

**MOA MEMBERS  
FROM SUE A. WEINGARTNER, EXECUTIVE DIRECTOR  
JUNE 16, 2009**

**BOARD CERTIFICATION INFORMATION (DR. ART EPSTEIN)**

Forwarded for your information upon request of Dr. Jim Reeves:

*A weekly e-journal by Art Epstein, OD, FAAO*

*Volume  
9,  
Number  
23*

*Monday,  
June 15,  
2009*

## Off the Cuff: Fatally Flawed

Before I begin, I ask just one favor. I ask you to read this with an open mind. No matter if you are decidedly for or against the AOA proposal, love me or hate me or don't really care either way, all I ask is that you read this entire editorial and consider it with an open mind.

The term "board certification" has been bandied about like we are somehow entitled to use it for whatever purpose we wish. Such is not the case. Board certification is a well-defined and very specific process, something that is well understood by the medical community.

**Board certification is not a measure of *continued competency*.** It is a complex and rigorous testing process that occurs after specialty (residency based) training. **Board certification serves as proof of entry-level competence for medical and dental specialists and is a de facto practice requirement for these specialists.**

Take ophthalmology as an example. After finishing medical school, ophthalmologists complete a 3-year residency and then sit for their ophthalmology boards. Lacking board certification, ophthalmologists would be unable to maintain surgical privileges at hospitals, unable to participate in insurance and government programs and would find it difficult, if not impossible, to obtain malpractice coverage.

In contrast, optometrists complete 4 years of optometric training, including externships and clinical rotations. We demonstrate successful completion of our training by graduating from an accredited program, passing all parts of the NBEO examinations (**our national boards**) and then become licensed by one or more state boards. Even though we do not claim that passing our board exams represents being board certified, **our training process and ophthalmology's training process are functionally equivalent requirements necessary to (begin) practice.** If you disagree, then please explain why **optometrists and ophthalmologists are held to exactly the same medical standards of care?**

A basic premise used by the AOA to justify their board certification push is that it is necessary to demonstrate continued competence beyond entry level. However, this assertion is not only untrue, it is demeaning and damaging to optometry. **Board certification is a metric for entry-level competence within a specialty area of practice. It is not, nor was it ever intended to be, a measure of continued competency for any specialty or profession.** Moreover,

**Are you in favor of the current  
AOA proposal for board  
certification?**

- Yes  
 No

[Submit Result]

If you do not receive confirmation of your vote, please [click here](#) to vote using the web-version of *OP*.

board certification cannot **credibly** be achieved by simple fiat or through any variation of traditional continuing education. **Optometrists do not need board certification to prove competence to practice general optometry. Appropriate training and testing mechanisms are already in place that credibly accomplishes this.**

The public and insurers are not demanding board certification of optometry. If the AOA adequately does its job of protecting our profession's interests, none of us will be left out of new healthcare initiatives. On the other hand, if board certification is enacted and the ABO is formed, many are likely to be excluded. Perhaps even more disturbing, many will leave the AOA and state affiliates at a time when support and cohesion is critical. **Knowingly allowing this to happen is the height of irresponsibility.**

With the exception of the AOA and the obsequious leadership of a handful of state affiliates, no one has expressed interest in forcing our profession to adopt a farcical, costly and unnecessary process that won't credibly serve its intended purpose. Going forward, insurers and the government will be interested only in our proving ongoing competency, not in our adopting meritless "board certification" credentials.

Last week's Live Poll confirmed that a majority of ODs believe we should develop a process to demonstrate ongoing competency. This is in stark contrast to previous polls on AOA "board certification" where 90% were against the proposal. At the time of this writing, 70% of respondents were in favor of developing an MOC process.

With the AOA Congress just two weeks away, it is critically important that national leaders as well as our state organizations and their delegates are aware of the profession's vote on the AOA proposal. I urge you to take part in this week's final board certification survey and to ask your colleagues to do likewise. Our previous BC poll had nearly 1,400 respondents—a powerful and unprecedented number. The more who express their perspectives, the more likely it will be that our combined voices will be heard.

Next week, just days before the Congress and HOD vote, I will share the poll results as well as insight into how different state organizations have handled the process of deciding how their delegates will vote. I think the courageous leadership of some states will impress, while the undemocratic dictatorial approach of others may disappoint or even anger.

Arthur B. Epstein, OD, FAAO  
Chief Medical Editor

[artepstein@optometricphysician.com](mailto:artepstein@optometricphysician.com)

Want to share your perspective? Write to Dr. Epstein at [artepstein@optometricphysician.com](mailto:artepstein@optometricphysician.com). Comments received may be published on *OP-Blog* at the discretion of the editor without attribution. Please indicate if you would like your thoughts attributed to you.

On Twitter? Follow *Optometric Physician* at <http://twitter.com/optomphysician>.

The views expressed in this editorial are solely those of the author and do not necessarily represent the opinions of the editorial board, Jobson Publishing or any other entities or individuals.