



RESOLUTION: 10(08)
SUBMITTED BY: Pennsylvania Chapter ACEP
SUBJECT: Fellowship Criteria

PURPOSE: Appoint a task force to study modification and implementation of revised fellowship criteria and provide recommendations to the 2009 Council.

- 1 WHEREAS, ACEP changed criteria in 2007 for election to fellowship status to no longer require
- 2 ABEM/AOBEM certification in an effort to honor legacy emergency physicians; and
- 3
- 4 WHEREAS, This has been misinterpreted by some as devaluing the achievement of fellowship status;
- 5 and
- 6
- 7 WHEREAS, There are some who consider current fellowship criteria to be overly inclusive, which may
- 8 further devalue the achievement of fellowship status; and
- 9
- 10 WHEREAS, ACEP has matured to the point in which achievement of fellowship status could be limited
- 11 to those individuals who have provided considerable service to the college and/or advancement of the specialty,
- 12 rather than any merit badge status or recognition of board certification; and
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- 14 WHEREAS, Modification of fellowship criteria is a complex process and cannot be adequately achieved
- 15 on the council floor; be it
- 16
- 17 RESOLVED, That ACEP appoint a task force to study modification and implementation of revised
- 18 fellowship criteria that honor true service to the College and/or advancement of the specialty, and be it further
- 19
- 20 RESOLVED, That the recommendations of the task force be discussed as Council business at the 2009
- 21 Council meeting.

Background

This resolution asks that a task force be appointed to study modification and implementation of revised fellowship criteria and that the recommendations of the task force be presented to the 2009 Council. The authors suggest that the issue is complex and that complete discussion and analysis of fellow status cannot be adequately achieved on the Council floor.

Note: The remaining background information for this resolution contains similar information to that written for the other fellowship resolutions submitted to the 2008 Council.

The 2007 Council adopted Amended Resolution 11(07) Fellowship which created an additional pathway to fellowship, removed the requirement for recertification after election as a fellow, and deleted sections of the Bylaws that became moot upon adoption of the proposed changes.

Below is a table which summarizes the differences between the two current options for fellow status.

Option 1	Option 2
Board Certification	
3 years of active involvement in emergency medicine	Ten years of involvement in emergency medicine
Active member for three continuous years	Active member for six continuous years
	Eligible for membership prior to 1/1/2000 (this is a member requirement)
	Letter of recommendation by two fellows or chapter
Satisfaction of 3 (min) individual criteria	Satisfaction of 3 (min) individual criteria of which one must be active involvement in ACEP chapter activities attested by chapter president or member of national committee, ACEP Council or national Board of Directors

The attached report summarizes a survey of medical specialty societies completed in June 2008 by the Membership Directors Section of the Council of Medical Special Societies. The survey purpose was to determine whether or not board certification was required for membership by medical specialty societies (as opposed to fellow status). It should be noted that fellow is a membership category with associated privileges for most medical specialty societies. Although board certification is not required for membership in many of these organizations, survey results indicates that board certification is generally required for fellow membership. An alternate survey by the same group completed two years ago indicates that most medical specialty societies require board certification within their specific medical specialty; however, several accept board certification in alternate medical specialties. This previous survey also indicates that, of the four medical specialty societies that have fellow status as a distinction (including ACEP), two require board certification and two do not.

At the end of August 2008, there were 19,204 members in the active and life categories of membership. Approximately 3,700 of these are within the first three years of active membership and not yet eligible for fellow status. 15,011 members (including an estimated 2000 in their first three year of active membership) are currently board certified in emergency medicine by ABEM, AOBEM or ABP in Pediatric Emergency Medicine. There are also 240 members who were at one time board certified by one of these groups but are no longer diplomates. 9,937 of those eligible have chosen to become fellows of the College. There are approximately 1,160 active and life members who may currently be eligible for fellow status through the alternate pathway. This count is based solely on years of membership for those members who are not board certified. As of August 2008, 209 applications have been received using the alternate pathway. 127 have been approved, 62 have been declined and 20 are pending approval.

To date, seven members have cancelled citing the new requirements for board certification as their reason for resigning membership. In addition, two residency programs that previously paid for their residents' member dues have opted not to pay (total residents affected by this decision is 66.)

ACEP Strategic Plan Reference

None

Fiscal Impact

Task force activities relating to conference calls and staffing would be allocated from the committee budget.

Prior Council Action

Amended Resolution 11(07) Fellowship adopted. This resolution created an additional pathway to fellowship, removed the requirement for recertification after election as a fellow, and deleted sections of the Bylaws that became moot upon adoption of the proposed changes.

Resolution 24(05) Fellowship and Its Implications adopted. The resolution directed that a task force be established to study the political, economic, and personal implications of opening ACEP fellowship to all active members of the College and provide a report to the Board and the Council.

Resolution 15(04) Simplification of Requirements to Retain Fellow Status defeated. Called for a Bylaws amendment simplifying the requirements for fellow status by allowing those members who are elected to fellow status to maintain their status whether or not they remain diplomates of their respective Boards as long as they maintain membership in ACEP.

Resolution 1(03) Fellow Reapplication adopted. It called for a Bylaws amendment omitting the requirement that fellows must reapply for fellow status when they recertify with their respective Boards...

Resolution 4(03) ACEP Members with Disabilities adopted. It called for a Bylaws amendment establishing of a mechanism for a member who has attained fellow status within the College to maintain their fellow status indefinitely in the event that member is permanently disabled.

Resolution 1(00) Membership Requirement for Fellowship defeated. Called for a Bylaws amendment eliminating restrictions in the fellow criteria that keep new active members from applying for fellow status until after their third year in the active category of membership.

Resolution 1(99) Fellowship – AOBEM and ABP adopted. It called for a Bylaws amendment allowing board certification by the American Board of Osteopathic Emergency Medicine to be acceptable criteria for fellow status in ACEP.

Amended Resolution 2(98) American Osteopathic Board of Emergency Medicine Certification for Fellow Status adopted. It called for the recognition of the American Board of Osteopathic Emergency Medicine as an emergency medicine certifying body.

Amended Resolution 35(95) Fellow Status Extension adopted. Allowed the Board to grant an extension of fellow status for a period of up to one year past their certification expiration date for fellows who for reasons of illness or other significant personal obstacles are unable to take the board examination.

Resolution 14(95) Fellowship Criteria – Pediatric Subspecialty adopted. It called for a Bylaws amendment expanding fellowship criteria to include the subspecialty certification in pediatric emergency medicine by either the American Board of Pediatrics or the American Board of Emergency Medicine.

Substitute Resolution 31(94) Fellow Status adopted. It called for the College to establish fellow status eligibility for ACEP members certified in the joint ABEM/AAP subspecialty certification of pediatric emergency medicine.

Resolution 28(94) Fellow Status defeated. It called for a Bylaws amendment expanding fellowship criteria to include BCEM certification.

Resolution 5(92) Fellowship Status adopted. It called for a Bylaws amendment omitting the requirement that candidates for fellow status submit letters from two fellows of the College and allowed the Board of Directors to define the documentation required from a candidate.

Amended Resolution 6(90) Fellow Status adopted. It called for refinement of the requirements for fellow status including the addition of the requirement for active involvement in emergency medicine as the physician's chief professional activity exclusive of training.

Amended Resolution 7(90) Life Fellow adopted. It called for a Bylaws amendment creating the Life Fellow status.

Resolution 8(89) Fellowship Requirements adopted. It called for the implementation of a notice period of three years before the requirements for fellow status adopted in 1988 took affect.

Resolution 4(89) Fellow Requirements adopted. Instructed the College to review fellow criteria and revise old criteria or add new criteria as deemed appropriate and to report to the 1990 Council.

Amended Resolution 11(88) Fellowship Requirements adopted in lieu of resolutions 10(88) and 12(88). Called for a Bylaws amendment modifying fellow requirements to make them more stringent.

Resolution 6(87) Fellowship Requirements postponed to the 1988 Council meeting. Called for a Bylaws amendment tightening the requirements for fellow status.

Resolution 54(86) Fellow Status adopted. Directed the Board of Directors to augment the qualifications for fellow status and report to the 1987 Council.

Resolution 6(84) Fellow Status postponed to the 1985 Council meeting. Called for additional professional criteria for fellow status eligibility.

Amended Resolution 4(81) Fellow Status adopted. Called for a Bylaws amendment establishing fellow criteria.

Substitute Resolution 17(80) Fellow Status postponed to the 1981 Council meeting. Called for the establishment of criteria for fellow status.

Substitute Resolution 7(74) adopted. It directed the Board of Directors to establish a category of membership to be called fellow and establish its qualifications and requirements.

Prior Board Action

Amended Resolution 11(07) Fellowship adopted.

Resolution 24(05) Fellowship and Its Implications adopted

Resolution 1(03) Fellow Reapplication adopted.

Resolution 4(03) ACEP Members with Disabilities adopted.

March 2000 adopted a motion that former fellows who desire to regain membership have their ACEP fellow status immediately reinstated upon initiation of their new membership in ACEP, provided that the new membership in ACEP, provided that their board certification and previous fellow status is current.

Resolution 1(99) Fellowship – AOBEM and ABP adopted.

Amended Resolution 2(98) American Osteopathic Board of Emergency Medicine Certification for Fellow Status adopted the first resolved and contested the second resolve.

Amended Resolution 35(95) Fellow Status Extension adopted.

Resolution 14(95) Fellowship Criteria – Pediatric Subspecialty adopted.

Substitute Resolution 31(94) Fellow Status adopted and asked the Bylaws Committee to provide language for the 1995 Council.

March 1993 adopted a change to the deadline for reapplication for fellow status to May one of each year and allowed for members to reapply for fellow status as they recertify with ABEM.

January 1993 adopted a change to the deadline for new fellow applications to December 15.

Resolution 5(92) Fellowship Status adopted.

January 1992 adopted key elements of the process for handling recertification of fellows.

Endorsed Amended Resolution 7(90) Fellow Status. The Board did not adopt Bylaws amendments prior to 1993.

Endorsed Amended Resolution 6(90). The Board did not adopt Bylaws amendments prior to 1993.

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ACEP GUIDE TO FELLOW APPLICATION PROCESS

HISTORY ON FELLOW ELECTION CRITERIA

The first fellows of the College were elected in 1982. From 1982 until 1988, members were eligible for election to fellow status if they had been an active, life, active honorary or international member of the College for three continuous years immediately prior to election and were certified by the American Board of Emergency Medicine (ABEM).

In 1988, the Council adopted more stringent requirements and, in 1989, fellows were elected based on the requirements previously mentioned, plus the additional criteria adopted by the 1988 Council. A decision was made by the 1989 Council to keep the additional criteria for fellow status in the Bylaws, but delay further implementation of the requirements until 1992. As a result, members elected to fellow status in 1990 and 1991 were elected based on the College's initial fellow requirements of three continuous years of active membership and ABEM certification. In 1995 the Council modified the Bylaws to include certification in pediatric emergency medicine by the American Board of Pediatrics to qualify for fellow status. The 1990 Council further modified the fellow status requirements to require members already elected to fellow status to reapply for fellow status at the time of their ABEM recertification and meet the current criteria listed below or be eligible for Life Fellow status.

In 1998 the Council modified the Bylaws to include certification in emergency medicine by the American Osteopathic Board of Emergency Medicine to qualify for fellow status.

In 2003 the Council modified the Bylaws to indicate that fellows or former fellows who have demonstrated by application that they meet the criteria for fellow status will retain their fellow status as long as they maintain certification in emergency medicine by ABEM, AOBEM, or in pediatric emergency medicine by ABP, and be and remain current members of the College. In addition, current fellows who develop a disability precluding recertification in emergency medicine may retain their title of Fellow by providing evidence of that disability to the College.

At the 2007 Council Meeting, the requirements for fellow status were changed to allow an alternate pathway for ACEP members who are not ABEM board certified. The change was made to recognize those Legacy Physicians who have made significant contributions and helped build the specialty through their service and dedication. Additionally, under the first set of criteria, the requirement for board recertification after election as a fellow was removed and since ongoing board certification was no longer required for fellow status, the Life Fellow category was also removed.

CRITERIA FOR ELECTION TO FELLOW STATUS

Fellows of the College shall meet one of the following two sets of criteria:

1. Be active, life, honorary, or international members for three continuous years immediately prior to election and must have been certified in emergency medicine at the time of election by the American Board of Emergency Medicine, the American Osteopathic Board of Emergency Medicine, or in pediatric emergency medicine by the American Board of Pediatrics. Maintenance of Fellow status requires continued membership in the College. In addition, the following requirements demonstrating evidence of high professional standing must be met by candidates some time during their professional career prior to application.
 - A. At least three years of active involvement in emergency medicine as the physician's chief professional activity, exclusive of training, and;
 - B. Satisfaction of at least three of the following individual criteria during their professional career:

1. active involvement, beyond holding membership, in voluntary health organizations, organized medical societies, or voluntary community health planning activities or service as an elected or appointed public official;
 2. active involvement in hospital affairs, such as medical staff committees, as attested by the emergency department director or chief of staff;
 3. active involvement in the formal teaching of emergency medicine to physicians, nurses, medical students, out-of-hospital care personnel, or the public;
 4. active involvement in emergency medicine administration or departmental affairs;
 5. active involvement in an emergency medical services system;
 6. research in emergency medicine;
 7. active involvement in ACEP chapter activities as attested by the chapter president or chapter executive director;
 8. member of a national ACEP committee, the ACEP Council, or national Board of Directors;
 9. examiner for, director of, or involvement in test development and/or administration for the American Board of Emergency Medicine or the American Osteopathic Board of Emergency Medicine;
 10. reviewer for or editor or listed author of a published scientific article or reference material in the field of emergency medicine in a recognized journal or book.
2. Be active, life, honorary, or international members for six continuous years immediately prior to election and eligible for membership at the close of business on December 31, 1999. Maintenance of Fellow status requires continued membership in the College. In addition, the following requirements demonstrating evidence of high professional standing must be met by candidates sometime during their professional career prior to application:
- A. At least **ten** years of active involvement in emergency medicine as the physician's chief professional activity, exclusive of training, and;
 - B. Satisfaction of at least three of the following individual criteria, of which **one of the three must be number 7 or number 8, during their professional career:**
 1. active involvement, beyond holding membership, in voluntary health organizations, organized medical societies, or voluntary community health planning activities or service as an elected or appointed public official;
 2. active involvement in hospital affairs, such as medical staff committees, as attested by the emergency department director or chief of staff;
 3. active involvement in the formal teaching of emergency medicine to physicians, nurses, medical students, out-of-hospital care personnel, or the public;
 4. active involvement in emergency medicine administration or departmental affairs;
 5. active involvement in an emergency medical services system;
 6. research in emergency medicine;
 7. active involvement in ACEP chapter activities as attested by the chapter president or chapter executive director;
 8. member of a national ACEP committee, the ACEP Council, or national Board of Directors;
 9. examiner for, director of, or involvement in test development and/or administration for the American Board of Emergency Medicine or the American Osteopathic Board of Emergency Medicine;
 10. reviewer for or editor or listed author of a published scientific article or reference material in the field of emergency medicine in a recognized journal or book.

In addition, the candidate must provide a written letter of recommendation from their chapter, as attested by the chapter president or chapter executive director, or two letters of recommendation from current Fellows of the College.

Provision of documentation of the satisfaction of the above criteria is the responsibility of the candidate and determination of the satisfaction of these criteria shall be by the Board of Directors of ACEP or its designee. Fellows shall be authorized to use the letters FACEP in conjunction with professional activities. Fees, procedures for election, and reasons for termination of Fellows shall be determined by the Board of Directors.

APPLICATION FOR FELLOW STATUS

Members applying for fellow status must do so on the official application form approved by the Board of Directors for the current year. The completed application, all required documentation and the fellow application fee of \$100 must be submitted at the same time. Applicants who indicate their compliance by utilizing criteria "2" and/or "7" described above must submit letters, on appropriate letterhead, from the emergency department director or chief of staff; or their chapter president or executive director.

RECOGNITION OF ELECTION TO FELLOW STATUS

To be acknowledged and recognized during the current year, applications for fellow status must be received by December 15. Members will receive official notification of election or rejection of their application by letter. Those elected 45 days prior to the date of the Convocation Ceremony (which is held during ACEP's Scientific Assembly) will have their names printed in the Convocation Program for that year and may begin using the designation FACEP on the date of the Convocation Ceremony. Those who apply after that Convocation Brochure cut off date and before December 15 may use the designation FACEP as soon as they have received official notification of election to fellow status but will be acknowledged officially at the Convocation Ceremony the following year. All newly elected fellows will receive an official fellow certificate and two tickets to the President's Reception, which follows the Convocation Ceremony.

Continued membership in the College is required to maintain fellow status and the use of the FACEP designation. Fellows whose memberships expire immediately lose fellow status in the College and the right to use the "FACEP" designation.

Medical Specialty Society Board Certification Requirements

Medical Special Society	Required?		Comments
	Yes	No	
American Academy of Dermatology	X, for Fellows		Yes for Fellow membership, but we have other categories of membership that do not require Board certification.
American Academy of Family Physicians		X	AAFP does not require board certification for active membership.
American Academy of Neurology	X, for Fellows	X	AAN does require Board certification for Fellow and Active members but not for other categories.
American Academy of Ophthalmology	X, for Fellows	X	AAO does not require board certification for membership. The membership category of Fellow does require board certification.
American Academy of Oral & Maxillofacial		X	
American Academy of Otolaryngology	X, for Fellows	X	AAO does not require board certification for membership. The membership category of Fellow does require board certification.
American Academy of Pediatrics	X, for Fellows and Specialty Fellows	X	AAP doesn't require board certification for membership. We have several membership categories for non-boarded physicians. Fellows and Specialty Fellows are boarded and are the only ones who can vote and hold national office.
American College of Emergency Physicians		X	
American College of Medical Genetics	X, for Fellows	X	Fellow status has to be board certified. We have other categories that don't.
American College of Obstetricians & Gynecologists	X, for Fellows	X	ACOG requires board certification for Fellowship. If physicians are not board certified, they can apply for another category.
American College of Physicians		X	To be eligible for full membership in ACP, the physician must be certified in internal medicine, a combined internal medicine specialty, or neurology. Physicians who have not been certified, but who have successfully completed training in an acceptable program, are also eligible for ACP Membership.
American College of Preventive Medicine	X, for Fellows	X	Board Certification is not require it for membership, it is required for Fellowship, however (although any ABMS certification is the requirement, not specifically ABPM certification)
American College of Surgeons	X		
American Psychiatric Association	X, for Fellows	X	APA does not require Board certification for membership in the entry level category for a fully trained physician (General Member). But, we do have another category that a General Member can apply for, Fellow, which does require Board certification
American Society for Clinical Pathology	X		Yes, we do. For both pathologist and technologist members.
American Society of Anesthesiologists		X	
American Society of Plastic Surgeons	X		ASPS requires board certification for active US members
American Urological Association	X, for active membership		Board certification is required for our Active (MD) category of membership. Other categories of membership do not require board, membership is for MDs as well but then need not be board certified
Society of Critical Care Medicine	X		
Society of Nuclear Medicine		X	
Society of Thoracic Surgeons	X		Requires Board Certification or its equivalence for its Active US and Canadian members.