CHANGING YOUR ABA STATUS TO "RETIRED"

Definition of a "retired" diplomate: A retired diplomate is no longer actively performing, teaching or supervising the practice of anesthesiology or a recognized anesthesiology subspecialty.

Please complete the attestation form below to request a "retired" status. Fax it to (866) 999-7503 or email it to credentialing@theaba.org.

- To retire in good standing, you need to have:
 - o a valid certificate or be in the Maintenance of Certification in Anesthesiology® (MOCA®) program
 - o no unresolved, adverse actions pending or imposed against any of your medical licenses at the time of retirement
- If you have a time-limited certificate that is valid at the time of your retirement, your designation will be changed to "certified retired" until your certificate's expiration date. This designation will appear in our records and our online certification verification directory. We will also report the designation of your "retired" status to the American Board of Medical Specialties.
- If you hold a time-limited certificate and are designated as "certified retired," you will NOT be required to fulfill any MOCA requirements.
- There is no minimum period of time that you must be retired before requesting the "certified- retired" status. The effective date will be the date we acknowledge the "retired" status change request.
- If you retire with adverse actions imposed against your medical license(s), you will have no designation in our records and our online certification verification directory.

	Attestation Form to Request "Retired" Status
Na	ime:
	te of Birth:
	BA ID Number:
	Indicate the date you discontinued or plan to discontinue practice as defined above:// I am retiring and do not plan to perform, teach or supervise the practice of anesthesiology or a recognized anesthesiology subspecialty at any time in the future: Yes No
3.	Do you have a restriction, condition, limitation, suspension or revocation currently imposed on any medical license? This includes voluntarily surrendering a medical license. \Box Yes \Box No

If "Yes," please also submit a statement that provides details of any disciplinary action(s), including the date(s), the subject matter and any sanctions.

NOTE: It is your responsibility to notify us if you choose to re	sume practice and to request that the	
"retired" designation be removed from your records. We will require evidence that you meet the		
minimum clinical activity requirement by having practiced anesthesiology or a recognized subspecialty, on		
average, at least one day per week during 12 consecutive mo	nths over the previous three years. Our	
Credentials Committee will determine when the "retired" designation can be removed from your record		
and which MOCA requirements you must fulfill (if you hold a time-limited certificate). The \$1,000 fee for		
re-attaining your certification must be submitted via check made payable to The American Board of		
Anesthesiology. All fees are nonrefundable.		
Signature	 Date	
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