



American College of  
Emergency Physicians®

ADVANCING EMERGENCY CARE 

# POLICY STATEMENT

Approved January 2022

## *Use of Short Courses in Emergency Medicine as Criteria for Privileging or Employment*

Revised January 2022,  
January 2016,  
April 2012

Reaffirmed September 2005

Revised June 1999 with  
current title, June 1997,  
August 1992

Originally approved January  
1984 titled "Certification in  
Emergency Medicine"

The American College of Emergency Physicians (ACEP) believes that board certification by the American Board of Emergency Medicine (ABEM) or the American Osteopathic Board of Emergency Medicine (AOBEM) demonstrates comprehensive training, knowledge, and skill in the practice of emergency medicine. Although short course completion may serve as evidence of focused review, the topics covered in such courses are part of the core curriculum of emergency medicine. ABEM or AOBEM certification in emergency medicine supersedes evidence of completion of such courses. Additionally, maintenance of board certification requires mandatory retesting and continuing medical education (CME), making updated short courses redundant. Similarly, board certification and maintenance of certification by either ABEM or American Board of Pediatrics (ABP) in pediatric emergency medicine supersedes the need for completion of such short courses.

However, for physicians board eligible or board certified by ABEM or AOBEM in emergency medicine, ACEP strongly opposes requiring completion of courses such as Advanced Cardiac Life Support (ACLS), Advanced Trauma Life Support (ATLS), Pediatric Advanced Life Support (PALS), and Basic Trauma Life Support (BTLS), or a specified number of CME hours in a sub-area of emergency medicine, as conditions for privileges, renewal of privileges, employment, qualification by hospitals, government agencies, or any other credentialing organization's standards to provide care for designated disease entities. For physicians board eligible or board certified by ABEM or ABP in pediatric emergency medicine, ACEP strongly opposes these additional requirements.