



Complementary Pathway Checklist and Frequently Asked Questions

The Complementary Pathway is designed to accommodate physicians who wish to make a mid-career shift into the practice of Preventive Medicine and to achieve certification by the ABPM in one of its three specialty areas – Aerospace Medicine, Occupational Medicine, or Public Health and General Preventive Medicine. This pathway recognizes prior postgraduate training in any clinical residency and current experience in a field of preventive medicine as a contribution toward training. This is supplemented by academic requirements and residency training in the desired field of preventive medicine.

The primary differences between the traditional residency pathway and the Complementary Pathway is the replacement of a two year Preventive Medicine residency program with a combination of coursework, one year in a Preventive Medicine residency program, and full-time practice in the field of Preventive Medicine. Complete requirements for the Complementary Pathway are described below.

COMPLEMENTARY PATHWAY REQUIREMENTS

Medical School: Graduation from a medical school in the United States which at the time of the applicant's graduation was accredited by the Liaison Committee on Medical Education, a school of osteopathic medicine approved by the American Osteopathic Association, an accredited medical school in Canada, or from a medical school located outside the United States and Canada that is deemed satisfactory to the Board.

Current License(s): Unrestricted and currently valid license(s) to practice medicine in a State, the District of Columbia, a Territory, Commonwealth, or possession of the United States or in a Province of Canada. No license may be restricted, revoked, or suspended or currently under such notice.

Clinical Training: Two years of supervised postgraduate clinical training provided as part of a graduate medical education program accredited by the ACGME, the AOA, the Royal College of Physicians and Surgeons of Canada, or the College of Family Physicians of Canada. Each year of training must include at least six months of direct patient care comprising ambulatory and inpatient experience with hands-on patient care involving diagnostic workup and treatment of individual patients.

Didactic Training: Completion of three-credit hour, post graduate level academic course work in each of the following areas: epidemiology, biostatistics, health services management and administration, environmental health, and behavioral health science.

Residency Training: Successful completion of 12 months in an ACGME-accredited residency program in the Preventive Medicine specialty area for which certification is being sought.

Currency: Essentially full time training for, or practice in, the Preventive Medicine specialty area for which certification is being sought for at least two of the five years preceding application for certification.



FREQUENTLY ASKED QUESTIONS

1. **Question:** How does the Complementary Pathway differ from the Special Pathway or the Alternative Pathway?

Answer: The Alternative Pathway is only open to physicians who graduated from medical school prior to January 1, 1984. Experience and training in a Preventive Medicine specialty is considered as alternative to formal training.

The Special Pathway is only open to physicians who are already certified by the ABPM in a specialty area of Preventive Medicine. Two years of full time practice in the second Preventive Medicine specialty area are required.

The Complementary Pathway is open to physicians who have at least two years of prior clinical residency training and who are practicing in the Preventive Medicine specialty. Appropriate coursework and one year in an ACGME-accredited PM residency are also required.

2. **Question:** Is an individual in the Complementary Pathway reported to the RRC as a resident in the ACGME-approved Preventive Medicine residency program?

Answer: While this is an RRC issue and not an ABPM issue, the RRC has indicated Complementary Pathway trainees may be listed as "Other Learners" for reporting purposes and not included in the number of residents reported.

3. **Question:** Is there a limit in the number of years after graduation from medical school to be eligible to begin training in the Complementary Pathway?

Answer: No

4. **Question:** If I only completed two years of my primary care residency, will this be accepted for the complementary pathway?

Answer: Yes. Prior training must include at least two years in an ACGME-approved clinical residency program (e.g. Internal Medicine, Family Medicine or Pediatrics). This training must include at least 6 months of direct patient care in each year.

5. **Question:** Do the years obtaining an MPH degree count toward the "two in five" currency requirement (ie, years of current practice in the specialty area of application)?

Answer: No, if there was no Preventive Medicine practice during that time. Practice in the Preventive Medicine specialty area for which certification is being sought is needed for the currency requirement.

6. **Question:** Do candidates with another clinical board certification need to accumulate additional "direct patient care" clinical training during their training in a Preventive Medicine residency program?

Answer: Yes, per RRC requirements direct patient care is necessary in every year of a Preventive Medicine training program.

7. **Question:** Will programs receive RRC citations or lose ACGME accreditation if they admit residents who do one year instead of two years of a Preventive Medicine residency?
Answer: This is an RRC issue and not an ABPM issue. Please see the answer to question number two.
8. **Question:** May the currency requirement of the Complementary Pathway be completed after Preventive Medicine residency training?
Answer: The two years of practice experience can occur before or after the year in a Preventive Medicine residency program and must have occurred within the prior five years.
9. **Question:** If the individual completes twelve months of training in a Preventive Medicine residency, would they be considered as completing a Preventive Medicine residency?
Answer: No. For purposes of completion of the ABPM Complementary Pathway, the Program Director will need to make a statement to the Board that the applicant satisfactorily completed one year of Preventive Medicine residency training. While this training must be in an ACGME-accredited residency training program, this one year of training is not sufficient to complete the 24 month-long ACGME-accredited Preventive Medicine residency
10. **Question:** Will ABPM provide a “pre-review” of the acceptability of an applicant’s coursework in epidemiology, biostatistics, environmental/occupational health, health care administration, and behavioral health science?
Answer: While only a completed application will be reviewed by the ABPM for a determination of eligibility, the American Board of Preventive Medicine Study Guide and outline (<https://www.theabpm.org/public/studyguide.pdf>) for the Core Examination may provide guidance.
11. **Question:** Is completion of an MPH or an equivalent degree required to sit for the Preventive Medicine board examination if an applicant is planning to meet eligibility through the Complementary Pathway?
Answer: No. Only post graduate level coursework is required for the Complementary Pathway.
12. **Question:** What is meant by direct patient care?
Answer: Direct patient care includes both ambulatory and inpatient experience with hands-on care of individual patients involving diagnostic workup and treatment.

Please contact the ABPM Board office with any additional questions.
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