<table>
<thead>
<tr>
<th>Collaborating ABMS Board</th>
<th>Eligible for ABMS Part II</th>
<th>Eligible for ABMS Part IV</th>
<th>Eligible for Patient Safety</th>
<th>What’s Unique?</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Board of Anesthesiology</td>
<td>✓ Lifelong Learning</td>
<td>✓</td>
<td>✓</td>
<td>No board review or board preparation courses may be registered.</td>
</tr>
<tr>
<td>American Board of Internal Medicine</td>
<td>✓ Medical Knowledge</td>
<td>✓ Practice Assessment</td>
<td>✓</td>
<td>Some activity formats have specific participation or planning requirements.</td>
</tr>
<tr>
<td>American Board of Ophthalmology</td>
<td>✓ Lifelong Learning &amp; Self-Assessment</td>
<td>✓ Improvement in Medical Practice</td>
<td>✓</td>
<td>Self-Assessment activities require self-assessment of the activity content. Activities cannot be registered for both Part IV and Patient Safety.</td>
</tr>
<tr>
<td>American Board of Otolaryngology – Head and Neck Surgery</td>
<td>✓ Lifelong Learning</td>
<td>✓ Improvement in Medical Practice</td>
<td>✓</td>
<td>Not applicable.</td>
</tr>
<tr>
<td>American Board of Pathology</td>
<td>✓ Lifelong Learning &amp; Self-Assessment Modules</td>
<td>✓ Improvement in Medical Practice</td>
<td>N/A</td>
<td>Self-Assessment Modules have additional evaluation requirements.</td>
</tr>
<tr>
<td>American Board of Pediatrics</td>
<td>✓ Lifelong Learning</td>
<td></td>
<td>N/A</td>
<td>Internet Searching &amp; Learning, Committee Learning &amp; PI-CME activity formats not eligible. Activities have additional evaluation requirements. Learner data should be reported by 12/1.</td>
</tr>
</tbody>
</table>

CME for MOC Crosswalk
797_20190116
Lifelong Learning (Part II)

Accredited CME activities are already meeting most boards’ MOC requirements for Lifelong Learning (Part II) by following the accreditation requirements and developing content that is relevant to the physician learners in the applicable specialty.

You can register CME activities for MOC Part II for all of the participating boards: American Board of Anesthesiology, American Board of Internal Medicine, American Board of Ophthalmology, American Board of Otolaryngology – Head and Neck Surgery, American Board of Pathology, and American Board of Pediatrics

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Improvement in Medical Practice (Part IV)

Accredited providers seeking to have CME activities recognized for the Improvement in Medical Practice (Part IV) expectations of MOC can attest that the activity meets the following requirements:

1. The activity addresses a quality or safety gap that is supported by a needs assessment or problem analysis, or supports the completion of such a needs assessment as part of the activity.
2. The activity addresses care, care processes or systems of care in one or more of the National Academy of Medicine’s (formerly the Institute of Medicine) quality dimensions or one or more of the three Aims or six Priorities articulated in the National Quality Strategy.
3. The activity has specific, measurable aim(s) for improvement.
4. The activity uses measures appropriate to the aim(s) for improvement.
5. The activity includes interventions intended to result in improvement.
6. The activity includes appropriate data collection and analysis of performance data to assess the impact of the interventions.

You can register CME activities for MOC Part IV for: American Board of Internal Medicine, American Board of Ophthalmology, American Board of Otolaryngology – Head and Neck Surgery, and American Board of Pathology

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Patient Safety

Accredited providers seeking to have CME activities recognized for Patient Safety can attest that the activity meets the following requirements:

The activity addresses at least one of the following topics:

1. Foundational knowledge — must include all of the following:
   - Epidemiology of error: should prepare physicians to discuss the key definitions that underpin current patient safety efforts
   - Fundamentals of patient safety improvement (plan, do, study, act, or PDSA): should engage physicians in a PDSA cycle focused on patient safety
   - Culture of safety: should identify the specific elements, (i.e., the beliefs, attitudes, and values about work and risks) that contribute to safety culture
2. Prevention of adverse events — examples include, but are not limited to:
   - Medication safety (e.g., medication reconciliation, safe use of analgesics and sedatives, identification and remediation of polypharmacy in the elderly)
   - Prevention of healthcare-acquired infections
   - Falls prevention
   - Teamwork and care coordination

You can register CME activities for Patient Safety for: American Board of Anesthesiology, American Board of Internal Medicine, American Board of Ophthalmology, and American Board of Otolaryngology – Head and Neck Surgery