

## **Joint Policy Statement Against Medical Merit Badges**

The American Board of Emergency Medicine (ABEM) and the American Osteopathic Board of Emergency Medicine (AOBEM) define the standards for the specialty of Emergency Medicine. Certification by ABEM or AOBEM obviates any additional certifications required for medical staff privileges or disease-specific care center designations, such as that needed for trauma or stroke centers.

Major Emergency Medicine organizations oppose any requirement of additional short courses or topic-specific continuing education for board-certified emergency physicians, who are in good standing with their medical staff, and who are participating in Maintenance of Certification (MOC), Osteopathic Continuous Certification (OCC), or any future program to ensure continued Board Certification. Our professional organizations provide the best opportunities for continuous professional development in advanced resuscitation, trauma care, stroke care, cardiovascular care, procedural sedation, pediatric care, and airway management. ABEM and AOBEM certify that this knowledge and these skills have been acquired and are maintained through both MOC and OCC.<sup>1</sup>

Mandates that were developed before Emergency Medicine was a mature specialty are unnecessary. The Accreditation Council for Graduate Medical Education (ACGME) tracks the acquisition of critical competencies during residency training. After completing an Emergency Medicine residency, the physician must take a secure, comprehensive written examination. Once successfully completed, the physician then must pass an Oral Certification Examination that emphasizes the evaluation and treatment of complex clinical conditions.

- The core content for emergency medicine training comprehensively covers stroke care, cardiovascular care, pediatric acute care, advanced resuscitation, airway management, trauma care, procedural sedation, as well as all other areas of emergent care that may be required by patients presenting to an emergency department.
- Initial certification involves both a comprehensive written examination and a rigorous oral examination involving the aforementioned areas.
- MOC and OCC preserve and advance the knowledge and skills in the aforementioned areas.
- Physicians are periodically tested in the previously mentioned areas.

Participation in Maintenance of Certification or Osteopathic Continuous Certification assures medical staff that the emergency physician is meeting and exceeding the educational objectives thought to be derived from merit badge courses.

Organizations who support this policy statement are the following:

- American Academy of Emergency Medicine (AAEM)
- American Academy of Emergency Medicine/Resident and Student Association (AAEM/RSA)
- American Board of Emergency Medicine (ABEM)
- American College of Emergency Physicians (ACEP)
- American College of Osteopathic Emergency Physicians (ACOEP)
- American Osteopathic Board of Emergency Medicine (AOBEM)
- Association of Academic Chairs of Emergency Medicine (AACEM)
- Council of Emergency Medicine Residency Directors (CORD)

- Emergency Medicine Residents' Association (EMRA)
- Society for Academic Emergency Medicine (SAEM)

<sup>1</sup> *For physicians who are not board certified in Emergency Medicine, or who do not participate in either Maintenance of Certification or Osteopathic Continuous Certification, the completion of periodic, short courses in focused content areas of Emergency Medicine may be valuable.*