

THE AMERICAN BOARD OF ANESTHESIOLOGY, INC.

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The following document contains information on the guidelines for determining the category for CME activities and examples of both Category 1 CME Activities and Category 2/Other CME Activities.

American Medical Association (AMA) Guidelines for CME Activity Category Determination

Referencing the AMA's guidelines can help in determining whether an activity should be considered Category 1 or Other. Documentation usually indicates the category, but there can be exceptions or lack of category assignment altogether.

Occasionally, the term "Category 1" is used but the documentation will not indicate the Accreditation Council for Continuing Medical Education (ACCME) or the American Medical Association (AMA) Physician's Recognition Award (PRA). After checking the ACCME website listing, refer to the [AMA's Guidelines](#), particularly page 18, which discusses the "Category 2" or "Other" Category.

The following activities are NOT considered Category 1 CME activities by the AMA:

- book reviews (as opposed to manuscript review for journals - p.9 of link above)
- teaching (this is part of their job and the AMA defines it as Cat. 2, which is our "Other" - p. 18)
- self-study (informal self review to prepare for an exam; a prep course which offers credit is different)
- departmental meetings
- preceptorships

These activities (and others referenced on page 18 of the AMA's Guidelines link above) are considered "Other-Undocumented" activities. Typically the doctor does not have evidence of participation but they can give themselves a maximum of 5 CME credits per activity. If a doctor does have documentation for the activity, and no credit is assigned by the hospital, they can receive a maximum of 5 documented credits.

Physicians may self-claim 1 credit for each 60-minute hour engaged in the learning activity or may claim credit in 15 minute increments, rounding to the nearest quarter hour.

Category 1 CME Credit Examples:

Fellowship-The ABA will grant up to 50 CME credits for 12 months of fellowship training in an ACGME-accredited subspecialty program, or in an anesthesiology subspecialty fellowship program sponsored by an ACGME-accredited core anesthesiology program. In order to receive credit toward the MOCA program, you need to have completed the fellowship in or after the year you received your primary certification in anesthesiology from the ABA.

Board Certification- A certificate is mailed to diplomates from the AMA for 25 CME credits earned upon board certification with the ABA. **These credits can NOT be applied to the MOCA cycle but can be applied for meeting state board requirements.

The American Heart Association's Advanced Cardiovascular Life Support (ACLS) course- If this course is offered by an ACGME-accredited sponsor, the ABA will allow up to 5 CME credits.

Publishing Articles-Publishing, as a lead author, an article in a journal included in the MEDLINE bibliographic database, will allow up to 10 CME credits per article.

Poster presentation-Preparing a poster presentation, which is also included in the published abstracts, for a conference designated for AMA PRA Category 1 Credit.

Test Item Writing- Providers may designate each test item writing activity for a maximum of 10 CME credits. The questions must be developed for examinations given by the NBME or the ABA.

Medically related advanced degrees-Obtaining a medically related advanced degree, such as a master's in public health, allows eligibility for up to 25 CME credits.

Manuscript review (for journals)- Providers may designate each accepted manuscript review, as documented by the journal editor, for a maximum of 3 CME credits.

Internet point of care learning (PoC)- Internet PoC is structured, self-directed, online learning by physicians on topics relevant to their clinical practice. The cycle must include the following: review original clinical questions, identify the relevant sources from among those consulted, and describe the application of their findings to practice. Physicians conducting structured online searches on clinical topics may claim a half CME credit for documented completion.

Performance Improvement-Performance improvement (PI) activities describe structured, long-term processes by which a physician or group of physicians can learn about specific performance measures, retrospectively assess their practice, apply these measures prospectively over a useful interval, and re-evaluate their performance. CME credits are allowed for completing each cycle.

****For the following live CME activities, the ABA will allow up to 1 CME credit.**

- Committee work
- Learning plans/contracts, etc.

Category 2/Other CME Credit Examples:

Participation as an ABA Oral Examiner- The ABA will grant up to 25 CME credits for participation as an ABA oral examiner.

Grand Rounds-CME credits are issued by the hospital.

****For the following CME activities, typically there is no documentation of participation. Doctors can give themselves a maximum of 5 credits per activity.**

- Lecturing/Demonstration to Residents, Medical Students or other Health Professionals
- Reading Authoritative Medical Literature
- Unstructured Online Searching and Learning (not Internet PoC)
- Consultation with peers and medical experts
- Small Group Discussions
- Self-Assessment Activities
- Medical Writing
- Preceptorships

These activities (and others referenced in the [American Medical Association's Guidelines](#)) are considered "Other-Undocumented" activities. Typically the doctor does not have evidence of participation but they can give themselves a maximum of 5 CME credits per activity. If a doctor does have documentation for the activity, and no credit is assigned by the hospital, they can receive a maximum of 5 documented credits.

Physicians may self-claim 1 credit for each 60-minute hour engaged in the learning activity or may claim credit in 15 minute increments, rounding to the nearest quarter hour.