

THE EVOLUTION OF ABIM PROCEDURAL REQUIREMENTS

Internal Medicine

1990-1991:

- Critical life-saving procedures including basic cardiopulmonary resuscitation and cardiac defibrillation
- Basic diagnostic procedures necessary for obtaining relevant biological fluids for evaluation:
 - Arterial and venous blood
 - Urine
 - Cerebrospinal fluid
 - Pleural and ascitic fluids
 - Cervical and vaginal secretions
- Procedures used by internists to obtain additional diagnostic information:
 - Breast and pelvic examinations
 - Sigmoidoscopy

1991-1997 (numbers in parentheses denote minimum number to be performed):

- Abdominal paracentesis (3)
- Arterial puncture for blood gas analysis (5)
- Arthrocentesis of the knee joint (3)
- Central venous line placement (5)
- Lumbar puncture (5)
- Nasogastric intubation (3)
- Thoracentesis (5)
- Critical life-saving procedures (this requirement can be met by documentation of successful training in advanced cardiac life support)

1997-2002 (numbers in parentheses denote minimum number to be performed):

- Abdominal paracentesis (3)
- Arterial puncture for blood gas analysis (5)
- Arthrocentesis of the knee joint (3)
- Central venous line placement (5)
- Lumbar puncture (5)
- Nasogastric intubation (3)
- Thoracentesis (5)
- Critical life-saving procedures (this requirement can be met by documentation of successful training in advanced cardiac life support)
- Breast examinations (5)
- Rectal examinations (5)
- Pelvic examinations and pap smear, including wet mount (5)

2002-2006:

1. Interpreting electrocardiograms
2. Performing the following procedures; understanding their indications, contraindications, and complications; interpreting their results:
 - Advanced cardiac life support (American Heart Association documentation of successful training within the teaching institution is accepted)
 - Abdominal paracentesis
 - Arterial puncture
 - Arthrocentesis
 - Central line placement
 - Lumbar puncture
 - Nasogastric intubation
 - Pap smear and endocervical culture
 - Thoracentesis

The Board recommends the general guideline of three to five as the minimum number of directly supervised, successfully performed procedures below which confirmation of proficiency is not credible.

2006-Current Time:

Know, Understand, Explain	Safely Perform
Abdominal Paracentesis	ACLS
Arterial Line Placement	Drawing Venous Blood
Arthrocentesis	Drawing Arterial Blood
Central Venous Line Placement	Pap Smear/Endocervical Culture
Electrocardiogram	Placing Peripheral Venous Line
Incision/Drainage of Abscess	
Lumbar Puncture	
Nasogastric Intubation	
Pulmonary Artery Catheter Placement	
Thoracentesis	

ABIM does not specify a minimum number of procedures to demonstrate competency; however, to assure adequate knowledge and understanding of the common procedures in internal medicine, each resident should be an active participant for each procedure five or more times.



American Board
of Internal Medicine®

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QUESTIONS?

Call 1-800-441-ABIM or email request@abim.org

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