

ABNM Credentialing Examination

Part I-Written and Part II-Oral Examinations

APPLICATION INSTRUCTIONS

These instructions have been abstracted from the ABNM Policy and Procedure Manual and will serve as a guide for your application process. Where appropriate, the instructions will reference the Policy and Procedure Manual. You are strongly encouraged to read the Policy and Procedure Manual in its entirety to understand fully the application process. The ABNM credentialing examination is comprised of the Part I-Written and Part II-Oral examinations.

- I. **Eligibility requirements for ABNM Part I-Written examination applications:** All candidates for **initial** and **renewal of a lapsed credential** must meet the following requirements by the application deadline. There are no alternative routes.
 1. Educational Degree (Policy and Procedure Manual Section III, Part 2)
 - i. **Doctoral degree** in a physical science, life science or clinical allied health profession from an accredited institution recognized by the U.S. Department of Education
 - ii. Foreign medical or doctoral degree with documentation of US education equivalence such as
 - a. a Certificate of the USMLE Step 1, or
 - b. a Certificate of primary-source credential verification such as provided by the EICS (ECFMG International Credentialing Services), or,
 - c. a certified Evaluation of a foreign educational program such as provided by the AACRAO (American Association of Collegiate Registrars and Admissions Officers), or,
 - d. documentation from an equivalent verification service
 - iii. On-line doctoral degrees will not be accepted.
 2. Educational Course work (Policy and Procedure Manual Section III, Part 3)
 - i. successful completion of two separate **graduate level** courses from an accredited educational institution with a passing grade:
 - a. one in neuroanatomy
 - b. one in neurophysiology.
 - ii. All ABNM required coursework must be taken in class or as part of an ABNM-approved distance learning course.
 3. Requisite number of cases (Policy and Procedure Manual Section III, Part 4 and 5)
 - i. Demonstrating a minimum of 300 cases with the primary responsibility for supervising and professional interpretation, 100 cases in which the applicant physically performed the majority of the technical aspects of monitoring.
 - ii. Demonstrating 36 months experience with primary responsibility for supervising and professional interpretation
 - iii. Documentation needs to be entered into the official **ABNM CASE LOG I**. (use EXCEL spreadsheet from the ABNM website) of 300 cases and must include:
 - a. Date of procedure
 - b. Surgeon
 - c. Surgical Procedure
 - d. Surgical case category (I through VI)
 - e. Case # per surgical category
 - f. Name of the responsible surgeon
 - g. Hospital where each procedure was undertaken

- iv. Only Case Logs arranged by date will be accepted. Arrange from oldest date (case 1) to most recent date (case 300). Use the “sort” feature in the Excel spreadsheet to arrange the case log in this format and then print out and sign each page for submission to PTC.
 - v. Demonstrating a minimum total of 165 monitored cases, of the 300 required cases, distributed between six categories of **required** surgical procedures, with a minimum numbers of cases per case category, as follows:
 - a. I. Spine (SPN) 45 cases.
 - b. II. Spine Tumors and Lesions (STL) 15 cases.
 - c. III. Cranial Tumors and Non-Vascular Lesions (CTL) 45 cases.
 - d. IV. Interventional Neurophysiology (INP) 10 cases.
 - e. V. Vascular (VAS) 45 cases.
 - f. VI. ENT (ENT) 5 cases.

The same case may be performed multiple times within each of the six categories and no stipulation exists that the other cases within each category be performed within the same or different sub-categories. For example, in Category I. Spine, all of the required 45 cases can be from the sub-category “ACDF” with no cases performed in the other three Spine sub-categories.
 - vi. Documentation needs to be entered into the official **ABNM CASE LOG II**. (use the spreadsheet from the ABNM website) of 165 monitored cases within each of the six **required** surgical categories. Enter numbers of cases only in the **UNSHADED** boxes for each of the various qualifying surgical procedures within each category. The spreadsheet will automatically total the numbers of cases entered for each category.
 - vii. Only Case Logs that document the minimum number of required cases for each category and that total a minimum of 165 total required cases, will be accepted.
4. For licensed physicians (MD, DO or equivalent) in lieu of sections 3 and 6
- i. Completion of an accredited post-doctoral program of training of at least 2 years duration
 - ii. Licensed to practice as a physician in the location in which the IONM training is performed
 - iii. Documentation of direct observation of the set-up of monitoring for 25 spine and 25 non-spine cases to include (signed by the training neurophysiologist board certified through the ABNM, ABCN, or ABPN):
 - a. elements of electrode placement
 - b. setting of stimulation parameters
 - c. acquisition and optimization and interpretation of baseline recordings
 - a. In 10 of each of the 25 cases above the candidates must acquire and optimize baseline recordings by running the IONM equipment
 - iv. Documentation of a minimum of 5 hours of CME covering the technical cognitive components of IONM. Items to be covered include filters, signal digitization, noise reduction stratifies, electrical safety and troubleshooting.
 - v. Documentation to show technical competence of 100 cases done under the supervision of a training neurologist and logged in the ABNM CASE LOG I that will be signed by the training neurophysiologist.
 - vi. A minimum of 5 hours of IONM CME/year of the 3 years experience with the primary responsibility for supervision and professional interpretation of IONM.
5. Statements of two attending surgeons who used your specific IOM services when they were operating (Policy and Procedure Manual Section III, Part 6)

6. Tutelage by the training neurophysiologist specifically involved in your primary IONM training (Policy and Procedure Manual Section III, Part 7)
 - i. A qualified, training neurophysiologist must provide documentation describing the training and supervision provided to the applicant during the applicant's three years of experience, or, the required 300 cases.
 - ii. A training neurophysiologist:
 - a. is either an individual with Board Certification from the American Board of Neurophysiologic Monitoring or a licensed physician who is Board certified in Neurology or Clinical Neurophysiology or, by another medical Board specialty deemed appropriate by this board.
 - b. must provide evidence of a minimum of 5 years experience in intraoperative neurophysiological monitoring (IONM) including at least 2 years of supervisory experience in IONM.
 - c. must attest to having conducted training of the applicant in person and together with the applicant either in the operating room and/or at the site of the provision of remote, telemedicine services in IONM for a minimum of 25 monitored cases, and that none of this training was provided either indirectly or remotely or on-line.
 - d. must complete the Statement from Training Neurophysiologist and attestations that document at least 10 business days of in-person training and at least 25 training cases in the Training case Log.

II. **Materials for the application (Use the checklist included in the application package where each item listed in this section needs to be specifically identified by the subsection number on an identifier page, provided by the applicant, for that section):**

Application form obtained at www.abnm.info/Exam_Main.htm.

1. Current Curriculum Vitae or Resume (Policy and procedure manual Section III.1)
2. Proof of educational degree (Policy and procedure manual Section III.2)
 - i. Doctoral degree: Copy of diploma
3. Foreign medical or doctoral degree: (Policy and procedure manual Section III.2)
 - a. Certificate of the USMLE Step 1, or
 - b. Certificate of primary-source credential verification such as provided by the EICS (ECFMG International Credentialing Services), or,
 - c. Certified Evaluation of a foreign educational program such as provided by the AACRAO (American Association of Collegiate Registrars and Admissions Officers), or,
 - d. Documentation from an equivalent verification service
4. Official transcript for graduate level coursework unless being sent directly from issuing Institution and post-marked by application deadline (Policy and procedure manual Section III.3)
5. Description of graduate level coursework to include: (Policy and procedure manual Section III.3)
 - i. Graduate level coursework in Neuroanatomy

Course Title and Code: Neuroanatomy. Code # _____

Equivalent Course Title: _____

Equivalent Course Code: _____

Enclose complete Course Syllabus, Class Schedule, Academic Credits, Course Faculty and any other course information, in print form.

6. Graduate level coursework in Neurophysiology (Policy and procedure manual Section III.3)

Course Title and Code: Neurophysiology. Code # _____

Equivalent Course Title: _____

Equivalent Course Code: _____

Enclose complete Course Syllabus, Class Schedule, Academic Credits, Course Faculty and any other course information, in print form.

7. Case Log I. of 300 cases and 36 months experience (Policy and procedure manual Section III.4 & III.5)
- Case log may only be submitted using the Excel spreadsheet entitled "ABNM Case Log I" found on the ABNM website.
 - No other format will be accepted. (www.abnm.info/CaseLog.htm)
 - Only case logs arranged by date will be accepted. Arrange from oldest date (case 1) to most recent date (case 300). Use the "sort" feature in Excel spreadsheet to arrange the case log in this format and **then print out for signature and submission to PTC.**
8. Case Log II. of a minimum of 165 **required** cases distributed between six surgical categories (Policy and procedure manual Section III.4 & III.5)
- Case log may only be submitted using the Excel spreadsheet entitled "ABNM Case Log II" found on the ABNM website.
 - No other format will be accepted. (www.abnm.info/CaseLog.htm)
 - Only case that document the minimum number of required cases per six categories will be accepted. The Excel spreadsheet will automatically total the numbers of documented cases for each qualifying case entered. When completed, **print out for signature and submission to PTC.**
9. Attestations of two attending surgeons (Policy and procedure manual Section III.6). Obtain form from www.abnm.info
10. Statement of Training Neurophysiologist (Policy and procedure manual Section III.7). Obtain form from www.abnm.info.
11. Completed and signed application form (Policy and procedure manual Section II and Section III.8) and current examination fee which includes sitting one ABNM Part I-Written examination and one ABNM Part II-Oral examination. (Policy and procedure manual Section II)
12. Completed and signed application checklist Statement. Obtain form from www.abnm.info.
13. Application packet must be post-marked by the Application deadline.

III. Steps in the application process:

- Determine eligibility requirements
 - Doctoral degree
 - Educational course work
 - Cases/experience documenting minimum of 165 required surgical procedures and a total of 300 cases over 36 months.
 - Training in clinical intraoperative neurophysiological data interpretation
 - Work with surgeons

2. **ALL** Application materials must be assembled into one application packet with the exception of transcripts which may be sent directly to PTC from the issuing Institution
 - i. Curriculum vitae or resume
 - ii. Proof of education degree(s)
 - iii. Official transcript(s) of course work and description of course work
 - iv. Case Log I. demonstrating 300 cases and 36 months experience
 - v. Case Log II. demonstrating 165 required cases
 - vi. Attestation of two attending surgeons
 - vii. Statement of Training Neurophysiologist
3. Complete and sign Application Form
4. Complete and sign Application Packet Checklist
5. Scan the complete Application Packet and attach the scanned PDF file as well as the two EXCEL spreadsheet files of Case Log I and Case Log II and email all attachments to Sherry Frier at: sfrier@ptcny.com
6. Submit payment for the examination fee to PTC
7. The complete Application packet, including all attached files, must be emailed to PTC by the application deadline. Transcripts, if sent to PTC directly by mail, must also be post-marked by the Application deadline
8. **Incomplete Application packets or, Application packets received at PTC or post-marked after the Application deadline, will be returned in their entirety.**

Payment Instructions:

ABNM Certification Examination in Neurophysiologic Monitoring

Please complete payment instruction Number 1 or Number 2, as appropriate:

1. Initial Application for Part I-Written AND Part II-Oral Examinations.

Total fee: \$1,600

Application fee: \$150 non-refundable processing fee

Examination fee: \$1450

- When paying by credit card: submit one credit number.
 - o PTC will assign \$150 to the application fee and \$1450 to the examination fee.
 - o

2. Repeat Application for Part I-Written Examination in Neurophysiologic Monitoring.

Total fee: \$1,000

Application fee: \$150 non-refundable processing fee

Examination fee: \$850

- When paying by credit card: submit one credit number.
 - o PTC will assign \$150 to the application fee and \$850 to the examination fee.

Applications for the ABNM examination will be emailed to Sherry Frier at: sfrier@ptcny.com

Transcripts (if appropriate) and/or payments by check, should be sent by mail to:-

Professional Testing Corporation (PTC),

1350 Broadway, Suite 800, New York, New York 10018.

Tel: (212) 356-0660, www.ptcny.com.

PTC administers the ABNM Part I-Written examination twice a year and the ABNM administers the ABNM Part II-Oral examination at least once per year. The dates for all ABNM examinations are listed on the **ABNM** web site.