Response: Re: American Board of Family Medicine (ABFM) Launches New Exam Prep iPhone Application

To the Editor: Thank you for the opportunity to respond to Dr. Volpintesta's letter suggesting that our recently released iPhone application should replace the maintenance of certification examination as a means of helping busy family physicians remain current. Although we are pleased that Dr. Volpintesta has found the iPhone application useful, we are afraid that he misses the point with regard to the purpose of the maintenance of certification examination. This examination, unlike the iPhone application, is not designed to help family physicians remain current, but rather to assess the minimum level of knowledge necessary to maintain certification with the American Board of Family Medicine (ABFM).

Since its inception in 1969, the specialty of Family Medicine has insisted on reassessing family physicians' knowledge on a periodic basis. This appears to have been a wise decision, as recent evidence has demonstrated that assessing this level of knowledge is one of the critically important factors necessary in guaranteeing the delivery of high quality care. Holmboe has substantiated the importance of a sufficient knowledge base to inform sound clinical judgment, make evidence-based decisions, and deal with uncertainty.1 Earlier work by Brennan provided evidence that maintenance of certification examination results correlate with the complexity and volume of patients seen by practicing physicians.² Turchin has shown the quality of care for patients being treated for hypertension, as measured by compliance with well-established practice guidelines, declines as the time since the physician's last maintenance of certification examination increases.³

Dr. Volpintesta suggests that family physicians "take expensive board recertification courses or engorge themselves with information they don't use" to successfully pass the maintenance of certification examination. While we are aware that many family physicians employ these strategies, we do not endorse them. I have written previously about the extensive validation procedures that we have used to guarantee that the material on our examinations accurately assesses the core competencies that family physician need to know to deliver high-quality care.⁴ We have also published a detailed explanation of the construct of our examination.5 Reviewing this information should make it evident that the practicing family physician best prepares for the maintenance of certification examination by developing a consistent and disciplined plan for remaining current with advances in family medicine. The iPhone application may be a useful adjunct in this regard; however, it is not a substitute for diligent journal reading and directed self-learning.

We thank Dr. Volpintesta for raising these issues in the *Journal*. His arguments for replacing the maintenance of certification examination with some other form of low stakes assessment are similar to those that we hear frequently from many of our Diplomates. We recognize that the assessment of clinical knowledge is but one of the important competencies that a board-certified family physician must possess. Migrating from our old recertification paradigm to Maintenance of Certification for Family Physicians (MC-FP) now provides us with the mechanisms to continuously assess all six of the general competencies that have been deemed essential by the Accreditation Council for Graduate Medical Education (ACGME) and the American Board of Medical Specialties (ABMS) in defining the competent physician.

On a final note, we expect that beginning in 2014 we will use our simulation technology in the maintenance of certification examination to further refine our assessment of the clinical knowledge of family physicians. We believe that this technology will allow us to more accurately assess how physicians gather, process, synthesize, and use information in their evaluation and management of patients. Such measurement not only will allow us to remain on the cutting edge of physician assessment, but more importantly, to continue to provide assurance to the public that family physicians certified by the ABFM have the necessary knowledge and skills to deliver high quality care.

James C. Puffer, MD President and Chief Executive Officer American Board of Family Medicine jpuffer@theabfm.org

References

- Holmboe ES, Lipner R, Greiner A. Assessing quality of care: knowledge matters. JAMA 2008;299:338–40.
- Brennan TA, Horwitz RI, Duffy FD, et al. The role of physician specialty board certification status in the quality movement. JAMA 2004;292:1039–43.
- Turchin A, Shubina M, Chodos AH, Einbinder JS. Effect of board certification on antihypertensive treatment intensification in patients with diabetes mellitus. Circulation 2008;117: 623–8.
- 4. Puffer JC. To the editor. J Am Board Fam Med 2003;16:467.
- Norris TE, Rovinelli RJ, Puffer JC, et al. From specialtybased to practice-based: a new blueprint for the American Board of Family Medicine cognitive examination. J Am Board Fam Med 2005;18:546–54.

doi: 10.3122/jabfm.2011.05.110206

The above letter was referred to the author of the article in question, who offers the following reply.