

American Board of Otolaryngology

Serving the Public and the Profession since 1924

Maintenance of Certification Application For Lifetime Diplomates



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INCORPORATED IN 1924

Profile and Demographic Information

Last Name

First Name

Full Middle (No Initials)

Work Address

Home Address

Work Line 1

Home Line 1

Work Line 2

Home Line 2

City, State Zip Code

City, State Zip Code

Work Number

Home Number

Fax Number

Area Code/Number

Area Code/Number

Area Code/Number

E-Mail Address

Licensure

State/Province	Expiration Date	Status

Other Specialty Board Certification:

MOC REQUIREMENTS AT A GLANCE

Part I – Professionalism and Professional Standing

The participant must complete an annual reporting form, update licensure information. Pay annual fee of \$310.

Part II – Lifelong Learning and Self-Assessment

Each participant must obtain 25 CME units per year, 60% of which must be in otolaryngology. The participant is required to successfully complete one ABOto self-assessment module in a specialty area of his/her choice per year.

Part III – Assessment of Knowledge, Judgment, and Skills

The participant is required to pass a closed book, computer-based exam once during the last three years of the 10 year MOC cycle.

The ABOto is developing an online platform, CertLink, which will present approximately 20 questions per quarter that diplomates can answer on their own schedule. Once the diplomate selects and answer, the correct answer will appear along with a statement of why the correct answer is correct and the other options are incorrect along with one or two references. Diplomates who opt for CertLink and maintain an appropriate performance will be exempt from the Part III exam and would meet the annual Part II self-assessment requirements (SAMs).

Part IV – Improvement in Medical Practice

The ABOto is working closely with the AAO-HNS on its RegentSM registry to ensure the registry data is compatible with the ABOto MOC program. When implemented, RegentSM users will have the option of forwarding the pertinent data periodically to the ABOto which will then provide feedback on improvement in practice.

The requirements for the ten year MOC cycle are summarized in the following table in which X indicates a required action:

Year	1	2	3	4	5	6	7	8	9	10
Part I	*	*	*	*	*	*	*	*	*	*
Part II	*	*	*	*	*	*	*	*	*	*
Part III								Exam Available	Exam Available	Exam Available
Part IV	*					*				

Please indicate the options below that best represent your interest in the MOC program

- Educational Purposes
- General Interest
- Hospital Privileges or Practice Requires Participation
- State Licensure Requirements
- Other_____

What is the main focus of your practice? Check all that apply

- | | |
|---|--|
| <input type="radio"/> Allergy | <input type="radio"/> Neurotology |
| <input type="radio"/> Facial Plastic and Reconstructive | <input type="radio"/> Otology |
| <input type="radio"/> General | <input type="radio"/> Pediatric Otolaryngology |
| <input type="radio"/> Head and Neck | <input type="radio"/> Rhinology |
| <input type="radio"/> Laryngology | <input type="radio"/> Sleep Medicine |

What is your current practice setting?

- Academic practice
- Military
- Multispecialty group practice
- Single specialty group practice
- Solo practice

Once the application is complete, please send (according to your preference) to the ABOto office:

Email: [Click here to send via email to MOC@aboto.org](mailto:MOC@aboto.org)

Or

Mail: Mail to the ABOto office at:

American Board of Otolaryngology
Attn: MOC Department
5615 Kirby Dr., Suite 600
Houston, TX 77005