

References

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PYHICIAN NETWORKING RESOURCE DELTA-EXCHANGE NOW FREE TO AAFP MEMBERS

As part of their member benefits, all AAFP members may now sign up at <http://www.aafp.org/online/en/home/practicemgt/deltaexchange.html> for free access to the Delta-Exchange interactive physician networking resource.

This network, which was created by the AAFP's nonprofit, wholly-owned subsidiary TransforMED, opened for business in 2009 as a fee-based service. Since then, the success of Delta-Exchange, which now has 3,500 users, and the accolades of those users has convinced the AAFP and TransforMED that the resource should be made available as a benefit for all AAFP members.

TransforMED's mission is to help primary care practices transform the way they do business so they can meet the needs of a changing health care environment, and "Delta-Exchange puts the power of peer-to-peer learning to work for family medicine," said Terry McGeeney, MD, MBA, TransforMED's president and CEO.

"The questions being asked and discussions going on in Delta-Exchange are about real-world needs and problems experienced every day in practices across the country," said McGeeney. "Participation in Delta-Exchange discussions can help family physicians get motivated, get answers, and get up to speed quickly and efficiently."

John Frey, MD, of Madison, Wisconsin, discovered the benefits of Delta-Exchange many months ago and has since recommended it to a number of colleagues. "We all work in our own silos," said Frey in an interview. "The network has been a very active opportunity

for me to learn what other people are thinking and to take what I read and pass it on to other people."

Opening up Delta-Exchange as a free service to all AAFP members "provides a portal for higher levels of conversations," he added.

John Bachman, MD, of Rochester, Minnesota said he had contributed to Delta-Exchange's "Ask the Experts" area on several occasions. The network "has a lot of potential to spread ideas and help clarify issues," he said. For example, in response to another physician's question about scheduling same-day appointments, Bachman recently posted a comment sharing what his practice had learned about the percentage of appointment slots to leave open for these appointments. He noted that the staff tracked the daily number of unfilled slots for several months.

Frey summed up his reaction to news that the resource is now free to AAFP members by predicting a surge in usage. "The idea of offering Delta-Exchange free to (AAFP) members is terrific, and I really want to compliment the Academy and TransforMED for taking this action. I suspect that traffic on the network is going to increase dramatically in coming months," he said.

AAFP members interested in Delta-Exchange who are not already enrolled in the service will need to provide their member identification number to get signed up.

Sheri Porter
AAFP News Now



From the American
Board of Family Medicine

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BOARD ELIGIBILITY

The term "board eligible" has never been recognized by member boards of the American Board of Medical Specialties (ABMS), including the American Board of Family Medicine (ABFM), but the term continues to be used by credentialing organizations and others to recognize noncertified physicians as having equivalent status. In practice, no limit exists on how long a non-certified physician could remain board eligible. The abuse of the term and the status perpetuated the ability of poorly qualified physicians to practice outside of their initial certification with a risk to patients and resulted in a lack of relationship between the initial certifying examination and training as a concurrent/synergistic measure of physician competency.

In an effort to resolve this confusion for the credentialers and the patients, all member boards of the ABMS agreed to establish parameters under which noncertified physicians could actually be recognized as being board eligible and to further define the time limit for such eligibility status.

The ABFM Board of Directors decided at its meeting in October 2011 that it would define board eligibility as the first 7 years after loss of certification or the completion of an ACGME accredited residency training program. Therefore, beginning January 1, 2012, a physician will have 7 years in which to successfully complete his or her initial certification examination after completing training or, if previously certified, will have 7 years after the loss of certification to successfully complete the examination.

During this 7-year period, these board-eligible physicians will have to continue to meet the ongoing requirements to sit for the examination and must maintain a full, valid, and unrestricted license. After this 7-year period, the physician will lose the ability to refer to himself or herself as board eligible and will need to re-enter training and complete at least 1 year of additional training in an ACGME-accredited family medicine residency before he or she will be allowed to reapply to sit for the examination. This rule will be effective January 1, 2012. As further details of the program are developed they will be published.

*Robert Cattoi
American Board of Family Medicine*



**From the Society of Teachers
of Family Medicine**

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AN IMPERATIVE FOR 2012 AND BEYOND: STEP UP AND ADVOCATE FOR ACADEMIC FAMILY MEDICINE

STFM has the privilege of leading the advocacy effort for the 4 academic family medicine organizations that make up the Council of Academic Family Medicine (CAFMs). We lead and staff the Academic Family Medicine Advocacy Committee (AFMAC) which has representatives from the CAFM organizations, as well as the AAFP. One of the 3 main goals of the CAFM organizations is to provide a unified voice for academic family medicine, and a key part of the STFM strategic plan is advocacy.

With advocacy for academic family medicine as its mandate, AFRAC has been critically involved in the development of policy on issues such as Medicare graduate medical education reform and Title VII primary care training funding. Our efforts to translate our policy interests into action require the involvement of the membership of all the CAFM organizations. We have designed a portfolio of tools and systems to aid our members in this activity. Within this portfolio is information on our online advocacy course and our new grassroots advocacy network.

About a year ago we unveiled the online advocacy course. This course is free to family medicine physicians, educators, residents, and students. It delivers a quick yet complete course of several modules with the skills needed to begin work in the advocacy arena. It takes less than an hour to complete and one can take it in several sittings. You can go to <http://stfm.org/advocacy> to register for the course. In combination with the Family Medicine Congressional Conference (FMCC) in the spring of each year, CAFM members can earn a certificate of achievement as a family medicine advocate.

We are excited to share a significant new effort this year, the creation and development of a grassroots advocacy network. Each department chair and residency director is being asked to name a member of their faculty to be the CAFM Advocacy Network (CAN) Representative for their program or department. The basic strategy is to have a motivated person in each department or program acting as a key advocate to respond to alerts and inform their colleagues, as a way to help amplify our advocacy efforts. Each CAFM Advocate will receive national recognition as your program or department's advocacy representative, recognition within their program as an expert on federal academic family medicine issues, ongoing support from CAFM's Government Relations office in Washington, DC, including a brief information sheet about your representative/senators, access to the aforementioned free online advocacy course to learn the skills needed to be an effective advocate, and the opportunity to develop enhanced leadership and negotiation skills. A key aspect of this effort is to teach our members to report their advocacy activities and their response to our alerts with a form they can find on the STFM website. There is a new email address cafmadvocacy@stfm.org for all CAN representatives who have questions about legislative issues or advocacy in general. The CAN network is off to a terrific start with over 50 persons signed up in the first month. Anyone who would like to join us as a CAFM Advocate can go to <http://www.stfm.org/advocacy/network.cfm> to find out more about this program and can sign up by