



American Board of Psychiatry and Neurology, Inc.

A Member Board of the American Board of Medical Specialties (ABMS)

2018

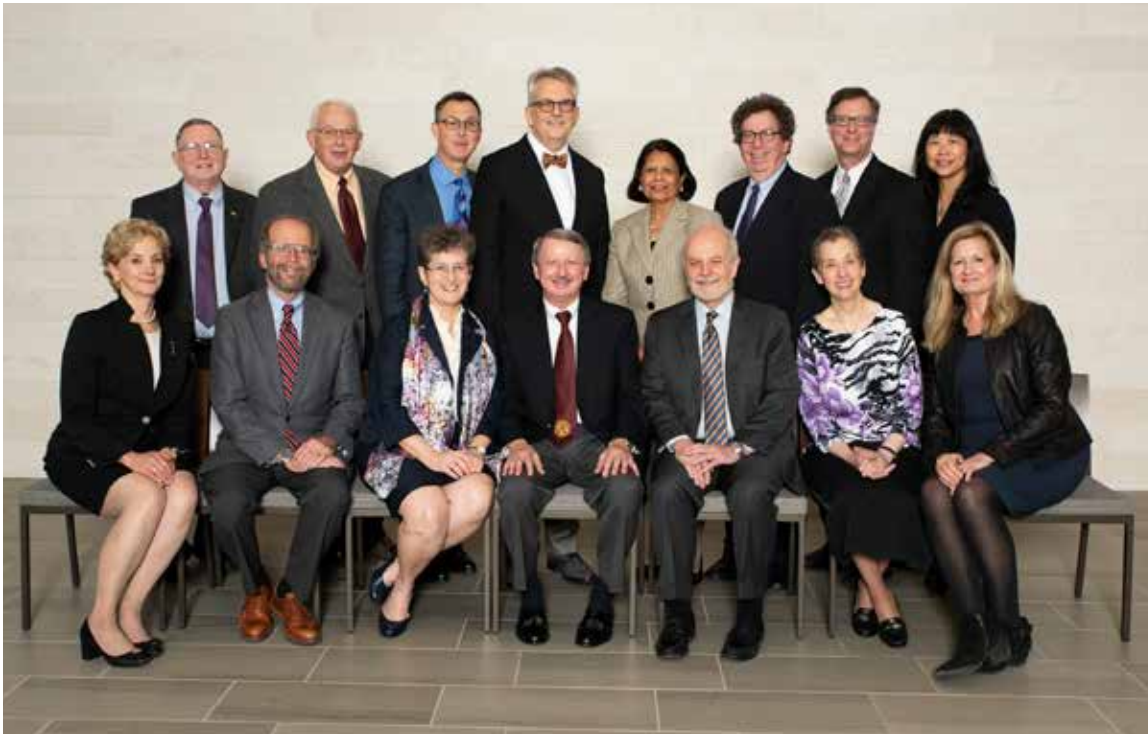


Annual Report

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2018 ABPN Board of Directors



Front row left to right: Drs. Allison Brashear, Robert Golden, Laurie Gutmann (Vice Chair), Larry Faulkner (President/CEO), George Keepers (Chair), Nina Schor and Joan Anzia. Second row left to right: Drs. J. Clay Goodman, John Bodensteiner, Robert Boland, Christopher Thomas, Paramjit Joshi, Steven Lewis, Jeffrey Lyness, and Josepha Cheong. Not pictured: Drs. Imran Ali and Amy Brooks-Kayal

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Strategic Planning at the ABPN

By Larry R. Faulkner, MD, ABPN President and CEO

1999 was an important year for the American Board of Psychiatry and Neurology (ABPN) and for me personally. For the ABPN, it was the year when it began its first formal strategic planning process. For me, it was my first year as an ABPN Director. This fortunate circumstance afforded me the opportunity to participate from the beginning in an effort that would set the course for the future of the ABPN. After an arduous planning process over many months, the ABPN Strategic Plan, named Vision 20/10, was approved in 2000 and went into effect in July 2001. In what would turn out to be a poignant event, the ABPN Directors celebrated the completion of Vision 20/10 with a dinner in a restaurant in the World Trade Center in New York City just a few months before the tragic events of 9/11.

In Vision 20/10, the ABPN identified several important Strategic Issues that were intended to be the major focus of its activities over the following decade. However, it is interesting that Vision 20/10 also demonstrated the limits of even intensive strategic planning. For example, despite a careful environmental scan and lengthy discussions among current and former Directors, staff, and others, Maintenance of Certification (MOC) was not considered in 2001 to be an important Strategic Issue for the ABPN. How rapidly the world can change! In just a few years MOC would become one of the most important Strategic Issues facing the ABPN, occupying much of the time and energy of Directors and staff.

Over the years since 2001, the ABPN Strategic Plan has been updated every five years and it is now known as Vision 20/20. The ABPN is currently in the process of developing Vision 20/30 that will go into effect in July 2021. As in the past, the planning process for Vision 20/30 has involved current and past Directors, staff, and others. In what may be a unique approach for organizations like the ABPN, the planning process for Vision 20/30 will also include input on important Strategic Issues from representatives of almost all professional societies in psychiatry and neurology. The ABPN is committed to focusing its future strategic efforts on relevant issues that are important not only to it but also to the broad fields of psychiatry and neurology.

The structure of Vision 20/30 will follow the successful blueprint of its predecessors, Visions 20/10 and 20/20. The ABPN Vision

and Mission will set the stage for the identification of important Strategic Issues and Strategies. Key Results Areas will be identified for each Strategic Issue and will be monitored on an annual basis against objective Benchmarks. In this way, each year the Directors will be able to review the progress made by the ABPN in each of its Strategic Issues.

To date in the planning process for Vision 20/30, the ABPN has identified nine important Strategic Issues that are intended to be the focus of its future strategic activities: (1) Governance and Administration, (2) Financial Management, (3) Communication, (4) Research, (5) Education, (6) Technology and Information, (7) Computerized Examinations, (8) Subspecialties, and (9) Maintenance of Certification (MOC). Each of these Strategic Issues have aspects that are complex, and some are very controversial. For example, in Governance and Administration, should the ABPN add a member of the “public” to its Board? In Financial Management, should the ABPN continue its current policy of requiring all candidates in a specific class (e.g., initial certification, subspecialties, MOC) to pay the same fee? In Computerized Examinations, should the ABPN attempt to develop a computerized oral examination with avatars? In Subspecialties, should the ABPN continue to require subspecialists to maintain their primary certification? In MOC, how can the ABPN make the process more valuable to its diplomates? These are just a few of the complicated strategic questions under consideration by the ABPN in Vision 20/30. They all will require broad input and intense discussion among ABPN Directors and staff, ABPN diplomates and candidates, and training programs and professional societies in psychiatry and neurology. Achieving a positive consensus on the answers to any of these questions will not be easy and will likely take several years of deliberation.

With past Strategic Plans as their guide, a willingness to consider constructive input, and a spirit of collaboration, current and past Directors and staff have made the ABPN an organization of strength and influence in U.S. psychiatry and neurology. In a similar manner, I am confident that Vision 20/30 will help ensure even more achievements by the ABPN over the next decade.



ABPN Launches ‘Pilot’ Alternative to Ten-Year MOC Examination



By Christopher R. Thomas, MD,
ABPN Psychiatry Director

The ABPN administered its first recertification examination in 2000 in the subspecialty of geriatric psychiatry, and it was an open book, take home exam. Subsequently, the American Board of Medical Specialties (ABMS) specified that all Maintenance of Certification (MOC) Part III

examinations be administered under proctored, closed book test conditions. As the Boards gained more experience, other options such as modular MOC examinations and multiple examinations during an MOC cycle were proposed, and in 2015 the ABMS revised the MOC standards to encourage Member Boards to explore new methods of evaluating diplomate knowledge. While the ABPN had been continuously reviewing its MOC program, a more intensive consideration of its MOC Part III requirement was undertaken. The purpose of this article is to outline the deliberations that began in 2016 and led to the launch in January 2019 of a Pilot Project for a new format consisting of short, on-line tests based on journal articles.

In Spring 2016, the ABPN held a Crucial Issues Forum on MOC with attendees from major stakeholder organizations, including the American Psychiatric Association (APA) and the American Academy of Neurology (AAN) as well as other professional societies, during which alternatives to the MOC Part III examinations were discussed. Representatives of the American Board of Medical Specialties (ABMS), Association of American Medical Colleges (AAMC), Accreditation Council for Graduate Medical Education (ACGME), and Accreditation Council for Continuing Medical Education (ACCME) provided the perspectives of their organizations, and representatives of the American Boards of Emergency Medicine, Internal Medicine, and Obstetrics and Gynecology reviewed their plans for MOC Part III. Options were discussed in small groups, and the feedback was recorded for future consideration. The ABPN also appointed an MOC Clinical Advisory Committee with members who were in practice to provide additional perspectives on recertification.

After careful deliberation the ABPN Directors concluded that a format that would best serve the ABPN’s diplomates should have the following characteristics:

- Contribute to lifelong learning
- Be relevant to clinical practice
- Allow for some tailoring based on professional interests
- Be available more frequently than current ten-year examinations
- Take place in the least restrictive testing environment possible
- Yield informative feedback

Hence, in July 2017, the ABPN Directors approved a Pilot Project that consisted of short, online, open book examinations based on journal articles for Part III MOC in psychiatry, neurology, child neurology, and child and adolescent psychiatry. In Fall 2017, the Pilot Project was approved by the ABMS Committee on Continuing Certification. The following parameters were established for the three-year Pilot Project:

- To assure that a broad range of topics are covered, content outlines were developed based on the current MOC examination outlines. As shown in Table 1, each has 10 categories, with the goal of identifying 4 articles per category for a total of 40 articles.
- All selected articles must have direct clinical application and usually have been published in the past five years in peer-reviewed journals listed on Medline. Practice guidelines and other important clinical references are also acceptable.
- Five multiple-choice questions were developed for each article and include at least one question about a specific and meaningful detail, one conclusion question that can only be answered by reading the entire article, and at least two questions focused on the clinical application of information contained in the article.
- To get credit for an article, the diplomate must answer at least four of the five items correctly on first attempt.
- To pass the Pilot Project, diplomates must earn credit for 30 articles.

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MOC Pilot Test Committees were established for each examination with 11 members each. The ABPN nominated five members for each committee and selected the remaining six from nominations made by the related professional organization (i.e., APA, AAN, the Child Neurology Society, and the American Academy of Child and Adolescent Psychiatry). The committees began work selecting articles in Spring 2018 and wrote and edited questions over the summer. Two committee members selected articles for each outline category, with final article selection based on review and approval by the whole committee.

In Fall 2018, the test administration platform was selected, and alpha testing of the online examinations was carried out by MOC Pilot Test Committee members and the ABPN Directors. The paramount concerns were ease of using the interface, speed and interpretability of test results, and data security. Each test included feedback surveys on the article, the test questions, the test delivery platform, and the Pilot Project as a whole. The Pilot Project staff and committee chairs monitored responses and comments on test questions in the same fashion as for other ABPN examinations, and items were rescored and revised if appropriate.

Announcements on the ABPN website, newsletters, and emails informed eligible diplomates (those due for recertification in 2019-2021) about the MOC Pilot Project. There is no extra cost for diplomate participation, and there is no penalty if a diplomate chooses to drop out or fails to complete the examinations, although they will have to take a proctored recertification examination. Thus far, the response has been enthusiastic, with 64% of the eligible diplomates (~16,000) agreeing to participate. Of those, about 4,600 have already completed one or more of the examinations, and comments have been very positive. For example, a diplomate wrote, “To be honest, I expected to prefer this slightly more than the exam, but I didn’t expect to be this enthusiastic. I thought the articles were well chosen and I have already applied some of what I learned to my practice. I was happy to have a bunch of pertinent articles curated for me and I thought that the majority were extremely interesting.”

The Pilot Project will run from 2019-2021, and the overall success will be measured by:

- Proportion of eligible diplomates that volunteer to participate
- Proportion of diplomates that complete the pilot
- The success rate of diplomates
- Overall satisfaction of diplomates on the exit surveys
- Relevance and quality of the selected journal articles as indicated by the examination surveys
- Total test scores for each article and performance variation across articles
- Quality of the test questions as assessed by item statistics, number of corrected items, and examination surveys
- Test delivery problems and user satisfaction with the delivery platform
- Feedback from professional societies

At the end of the Pilot Project, the ABPN will analyze these data and, if appropriate, request that the ABMS approve the new format as a permanent replacement for the current MOC Part III examinations.

The goal of MOC requirements is to document the continued growth and performance of certified clinicians. The ABPN Pilot Project guides the continued learning with at-home examinations on peer-selected articles on important clinical issues. This format fits more easily into busy schedules than traditional tests, and when important issues arise for clinicians, such as the opioid crisis, they can be addressed more quickly than in the current ten-year examination cycle. The Pilot Project exemplifies the ABPN commitment to serving the professions of psychiatry and neurology by promoting excellence in practice.

Table 1: Content Outlines

Topic	Psychiatry	Child and Adolescent Psychiatry	Neurology	Child Neurology
1	Substance-related and Addictive Disorders	Developmental Processes Through the Life Cycle	Headache and Pain Disorders	Headache and Pain Disorders
2	Schizophrenic Spectrum and Other Psychotic Disorders	Neurodevelopmental Disorders, Autism Spectrum Disorders	Epilepsy and Episodic Disorders, Sleep Disorders	Epilepsy and Episodic Disorders, Sleep Disorders
3	Mood Disorders	Learning Disorders and ADHD	Vascular Neurology	Genetic & Developmental Disorders, Metabolic Disorders
4	Anxiety Disorders, Trauma and Stressor Related Disorders, Obsessive-Compulsive Disorders, Dissociative Disorders	Mood Disorders	Neuromuscular Diseases	Neuromuscular Disorders
5	Eating Disorders, Elimination Disorders, Somatic Symptom Disorders	Anxiety-related Disorders, Obsessive-Compulsive Disorders, Somatic Symptom Disorders	Movement Disorders	Movement Disorders
6	Personality Disorders; Disruptive, Impulse-Control, and Conduct Disorders	Substance and Addictive Disorders	Neuro-oncology, Neuroimmunologic and Paraneoplastic Disorders of the CNS, Neuroinfectious Diseases	Neuro-oncologic Disorders, Neuroinfectious Diseases, Neuroimmunologic and Paraneoplastic Disorders of the CNS
7	Sexual Disorders, Gender Dysphoria, Paraphilic Disorders	Trauma & Stress-related Disorders, Dissociative Disorders	Behavioral Neurology, Psychiatric Disorders	Behavioral Neurology, Neurocognitive Disorders, Psychiatric Disorders
8	Neurocognitive Disorders	Disruptive, Impulse-Control and Conduct Disorders	Genetic and Developmental Disorders, Metabolic Disorders	Vascular Neurology; Brain and Spinal Trauma; Normal Structure, Process, and Development Through the Life Cycle
9	Professionalism, Forensics, Ethics	Professionalism, Forensics, Ethics	Brain and Spinal Trauma, Autonomic Nervous System Disorders, Neuro-ophthalmologic and Neuro-otologic Disorders	Neuro-ophthalmologic and Neuro-otologic Disorders, Autonomic Nervous System Disorders
10	Other Disorders/Issues	Other Topics	Professionalism, Forensics, Ethics	Professionalism, Forensics, Ethics

ABPN Offers New Subspecialty Certificate in Neurocritical Care

In August 2018, the ABPN formally received approval from the American Board of Medical Specialties (ABMS) to offer a certificate in the subspecialty of neurocritical care. The medical specialty of Neurocritical Care is devoted to the comprehensive multisystem care of the critically ill patient with neurological diseases and conditions.

Upon the request of the Neurocritical Care Society and the American Academy of Neurology, ABPN had submitted an application for a new subspecialty to the ABMS, which was formally approved at their June 2018 Board of Directors meeting. The ABPN submitted a proposal to the Accreditation Council for Graduate Medical Education (ACGME) for accreditation recognition of the Neurocritical Care subspecialty and it was approved at their February 2019 Board of Directors Meeting.

The subspecialty certificate will be administered by the ABPN but also offered to eligible diplomates of the American Board of Anesthesiology, the American Board of Emergency Medicine and the American Board of Neurological Surgery.

There will be a 6-year practice pathway for neurologists, neurosurgeons, anesthesiologists, and emergency medicine physicians who are certified in Neurocritical Care by the UCNS or CAST, have completed a “fellowship” in Neurocritical Care (UCNS, CAST, or other non-accredited fellowship), or who document required practice experiences. The practice pathway will start at the time the first exam is offered.

Practice and eligibility requirements are now available on the ABPN website. The first administration of the exam will be in 2021.

2018 Computer Examination Results

- The ABPN administered 41 computer-based specialty and subspecialty certification and maintenance of certification (MOC) examinations in 2018. (Some MOC examinations had two forms, and some had two administrations.)
- In addition, 40 combined MOC examinations (specialty and specialty, specialty and subspecialty, or multiple subspecialties) were administered to 487 ABPN diplomates of whom 468 (96%) passed.
- About 8,575 ABPN computer-based examinations were administered at Pearson VUE testing centers.
- The certification examination in Neuromuscular Medicine was administered to 92 ABPN examinees and 14 American Board of Physical Medicine and Rehabilitation (ABPMR) examinees, and the MOC examination in Neuromuscular Medicine was administered to 80 ABPN diplomates and 10 ABPMR diplomates.
- The MOC examination in Neurodevelopmental Disabilities was administered to three ABPN diplomates and one American Board of Pediatrics diplomate.
- Three additional subspecialty examinations and three additional subspecialty MOC examinations were administered by other ABMS boards.
 - The American Board of Anesthesiology administered certification and MOC Pain Medicine examinations.
 - The American Board of Internal Medicine administered certification and MOC Hospice and Palliative Medicine examinations and the MOC Sleep Medicine examination.
 - The ABPMR administered the Brain Injury Medicine certification examination.

Examination Type	Examination	Number Passing	Number of Candidates	Percent Passing
Specialty	Psychiatry Certification	1478	2024	73%
Specialty	Neurology Certification	711	926	77%
Specialty	Child Neurology Certification	131	185	71%
Subspecialty	Addiction Psychiatry	150	157	96%
Subspecialty	Brain Injury Medicine*	62	68	91%
Subspecialty	Child and Adolescent Psychiatry	407	544	75%
Subspecialty	Epilepsy	291	334	87%
Subspecialty	Geriatric Psychiatry	92	108	85%
Subspecialty	Hospice and Palliative Medicine*	17	20	85%
Subspecialty	Neuromuscular Medicine*	87	92	95%
Subspecialty	Pain Medicine*	12	15	80%
MOC	Vascular Neurology	209	218	96%
MOC	Psychiatry	1772	1815	98%
MOC	Neurology	1111	1163	96%
MOC	Child Neurology	146	153	95%
MOC	Addiction Psychiatry	97	105	92%
MOC	Child and Adolescent Psychiatry	375	379	99%
MOC	Clinical Neurophysiology (General, EEG, EMG)	116	129	90%
MOC	Consultation-Liaison Psychiatry	121	144	84%
MOC	Forensic Psychiatry	86	93	92%
MOC	Geriatric Psychiatry	105	110	95%
MOC	Hospice and Palliative Medicine*	7	8	88%
MOC	Neurodevelopmental Disabilities*	3	4	75%
MOC	Neuromuscular Medicine*	76	77	99%
MOC	Pain Medicine*	11	13	85%
MOC	Sleep Medicine*	63	70	90%
MOC	Vascular Neurology	204	227	90%

*ABPN only

ABPN Certificates Issued

Specialty / Subspecialty	Certificate First Awarded	Total Lifetime and Time-Limited Certificates Awarded	Estimated Number of Active <i>Lifetime</i> Certificates*	Time-Limited Certificates: First Award Date	Number of Time-Limited Certificates Awarded	Estimated Number (Percent) of Active <i>Time-Limited</i> Certificates**
Psychiatry	1935	63,196	10,313	10/1994	31,690	28,151 (89%)
Neurology	1935	20,714	3,187	10/1994	13,062	12,195 (93%)
Child Neurology	1968	2,869	424	10/1994	1,926	1,831 (95%)
Subspecialties						
Child and Adolescent Psychiatry	1959	10,909	1,575	1995	7,045	6,399 (91%)
Addiction Psychiatry				1993	2,665	1,202 (45%)
Brain Injury Medicine				2014	162	153 (94%)
Clinical Neurophysiology				1992	3,035	1,999 (66%)
Consultation-Liaison Psychiatry				2005	1,563	1,105 (71%)
Epilepsy				2011	1,846	1,812 (98%)
Forensic Psychiatry				1994	2,387	1,306 (55%)
Geriatric Psychiatry				1991	3,557	1,426 (40%)
Hospice and Palliative Medicine				2008	144	115 (80%)
Neurodevelopmental Disabilities				2001	87	44 (51%)
Neuromuscular Medicine				2008	866	731 (84%)
Pain Medicine				2000	368	222 (60%)
Sleep Medicine				2007	1,580	1,375 (87%)
Vascular Neurology				2005	1,746	1,423 (82%)

*Obtained primary certification between 1984 and September 1994; estimates based on a 35-year career post primary certification

**All subspecialties, except for Child and Adolescent Psychiatry, must maintain primary certification

Ambassadors Reinforce Lifelong Learning to Professional Groups

The ABPN MOC Ambassador Program was developed in 2011 in anticipation of launching the Continuous MOC Program in 2012. With this program, trained volunteer diplomates communicate a consistent positive message about lifelong learning and maintenance of certification to our diplomates via presentations for professional organizations, group practice settings and other groups. Our goal is to work together with the MOC Ambassadors to continue to keep the field informed about ABPN policies and programs.

Thank you to the following psychiatrists and neurologists:

Psychiatry Ambassadors:

Carol A. Bernstein, MD
James Boehnlein, MD
Melissa Buboltz, MD
Carlyle Chan, MD
Kristen Dunaway MD
Steven Epstein, MD
Richard Frierson, MD
Rita Hargrave, MD
Christopher Lange, MD
Mary Lu, MD
Barbara Lubrano Di Ciccone, MD
Gail Manos, MD
Annette Matthews, MD
Elinore McCance-Katz, MD, PhD
Aida Mihajlovic, MD
Sahana Misra, MD
Jonathan Morris, MD, MPH
Sandra Sexson, MD
G. Richard Smith, Jr., MD
Susan Stagno, MD
Marcia Verduin, MD
Arthur Walaszek, MD
Mitzi Wasserstein, MD
Linda Worley, MD

Neurology Ambassadors:

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José Biller, MD
Stephen Conway, MD
Patricia Crumrine, MD
Charles Flippen, II, MD
Nestor Galvez-Jimenez, MD
Linda Hershey, MD
Aatif Husain, MD
Michael Johnston, MD
John Kincaid, MD
Brett Kissela, MD
Robert Pascuzzi, MD
Marc Patterson, MD, MBBS
Philip Pearl, MD
Patricia Penovich, MD
Alan Percy, MD
Mark Ross, MD
Benn Smith, MD
William Theodore, MD

Clinical Advisory Committee Provides Input on MOC Program Enhancements

The MOC Clinical Advisory Committee was developed at the end of 2015 to provide physician feedback and contributions towards potential improvements to the ABPN MOC Program. The American Psychiatry Association and the American Academy of Neurology were solicited for names of committee volunteers. The group consists of practicing board certified psychiatrists and neurologists who provide input on how MOC impacts their practice and potentially improves patient care.

Thank you to the following psychiatrists and neurologists:

Psychiatry

Valerie Arnold, MD
J. Robert Batterson, MD
Lama Bazzi, MD
L. Russell Pet, MD

Neurology

Charlene Gamaldo, MD
Elaine Jones, MD
Eddie Patton, MD
Michael Rosenbloom, MD

Test Development Committee Names and Members

Addiction Psychiatry

William Haning, MD, Chair
Grace Hennessy, MD, Vice Chair
James Berry, DO
Stuart Gitlow, MD, MPH
Brian Hurley, MD
Eugene Kim, MD

Child and Adolescent Psychiatry Certification

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Sandra Rackley, MD
Kenneth Rogers, MD
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Cynthia Telingator, MD

Child and Adolescent Psychiatry Maintenance of Certification

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James Cullinan, DO
Terry Lee, MD
Alvin Lewis, MD
Roberto Ortiz-Aguayo, MD
Julie Sadhu, MD

Child Neurology Maintenance of Certification

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Debra Byler, MD
Kara Lewis, MD
Jonathan Mink, MD, PhD
Rana Said, MD
Shannon Standridge, DO
Ann Tilton, MD

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Imran Ali, MD, Vice Chair
Ioannis Karakis, MD
Adriana Palade, MD
Mark Quigg, MD, MSC
Devon Rubin, MD
Linda Selwa, MD
Jinny Tavee, MD

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Robert Boland, MD, Vice Chair
Madeleine Becker, MD
Catherine Crone, MD
Paul Desan, MD, PhD

Terry Rabinowitz, MD
Lisa Rosenthal, MD
Peter Shapiro, MD

Epilepsy

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Imran Ali, MD, Vice Chair
Ritu Bagla, MD
Amy Brooks-Kayal, MD
David Dunn, MD
Alica Goldman, MD, PhD
Alison Pack, MD
Patricia Penovich, MD
Jerry Shih, MD
Joseph Sirven, MD

Forensic Psychiatry

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Jeffrey Janofsky, MD, Vice Chair
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Martin Guerrero, MD
Annette Hanson, MD
Donald Meyer, MD
Raymond Patterson, MD
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Elizabeth Santos, MD, Vice Chair
Jordan Karp, MD
Cindy Marshall, MD
Dinesh Mittal, MD
Shilpa Srinivasan, MD
Uma Suryadevara, MD
Ipsit Vahia, MD

International Exam Committee – US

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Jasvinder Chawla, MD
Josepha Cheong, MD
Gail Manos, MD
James Shore, MD
Alan Teo, MD

Maintenance of Certification Pilot Project – Child and Adolescent Psychiatry

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Paramjit Joshi, MD, Vice Chair
Valerie Arnold, MD
Irena Bukelis, MD
Regina Bussing, MD
Linda Drozdowicz, MD
Robert Harper, MD
Thomas Matthews, MD
Cynthia Santos, MD
Oliver Stroeh, MD
Eric Williams, MD

Maintenance of Certification Pilot Project – Child Neurology

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Elizabeth Bebin, MD

Joanna Blackburn, MD
Keith Coffman, MD
Patricia Crumrine, MD
Lisa Emrick, MD
Anthony Fine, MD
Cary Fu, MD
Lenora Lehwald, MD
Timothy Lotze, MD

Maintenance of Certification Pilot Project – Neurology

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Barry Czeisler, MD
Julie Hammack, MD
MaryAnn Mays, MD
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Nicholas Silvestri, MD

Maintenance of Certification Pilot Project – Psychiatry

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Timothy Dellenbaugh, MD
Benoit Dubé, MD
Marc Ettensohn, MD
John Kinzie, MD, PhD
Margo Lauterbach, MD
Martin Leamon, MD
Arthur Walaszek, MD

Neurodevelopmental Disabilities

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John Bodensteiner, MD, Vice Chair
Peter Blasco, MD *
Keith Coffman, MD
Sandra Friedman, MD, MPH/MSPH *
Imad Jarjour, MD
Amy Newmeyer, MD *
Max Wiznitzer, MD

Neurology Maintenance of Certification

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Karen Furie, MD
Lisa Hobson-Webb, MD
Aatif Husain, MD
Ann Killoran, MD
Emily Pharr, MD
Vineeta Singh, MD
Christopher Skidmore, MD
Andrew Southerland, MD, MSC
Amaal Starling, MD

General Neurology (Neurology Part A)

Jerry Goodman, MD, Chair
Terrence Cascino, MD, Vice Chair
Amy Brooks-Kayal, MD
Dane Chetkovich, MD, PhD
Nestor Galvez-Jimenez, MD, MS
Deborah Hall, MD
Shannon Kilgore, MD
Benn Smith, MD

Behavioral Neurology, Cognition, and Psychiatry (Neurology Part B)

Steven Lewis, MD, Chair
Michael Jaffee, MD, Vice Chair
Anna Barrett, MD
Steven DeKosky, MD
Daniel Fallon, MD
Julie Fudge, MD
David Gill, MD

Clinical Neurology Adult (Neurology Part C)

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Allison Brashear, MD, Vice Chair
Kerry Levin, MD, Vice Chair
José Biller, MD
Stephen Conway, MD
Jaison Grimes, MD
Sara Hocker, MD
Jonathan Howard, MD
Jerry Swanson, MD

Clinical Neurology Child (Neurology Part C)

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Nina Schor, MD, PhD, Vice Chair
Tonya Balmakund, MD
Andrea Gropman, MD
Karen Keough, MD
Marc Patterson, MD, MBBS
Phillip Pearl, MD

Neuromuscular Medicine

Janice Massey, MD, Chair
Laurie Gutmann, MD, Vice Chair
William David, MD, PhD
Janak Doshi, MD **
Shawn Jorgensen, MD **
Noor Pirzada, MD
Lawrence Robinson, MD **
John Sladky, MD
Jayashri Srinivasan, MD, PhD
Gil Wolfe, MD

Professionalism

Christopher Thomas, MD, Chair
Nina Schor, MD, PhD, Vice Chair
Joan Anzia, MD
Patricia Crumrine, MD
Andrea Leep Hunderfund, MD
Kayla Pope, MD
Deepak Prabhakar, MD, MPH
Laura Roberts, MD
Madhu Soni, MD

Psychiatry Maintenance of Certification

Paramjit Joshi, MD, Chair
Robert Ronis, MD, MPH, Vice Chair
Peter Buckley, MD
Maria Caserta, MD, PhD
Brian Fuehrlein, MD
Pleas Geyer, MD
Jeanne Lackamp, MD
Stephen Noffsinger, MD
Kenneth Rogers, MD
Andrea Stolar, MD
Marcia Verduin, MD
Matthew Warren, MD

General Psychiatry (Psychiatry Part A)

Robert Golden, MD, Chair
Joan Anzia, MD
Brian Evans, DO
Charlotte Ladd, MD, PhD
Kenan Penaskovic, MD
Dawnelle Schatte, MD
Roomana Sheikh, MD

Basic Neurology and Neuroscience (Psychiatry Part B)

George Keepers, MD, Chair
Sepideh Bajestan, MD
Robert Boland, MD
Amelia Dubovsky, MD
Jordan Eisenstock, MD
William LaFrance Jr., MD, MPH
Margo Lauterbach, MD
David Spencer, MD

Clinical Psychiatry (Psychiatry Part C)

Jeffrey Lyness, MD, Chair
Christopher Cargile, MD
Josepha Cheong, MD
Crystal Clark, MD
Anne Gross, MD
Stephen Kramer, MD
Robert Pary, MD
Ilisse Perlmutter, MD
Roman Rodriguez, MD
Mitzi Wasserstein, MD

Vascular Neurology

José Biller, MD, Chair
Steven Lewis, MD, Vice Chair
Michael De Georgia, MD
Bart Demaerschalk, MD, FRCP
Megan Leary, MD
Enrique Leira, MD, MS
David Liebeskind, MD
Natalia Rost, MD
Fernando Testai, MD, PhD

* Diplomate of the American Board of Pediatrics

** Diplomate of the American Board of Physical Medicine and Rehabilitation

New Board Members

The ABPN elected two new board members who began their terms in 2019.



Terrence L. Cascino, MD, FAAN, Rochester, MN

Dr. Cascino is Professor of Neurology, Mayo Clinic College of Medicine, at Mayo Clinic in Rochester. He has served as vice chair of the Department of Neurology and has been a leader in clinical practice at Mayo Clinic, serving as the chair of the Clinical Practice Committee. Dr. Cascino has served as the Juanita Kious Waugh Executive Dean for Education, Mayo Clinic, completing his tenure in October 2012. As an ABPN Director, Dr. Cascino serves on the Neurology Council and as Vice Chair of the Neurology Certification Examination Combined -- General Neurology Subcommittee. He also serves on the Communications, Finance, Investment, Credentials-Neurology, Strategic Planning, and the Maintenance of Certification Committees. Dr. Cascino has chaired numerous committees in the American Academy of Neurology and served as its President from 2015-2017. He has also served as a member of the Neurology Residency Review Committee. He is beginning his second term as a Director of the American Board of Psychiatry and Neurology.



Andrea G. Stolar, MD, Houston, TX

Dr. Stolar is a Professor of Psychiatry at Baylor College of Medicine, Houston TX, Assistant Dean for Student Affairs and Medical Director for the Veterans Court Programs. As an ABPN Director, Dr. Stolar serves on the Psychiatry Council and as a Vice Chair of the Forensic Psychiatry Steering Committee. She also serves on the Core Competencies, Appeals Review - Psychiatry, Maintenance of Certification and the Forensic Psychiatry Certification and MOC Examination Committees. She also serves on the Certification Examination Combined – General Psychiatry Subcommittee and as a liaison to the AAPL. Dr. Stolar is Vice Chair of the ACGME Residency Review Committee for Psychiatry and previously Chaired the Forensic Psychiatry Working Group, Subspecialty Milestone Project. A Distinguished Fellow of the APA, Dr. Stolar served on the Council on Psychiatry and the Law and the Committee on Psychiatry in the Workplace.

Retiring Board Members

Two ABPN board members retired at the end of 2018 after 8 years of service. The ABPN thanks them for their commitment and contributions to the Board.



George A. Keepers, MD, Portland, OR, 2018 Chair

Dr. Keepers is the Carruthers Professor and Chair of the Department of Psychiatry at Oregon Health and Science University in Portland, Oregon. He is a Distinguished Life Fellow of the APA and a Fellow of the American College of Psychiatry and serves on the College's Board of Regents. As an ABPN Director, Dr. Keepers served as Board Chair, Chair of the Psychiatry Council and as Chair of ten committees: Bylaws, Nomination for 2019 Officers, Core Competencies, Review Appeals-Psychiatry, Irregular Behavior, Disability Accommodations, International Examination, Certification Examination Combined-Psychiatry, Certification Examination Combined-Basic Neurology and Neuroscience Subcommittee, and Delegates to the RRC-Psychiatry. Dr. Keepers was also Chair of the Task Force on Pool Question Reclassification-Psychiatry. He was a member of committees on Communications, Finance, Investment, and Strategic

Planning for the ABPN and the liaison to the AACDP. Dr. Keepers' earliest research interests included the psychopharmacological treatments of schizophrenia and side effects of these treatments, acute extra-pyramidal side effects (dystonia, akathisia and parkinsonism), tardive dyskinesia, and other aspects of neuropsychiatry and neuropsychopharmacology. His current clinical and research interests continue to be in the field of neuropsychiatry. A former program director, his contribution to psychiatric education continues through his participation in the ACGME Psychiatry RRC of which he is the immediate past Chair; the ACGME Milestones project, and the ACGME Task Forces revising the Common Program Requirements. Dr. Keepers co-chaired the second Task Force. Currently, he co-Chairs the ACGME Task Force to revise the resident and faculty surveys administered in all training program annually.



Laurie Gutmann, MD, Iowa City, IA, 2018 Vice Chair

Dr. Gutmann is Clinical Professor and Vice Chair of Clinical Research in the Department of Neurology at the Carver College of Medicine, University of Iowa. She is Director of the Myotonic Dystrophy Clinic and involved in the MDA, CMT, and ALS clinics. As an ABPN Director, Dr. Gutmann served as Board Vice Chair, Chair of the Neurology Council and as Chair of six committees: Review Appeals-Neurology, Strategic Planning, Clinical Neurophysiology Steering, Clinical Neurophysiology Certification and MOC Examination, Neuromuscular Medicine Steering, and Delegates to the RRC-Neurology. She is Vice Chair of committees for Core Competencies, Alternative Pathways Oversight, and Neuromuscular Medicine Certification and MOC Examination. Dr. Gutmann also served as a member of the Bylaws, Communications, Finance, Investment, Irregular Behavior, and Faculty Innovation in Education Award Committees for the ABPN. She was a member of the Task Force on Pool Question Reclassification-Neurology/Child Neurology and the liaison to the AANEM. Dr. Gutmann has had a strong interest throughout her career in education and research, having formerly been a residency program director

and clinical neurophysiology fellowship director. She is the current chair of the ACGME Neurology Residency Review Committee and serves as vice chair of the AAN Education Committee. She is a fellow of the AAN and the ANA. Her current research funding includes myotonic dystrophy, ALS, as well as for clinical research education. She is co-PI for NINDS/NIH sponsored Clinical Trials Methodology Course (website: neurotrials.training) and coinvestigator for an NIH funded longitudinal study of CNS and muscle changes in type 1 myotonic dystrophy. She is a member of the Clinical Coordinating Center for NeuroNEXT (Neurological Network for Experimental Therapeutics - NINDS network), as Director of Site Support and Management, facilitates the Recruitment, Retention and Diversity Committee and is co-PI for the Iowa NeuroNEXT site. She has publications in the areas of neuromuscular disease, stroke, education and clinical trial design. Prior to coming to Iowa in 2013, she spent 20 years at West Virginia University in a variety of roles including Medical Stroke Director and Residency Program Director, with 4 intervening years as a program officer in the extramural Office of Clinical Research at NINDS/NIH.

Reflections on the Importance of Certification

By George A. Keepers, MD

It was business as usual on United 659, a spring flight to Chicago in 2016 to chair another ABPN exam committee meeting. Six years into being an ABPN Director and 500,000 flight miles on United—the trip to the Portland airport, TSA pre-check, the short walk to gate E1 all were practically automatic. Arrival was scheduled for 4:53 PM at gate C27 at O’Hare. The many four-hour flights back and forth provided the opportunity for uninterrupted work and this was no exception. I hardly noticed the approach, the descent, wheels coming down as I continued my work. Suddenly, the wheels were 5 feet off the runway, I was shoved back hard into my seat as the engines roared, the airframe flexed, and the plane’s nose jerked skyward at a military angle of ascent. The flight attendants were frightened and there was no word from the pilots until we were up above 10,000 feet, circling for another approach. Laconically, the pilot in his Alabama drawl reassured us that there had been a just bit of a problem on the runway, another 737 crossing the tarmac in our landing path and that safety consideration led him to abort. A near miss with 215 souls on board.

I was and am very grateful that our pilot was up to the challenge that day and that he, like all other commercial pilots, are well trained, licensed, and required to train and certify every 6 months in emergency situations in the simulator. Physicians have a similar responsibility as they have the health and lives of their patients in their hands. As a board examiner, exam committee member and Director, I absolutely believe in the value of Board Certification for physicians as one measure of physicians’ ability to deliver excellent care. But passage of a certification exam is no assurance of continued competence any more than passing the flight exam 30 years previously assures passenger safety. Continued learning and external measures of performance that do not suffer from our inability to objectively evaluate our own performance are needed in medicine just as much as in aviation. The ABPN’s program of lifelong learning that is required for continued certification is just such an effort. The Board’s staff, Directors and hundreds of volunteer physicians who devote countless hours to formulating and improving this program are devoted to this mission. It has been an honor and a great pleasure to serve on the Board with leading neurologists and psychiatrists and to chair the exam committees that depend on the extraordinary efforts of the ABPN staff and so many gifted physician volunteers.

I am especially excited by the new ABPN pilot project that replaces the 10-year certification examination for a subset of diplomates. The pilot, approved by the ABMS, requires participants to study carefully selected articles from the literature that cover a broad range of topics in psychiatry and neurology. Computer-based mini-examinations on each article are completed incrementally with the expectation that the diplomate will score 80% or better to

gain credit for their study of the publication. The pilot provides the opportunity to study important, clinically relevant manuscripts in a manner that is consistent with the needs of adult learners. If finally approved by the ABMS, this program will become available to all diplomates.

This accomplishment is emblematic of today’s ABPN. The Board and the staff of the ABPN are constantly seeking ways to improve the process of the lifelong learning program required for continued certification. Balancing the efforts to produce valid examinations and educational processes that assure the public of the quality of ABPN diplomates with the acceptability and feasibility of those processes for diplomates is not easy. But it is essential. I have no doubt, based on my experiences of the last eight years, that the ABPN is up to that challenge.

The Honor of Answering the Call

By Laurie Gutmann, MD

The last eight years on the ABPN Board of Directors began with a phone call that I remember vividly. I was in the middle of clinic and my phone rang. I was told by the Chair of the Neurology Council that I had been elected to be a Director for the ABPN Board. My initial response was silence, being acutely aware of what an honor it was to be appointed as well as how much work I would be committing to doing. I had the unique experience of having watched my father as an ABPN Board Director many years before and knew that this call would begin a multi-year experience beyond my usual busy schedule. Even knowing that, I was pleased to accept. Looking back now, I know I could not have predicted the workload, the dilemmas faced, the discussions and the priceless experience of getting to work closely with the thoughtful, accomplished and kind fellow Board members as well as the ABPN staff.

Of the many tasks and accomplishments that occurred during my time on the Board, the most visible was exploring Maintenance of Certification (MOC) and potential alternatives to those put in place initially following the ABMS decision to establish MOC. Through feedback obtained from diplomates directly and convening Critical Issues Forums and meetings with a variety of societies including other boards and physician-led groups, a pilot project was designed and implemented by the Board. The development of this potential alternative to an every 10 year examination was one of the most significant occurrences during my tenure on the board. The topic of MOC, trying to make it relevant to all of us who practice medicine, has been one of the most challenging during my tenure. As I step down from the board, it is with the hope that this pilot project will result in a way to establish maintenance of certification that is practical, relevant and meaningful to those who participate. Other significant changes included the development of the first two year

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fellowship in neurology: neurocritical care – a multidisciplinary subspecialty that is crucial to the care of patients with neurological disorders – and the decision to provide a grant mechanism for education and research in topics that would help to inform different areas of the ABPN mission.

As the Board moves forward, there will certainly be more challenges and opportunities which will require continued collaboration with other boards and our professional societies. These relationships will hopefully continue to move in a positive direction and input from trainees and diplomates will continue to inform the future efforts and direction of the Board. Technology will open more opportunities for the Board to improve certification and MOC as well, possibly in ways not even yet imagined but most certainly with significant effect.

Besides a better understanding of the larger picture of the issues surrounding board certification, my experience as a Director of the ABPN has allowed me a view of many different styles of leadership through the example of my colleagues on the Board, both neurologists and psychiatrists. The opportunity to listen to the thoughtful discussions and debates on a variety of topics from some of the great leaders in our fields has been priceless. Being a Board Director is challenging, time-consuming, and requires increasing amounts of effort over the eight years. It is also one of the greatest honors of my career to have been a part of this group of thoughtful and wise neurologists and psychiatrists.

Insight into Academic and Administrative Pathways for Physicians a Valuable Aspect of Administrative Fellowship



By Avni Kapadia, MD, Clinical and Research Fellow, Department of Neuroanesthesiology and Critical Care Medicine, Johns Hopkins University, Baltimore, MD

The networking and connections with noteworthy physicians in neurology and psychiatry during the ABPN Senior Resident Administrative Fellowship has been invaluable. This experience afforded me greater insight into the academic and administrative pathways available to young physicians, notably the partnership of specialty member organizations and the Board to help physicians achieve academic and career goals through scholarship, certification, and outreach.

The exposure to current policy and political challenges in neurology has given me a perspective I had not reflected upon prior to the fellowship and has contributed to my understanding of current challenges facing national healthcare organizations. As a physician pursuing further training in neurocritical care, I had the opportunity to learn about the ABMS applications procedures and contribute to the neurocritical care subspecialty certification process with my fellowship project, which surveyed practicing neurocritical care neurologists on professional and personal perspectives of training and practice atmosphere.

Directors of the Board provided insight into career challenges and highlights, including leadership roles at ABPN, allowing me to reflect on my own ambitions and professional visions. Undeniably, the most rewarding aspect of the fellowship was Dr. Faulkner's candid reflections on professional and personal successes and obstacles, as well as the strategic issues facing the board. Altogether, the fellowship afforded me a better understanding of a physician's professional role outside of the training experience many of us are constrained to during our early years of training.

Fellowship Provides Unique Glimpse at Mission of ABPN



By Kalea Colletta, DO, Clinical Neurophysiology Fellow, Loyola University Medical Center and Edward Hines Jr. VA Hospital, Maywood, IL

The ABPN Senior Resident Administrative Fellowship was one of the most invaluable and edifying experiences of my career and undoubtedly surpassed all of my expectations. This fellowship provided a unique glimpse into how our professional organizations run, the decision-making process of committees, and the current overarching issues within our subspecialties and the medical field at large. Observing the ways in which board members and leaders are working through these complex and critical issues for the betterment of our fields and the care we provide our patients, was truly an enlightening experience and caused me to want to be a more involved advocate for our patients.

The best part of the fellowship, however, was the seminars and conversations with Dr. Faulkner. Not only did I learn about the innerworkings and mission of the ABPN, but more importantly, lessons about my career and life in general, lessons and advice that have already had an enormous impact on my future plans and career path. Learning firsthand from an inspiring leader such as Dr. Faulkner has motivated me to become a more well-rounded physician and more effective leader.

The entire experience was truly unforgettable and formative, due to Dr. Faulkner and the incredible staff and leaders at the ABPN.

Awards and Honors

Staff and current and former members of the ABPN Board of Directors received several awards in 2018.

Allison Brashear, MD, MBA, ABPN director, was named City of Winston-Salem 2018 Outstanding Women Leader.

Larry Faulkner, MD, ABPN President and CEO, delivered the Paul Wellstone Lecture in Mental Health Advocacy to the Case Western Reserve University School of Medicine Department of Psychiatry.

Robert Golden, MD, ABPN director, was named president of The American College of Psychiatrists and Chair-elect of the Board of Directors of the Association of Academic Health Centers (AAHC).

Ralph Józefowicz, MD, former ABPN director, was awarded the American Academy of Neurology's (AAN) Leading in Excellence through Mentorship award.

Nina Schor, MD, PhD, ABPN director, was named deputy director of the National Institute of Neurological Disorders and Stroke (NINDS), part of the National Institutes of Health (NIH).

2018 Publications

Written by ABPN staff, and Board members, this article appeared in a psychiatry publication in 2018.

Primary Care and Neurology in Psychiatry Residency Training: A Survey of Early Career Psychiatrists by D. Juul, J. Lyness C. Thomas, and L. Faulkner, Academic Psychiatry e-publication, June 25, 2018.

2018 Presentations

Throughout 2018, ABPN Directors, former Directors, MOC Ambassadors and staff contributed their knowledge of both the psychiatry and neurology specialties and subspecialties and the importance of certification and continuing certification through engaging in presentations to various groups.

January

Lifelong Learning: The ABPN MOC Program, presented by L. Gutmann, American Academy of Neurology Breakthroughs in Neurology Conference, Orlando, FL, January 2018.

February

Podcast interview: MOC requirements and updates, presented by L. Gutmann, American Academy of Neurology, February 2018.

Refereeing Your Item References, presented by K. O'Brien and E. Ronkowski, Association of Test Publishers Innovations in Testing Conference, San Antonio, TX, February 2018.

March

Lifelong Learning: The ABPN MOC Program, presented by J. Cheong, American Academy of Geriatric Psychiatry Annual Meeting, Honolulu, HI, March 2018.

Update on the ABPN, presented by L. Faulkner, American Association of Directors of Psychiatric Residency Training Annual Meeting, New Orleans, LA, March 2018.

April

Ensuring the Survival of Academic Psychiatry in the New Healthcare Era, presented by L. Faulkner, Paul Wellstone Lecture in Mental Health Advocacy, Case Western Reserve University School of Medicine, Department of Psychiatry Meeting, Cleveland, OH, April 2018.

How to be an Administrative Failure in 13 East Steps, presented by L. Faulkner, National Association of Academic Psychiatry Administrators Meeting, Cleveland, OH, April 2018.

Lifelong Learning: The ABPN MOC Program, presented by JC Goodman, American Academy of Neurology Annual Meeting, Los Angeles, CA, April 2018.

Maintenance of Certification: An Alternative to a Comprehensive Multiple-Choice Test for Cognitive Assessment, presented by D. Juul, American Educational Research Association Annual Meeting, New York, NY, April 2018.

Neurologists in Trouble: Licensure Actions Involving ABPN Diplomates, poster presented by L. Faulkner and D. Juul, American Academy of Neurology Annual Meeting, Los Angeles, CA, April 2018.

Update on the ABPN, presented by L. Faulkner, American Association of Directors of Child and Adolescent Programs Annual Meeting, Washington, DC, April 2018.

May

Attitudes of Chief Residents in Psychiatry and Neurology Regarding MOC, poster presented by L. Drozdowicz, L. Faulkner and A. Simon, American Psychiatric Association Annual Meeting, New York, NY, May 2018.

Current Status and Possible Future Challenges for the ABPN, presented by L. Faulkner, ABPN Building Celebration, Deerfield, IL, May 2018.

Lifelong Learning: The ABPN MOC Program, presented by I. Ali, American Clinical Neurophysiology Society's International Congress of Clinical Neurophysiology (ICCN), Washington, DC, May 2018.

Maintenance of Certification (MOC): A New Hope, presented by J. Anzia and R. Boland, American Psychiatric Association Annual Meeting, New York, NY, May 2018.

Reflections About Continuous Certification, presented by L. Faulkner, ABMS Vision for the Future Commission Meeting, Denver, CO, May 2018.

June

Lifelong Learning: The ABPN MOC Program, presented by I. Ali, Grand Rounds, Department of Neurology, University of California, Irvine, June 2018.

Lifelong Learning: The ABPN MOC Program, presented by S. Lewis, Rhode Island Neurological Society Meeting, Providence, RI, June 2018.

September

ABPN MOC Part III Pilot Project, presented by S. Lewis, ABPN Test Committee Members Conference, Deerfield, IL, September 2018.

ABPN MOC Question and Answer Session, presented by J. Bodensteiner, Gwen Hogan Lecture, Department of Pediatrics, West Virginia University School of Medicine, Morgantown, WV, September 2018.

Lifelong Learning: The ABPN MOC Program, presented by L. Gutmann, Iowa Neurological Society Annual Meeting, Iowa City, IA, September 2018.

Reliability and Its Indices: Update of Test Development Operations, presented by L. Shen, ABPN Test Committee Members Conferences, Deerfield, IL, September and October 2018.

The ABPN MOC Program: Current Status and Future Directions, presented by L. Faulkner, Association for Academic Psychiatry Annual Meeting, Milwaukee, WI, September 2018.

Update on the ABPN, presented by L. Faulkner, ABPN Neurology Examination Committee Member Recognition Event, Deerfield, IL, September 2018.

Validity of ABPN Multiple Choice Examinations, presented by D. Juul, ABPN Test Committee Members Conferences, Deerfield, IL, September and October 2018.

October

ABPN MOC Part III Pilot Project, presented by J. Anzia, ABPN Test Committee Members Conference, Deerfield, IL, October 2018.

Lifelong Learning: The ABPN MOC Program, presented by A. Brashear, American Academy of Neurology Fall Conference, Las Vegas, NV, October 2018.

Lifelong Learning: The ABPN MOC Program, presented by A. Brashear, American Neurological Association Annual Meeting, Atlanta, GA, October 2018.

The ABPN MOC Program: Current Status and Future Directions, presented by L. Faulkner, Grand Rounds, Department of Neurology, Rush University Medical Center, Chicago, IL, October 2018.

Update on the ABPN, presented by L. Faulkner, ABPN Psychiatry Examination Committee Member Recognition Event, Deerfield, IL, October 2018.

Update on the ABPN, presented by L. Faulkner, Child Neurology Society Executive Committee, Chicago, IL, October 2018.

November

ABPN MOC Question and Answer Session, presented by J. Bodensteiner, Pediatric Grand Rounds, Department of Pediatrics, St Christopher's Hospital, Philadelphia, PA, November 2018.

December

Lifelong Learning: The ABPN MOC Program, presented by J. Anzia, American Academy of Addiction Psychiatry Annual Meeting, Bonita Springs, FL, December 2018.

ABPN Participation in American Board of Medical Specialties Committees and Groups

The ABPN continues its active involvement with the ABMS. The following ABPN directors, emeritus directors, and staff served on ABMS committees and groups in 2018:

Larry R. Faulkner, MD: ABMS Board of Directors; Member Board Executive Caucus; Task Force to Review Continuing Certification Programs for Co-Sponsored Certificates

Kerry H. Levin, MD: Committee on Continuing Certification

Jeffrey M. Lyness, MD: Health Policy and Strategy Committee

Barbara S. Schneidman, MD, MPH: Awards Committee

Christopher R. Thomas, MD: Ethics and Professionalism Committee

ABPN Staff:

Tina Espina: ProNet

David Homan: TechNet

Catherine Szmurlo: ComNet

Patricia Vondrak: ComNet and MOCNet

Professional Society Meeting Participation

The ABPN values the importance of attending meetings of our professional society partners and participating with display tables or booths, in order to meet with and answer questions from our candidates and diplomates. The following organizations were included in the 2018 schedule:

- Academy of Consultation-Liaison Psychiatry
- American Academy of Addiction Psychiatry
- American Academy of Child and Adolescent Psychiatry
- American Academy of Neurology
- American Academy of Psychiatry and the Law
- American Association of Directors of Psychiatric Residency Training
- American Association of Neuromuscular & Electrodiagnostic Medicine
- American Clinical Neurophysiology Society
- American Epilepsy Society
- American Psychiatric Association
- Child Neurology Society

ABPN Moves to New Headquarters



In 2018, the ABPN moved its administrative offices into a new headquarters building in Deerfield, Illinois. The building is a testament to the important work by those involved in the ABPN in the past as well as those who work today to make our certification and continuing certification programs for psychiatrists and neurologists both effective and valuable.

Several years of planning and collaboration by current and past Directors, staff, and consultants went into the new space, which features small and large high-tech conference rooms for Board and committee meetings and professional society conferences, in addition to staff offices.

The ABPN has been an important part of the history of psychiatry and neurology and we hope this new building will help ensure the continuation of that tradition long into the future.

A handwritten signature in black ink, reading "Larry R. Faulkner".

Larry R. Faulkner, MD
President and CEO

Our Mission

The mission of the ABPN is to promote and assess the competence of psychiatrists and neurologists by:

- Establishing requirements for initial and continuing certification;
- Implementing state-of-the-art testing methods to evaluate candidate and diplomate competencies;
- Promoting and assessing diplomate involvement in lifelong learning;
- Applying available technologies and information to collect and analyze pertinent data;
- Communicating and collaborating with training programs, residents, candidates, diplomates, professional and health care organizations, and the public;
- Supporting innovative educational and research programs relevant to psychiatrists and neurologists; and
- Operating internal programs and services effectively and efficiently.

Statement on Professionalism

Professionalism forms the basis of medicine's contract with society. The ABPN is concerned with those aspects of professionalism that are demonstrated through: a physician's clinical competence, commitment to lifelong learning and professional improvement, interpersonal skills, and ethical understanding and behavior. In its credentialing, certification, and MOC programs, the ABPN seeks to assess and document that its candidates and diplomates possess and maintain these essential aspects of professionalism.



American Board of Psychiatry and Neurology, Inc.

A Member Board of the American Board of Medical Specialties (ABMS)