2017
Information for Applicants

Maintenance of Certification Examination

Sleep Medicine

Diplomates from the American Board of Anesthesiology, the American Board of Family Medicine, the American Board of Internal Medicine, the American Board of Otolaryngology and the American Board of Pediatrics are required to apply for certification through their respective board. The information contained in this document supersedes all previously printed publications concerning Board requirements, policies, and procedures. For the most current information, please visit our website at www.abpn.com.

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### Maintenance of Certification Exam in Sleep Medicine

**Date Choices:** November 20, 2017  
**Application Deadline:** February 24, 2017  
**Late Deadline:** March 24, 2017

### 2017 Fee Schedule*

<table>
<thead>
<tr>
<th>Fee Type</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application fee**</td>
<td>$700</td>
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<tr>
<td>Examination fee</td>
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<td>Late application fee (in addition to the above)</td>
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<tr>
<td>Reexamination fee***</td>
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<tr>
<td>Reexamination late application fee (in addition to the above)</td>
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<tr>
<td>Application/licensure appeal fee****</td>
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<tr>
<td>Examination appeal fee****</td>
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<td>Irregular behavior appeal fee****</td>
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<td>Application for testing accommodations appeal fee****</td>
<td>$350</td>
</tr>
<tr>
<td>Duplicate certificate fee</td>
<td>$150</td>
</tr>
<tr>
<td>Returned check charge</td>
<td>$50</td>
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</tbody>
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**All fees must be submitted in U.S. currency.**  
**Fee is non-refundable.**  
**Reexamination fees are in addition to any appeal fees.**  
**Appeal fees are refundable if the decision is in the appellant’s favor.**

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**Please Note:**  
- The ABPN reserves the right to revise fee schedules at any time.  
- Throughout this publication, the American Board of Psychiatry and Neurology, Inc. may be referred to as “the Board” or as “ABPN.”
<table>
<thead>
<tr>
<th>Important Dates</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Exam Date Choices:</td>
<td>November 20, 2017</td>
</tr>
<tr>
<td>Applications Available:</td>
<td>November 28, 2016</td>
</tr>
<tr>
<td>Application Deadline:</td>
<td>February 24, 2017</td>
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<tr>
<td>Late Application Deadline:</td>
<td>March 24, 2017</td>
</tr>
<tr>
<td>Applicant should contact the Board if they have not received notification regarding their application</td>
<td>April 12, 2017</td>
</tr>
<tr>
<td>Scheduling instructions mailed to approved candidates</td>
<td>May 8, 2017 (tentative)</td>
</tr>
</tbody>
</table>
| Pearson VUE Registration Opens       | May 8, 2017 (tentative) }
Table of Contents

I. Requirements for Admission to Maintenance of Certification Exam in Sleep Medicine

A. General Requirements for All Applicants. .......................................................... 1

B. General Requirements for Applicants Whose Primary Specialty is from another ABMS Board . . . . 1

C. ABPN Maintenance of Certification Program .................................................. 1
   1. Professionalism and Professional Standing. ....................................................... 2
   2. Lifelong Learning (CME) and Self-Assessment (SA). ....................................... 3
      A. Continuing Medical Education. .................................................................... 3
      B. Self-Assessment (SA). .................................................................................. 3
      C. Non-CME Self-Assessment. ......................................................................... 3
   3. Assessment of Knowledge, Judgment, and Skills. .......................................... 3
   4. Improvement in Medical Practice (PIP). ............................................................ 4
      A. Clinical Module (Chart Review). ................................................................. 4
      B. Feedback Module (Patient or Peer Review) ............................................... 5
   5. NEW Patient Safety Activity. .......................................................................... 6
   6. Clinical Activity Status .................................................................................... 6

II. Maintenance of Certification Exam in Sleep Medicine: Application Process, Procedures, Format, and Content

A. Application Process Information. ...................................................................... 7

B. Applicants with Disabilities .............................................................................. 7

C. Computer-Administered Examination Procedures ........................................... 7

D. Sleep Medicine Maintenance of Certification Examination Format and Content .................. 9

E. Grade Letters and Certificates. ......................................................................... 9

F. Computer-Administered Examination Appeal Procedures .................................. 10
   1. Appeal Procedure for Rejection of Credentials, Invalidation of Examination Score
      Due to Irregular Behavior, or Denial of a Request for Disability Accommodations. .... 10
   2. Appeal Procedure for Computer-Administered Examination Failing Grade .......... 10
I. Requirements for Admission to MOC Exam in Sleep Medicine

A. General Requirements for All Applicants
To qualify and apply to sit for the Maintenance of Certification Examination, an applicant must:
1. Adhere to and follow all Board Policies as described in the separate Board Policies Manual
2. Be Board certified currently in psychiatry, neurology and neurology with special qualification in child neurology
3. Be Board certified currently or at one time have been Board certified in Sleep Medicine
4. Complete the following MOC activities prior to applying:
   • 300 Category 1 CME credits (150 in past 5-yr block)*
   • 24 Self-Assessment (SA) CMEs
   • One Improvement in Medical Practice (PIP) Unit
   OR
   • Be current with C-MOC requirements (visit www.abpn.com for more details)

* including those from SA

5. Submit an online application through ABPN Physician Folios at www.abpn.com/folios.
6. Maintain an active, full, unrestricted medical license.

B. General Requirements for Applicants Whose Primary Specialty is from another ABMS Board
Physicians certified in sleep medicine through the ABPN who are certified in their primary specialty by another Board must meet the maintenance of certification requirements of their primary specialty Board. This will satisfy the ABPN requirements.

Physicians with primary specialities other than those granted by the ABPN must:
1. Adhere to and follow all Policies as described in the separate Board Policies Manual
2. Be Board certified currently in a primary specialty from another ABMS board other than the ABA or ABPMR
3. Be Board certified currently or at one time have been Board certified by the ABPN in the subspecialty of pain medicine
4. Submit a letter from the respective ABMS member Board verifying maintenance of certification by that Board and granting permission for the applicant to sit for the pain medicine MOC examination. The letter must specify the certification and MOC dates, the current expiration date (if any) of the primary specialty certificate, and verify that the physician is currently maintaining certification.
5. Submit an online application through ABPN Physician Folios at www.abpn.com/folios.

Note: ABA, ABFM, ABIM, ABOto and ABP diplomates must apply for maintenance of certification through their respective Board and should contact that Board for information regarding certification requirements.

C. ABPN Maintenance of Certification Program
NOTE: All policies, components, and requirements of the ABPN Maintenance of Certification (MOC) Program are subject to change. Each ABPN Diplomate is responsible for remaining informed about the current MOC program requirements. Diplomates are encouraged to consult the ABPN website at www.abpn.com for regular updates.

The MOC Program is organized through the use of ABPN Physician Folios. Using the Physician Folios link on the ABPN website, physicians can create accounts that will enable them to keep contact and license information up-to-date, track and attest to their MOC activities, stay informed of any program changes, and apply for examinations. Physicians must activate an ABPN Physician Folios account to begin the MOC process and gain the benefits of the program.

While passing an MOC examination is still required at least every ten years, a diplomate’s certification status is dependent upon fulfillment of all four MOC program components — Professional Standing, Lifelong Learning (CME) and Self-Assessment, Assessment of Knowledge, Judgment and Skills, and Improvement in Medical Practice (PIP).
Specific Requirements: 10-Year MOC Program: Program for Diplomates certified before 2012
Diplomates who are in the 10-Year MOC Program need to satisfy the following requirements prior to applying for the MOC exam:

• 300 Category 1 CME credits (includes SA credits)
• 24 Self-Assessment (SA) CME credits*
• 1 Improvement in Medical Practice (PIP) Unit*
*Both SA and PIP activities need to be ABPN-approved.

Diplomates in the 10-Year MOC Program will attest to completing MOC requirements on the application. They do not need to submit or upload documentation of completed activities unless they are audited.

Specific Requirements: Continuous Maintenance of Certification (C-MOC): Program for Diplomates certified or recertified beginning in 2012
Beginning in 2012, diplomates who certify or recertify are enrolled into the C-MOC Program. Other diplomates certified before 2012, including lifetime certificate holders, may elect to participate in the program through their Physician Folios.

Diplomates in the C-MOC Program need to satisfy the following requirements every three years:
• 90 Category 1 CME credits (includes SA CME credits)
• 24 Self-Assessment (SA) CME credits*
• 1 Patient Safety Activity (one-time only)**
• 1 Improvement in Medical Practice (PIP) Unit*
• Pay the Annual Fee

*Both SA and PIP activities need to be ABPN-approved.
**Applies to diplomates whose first C-MOC block begins in 2017 and later.

Diplomates in the C-MOC Program will attest the number of credits and activities completed each year in their Physician Folios account. The Annual Fee will also need to be paid online in the Folios account. They do not need to submit or upload documentation of completed activities unless they are audited.

A three-year block of C-MOC requirements (CME, SA and PIP) will be waived for diplomates who graduated from an ACGME-accredited subspecialty fellowship training program in 2011 or later and who pass the corresponding ABPN subspecialty exam. Diplomates will receive a three-year block MOC activity waiver for the current block they are in at the time of passing the subspecialty exam. Upon passing the subspecialty exam, diplomates will see the waiver reflected in their Physician Folios account. Diplomates are also required to pay the annual fee.

1. Professionalism and Professional Standing
To show evidence of professional standing, all diplomates must continuously hold an active, full, and unrestricted allopathic and/or osteopathic license to practice medicine in at least one state, commonwealth, territory, or possession of the United States, or province of Canada. All licenses held by a physician must be unrestricted. An active, full, unrestricted license must be maintained even if the physician is out of the country for extended periods of time. Full details of licensure requirements are found in the Board Policies Manual.
2. Lifelong Learning (CME) and Self-Assessment (SA)

A. Continuing Medical Education (CME)
Diplomates are required to complete an average of 30 specialty or subspecialty CME credits per year. CME must be relevant to the specialty and/or subspecialties in which the diplomate practices. Acceptable CME credits are Category 1 CME accredited by the Accreditation Council for Continuing Medical Education (ACCME), Category 1A CME accredited by the American Osteopathic Association (AOA), or Category 1 CME accredited by the Royal College of Physicians and Surgeons of Canada. Diplomates certified in more than one area only need to accrue an average of 30 CME credits per year, because the same CME credits can be used to satisfy CME requirements for multiple specialties and subspecialties.

• Diplomates must accrue an average of 30 Category 1 CME credits per year (averaged over three years).
• CME does not need to be preapproved by ABPN or be selected from the ABPN Approved Products List.
• CME must be relevant to the specialty and/or subspecialty in which the diplomate practices.

B. Self-Assessment (SA)
Diplomates are required to complete ABPN-approved Self-Assessment activities. SA requirements may be fulfilled by multiple SA activities. Each SA activity must cover new knowledge and/or current best practices in one or more of the competency areas and provide feedback that can be used by the diplomate as the basis for focused CME, lifelong learning, and/or career development. That feedback must include the correct answer, recommended literature resources for each question and comparative performance to peers.

• Diplomates can choose Self-Assessment activities most relevant to them from the ABPN Approved Products List or complete a non-CME SA option.
• CME credits from SA activities contribute toward total CME credits per year.
• Diplomates in C-MOC must complete an average of at least eight SA CME credits per year, averaged over three years.
• Diplomates in the 10-Year MOC program must complete at least 24 Self-Assessment CME credits prior to applying for recertification.

C. Non-CME Self-Assessment
• The ABPN will waive eight SA CME credits for the completion of a non-CME SA activity.
• The ABPN will waive a maximum of 16 SA CME credits for two different non-CME SA activities in one three-year MOC block.
• Diplomates in C-MOC must complete the approved non-CME SA activity during the block for which they are earning non-CME Self-Assessment credit.
• Diplomates in the 10-year MOC Program, who are due to recertify in 2015-2021, must complete the non-SA CME activities within the 3 years prior to applying for the MOC examination.

See the ABPN website or the MOC Booklet for a list of applicable Non-CME Self-Assessment Activities.

3. Assessment of Knowledge, Judgment, and Skills
Passing the MOC examination at least once every 10 years fulfills the assessment of knowledge, judgment and skills component of the program. To sit for an MOC examination, all current MOC requirements must be satisfied at the time one applies for the MOC examination. The ABPN will audit 5% of applicants for the examination. Audited applicants must provide documentation of CME, SA and PIP activities.

Practice-relevant, clinically oriented, multiple-choice, computer-administered examinations are delivered in over 200 Pearson VUE testing centers across the United States and Canada.
To prepare for the MOC examinations, diplomates should keep current with research and developments in their field, review specialty-specific journals and practice guidelines, and attend relevant CME programs.

- Diplomates must pass the MOC examination at least once every 10 years.
- Maintenance of Certification program participation includes meeting all MOC requirements. All MOC components must be met at the time of application for examination for the 10-year MOC Program.
- Maintenance of Certification examinations for psychiatry, neurology, child neurology and child and adolescent psychiatry are currently administered twice in a calendar year. Please see Important Dates at the beginning of this document for deadlines.
- Combined MOC examinations are available for physicians who wish to recertify in more than one specialty and/or subspecialty at the same time. See the Combined Exams section of the website for more information.

4. Improvement in Medical Practice (PIP)

NEW in February 2016: Diplomates now choose ONE Clinical Module OR Feedback Module activity to complete the PIP Unit.

This quality improvement exercise is designed to identify and implement areas for improvement based on the review of one’s own patient charts (Clinical Module) OR feedback from peers or patients via a questionnaire/survey (Feedback Module).

A. Clinical Chart Review Module

A diplomate can choose one of the following options to complete the Clinical Module:

- Select a Clinical Module from the ABPN Approved Products List on the website
- Participate in your institution’s QI effort that is approved by the ABMS Portfolio Program
- Participate in an approved registry such as the Axon Registry from the American Academy of Neurology
- Participate in a Joint Commission Certified Primary or Comprehensive Stroke Center
- Participate in a Joint Commission accredited, specialty-specific Ongoing Professional Practice Evaluation (OPPE) that meets the ABPN MOC requirements; submit for preapproval
- Complete a quality improvement effort under the auspices of an International Certification Organization (e.g. RCPS-C) that meets the ABPN MOC requirements; submit for preapproval
- Seek individual preapproval (at no charge) for your own developed, or your institution’s quality improvement efforts

How to complete the PIP Clinical Module

Step A: Initial assessment of five patient charts

- Collect data from at least five of your own patient charts in a specific category (diagnosis, type of treatment, or treatment setting) obtained from your practice over the previous three-year period.
- Compare the data from the five patient cases with published best practices, practice guidelines, or peer-based standards of care (e.g., hospital QI programs, standard practice guidelines published by specialty societies), using a minimum of four quality measures.

Step B: Identify and Implement Improvement

- Based on results from chart reviews, develop and carry out a plan to improve effectiveness and/or efficiency of your medical practice.

- If no areas for improvement are determined based on initial assessment, then maintenance of performance in medical practice should be reassessed in Step C.

Step C: Reassessment of five patient charts

- Within 24 months of initial assessment, collect data from another five of your own patient charts (may use same or different patients)
- Use the same category and practice guidelines for the initial assessment and reassessment steps.
B. Patient or Peer Feedback Module
With a Feedback Module, preapproval is not needed if the questionnaire/survey meets general competencies. The six general competencies to be reviewed on the feedback forms are interpersonal and communication skills, medical knowledge, practice-based learning and improvement, professionalism, patient care and system-based practices.

A diplomate can collect feedback using one of the following options:
• Select a Feedback Module from the ABPN Approved Products List
• Collect patient* feedback from five patients
• Collect peer** feedback from five peers
• Collect resident evaluations from five respondents
• Collect 360 degree evaluations from five respondents
• Obtain institutional peer reviews from five respondents
• Obtain a supervisor evaluation from one supervisor

Model feedback forms are available on the ABPN Approved Products List at no cost.

* Patients may include those for which the diplomate supervises the care of another provider (e.g., resident)
** Peers may include other professional healthcare staff such as counselors, nurses, physicians, psychologists, and social workers

How to Complete a PIP Feedback Module
Step A: Initial assessment of patient OR peer feedback.
• Diplomates must obtain personal performance feedback from either their peers or patients regarding their own clinical activity during the previous three years.
• Diplomates choose ONE type of feedback from one of the approved Feedback Modules.

Step B: Identify and implement improvement.
• Based on results from feedback, diplomates must then identify opportunities for improvement to the effectiveness and/or efficiency in their practice as related to the general competencies and take steps to implement improvements as needed.
• If no areas for improvement are determined based on initial assessment, then maintenance of performance in medical practice should be reassessed in Step C.

Step C: Reassessment of peer OR patient feedback.
• Within 24 months of initial assessment, collect data from another set of same or different patients or peers.
• Use the same feedback option for the initial assessment and reassessment steps.

General Information About the PIP Unit
• Please allow ample time to complete the PIP Unit (Steps A, B and C).
• Use the same feedback option for the initial assessment and reassessment steps.
• One PIP Unit is required every 3 years for the C-MOC Program.
• ABPN does not collect patient or peer data. If audited, ABPN will require that diplomates explain how they carried out the Improvement in Medical Practice Unit and submit information about their process and improvement plan.

The MOC Activities Audit Form on the website outlines the documentation needed if a diplomate is chosen for an audit.

Note: Only those diplomates in the 2013-2015 C-MOC block must complete BOTH a Clinical Module and a Feedback Module for that specific C-MOC block.
5. NEW Patient Safety Activity
All diplomates entering the ABPN C-MOC Program whose first block begins in 2017 or later are required to do or have done a patient safety activity within three years prior or three years after entering the C-MOC Program.

Diplomates of the ABPN are required to participate in an ABPN-approved patient safety activity to ensure they have adequate knowledge of safety science and principles.

Choose from ONE of the following options to complete the patient safety activity:
• A patient safety activity required by an accredited institution (e.g., hospitals, clinics, training programs); or
• A patient safety activity listed on the ABPN Approved Products List. Some no-cost or reduced cost ABPN-approved activities on the list are available to members through professional organizations.

General Information about the Patient Safety Activity
• The patient safety activity is a one-time requirement.
• Starting in 2017, diplomates will be able to attest to a patient safety activity in their ABPN Physician Folios account.
• Institutions are NOT required to get preapproval from ABPN for patient safety activities.
• The candidate/diplomate must provide documentation of successful completion of the patient safety activity if audited.
• See your individual ABPN Physician Folios account for more information.

6. Clinical Activity Status
The ABMS has issued definitions of ‘Clinically Active’ and ‘Clinically Inactive’ and requires that all diplomates self report their status once every 24 months in each area of certification. This information will be available to the public.

1. Clinically Active: Any amount of direct and/or consultative patient care has been provided in the preceding 24 months. This includes the supervision of residents.
   A. Engaged in direct and/or consultative care sufficient to complete an Improvement in Medical Practice (PIP) Unit.
   B. Engaged in direct and/or consultative care not sufficient to complete a PIP Unit.
2. Clinically Inactive: No direct and or/consultative patient care has been provided in the past 24 months.
3. Status Unknown: No information available on the clinical activity of this diplomate.
   A. Diplomates who are in Category 1A above are required to complete all components of the MOC program including a PIP Unit.
   B. Diplomates who are in categories 1B or 2 above are required to complete all components of the MOC program except a PIP Unit.
   C. A change in diplomate status from 1B or 2 to 1A requires the completion of a PIP Unit.

Diplomates must update their clinical activity status as needed through ABPN Physician Folios at www.abpn.com in the Diplomate Information and Status section.
II. Maintenance of Certification Exam in Sleep Medicine: Application Process, Procedures, Format and Content

A. Application Process Information
Applications are to be completed and submitted using the online application through ABPN Physician Folios at www.abpn.com. Through ABPN Physician Folios, physicians may update licensure information and change their contact information.

See Important Dates at the beginning of this document for application availability. Information for Applicants documents are revised each year and may be downloaded from the website. Only applications submitted through ABPN Physician Folios are accepted.

Applications are reviewed in the order of receipt. It may take up to 16 weeks for the applicant to receive further information regarding the status of the application. MOC in Sleep Medicine applicants who do not receive any notification from the Board regarding their application by April 12, 2017 should contact the Board office to inquire about the status of their application.

Applicants accepted for examination are notified via email. Applicants denied admission to the examination are notified of their deficiencies in meeting the standards of the Board via regular mail.

Approximately six months prior to the examination date, accepted candidates will be mailed registration procedures and deadlines by the American Board of Internal Medicine.

Applications remain active for two consecutive examinations only. Candidates who fail to present themselves for the first scheduled examination following the date of acceptance of their applications are required to reapply online and pay the current application fee and examination fee.

Application fees are not refundable.

B. Applicants with Disabilities
Applicants with disabilities who wish to request testing accommodations should review the Policy for Applicants with Disabilities on the ABPN website at www.abpn.com and submit the required forms and documentation.

C. Computer-Administered Examination Procedures

Note: ADA candidates will receive individual scheduling and examination materials.

Approximately six months prior to the examination, the American Board of Internal Medicine will mail scheduling information to candidates whose applications have been approved. Candidates are urged to contact Pearson VUE as soon as scheduling opens to make an appointment for the examination. A delay in contacting Pearson VUE can result in fewer available openings for the examination in a candidate’s choice of date and location. ABPN candidates may schedule an exam at a Pearson VUE center outside the United States or Canada for an additional $500 fee. The fee will be included in the total amount if paid in full, or in the first payment if the payment is split. Under certain conditions, it may be possible for a candidate to schedule an examination at a U.S. military base outside of the US. for no additional fee. These candidates must initially pay the $500 fee when applying for an examination and will be contacted by the Board with additional information. ABPN does not guarantee the availability of locations, dates and/or times of Pearson VUE test centers.

If the name that the candidate applied under is different than the name that appears on the identification, certified, legal documentation (marriage license, name change determination, etc.) verifying the name change must be submitted to the Board office prior to the date of the examination. Address and/or email address changes must be updated online through the ABPN Physician Folios at www.abpn.com/folios.
Candidates are required to present two forms of identification upon arrival at the testing center. One of the forms of identification must be government issued and must display a recent, permanently-affixed photograph. Both forms of identification must be signed and both must be valid (not expired). The first and last names on both identifications must match the name on file with the ABPN. Failure to comply with these requirements may result in the candidate’s inability to gain admission to the examination. If a name change has recently occurred, it is recommended to bring a copy of legal documentation to the testing center on the appointment date. Government-issued identification includes military identification, passports, driver’s licenses, and state identification cards. Secondary Identification includes a Social Security card, valid credit card, bank automated teller machine card.

Candidates may NOT bring food, drink, cellular phones, pagers, other electronic devices, books, study materials, or other personal belongings, including watches and wallets, into the examination room. A secure locker is available to store personal items. Candidates may not access phones or other devices of any kind while on optional or unscheduled breaks. Accessing prohibited items during optional or unscheduled breaks constitutes irregular behavior and may be cause for invalidation of examination result (See separate Board Policies Manual).

Candidates are NOT permitted to leave the testing center’s building during a test section. Leaving the building during a test section constitutes irregular behavior and may be cause for invalidation of examination results (See separate Board Policies Manual).

Candidates are photographed and are required to provide an electronic signature at the computer test centers. For security purposes, candidates are required to place each hand on a palm vein device each time they enter or leave the computer test center. This information is stored electronically. Candidates must agree to the Pearson VUE Professional & Regulatory Candidate Rules. Candidates must agree to the ABPN Nondisclosure Agreement before taking the examination.

Candidates are observed at all times while taking the examination. This observation includes direct monitoring by testing center staff, as well as video and audio recording of the examination session.

General questions about requirements and logistics of ABPN examinations may be asked of ABPN staff by telephone or onsite. Verbal complaints to staff, directors, proctors, or examiners that continue after explanation of ABPN policy that rise to the level of harassment may be considered irregular behavior (See separate Board Policies Manual).

Candidates are required to sit for the examination for which they have applied. Candidates who fail to do so are required to reapply by submitting a new application form, copies of all medical licenses, meeting the current credentialing requirements and paying the application fee and the examination fee.

Candidates withdrawing from an examination:
The examination fee is refunded to candidates withdrawing from an examination, provided the President and CEO of the Board is notified in writing no less than two months prior to the first date of the examination date range. Failure to notify the Board in writing no less than two months prior to the first date of the examination date range results in forfeiture of the examination fees. Application fees are not refunded for any reason.

Candidates unable to sit for their scheduled examination due to an unforeseen medical or other emergency:
Candidates who are unable to sit for their scheduled examination due to an unforeseen medical or other emergency should submit a personal statement and supporting documentation of the emergency to the Board office, no later than 30 days after the date of the examination. The Board will then evaluate the documentation and determine whether the absence is excusable. In determining whether an absence is excusable, the Board will consider whether the claimed emergency could have been anticipated and/or foreseen prior to the examination. Candidates suffering from pre-existing and/or chronic conditions generally will not be excused for medical or other emergencies relating to such
conditions. If the absence is determined excusable, the candidate is rescheduled for the next ABPN computer-administered examination, and the examination fee will be transferred. Such candidates will be responsible for paying a rescheduling fee of $399 and may be responsible for paying any difference in the examination fee. In the event a candidate is granted two consecutive excused absences, subsequent requests for rescheduling will be denied, only the candidate’s examination fee (but not rescheduling fees) will be refunded, and such candidates will be required to reapply in order to sit for examination.

**Candidates who fail the computer-administered examination (except for Pain Medicine and MOC Pain Medicine)**
Candidates who fail the initial computer-administered examination may pay a reexamination fee and repeat the examination at the next available administration. Candidates being reexamined and who fail or do not sit for the reexamination as scheduled are required to reapply online, and pay the current application fee and the examination fee.

### D. Sleep Medicine Maintenance of Certification Examination Format and Content

The Board recommends that examinees use the following resources for test preparation: peer-reviewed journals, current monographs and textbooks, review publications, practice guidelines, accredited CME programs, and attendance at professional meetings.

### E. Grade Letters and Certificates
#### 1. Grade Letters
- **Computer-Administered Examinations**
  
  All initial certification and MOC examinations for specialties, including Child and Adolescent Psychiatry: The President and CEO of the Board notifies candidates in writing of the results of their computer-administered examinations no later than ten to twelve weeks from the last date of the testing date range.

#### 2. Certificates

  Successful candidates receive their certificates approximately two months after grade letters are mailed. It is the candidate’s responsibility to notify the Board office, in writing, if he or she does not receive a certificate within six months. If a candidate does not submit a written notification that the certificate was not delivered, the candidate must request a duplicate certificate and pay the appropriate fee. (See Fees at the beginning of this document.)

#### 3. Duplicate Certificates

  Photocopies of Board certificates are not available from the ABPN. Requests for duplicates of ABPN certificates must specify the diplomate’s:
  - Name
  - Address
  - Phone number
  - Birth date
  - Signature
  - Preference of how his or her name will be printed on the certificate
  - Specialty or subspecialty certification for which he/she is requesting a duplicate certificate

  The diplomate must include:
  - A copy of each current medical license held, showing the expiration date
  - For security purposes, a copy of government-issued photo identification, such as a driver’s license or passport
  - The appropriate fee (See Fees at the beginning of this publication.)

**NOTE:** For any name changes on a certificate, the diplomate must submit certified, legal documentation (marriage license, name change determination, etc.) to the Board office.
A form for requesting a duplicate certificate may be obtained from the ABPN website at www.abpn.com. Certificates are printed approximately four times per year. Depending on when a duplicate certificate is requested, it may be four to six months until the diplomate receives the duplicate certificate.

F. Computer-Administered Examination Appeal Procedures
The Board provides applicants appeals procedures for certain negative determinations. Specifically, a candidate may appeal:

• The rejection of credentials for admission to an examination (See procedure 1 below)
• Invalidation of an examination score due to irregular behavior (See procedure 1 below)
• The denial of a request for disability accommodations (See procedure 1 below)
• A failing grade on a computer-administered examination (See procedure 2 below)

1. Appeal Procedure for Rejection of Credentials, Invalidation of Examination Score Due to Irregular Behavior, or Denial of a Request for Disability Accommodations
An applicant may appeal the decision if:

• The applicant submitted a formal application and received a negative determination regarding the application
• The applicant’s examination scores are invalidated because of irregular behavior
• The applicant’s request for disability accommodations was denied

Such applicants or candidates must submit the following materials to the President and CEO at the Board office:

• Written request for a formal appeal
• Applicable appeal fee (See Fee Schedule)
• Additional written information that supports the appeal

The appeal materials must be sent in a single mailing that is post-marked within 30 days of the date indicated on the letter of negative determination. The materials are sent to the respective Appeals Committee, which reviews the materials, deliberates, and makes a determination. In all events, the Appeals Committee’s determination is final and binding on both the Board and the candidate.

If the appeal is granted, the appeal fee will be returned to the candidate.

2. Appeal Procedure for Computer-Administered Examination Failing Grade
A candidate who believes that there was a compromise in the administration of the examination may choose to appeal a negative determination. A failing grade on a computer-administered examination is considered a negative determination.

Appeals are limited to a review of an alleged compromise in the administration of the examination. Specifically, that the examination was administered in a manner that was atypical or did not meet the Board’s guidelines. An appeal does not result in a review of a candidate’s performance on an examination.

An appeal will never reverse a negative determination of a computer-administered examination. Rather, a successful appeal will result in the examination being invalidated and the candidate being rescheduled to sit for the examination at the next available administration.

Candidates who wish to appeal a negative determination must submit the following materials to the President and CEO at the Board office:

• Written request for a formal appeal of the negative determination
• Applicable appeal fee (See Fee Schedule)
• Additional written information in support of the appeal
The appeal materials must be sent in a single mailing that is post-marked within 30 days of the date indicated on the letter of negative determination.

The materials are sent to the respective Appeals Committee, which reviews the materials, deliberates, and makes a determination. In all events, the Appeals Committee’s determination is final and binding on both the Board and the candidate.

If the appeal is granted, the appeal fee will be returned, the score for the examination will be invalidated, and the candidate will be rescheduled to sit for the examination at the next available administration.