

# **AMERICAN BOARD OF URGENT CARE MEDICINE DISCIPLINARY AND APPEALS POLICY**

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**ABUCM**  
American Board of Urgent Care Medicine est. 1997®  
*"Recognizing Excellence"*

## **LICENSURE STATUS**

Diplomates and exam candidates must meet the standards of professionalism, state licensure, and personal conduct in order to obtain and maintain board certification. All currently certified Diplomates as well as physicians seeking certification are subject to this policy, including commissioned medical officers of the armed forces of the United States and medical officers of the United States Public Health Service or the Department of Veterans Affairs of the United States.

Physicians are required to continuously hold an active, valid, full and unrestricted license to practice medicine in any state or territory of the United States or any province of Canada, and all medical licenses held by the physicians must be full and unrestricted, regardless of whether or not the Diplomate currently practices in the given state, territory or province. Diplomates are required to retain a full and unrestricted medical license in the United States or Canada even if they are out of the country for extended periods of time. A physician's professionalism or personal conduct may be called into question and reviewed by the Credentials Committee of the American Board of Urgent Care Medicine (ABUCM) at such time as the physician is sanctioned by a legally-constituted entity with control over aspects of a physician's practice of medicine, including, but not limited to, entities of the Federation of State Medical Boards, the U.S. Drug Enforcement Administration, the Centers for Medicare and Medicaid Services, and institutional review boards and ethics committees of medical schools, hospitals and medical clinics. Failure to maintain compliance will result in the loss of ABUCM certification and/or eligibility.

Institutional, temporary and training medical licenses do not fulfill the requirements of an active, valid, full and unrestricted medical license. If a candidate uses an institutional, temporary and training medical license or enters an inaccurate date of initial licensure or renewal in order to complete the requirements for certification and the ABUCM determines that the information does not match the records from the licensing state, the certification will be invalidated. Falsification of any information provided for your medical license is a violation of ABUCM policies and could result in withdrawal of certification for an extended period of time.

## **RESPONSIBILITY TO REPORT PROFESSIONAL VIOLATIONS**

It is the responsibility of the physician to inform the ABUCM in writing of any compliance issues. This may include, but not be limited to, any licensure actions or inactions, disciplinary reports, or any adverse action(s) by any peer review committee. Should a physician be uncertain about whether or not they are in compliance, a written inquiry should be made to the Board.

Medical license status changes are required to be reported to the ABUCM by the physician by letter or email immediately following any change in licensure. Any medical license currently, or previously held by the physician that is not currently active, valid, full and unrestricted (i.e. inactive, volunteer, retired, etc.) may not meet guidelines and must be reported. The ABUCM reviews periodic American Medical Association Disciplinary Action Reports to confirm licensure status as needed.

## **MONITOR OF LICENSURE STATUS**

A Diplomate of the ABUCM is required to hold a currently valid, full, and unrestricted license to practice medicine in the United States or Canada. Furthermore, every license to practice medicine held by a Diplomate in any state or territory of the United States or province of Canada must be currently valid, full, and unrestricted, whether or not the Diplomate in effect practices in such state, territory, or province. Diplomates shall be required to retain a full and unrestricted medical license in the United States or Canada even if they are out of the country for extended periods of time. Failure to retain a license will result in loss of Diplomate status and will result in loss of the ability to make application for certification, recertification, or other examinations offered by the Board.

In the event a Diplomate's license to practice in ANY state or territory of the United States or province of Canada is revoked, restricted, or suspended, the Diplomate's certificate is simultaneously rescinded at the time of the licensure revocation, restriction, or suspension. The physician must advise the ABUCM within 90 days and cease immediately identifying himself/herself in any way directly or indirectly as a Diplomate of the ABUCM. If the physician fails to notify the American Board of Family Medicine of any revocation, restriction, or suspension within 60 days after the effective date, he/she shall be ineligible to seek reinstatement of Diplomate status for up to one year following the reinstatement of full and unrestricted licensure.

Any adverse action by a state licensing agency, agreement between a licensing agency and a physician, or voluntary action by a physician, that revokes, restricts, or suspends the physician's medical license is a violation of ABUCM policy. In cases where a physician has changed his or her residence deliberately to avoid prosecution, loss of license, or disciplinary action by a state licensing agency, the Board reserves the right to revoke or suspend Diplomate status, and/or prohibit application for certification.

If and when the physician's revoked, restricted or suspended license is reinstated in full (with no restrictions) and official written documentation of reinstatement is provided, the ABUCM will honor the remainder of the current certificate and the Diplomate will not be required to be re-examined. If the current certificate has expired prior to the reinstatement of the license, the physician may make application for the next annual examination. Successful compliance with all application requirements in effect at that time will be expected.

Note, the ABUCM does not currently receive licensure data from any source than the Diplomate. Consequently it is your responsibility to maintain current license information with the ABUCM.

## **CERTIFICATE REVOCATION; DISCIPLINARY ACTION**

### *Authority to Revoke Certification*

The Board of Directors of the ABUCM shall have sole power and authority to determine whether or not the evidence or information before it is sufficient to constitute grounds for revocation and/or sanctions of any certificate issued by the Board. The Board of Directors may, however, at its discretion, require any person so certified to appear before the Board of Directors, upon not less than thirty (30) days written notice by registered mail, and to show cause, at the time and place specified in such notice, why the certificate should not be revoked. The failure of any person so

notified to appear as required in such notice shall, at the discretion of the Board of Directors, constitute cause for revocation of the certificate. The decision of the Board of Directors in all such matters shall be final. The ABUCM reserves the right to revoke or suspend a Diplomate's Board Certification summarily in extraordinary circumstances. The ABUCM at its sole discretion may notify local credentialing bodies, licensing bodies, law enforcement and agencies, program directors, impaired-physician advocacy groups, or others of any final disciplinary sanctions.

#### *Misrepresentations by the Candidate*

Each certificate issued by the Board of Directors shall be subject to revocation in any of the following circumstances:

- The person certified shall at any time have neglected to maintain the degree of competency in the field of Urgent Care Medicine as established by the Board.
- The person certified shall not have been eligible to receive such certificate, irrespective of whether or not the facts constituting such ineligibility were known to, or could have been ascertained by, the Directors of the Corporation or its representatives.
- The person certified shall have made a misstatement of fact in the application for such certificate or in any other statement or representation to the Board or its representatives.
- The person certified has fraudulently altered, copied, or changed a certificate of the ABUCM or has fraudulently presented, or allowed to be presented on behalf of the individual, an altered, copied or changed certificate of the Board. In such cases, the Board reserves the right to revoke, suspend, and/or prohibit subsequent certification of the offending party for a period not to exceed five (5) years from the date of discovery of the offense. In the event the individual appeals or otherwise challenges the suspension, the (5) year period shall be postponed until the action of the Board is determined to be final and enforceable.
- The issuance of such certificate or its receipt by the person certified shall have been contrary to, or in violation of, any provision of the Articles of Incorporation of the American Board of Urgent Care Medicine, Inc.

## **APPEALS**

### *Introduction*

The ABUCM is dedicated to the principles of fairness, consistency and equality in its dealings with its applicants, candidates and Diplomates and hereby establishes the following policy with regard to the resolution of questions or dissatisfactions arising from its policies and procedures.

### *Reconsideration*

Applicants, candidates and diplomates may request reconsideration of decisions regarding the requirements and rules of the ABUCM on individual credentials and admissibility to the examinations. These requests are referred to the Credentials Committee for evaluation and decision. With respect to the Certifying Examination, individuals may only request reconsideration

regarding potential fraud or misconduct by the examiners, not the content of the examination, the sufficiency or accuracy of the answers given, nor any other matter.

Any applicant, candidate or diplomate who considers an action of the ABUCM adverse to his or her interest, or to be based upon unfairness, inconsistency or inequality may request reconsideration. The request must be made in writing within 90 days of receipt of notice from the ABS of the action in question. Requests must be sent by mail to the ABUCM office (no emails). The request may be accompanied by such documentation as the requestor considers appropriate to support the request. The request for reconsideration will be brought before the Credentials Committee at the next regular meeting of that committee, and the decision of the committee shall be reported to the directors of the ABUCM at their next regular meeting. Within 30 days following the meeting of the directors, the requestor shall be notified, in writing, of the Credentials Committee action and the reasons therefore.

The decision of the Credentials Committee shall be considered final unless the complainant, within 30 days after having been advised thereof, gives written notification sent by mail to the ABUCM that he or she wishes to institute a Personal Appeal, requests a hearing, and sets forth the reasons for disagreement with the findings of the Credentials Committee.

#### *Personal Appeals*

The process of Personal Appeal consists of two phases: the Informal Hearing and the Formal Hearing.

#### Informal Hearing

When a request for a Personal Appeal is received, the hearing shall be scheduled at the next regular meeting of the Credentials Committee. The appellant shall be notified in writing at least 30 days prior to the meeting of the time and location at which he or she should appear. The appellant shall be afforded the opportunity to appear in person and present oral and written evidence in his or her own behalf. The members of the committee have the right to question the appellant concerning anything in his or her record or the evidence presented. Upon completion of the hearing the committee shall, in closed session, reach a finding by majority vote. The finding of the committee and any recommendations shall be reported to the directors.

The committee shall report to the directors nothing more than the issue(s) addressed at the appeal and its findings and recommendations. Neither the identification of the appellant nor any of the details upon which the findings and recommendations were based shall be reported nor discussed. The directors may approve the recommendations of the committee or may direct that the action be deferred pending a Formal Hearing before the directors. The appellant shall be notified in writing within 30 days as to the action taken and the reason for it.

In the event the appellant is not satisfied by the action taken as a result of the Informal Hearing, he or she may, within 30 days after having been advised thereof, give notification in writing to the ABUCM that he or she wishes a Formal Hearing, requests such a hearing before the directors, and sets forth the reasons for disagreement with the findings of the Informal Hearing. If no request for a Formal Hearing has been received within the time periods stipulated above, the findings shall be final and binding upon both the appellant and the ABUCM.

### Formal Hearing

When an appeal for a formal hearing is received, the procedure shall be as follows:

The hearing panel shall consist of at least three (3) directors of the ABUCM. The appellant will be notified in writing of the identity of the directors who will conduct the hearing and shall have the privilege of challenge for cause only. Such challenges must be made in writing by the appellant within 30 days following receipt by the appellant of the notice of membership on the panel. The Executive Committee, advised by legal counsel, shall rule upon the challenge, and its ruling shall be final. The appellant shall be notified in writing of such actions.

Hearings will normally be conducted at the time and place of regular meetings of the directors of the ABUCM. The appellant will be notified in writing of the time and place of the hearing at least 60 days prior to the date set therefor. At the hearing the appellant shall appear in person, may be accompanied by counsel if he or she so desires, may present witnesses and other evidence in his or her own behalf. The hearing panel may also call witnesses and consider other evidence as it may deem appropriate. The appellant and appellant's counsel, as well as the hearing panel and the legal counsel of the American Board of Surgery shall have the opportunity to examine all documents and physical evidence considered by the panel and to question all witnesses heard by it.

Upon completion of the hearing, the panel of directors, in closed session, shall make a determination by simple majority vote. The determination made by the panel of directors shall be final and binding upon the ABUCM and the appellant, and shall be transmitted to the appellant in writing within 30 days of the close of the hearing.

### **PROFESSIONALISM**

The ABUCM is cognizant that there are many definitions of professionalism in the medical literature and that there is not one universal definition; however the ABUCM believes that there are some basic tenets to which it believes its Diplomates should recognize and embrace. Professionalism is embodied in the physician-patient relationship and should include:

- A. Continued enhancement of one's own knowledge to achieve ethical, fair and just results;
- B. Courtesy, fairness, honesty and respect for patients, colleagues and the public it serves;
- C. Accepting responsibility for one's own professional conduct as well as that of other's in the profession.

The ABUCM endorses the modern version of the Hippocratic Oath:

I swear to fulfill, to the best of my ability and judgment, this covenant:

I will respect the hard-won scientific gains of those physicians in whose steps I walk, and gladly share such knowledge as is mine with those who are to follow.

I will apply, for the benefit of the sick, all measures which are required, avoiding those twin traps of overtreatment and therapeutic nihilism.

I will remember that there is art to medicine as well as science, and that warmth, sympathy, and understanding may outweigh the surgeon's knife or the chemist's drug.

I will not be ashamed to say "I know not," nor will I fail to call in my colleagues when the skills of another are needed for a patient's recovery.

I will respect the privacy of my patients, for their problems are not disclosed to me that the world may know. Most especially must I tread with care in matters of life and death. If it is given me to save a life, all thanks. But it may also be within my power to take a life; this awesome responsibility must be faced with great humbleness and awareness of my own frailty. Above all, I must not play at God.

I will remember that I do not treat a fever chart, a cancerous growth, but a sick human being, whose illness may affect the person's family and economic stability. My responsibility includes these related problems, if I am to care adequately for the sick.

I will prevent disease whenever I can, for prevention is preferable to cure.

I will remember that I remain a member of society, with special obligations to all my fellow human beings, those sound of mind and body as well as the infirm.

If I do not violate this oath, may I enjoy life and art, respected while I live and remembered with affection thereafter. May I always act so as to preserve the finest traditions of my calling and may I long experience the joy of healing those who seek my help.

*Written in 1964 by Louis Lasagna, Academic Dean of the School of Medicine at Tufts University, and used in many medical schools today.*