284

Change in net assets*	2,714,685
Net assets, at beginning of year	\$37,318,940
Net assets, at end of year	\$40,033,625

* Before other income and gains

SENIOR DIRECTORS

Thank you for your legacy and contributions to the specialty of Emergency Medicine.

Gail V. Anderson, Sr., M.D. 1976–1989
Walter R. Anyan, Jr., M.D. 1995–2003
William G. Barsan, M.D. 1993–2001
Carol D. Berkowitz, M.D. 2003–2006
Howard A. Bessen, M.D. 2002–2010
Michael D. Bishop, M.D. 1988–1996
Brooks F. Bock, M.D. 1995–2004
G. Richard Braen, M.D. 1988–1996
Glenn D. Braunstein, M.D. 2002–2006
Dick D. Briggs, Jr., M.D. 1994–2002
Kerryann B. Broderick, M.D. 2011–2019
Paul D. Bruns, M.D. 1980–1983
Michael L. Carius, M.D. 2009–2018
Joseph E. Clinton, M.D. 1986–1994
Robert E. Collier, M.D. 2004–2012
Lily C. A. Conrad, M.D. 2002–2010
Francis L. Counselman, M.D. 2008–2016
Rita Kay Cydulka, M.D. 2002–2010
Robert H. Dailey, M.D. 1976–1982
Daniel F. Danzl, M.D. 1991–1999
Steven J. Davidson, M.D. 1986–1995
John H. Davis, M.D. 1979–1984
Richard E. Dean, M.D. 1991–1994
James J. Dineen, M.D. 1976–1980
Frank A. Disney, M.D. 1979–1980
Lynnette Doan-Wiggins, M.D. 1999–2008
E. John Gallagher, M.D. 1995–2003
Joel M. Geiderman, M.D. 2003–2011
William E. Gotthold, M.D. 1994–2003
Jeffrey G. Graff, M.D. 1996–2005
Harris B. Graves, M.D. 1980–1987
R. R. Hannas, Jr., M.D. 1976–1988
Gerald B. Healy, M.D. 1988–1992
Barry N. Heller, M.D. 2008 – 2017
Robert S. Hockberger, M.D. 1995–2004
Gwendolyn L. Hoffman, M.D. 1994–2003
Leonard D. Hudson, M.D. 1990–1994
Bruce D. Janiak, M.D. 1986–1995
Carl Jelenko, III, M.D. 1976–1980
James H. Jones, M.D. 2005–2015
R. Scott Jones, M.D. 1988–1991
Allen P. Klippel, M.D. 1976–1982
Robert K. Knopp, M.D. 1988–1993
Terry Kowalenko, M.D. 2010–2019
David A. Kramer, M.D. 2009–2013
Ronald L. Krome, M.D. 1976–1988
Jo Ellen Linder, M.D. 2004–2012
Louis J. Ling, M.D. 1997–2007
O. John Ma, M.D. 2013–2019
Catherine A. Marco, M.D. 2010–2018
Mark A. Malangoni, M.D. 1998–2002
Vincent J. Markovchick, M.D. 1994–2002
M. J. Martin, M.D. 1990–1994, 1996–1998
John B. McCabe, M.D. 1996–2006
Henry D. McIntosh, M.D. 1979–1986
W. Kendall McNabney, M.D. 1982–1986
Harvey W. Meislin, M.D. 1986–1994
J. Mark Meredith, M.D. 2004–2012
Sheldon I. Miller, M.D. 1999–2006
James D. Mills, M.D. 1976–1988
John C. Moorhead, M.D. 2004–2014
Robert L. Muelleman, M.D. 2011–2019
John F. Murray, M.D. 1986–1989
Robert C. Neerhout, M.D. 1986–1994
Richard N. Nelson, M.D. 2004–2013
Michael S. Nussbaum, M.D. 2002–2006
Thomas K. Oliver, Jr., M.D. 1980–1981
Debra G. Perina, M.D. 2003–2011
Nicholas J. Pisacano, M.D. 1979–1986
Roy M. Pitkin, M.D. 1990–1998
George Podgorny, M.D. 1976–1988
Peter T. Pons, M.D. 1996–2004
J. David Richardson, M.D. 1994–1998
Leonard M. Riggs, Jr., M.D. 1981–1986
Frank N. Ritter, M.D. 1979–1988
Peter Rosen, M.D. 1976–1986
Robert J. Rothstein, M.D. 1996–2004
Douglas A. Rund, M.D. 1988–1997
Earl Schwartz, M.D. 1994–2002
Richard I. Shader, M.D. 1980–1990
Roger T. Sherman, M.D. 1984–1988
Rebecca Smith-Coggins, M.D. 2007–2015
Mark T. Steele, M.D. 2003–2012
Richard M. Steinhilber, M.D. 1979–1980
Richard L. Stennes, M.D. 1988–1996
Robert W. Strauss, M.D. 2007–2015
Henry A. Thiede, M.D. 1979–1980, 1984–1990
Harold A. Thomas, M.D. 2001–2010
Judith E. Tintinalli, M.D. 1982–1991
Robert Ulstrom, M.D. 1982–1986
Michael V. Vance, M.D. 1986–1995
David K. Wagner, M.D. 1976–1988
Robert P. Wahl, M.D. 2012–2020
Edward E. Wallach, M.D. 1998–2006
Gerald P. Whelan, M.D. 1988–1998
John G. Wiegenstein, M.D. 1976–1986

EXAMINATION STATISTICS

Certification

Date	App's Rec'd	Qualifying Examination						Oral Certification Examination					
		EM Residency-eligible First-time Takers			Total Candidates ³			EM Residency-eligible First-time Takers			Total Candidates ³		
		# Took	# Pass	% Pass	# Took	# Pass	% Pass	# Took	# Pass	% Pass	# Took	# Pass	% Pass
1980 and prior	1,875	-	-	-	1,496	998	67	-	-	-	399	248	62
1981	1,035	-	-	-	1,142	825	72	-	-	-	548	356	65
1982	1,149	-	-	-	1,254	869	69	-	-	-	998	571	57
1983	1,242	-	-	-	1,335	885	66	-	-	-	1,293	766	59
1984	1,399	-	-	-	1,694	1,108	65	-	-	-	1,339	912	68
1985	1,600	-	-	-	2,016	1,274	63	-	-	-	1,066	801	75
1986	1,709	-	-	-	2,147	1,124	52	-	-	-	1,425	993	70
1987	1,977	-	-	-	2,479	1,429	58	-	-	-	1,503	1,192	79
1988	2,915	-	-	-	2,607	1,375	53	-	-	-	1,602	1,227	77
1989	886	Postponed to 5/30/90						-	-	-	1,627	1,266	78
1990	1,069	-	-	-	3,446	1,953	57	-	-	-	1,350	1,059	78
1991	624	-	-	-	1,510	853	56	-	-	-	1,464	1,185	81
1992	742	-	-	-	1,396	820	59	-	-	-	1,446	1,146	79
1993	964	-	-	-	1,281	822	64	-	-	-	977	753	76
1994	785	-	-	-	1,329	781	59	-	-	-	1,095	894	82
1995 ¹	847	753	664	88	1,249	769	62	692	669	97	1,028	890	87
1996	860	839	756	90	1,290	899	70	703	658	94	968	808	84
1997	943	920	811	89	1,335	903	68	795	711	89	934	795	85
1998	1,005	1,003	909	91	1,426	1,036	73	864	788	91	1,059	895	85
1999	1,099	1,092	972	89	1,457	1,053	72	988	851	86	1,083	901	83
2000	1,108	1,087	985	91	1,488	1,085	73	1,040	957	92	1,272	1,124	88
2001	1,173	1,155	1,026	89	1,471	1,135	77	1,064	1,000	94	1,257	1,133	90
2002	1,171	1,176	1,057	90	1,516	1,181	78	1,142	1,040	91	1,291	1,140	88
2003	1,198	1,179	1,092	93	1,496	1,205	81	1,158	1,058	91	1,278	1,140	89
2004	1,256	1,242	1,099	88	1,490	1,188	80	1,204	1,142	95	1,335	1,237	93
2005	1,299	1,287	1,164	90	1,593	1,283	81	1,197	1,132	95	1,325	1,233	93
2006	1,329	1,302	1,200	92	1,606	1,344	84	1,239	1,166	94	1,289	1,204	93
2007	1,411	1,408	1,267	90	1,645	1,363	83	1,328	1,254	94	1,431	1,340	94
2008	1,387	1,366	1,246	91	1,638	1,371	84	1,357	1,288	95	1,434	1,353	94
2009	1,448	1,430	1,295	91	1,717	1,429	83	1,408	1,337	95	1,484	1,397	94
2010	1,517	1,519	1,381	91	1,779	1,515	85	1,416	1,335	94	1,470	1,378	94
2011	1,584	1,560	1,417	91	1,827	1,540	84	1,534	1,487	97	1,665	1,603	96
2012	1,612	1,615	1,511	94	1,898	1,653	87	1,548	1,515	98	1,643	1,599	97
2013	1,711	1,704	1,520	89	1,952	1,617	83	1,704	1,675	98	1,712	1,678	98
2014	1,739	1,709	1,536	90	2,028	1,676	83	1,620	1,559	96	1,638	1,571	96
2015	1,811	1,807	1,639	91	2,118	1,788	84	1,684	1,648	98	1,729	1,682	97
2016	1,867	1,853	1,732	93	2,129	1,893	89	1,765	1,722	98	1,827	1,778	97
2017	1,986	1,975	1,834	93	2,215	1,961	89	1,894	1,818	96	1,952	1,868	96
2018	2,133	2,101	1,999	95	2,364	2,173	92	1,954	1,895	97	2,006	1,943	97
2019	2,285	2,299	2,123	92	2,522	2,238	89	2,169	2,051	95	2,277	2,133	94
Total	55,750	35,381	32,235	91²	68,381	50,414	74²	33,467	31,756	95²	54,519	47,192	87²

¹ 1995 was the first year that a reference group of EM residency-eligible, first-time test takers was used to construct the written certification examination, now known as the qualifying examination.

² Number indicates the percent of the total that passed.

³ Candidates do not include former diplomates attempting to regain certification through the qualifying and/or oral examination.

ConCert™ Examination

Year	Diplomates			Former Diplomates		
	# Took	# Pass	% Pass	# Took	# Pass	% Pass
2004	1,264	1,169	92	127	60	47
2005	1,407	1,295	92	157	92	59
2006	1,367	1,296	95	206	129	63
2007	1,569	1,483	95	135	81	60
2008	1,778	1,687	95	138	104	75
2009	1,657	1,576	95	119	82	69
2010	1,955	1,897	97	121	94	78
2011	2,022	1,943	96	147	99	67
2012	1,762	1,681	95	154	100	65
2013	1,971	1,895	96	189	132	70
2014	2,391	2,335	98	142	19	31
2015	2,503	2,412	96	124	74	60
2016	2,582	2,478	96	136	78	57
2017	2,653	2,535	96	146	79	54
2018	2,544	2,433	96	147	82	56
2019	2,431	2,330	96	189	106	56
Total	31,856	30,445	96¹	2,377	1,494	63¹

¹ Number indicates the percent of the total who passed.

Statistics are reported by calendar year. The statistics accurately reflect the examinations administered during the designated periods, and all examination data are included. Candidates who took more than one examination are included more than once.

Total number of active diplomates on 12/31/2019 was 39,195.

Subspecialty Certification

Year	ACCM	EMS	HPM	IM-CCM	MedTox	Pain	PedEM	SPM	UHM	Total
1993							38	8		46
1994							23	0		69
1995					51		0	12		134
1996					0		0	0		132
1997					32		39	8		213
1998					0		0	0		213
1999					42		20	8		283
2000					24		0	0		307
2001					0		23	4	7	341
2002					30		0	2	7	380
2003					0		12	2	11	405
2004					30		19	3	42	499
2005					0		0	3	17	519
2006					39		10	12	7	587
2007					0		0	5	6	598
2008			12		31		0	12	12	665
2009			0		0	1	19	9	21	715
2010			23		39	2	0	13	38	830
2011			0		0		26	14	15	885
2012			60	25	38	1	0	11	5	1,024
2013		225	0	19	0	2	35	16	5	1,326
2014	12	0	20	25	48	0	0	14	4	1,449
2015	9	220	0	28	0	1	30	16	3	1,756
2016	17	0	32	40	53	0	0	26	6	1,930
2017	11	183	0	34	0	1	27	17	2	2,205
2018	16	0	31	26	49	2	0	19	2	2,350
2019	11	204	0	36	0	2	34	13	3	
Total Certificates Issued	76	832	177	233	508	12	355	247	213	2,653
Total Current Diplomates	76	831	168	233	433	12	283	213	157	2,406

ACCM: Anesthesiology Critical Care Medicine
 EMS: Emergency Medical Services
 HPM: Hospice and Palliative Medicine
 IM-CCM: Internal Medicine - Critical Care Medicine
 MedTox: Medical Toxicology

Pain: Pain Medicine
 PedEM: Pediatric Emergency Medicine
 SPM: Sports Medicine
 UHM: Undersea and Hyperbaric Medicine

PHOTO CAPTIONS

Page 11: 2019 Qualifying Exam Standard Setting Advisory Panel: Back row: Mark F. Brady, M.D.; Geoffrey L. Odom, M.D.; Carl R. Chudnofsky, M.D. (Vice-Chair TAC), Dale P. Curtis, M.D.; Amie M. Kim, M.D.; Eric W. Wortmann, M.D.; Darrius P. Guiden, M.D.; Blake H. Cleveland, M.D.; and Linda Joseph, M.D. Front row: Jill M. Baren, M.D.; Kara L. Dahl, M.D.; Tatsuya Norii, M.D.; Deborah J. White, M.D.; Randy H. Fischer, M.D.; Mary P. Chang, M.D.; and Sebastian J. Jacobi, D.O. Not pictured: Bridget B. Flickinger, M.D. and Ritu Malik, M.D.

Page 11: Fall 2019 Oral Exam Standard Setting Advisory Panel: Back row: Lawrence Proano, M.D., Barry J. Knapp, M.D., James Miner, M.D., Christian Arbelaez, M.D., Todd Thomsen, M.D., David S. Bullard, M.D., David M. Sullivan, M.D., Yiju T. Liu, M.D., Robert A. Swor, D.O., Stephen W. Bretz, M.D., Joseph B. House, M.D., John L. Foggie, M.D., James D. Thomas, M.D. (observing Board member), David B. Burbulys, M.D., and Philip H. Shayne, M.D. Front row: Julie A. Gorchynski, M.D., Theresa M. Gunnarson, M.D., Jill M. Baren, M.D. (President and Chair, TAC), Susan L. Gin-Shaw, M.D., Shannon E. Moffett, M.D., Janet G. H. Eng, D.O., and Patricia P. Nouhan, M.D.

Page 12 (top) AEMUS Exam Committee: Pictured, left to right, standing: Megan M. Leo, M.D.; Srikar Adhikari, M.D.; Robert A. Jones, D.O.; Andrew S. Liteplo, M.D.; John Bailitz, M.D.; and Timothy B. Jang, M.D. Seated: Meghan Kelly Herbst, M.D.; Terry Kowalenko, M.D.; John L. Kendall, M.D.; and Rachel Bo Ming Liu, M.D.

Page 12: (middle) EMS Subboard: Pictured left to right, standing: Vincent N. Mosesso, Jr., M.D.; Douglas F. Kupas, M.D.; Theodore R. Delbridge, M.D.; Alexander P. Isakov, M.D.; Jeffrey M. Goodloe, M.D.; Mohamud R. Daya, M.D.; and Peter T. Pons, M.D. Seated: ABEM Liaison Marianne Gausche-Hill, M.D.; Kathy J. Rinnert, M.D.; Sophia Dyer, M.D.; and Katie L. Tataris, M.D.

Page 12: (bottom) Medical Toxicology Subboard: Pictured left to right, standing: ABPM Liaison Christopher J. Ondrula, Esq.; Andrew I. Stolbach, M.D.; Joshua G. Schier, M.D.; Robert G. Hendrickson, M.D.; Michael I. Greenberg, M.D.; Michael G. Holland, M.D.; Theodore C. Bania, M.D.; and ABEM Liaison Lewis S. Nelson, M.D. Seated: Carl R. Baum, M.D.; Diane P. Calello, M.D.; and Tammi H. Schaeffer, D.O. Not pictured: ABP Liaison Suzanne K. Woods, M.D.



American Board of Emergency Medicine

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