

# ABD Newsletter

JANUARY 2002



***A Bulletin on Current Activities, Policy Issues and Changes in Composition of the American Board of Dermatology (ABD)***

## PRESIDENT'S MESSAGE

**KENNETH E. GREER, M.D., *President***



As I begin my ninth and final year as a Director, and for this year, President of the American Board of Dermatology (ABD), I can tell you that the 15 Directors of the Board are a committed and dedicated group that oversee an ever expanding list of examinations and activities. We began as the American Board of Dermatology and Syphilology in 1932, and in our 70th year, we have the annual certification examination (time-limited as of 1991) in the fall, the in-training examination taken by all residents in April, the "recertification" or "maintenance of certification" examination in the summer (next one in 2003), and additional certifications in Dermatopathology, Clinical and Laboratory Dermatological Immunology, and beginning in 2004, Pediatric Dermatology.

Four members of the Board also serve on the Residency Review Committee (RRC) for Dermatology along with four other members selected by the American Medical Association with direction from the American Academy of Dermatology (AAD). This important committee meets twice each year to evaluate and assure that the 106 dermatology residency programs in the United States provide appropriate training for the 900+ residents who fill these programs. The RRC, along with the ABD, is actually involved in resident education as well as the development of fellowships in surgery. The ABD is currently working with a subcommittee from the AAD on procedure credentialing.

Personally, I am honored to be President and have gained tremendously from my association with the present and previous Directors during the past decade. The office staff, with whom many of you have interacted, is phenomenal, and the executive staff of Drs. Antoinette Hood and Stephen Webster is top flight. In addition, the Board Directors are very appreciative of the hard work done by the test writing subcommittee members who donate their time and expertise to supply questions for

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## MAINTENANCE OF CERTIFICATION

**by ANTOINETTE F. HOOD, M.D., *Executive Director***

The Board began issuing time-limited certificates, valid for ten years, in 1991 and its process of voluntary recertification was approved by the American Board of Medical Specialties in 1994. Recertification examinations were administered in 1999 and 2001. A total of 992 diplomates, including 874 time-limited and 118 lifetime certificate holders, took these examinations as part of the recertification process.

The American Board of Medical Specialties (ABMS) has recently introduced the concept of Maintenance of Certification, a program of continuous professional development that is intended to replace the current process of recertification. Maintenance of certification is an ongoing process through which a diplomate's credentials, licensure, and professional standing are verified and his or her knowledge and practice performance are evaluated. The maintenance of certification process is comprised of four components:

- Evidence of Professional Standing
- Evidence of Commitment to Lifelong-Learning and Periodic Self-Assessment
- Evidence of Cognitive Expertise
- Evaluation of Performance in Practice

The ABD is committed to the gradual conversion of its current process of recertification to a process of maintenance of certification that is consistent with guidelines established by the ABMS and with the distinctive nature and elements of the specialty of dermatology. In so doing, the Board will plan and implement maintenance of certification as a fair and credible process that will withstand public and professional scrutiny, will be properly considerate of the concerns and responsibilities of its diplomates, and will preserve the high standards of the specialty of dermatology. As the various phases of the maintenance of certification process are being developed and put in place, diplomates will be informed in newsletters and other communications. At present, the requirements for qualification for Components 1 (Evidence of Professional Standing) and 3 (Evidence of Cognitive

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## MAINTENANCE OF CERTIFICATION

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Expertise) have been defined and are listed below. The resources of the American Academy of Dermatology and other dermatological organizations will be utilized to assure adequate opportunities for diplomates to satisfy the requirements of Component 2 (Commitment to Lifelong-Learning and Periodic Self-Assessment). The implementation of Component 4 (Evaluation of Performance in Practice) must await the definition of appropriate standards and methods of assessment.

### **Component 1. Evidence of Professional Standing**

- Currently valid and unrestricted license to practice medicine or osteopathy in the United States or Canada
- Listing of other current or past state licenses
- Past or present restrictions, modifications or suspensions of any state license
- List of hospital privileges and current hospital credentials accompanied by a letter from the chief of the department/staff at each hospital where privileges are granted or from an ABD diplomate if the physician has no affiliation with a hospital staff
- Letter/s attesting to moral and ethical character and lack of drug dependency

### **Component 2. Commitment to Lifelong-Learning and Periodic Self-Assessment**

- 90 hours of Category I CME credits are required in the three years preceding the date of the application for recertification but including also the first three months of the year of administration of the recertification examination. This CME should be acquired in educational programs that are related to dermatology, specifically those that would be approved by the AAD for its CME award.

### **Component 3. Cognitive Expertise**

- Successful completion of an examination. The current examination is a clinically-focused, take-home, open-book examination that is administered biennially. Beginning 2003, the examination will be given annually and the ABD is exploring ways to administer the examination electronically using either the Internet or a CD-ROM. The ABD will further modify the recertification examination in the future as required in order to conform to the standards of the maintenance of certification process and to permit the equitable and effective evaluation of its diplomates.

### **Component 4. Evaluation of Practice Performance**

- Implementation is currently on hold (see above).

There is no limit on the number of times diplomates may undertake the Recertification Process. If the candidate does not successfully complete the Recertification Process prior to expiration of his/her time-limited certificate, he/she will remain eligible to participate in the Recertification Process but will cease to be Board-certified until the process is successfully completed and a new time-limited certificate is issued. If the candidate successfully completes the Recertification Process before expiration of his/her certificate, e.g., in year 9 of the 10 years, the new certificate will be issued for 10 years commencing on January 1 of the year following the expiration date of the prior certificate.

**Diplomates with time-limited certificates may take a recertification examination any year in which it is offered. However, for formal (official) completion of the Recertification Process, candidates must take either of the two recertification examinations that immediately precede the expiration of their time-limited certificate.**

**Should a diplomate not be recertified by the end of the tenth year, the certificate will expire and the physician will lose diplomate status. Once the certificate has expired, the physician may not represent himself/herself to the profession or the public as being certified unless and until successfully recertified by the American Board of Dermatology. The physician may reapply for a future recertification examination, but must meet all the criteria in effect at that time.**

Diplomates with lifetime certification may elect to pursue voluntary recertification in any given year the examination is offered. Any questions or correspondence relating to the Recertification Process should be directed to the Executive Director of the American Board of Dermatology.

**Deadline for receipt of applications for the next recertification examination is January 1, 2003.** Requests for applications should be directed to the office of the American Board of Dermatology. Applications may also be downloaded from the Board's website ([www.abderm.org](http://www.abderm.org)). This computer-based examination is tentatively scheduled for the month of April 2003. Notification of performance on the examination and other pertinent related information, will be mailed to the candidates approximately 8-10 weeks later.

An appeals procedure is available for candidates who were declared ineligible by the Board for the recertification process or who failed the recertification examination. Candidates submitting such appeals should contact the Board office for current additional information.

It is to be noted that at this time a recertification process has not been instituted for the subspecialty certification processes in Dermatopathology, Clinical and Laboratory Dermatological Immunology, or Pediatric Dermatology.

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## PRESIDENT'S MESSAGE

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the various examinations. In New Orleans in February at the AAD Meeting, we will hold the third question writing seminar for anyone who would be willing to help with this endeavor.

I have no doubt that the future is bright for your Board, which has as its goal to assure the American public that our diplomates have the necessary clinical training and have satisfied standards and qualifications required for the practice of dermatology.



# TEST COMMITTEES — 2003 RECERTIFICATION EXAMINATION

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Evan R. Farmer, M.D., *General Vice Chairman*  
Antoinette F. Hood, M.D., *Staff*  
Stephen B. Webster, M.D., *Staff*  
Harry J. Hurley, M.D., *Executive Consultant*  
John S. Strauss, M.D., *Executive Consultant*

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Ronald R. Brancaccio, M.D.\*  
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Patricia G. Engasser, M.D.\*  
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Julie K. Salmon, M.D.\*

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Lawrence F. Eichenfield, M.D.\*  
Maria C. Garzon, M.D.\*  
Renee M. Howard, M.D.\*  
Anthony J. Mancini, M.D.\*  
Steven D. Resnick, M.D.\*  
Mary Wu Chang, M.D.\*

\*Non-ABD Director member.

### Application Request Form For The Recertification Examination

Deadline for receipt of applications in the Board office is January 1, 2003. Thus, return this form to the Board office before December 1, 2002 in order to meet the deadline. *Please note that this form does not register you to take the recertification examination in 2003. You must complete a multi-page application form that will be mailed to you or can be downloaded from our website at [www.abderm.org](http://www.abderm.org). (Please note that candidates who received their time-limited certification in the years 1991, 1992, 1993, and 1994 are all eligible to take the 2003 Recertification Examination as part of the recertification process.)*

Please send me an **application form** for the  
2003 Dermatology Recertification Examination.

*(Please print or type)*

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

City/State/Zip/Country: \_\_\_\_\_

Year Certified by ABD: \_\_\_\_\_

Mail or FAX form to:  
**American Board of Dermatology**  
**1 Ford Place**  
**Detroit, MI 48202-3450**  
**FAX: 313-872-3221**

## NEW DIRECTOR OF THE BOARD

The American Board of Dermatology is pleased to announce the election of **Elaine C. Siegfried, M.D.** to its Board of Directors. Dr. Siegfried's term as a Director begins January 1, 2002. Dr. Siegfried was Associate Professor of Pediatrics and Dermatology and the Director of the Clinical Trials Unit at Saint Louis University Medical School in St. Louis, MO from 1992 until Oct. 31, 2001, when she entered private practice in St. Louis. The majority of Dr. Siegfried's patients are children.



Dr. Siegfried received her BA from Pomona College, Claremont, CA and her medical degree from the University of Missouri-Columbia. She completed residency training in Pediatrics and Dermatology at the University of Iowa, in Iowa City, IA and has been certified by the American Board of Pediatrics and the American Board of Dermatology. She has been on test committees of the ABD since 1999.

Dr. Siegfried is an active member of several organizations, including the Society for Pediatric Dermatology (serving as the chair of the Committee for Certification), the American Academy of Pediatrics (serving on the Executive Committee of the Section on Dermatology), and several ad hoc committees of the American Academy of Dermatology. She serves on the Scientific Advisory Board of the National Foundation for Ectodermal Dysplasias.

She has published over 76 articles, abstracts and chapters in the field of pediatric dermatology, and also serves on the Editorial Advisory Board of *Pediatric Annals*, and is an Associate Editor for *Journal Watch for Dermatology*. Dr. Siegfried is a popular speaker and educator.

Married to Daniel F. Hoft, M.D., Ph.D., who specializes in infectious disease research at St. Louis University, Drs. Siegfried and Hoft are the parents of three children, Isaac (14), Galen (11) and Stella (7).

## 2001 ABD EXAMINATIONS

### Certification Examination

The ABD certification examination was administered October 14 and 15, 2001 to 329 candidates. The overall passing rate was 92.7%, the highest rate in the history of the Board. The Board is pleased with the performance of this year's candidates and believes that this exceptional passing rate is a reflection of the candidates' high level of intelligence, knowledge and superior training in residency. The 2002 certification examination will be held in Rosemont, Illinois on October 13 and 14.

### Recertification Examination

The second ABD recertification examination was given during the months of June and July and was taken by 645 diplomates. The examination was an open-book, take-home examination. Candidates had 6 weeks to complete a general dermatology module of 100 questions, and a self-selected module of 50 questions. In conjunction with the National Board of Medical Examiners, passing scores were determined for each module, with the assumption that 100% of the candidates could pass the examination. The overall passing rate for the 2001 examination was 91%. The next recertification examination will be given in April 2003 and annually thereafter.

### Dermatopathology Subspecialty Certification Examination

A total of 10 dermatologists and 51 pathologists took the subspecialty certification examination in dermatopathology on November 15 and 16, 2001. The overall passing rate for all candidates was 72%. The next dermatopathology subspecialty certification examination will be given on November 8, 2002 at the American Board of Pathology test center in Tampa, Florida.

### Clinical and Laboratory Dermatological Immunology Subspecialty Certification Examination

This subspecialty certification examination was administered to 6 candidates on October 11, 2001 in Rosemont, Illinois. All 6 candidates passed the examination. There are no immediate plans to repeat this examination.

## VISIT THE BOARD'S WEBSITE:

<http://www.abderm.org>

*It encompasses all information contained  
in the current American Board of Dermatology  
Booklet of Information, including:*

1. Requirements for Eligibility to take the Certifying Examination in Dermatology
2. Maintenance of Certification/Recertification
3. Subspecialty Certification in Pediatric Dermatology
4. Combined Training in Dermatology and Internal Medicine
5. Combined Training in Dermatology and Pediatrics

# COMPETENCIES IN CLINICAL MEDICINE

by **STEPHEN B. WEBSTER, M.D.**, ASSOCIATE EXECUTIVE DIRECTOR

Competence in medicine has always been hard to define. Like pornography, we all know it when we see it, but we have difficulty defining it. Just such an effort, however, i.e., delineating the attributes of the competent physician and developing appropriate mechanisms of assessment therefor, has been the focus of the American Board of Medical Specialties (ABMS) and its member boards over the past few years, with the ultimate objective of assuring the American public that physicians so identified are providing optimal medical care. The result of these deliberations is a process entitled "Maintenance of Certification" (MOC), which is designed to extend or broaden the current process of recertification, giving it the proper degree of currency and continuity as well as comprehensiveness. Indeed, the recertification process, as we now know it, will be an essential part of MOC, providing an evaluative method at the level of the practicing physician for some of the general competencies of the MOC program.

In addition to the above general explanation of what MOC is and how it relates to the current recertification process, my purposes in this brief exposition are to restate the description of the Competent Physician as developed and approved by the ABMS, and to list and further define the six general competencies physicians should possess in their delivery of optimal medical care.

## Description of the Competent Physician

- The competent physician should possess the medical knowledge, judgment, professionalism, and clinical and communication skills to provide high quality patient care.
- Patient care encompasses the promotion of health, prevention of diseases, and diagnosis, treatment and management of medical conditions with compassion and respect for patients and their families.
- Maintenance of competence should be demonstrated throughout a physician's career by evidence of lifelong learning and ongoing improvement of practice.

The ABMS also listed 6 general competencies that are essential for the competent physician:

## General Competencies

- Medical knowledge
- Patient care
- Interpersonal and communication skills
- Professionalism
- Practice-based learning and improvement
- Systems-based practice

The ideal MOC program will measure each physician against these general competencies. It is useful, therefore, to further amplify these general competencies as they have been defined by the ABMS and the Accreditation Council for Graduate Medical Education (ACGME).

- **Medical knowledge** – Demonstrate knowledge of established and evolving medical, clinical and social sciences, and the application of their knowledge to patient care and the education of others.

- **Patient Care** – Provide patient care that is compassionate, appropriate and effective for the promotion of health, prevention of illness, treatment of disease, and at the end of life.
- **Interpersonal and Communication Skills** – Demonstrate interpersonal and communication skills that enable the physician to establish and maintain professional relationships with patients, families, and other members of health care teams.
- **Professionalism** – Demonstrate behaviors that reflect a commitment to continuous professional development, ethical practice, and understanding and sensitivity to diversity, and a responsible attitude toward their patients, their profession, and society.
- **Practice-Based Learning and Improvement** – Be able to use scientific evidence and methods to investigate, evaluate, and improve patient care practices.
- **Systems-Based Practice** – Demonstrate both an understanding of the context and systems in which health care are provided and the ability to apply this knowledge to improve and optimize health care.

It is worth noting that in consonance with the utilization of MOC for the practicing physician, the ACGME has introduced a similar program emphasizing the same general competencies as the outcome expectations for residency training. Finally, medical students will also be exposed to the principles of MOC and their education and training will reflect these same general competencies. Application of the MOC program at these various phases of medical education is just beginning and will take years to complete. Undoubtedly, there will be adjustments and modifications along the way.

While the general competencies may seem at first glance complicated and burdensome, they are in reality part and parcel of every day medical practice. Thus, the demonstration of our compliance with them need not be as difficult as might initially be assumed. It is important to realize also that in implementing MOC, the necessary flexibility in adaptation of the program to the various specialties and subspecialties of medicine is not only necessary but is encouraged. Thus, how the American Board of Dermatology develops its MOC program may differ significantly from what general surgery or psychiatry and neurology will prepare. As the ABD proceeds, all of its diplomates will be kept fully informed. Inquiries or comments along with suggestions on any aspect of a proposed component of MOC, are encouraged and will be given thoughtful consideration by the Board.

To all who will examine this broad coordinated initiative, it should be eminently clear that Medicine, through this MOC program that involves all levels of medical education from the student to the resident to the practitioner, is very conscious of its responsibility to the people of our nation to help assure the delivery of the best of medical care.

# THE AMERICAN BOARD OF DERMATOLOGY, INC.

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[abderm@hfhs.org](mailto:abderm@hfhs.org)

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John S. Strauss, M.D., *Executive Consultant*  
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## DIRECTORS, OFFICERS, AND STAFF OF THE AMERICAN BOARD OF DERMATOLOGY, INC. OCTOBER 13, 2001



**BACK ROW:** (Left to right) Randall K. Roenigk, M.D., Clifton R. White, Jr., M.D., Thomas D. Horn, M.D., Darrell S. Rigel, M.D., Paul R. Bergstresser, M.D., Kim B. Yancey, M.D..

**MIDDLE ROW:** (Left to right) Lela A. Lee, M.D., Ilona J. Frieden, M.D., Ronald P. Rapini, M.D., Evan R. Farmer, M.D., Jean Modaffare.

**FRONT ROW:** (Left to right) Antoinette F. Hood, M.D., Diane R. Baker, M.D. (2001 Vice President), Kenneth E. Greer, M.D., (2001 President-Elect), Lee T. Nesbitt, Jr., M.D. (2001 President), Stephen B. Webster, M.D., Margaret M. Aguiar.

**Not pictured:** David R. Bickers, M.D., Leonard M. Dzubow, M.D., Cynthia Campbell.

## REQUEST FOR SOCIAL SECURITY NUMBERS

Names of certified dermatologists are shared with the American Board of Medical Specialties (ABMS) and are published in *The Official ABMS Directory of Board Certified Medical Specialists*. The ABMS, along with its 24 member certifying boards, is attempting to update its database to identify all Diplomates accurately. In order to identify diplomates, the ABMS will use social security numbers, birthdates, and Board identification numbers. To help in this regard, the ABMS is requesting that the certifying boards collect social security numbers and birthdates from all diplomates in order to assure that Jane Q. Smith is the same Jane Q. Smith in each database.

**Please be assured that your social security number will only be used internally by the American Board of Medical Specialties and the American Board of Dermatology for identification purposes. They will not be published in any directories or on any websites or released to any outside groups.**

Please send your name, address, birthdate, and social security number to the Board office either by FAX (313-872-3221), e-mail (abdern@hfhs.org), or mail (American Board of Dermatology, 1 Ford Place, Detroit, Michigan 48202). Thank you for your cooperation.

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
Birthdate

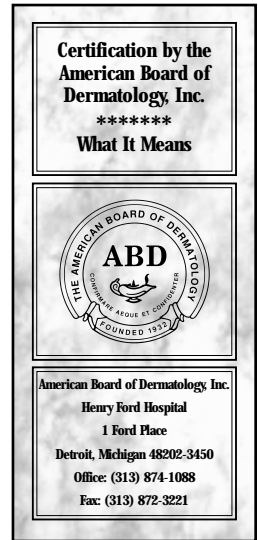
\_\_\_\_\_  
City, State

\_\_\_\_\_  
E-Mail Address

## THE ABD BROCHURE ON CERTIFICATION

A small brochure entitled, *Certification by the American Board of Dermatology, Inc. — What It Means*, is available for Diplomates of the American Board of Dermatology.

In the face of challenges from non-ABMS boards, who have confused patients and possibly some physicians, that their members have had training and credentialing requirements equivalent to that of the American Board of Dermatology and other ABMS certifying boards, this brochure briefly describes the certification process of the American Board of Dermatology. In addition, it lists the disease areas and proficiencies of ABD-certified dermatologists. Such information should prove helpful to patients as well as other physicians who refer patients to a dermatologist. If you are interested in obtaining copies of this brochure for your waiting room, please return the order form below.



### BROCHURE ORDER FORM

*Certification by the American Board of Dermatology, Inc. — What It Means*

Brochures are available only to  
Diplomates of the American Board of Dermatology.

(Please print or type clearly)

**Diplomate's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**City/State/Zip/Country:** \_\_\_\_\_

**Check the box below for the number of  
brochures you are ordering**

100 (\$25)    200 (\$50)    500 (\$100)

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**American Board of Dermatology**

**1 Ford Place**

**Detroit, MI 48202-3450**

**FAX: 313-872-3221**

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OF  
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Notify the Board office of any changes of address.  
You can Fax this form or send an e-mail message to  
abderm@hfhs.org.

Please note my new address below, effective \_\_\_\_\_  
Date

This is my  Home address,  Office address.

*(Please print or type clearly)*

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

City/State/Zip/Country: \_\_\_\_\_

**Mail or FAX form to:  
American Board of Dermatology  
1 Ford Place  
Detroit, MI 48202-3450  
FAX: 313-872-3221**



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