**APPENDIX E: CERTIFICATION ELIGIBILITY REQUIREMENTS**

For **Appendix E**, the template below must be used to define the subspecialty’s certification eligibility requirements. **Bolded** items are required of all subspecialties and may not be edited. Requirements in bracketed regular typeface are to be completed and defined by each subspecialty within the template format.

**Certification General Eligibility Requirements**

* + 1. **GENERAL**

**General eligibility criteria:**

1. **Applicants must be certified by an American Board of Medical Specialties (ABMS) certifying board, or possess equivalent certification by the Royal College of Physicians and Surgeons of Canada (RCPSC) or the American Osteopathic Association (AOA)** [other as specified by the Subspecialty]**.**
	1. **Applicants applying under the internationally trained faculty pathway must have a medical diploma from an institution registered in the** [**World Directory of Medical Schools**](https://search.wdoms.org/)**.**
	2. **Applicants applying under the internationally trained faculty pathway must be certified in his or her primary specialty by a competent medical board. Such a board may include, a) an appropriate board of the European Union of Medical Specialties (EUMS), or b) the medical board of the applicant’s country of origin, such board to be approved by the Certification Council.**
2. **Applicants must hold a current, active, valid, unrestricted, and unqualified license to practice medicine in at least one jurisdiction in the United States, its territories, or Canada, and in each jurisdiction in which they practice.**
	1. **Applicants applying under the internationally trained faculty pathway for UCNS subspecialty certification must hold a valid license to practice medicine in the United States, its territories and possessions, or Canada.**

**A license to practice medicine is not “current, active, valid, unrestricted and unqualified” if, in any manner to any extent whatsoever, one or more of the following applies. The license is:**

1. **under probation;**
2. **conditioned, i.e., the physician is required to practice under supervision or with modification, or to**
3. **obtain continuing education;**
4. **limited, e.g., to specific practice settings;**
5. **institutional, temporary, or educational; or**
6. **inactive as a result of an action taken by or a request made by a medical licensing board.**

**Policy on Medical Licensure**

* **If any license currently held by an applicant participating in the application process is restricted or qualified in any way, full details must be provided to the UCNS. The UCNS may, at its sole discretion, determine whether to investigate the license and the information provided. The UCNS reserves the right to determine if the license fulfills this policy.**
* **Licenses that have been revoked, suspended, surrendered, or not renewed in order to terminate or settle disciplinary proceedings do not qualify as meeting the requirements for medical licensure, and all such licenses must be reported for review and consideration. The UCNS will determine if the situation is cause to deny an applicant’s certification application, deny a candidate access to an examination, or revoke a diplomate’s certificate.**
	+ 1. **Pathways**

**Applicants must have completed *one of four* eligibility pathways. The pathways are:**

* 1. **UCNS-Accredited Fellowship**
	2. **Practice Track**
	3. **Academic Appointment at a UCNS-Accredited Fellowship**
	4. **Internationally Trained Faculty at UCNS-Accredited Training Programs**
1. **UCNS-Accredited Fellowship Training**

**Applicants must meet one of the following requirements:**

**A) An applicant must have successfully completed a fellowship in [**Subspecialty] **that is accredited by UCNS. The fellowship must be** [Subspecialty defines duration]. **The applicant must apply within 48 months of completing the fellowship. Verification by the appropriate fellowship program director using the** [**Fellowship Training Verification Template Letter**](https://www.ucns.org/Online/Certification/Online/Certification_Home.aspx?hkey=c7f37845-c035-4186-bd99-9eff677d6c90) **or a copy of the fellowship completion certificate must be provided.**

**B) Applicants currently in a fellowship that will not be completed prior to the application deadline may still apply. The applicant must have successfully completed the fellowship training a minimum of 25 days prior to the examination week. Confirmation from the fellowship program director stating that the applicant has successfully completed the UCNS-accredited fellowship program must be received within 20 days of the fellowship completion date.**

1. **Practice Track**

**The practice track is a process that allows physicians who initiated the subspecialty prior to the availability of accredited training programs to qualify for the examination by meeting a defined set of criteria. To apply via this pathway, applicants must fulfill the requirements of the pathway on or before the last date of the current application cycle.**

**The applicant must submit the following documentation for one of the three** **following areas in** [Subspecialty]. Applicants must use template letters provided by the UCNS where applicable.

* + - * 1. **Satisfactory completion of** [Subspecialty determines duration] **of formal training (non-accredited** **in** [Subspecialty] **that has taken place after the completion of formal residency training in** [Subspecialty determines appropriate specialty training]. **Training or exposure to** [Subspecialty] **given to residents as part of their curriculum will not count toward the** [duration determined by Subspecialty] **of training. The applicant must provide documentation from the appropriate program director of each institution where the training occurred or a copy of their fellowship completion certificate.**

**OR**

* + - * 1. **At least** [Subspecialty determines] **hours of *AMA PRA Category 1 CMETM* specifically related to** [Subspecialty determines] **over the 60 months prior to application. Specification of programs attended and relevance to the field of** [Subspecialty] **must be provided.**

**OR**

* + - * 1. **A letter from the applicant’s current department chair that states he/she has an active, full-time academic appointment in which his/her teaching responsibilities include instructing one or more of the following in** [Subspecialty]: **medical students, residents, or fellows.**

**AND**

* + - * 1. **Documentation of a 36-month\* period of time in which the applicant has spent a minimum of 25% of his/her time in the practice of** [Subspecialty]. [The Subspecialty may also establish additional time options as appropriate, e.g. 24-months with a minimum of 50% practice time.] **The practice must:**
1. **Include evaluation** [defined by Subspecialty] **in the context of diagnosis and management of persons with** [defined by Subspecialty]. **The applicant’s practice must include conditions in Sections II and III of the** [Subspecialty] **Examination Content Outline.**
2. **Have occurred in the United States, its territories, or in Canada.**
3. **Have occurred in the 60-month interval immediately preceding application for certification but need not be continuous.**

 **The application must contain letters from two physicians familiar with the applicant’s practice pattern during the practice time submitted in the application. The letters must together address an entire 36-month period of time submitted.** **Use the** [**Subspecialty Practice Time Verification template**](https://www.ucns.org/Online/Certification/Online/Certification_Home.aspx?hkey=c7f37845-c035-4186-bd99-9eff677d6c90)**.**

**\* If the applicant completed unaccredited training, this may count towards the 36-month period of time. For example, if the applicant completed 12 months of unaccredited training in** [Subspecialty]**, UCNS will count these 12 months towards the 36-month period of time. Documentation of an additional 24-month period of time would then be required.**

* + - * 1. [The Subspecialty may determine additional criteria as appropriate, e.g. practical expertise component.]
1. **Academic Appointment at a UCNS-Accredited Training Program**

**Faculty of a UCNS-accredited training program in [**Subspecialty**] must supply a letter, using the** [**Academic Appointment Verification template**](https://www.ucns.org/Online/Certification/Online/Certification_Home.aspx?hkey=c7f37845-c035-4186-bd99-9eff677d6c90)**, from the applicant’s current department chair that states he/she has an active full-time academic appointment in which his-her teaching responsibilities include instructing [**Subspecialty**] fellows.**

**Applicants of this pathway must provide practice pattern letters using the** [**Subspecialty Practice Time Verification template**](https://www.ucns.org/Online/Certification/Online/Certification_Home.aspx?hkey=c7f37845-c035-4186-bd99-9eff677d6c90)**. Practice time requirement will mirror the requirement stated in the practice track for each subspecialty. Required criteria for the letters is found within the templates.**

1. **Internationally Trained Faculty at UCNS-Accredited Training Programs**
	1. **Applicant must have an active appointment as a program director or a faculty member of a UCNS-accredited training program or have evidence of a current offer of such an appointment. Such an offer must be written by the chairperson of the appropriate department of the academic institution and state: a) when the appointment began or will begin, b) that the appointment is contingent upon the applicant sitting for, and passing, the next available UCNS certification examination, and c) that retention or recruitment of the applicant is considered by the institution to be essential to the quality of the fellowship program.**
	2. **Applicant must provide documentation of a 36-month period of time in which the applicant has spent a minimum of 25% of his/her time in the practice of [**Subspecialty**]. Practice time requirement will mirror the requirement stated in the practice track for each subspecialty. The practice must:**
		1. **Have occurred in the 60 months immediately preceding the applicant deadline but need not be continuous.**

 **The application must contain a letter from the chairperson, using the** [**Subspecialty Practice Time Verification template**](https://www.ucns.org/Online/Certification/Online/Certification_Home.aspx?hkey=c7f37845-c035-4186-bd99-9eff677d6c90)**, confirming the practice time requirement has been met. The letter must address the entire practice time period being submitted.**

**c. Certification is linked directly to the diplomate’s appointment on the faculty of a UCNS-accredited fellowship. That is, if the diplomate no longer is on the faculty of a UCNS-accredited fellowship, his or her certificate automatically terminates. In effect, Faculty certification status is issued jointly to the faculty member and his or her employing institution, which vouches for the faculty member’s competence.**