Major changes for the 2006 revision

- Asserted trademark protection for the AMA's intellectual property through required use of *AMA PRA Category 1 Credit™* in the Designation Statement and whenever the complete phrase is first used in any publication and periodically through the publication (see page 13).

- The new AMA PRA credit system Designation Statement reflects this and other changes (see page 13).

- International physicians are now formally eligible for AMA PRA Category 1 Credit without a provider application process; the “U.S. licensed” requirement is eliminated (see page 3).

- Shifted to accredited providers the ability to award AMA PRA Category 1 Credit to faculty for teaching at their designated live activities (see page 6).

- Incorporated four new formats approved for AMA PRA Category 1 Credit, most recently performance improvement and Internet point of care learning (see pages 8-12).
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## Principles of medical ethics

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Introduction

A. Brief history

The American Medical Association (AMA) Physician’s Recognition Award (PRA) has recognized physician participation in continuing medical education (CME) for more than 35 years. Established in 1968, the AMA PRA certificate and the related AMA PRA credit system recognize physicians who, by participating in CME activities, have demonstrated their commitment to staying current with advances in medicine. AMA PRA credit offers a system to measure and track physician participation in certified CME activities. AMA PRA credit is recognized and accepted by hospital credentialing bodies, state medical licensure boards and medical specialty certifying boards.

When physicians have accumulated enough AMA PRA Category 1 Credit, they can then apply for an AMA PRA certificate. The AMA uniquely and exclusively awards the AMA PRA certificate to physicians who apply for it. AMA PRA credit may be awarded by accredited CME providers to physicians who participate in their appropriately developed and certified educational activities.

Within the United States, the AMA only authorizes organizations that are accredited by the Accreditation Council for Continuing Medical Education (ACCME) or by a state medical society recognized by the ACCME Committee for Review and Recognition (CRR) to designate and award AMA PRA Category 1 Credit to physicians. The AMA, on behalf of its physician constituency, also maintains international relationships for certain educational activities that meet AMA PRA standards.

In the 1960s, the AMA started to recognize CME programs in hospitals and other health care organizations for the purpose of encouraging quality CME. In 1977 the AMA responded to the rapidly growing number of accredited CME programs by inviting other organizations to form a national accrediting body, which eventually evolved into the ACCME in 1981. The ACCME currently includes seven member organizations: the AMA, American Board of Medical Specialties, American Hospital Association, Association for Hospital Medical Education, Association of American Medical Colleges, Council of Medical Specialty Societies, and Federation of State Medical Boards.

Today the ACCME directly, or through the recognized state medical societies, accredits more than 2,500 U.S.-based organizations to provide CME. For accredited providers who choose to designate their activities for AMA PRA Category 1 Credit, high quality program
content is expected, in compliance with the standards outlined in this booklet. The strength of the AMA PRA credit system depends on the complementary roles of the ACCME essential elements and standards for commercial support, and the AMA PRA requirements. Both organizations work diligently to coordinate the development of their respective systems in a manner that seamlessly serves providers’ and physicians’ educational needs. This effort ensures the integrity and effectiveness of the AMA PRA Category 1 Credit system.

In support of the AMA PRA and its credit system, staff for the AMA Division of Continuing Physician Professional Development (CPPD) are available to answer questions from physicians or providers about compliance with the AMA definition of CME, the relevant ethical opinions (see page 3), AMA PRA standards, requirements for content validity, or other questions about the AMA PRA or its credit system. To remain up-to-date on the most current information about the AMA PRA, providers are strongly encouraged to sign up for the CPPD Report, a regular newsletter, and our e-mail distribution list at cppd@ama-assn.org.

Finally, the AMA PRA program continuously evolves to meet physician learning needs. Consequently, the AMA will, from time to time, initiate pilot projects to evaluate and eventually recommend new ways for physicians to earn AMA PRA Category 1 Credit. We would like to thank the provider and physician communities, without whom the changes and improvements reflected in this booklet would not have been possible, and the patients who lend meaning to this work.

B. The AMA definition of CME

CME consists of educational activities which serve to maintain, develop, or increase the knowledge, skills, and professional performance and relationships that a physician uses to provide services for patients, the public or the profession. The content of CME is the body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine, and the provision of health care to the public [AMA House of Delegates policy #300.988].

Stay up to date: sign up for the CPPD Report and our e-mail distribution list at cppd@ama-assn.org
C. Frequently used terms

An accredited provider is a U.S.-based entity accredited by either the ACCME or an ACCME-recognized state medical society.

Physicians eligible to receive AMA PRA Category 1 Credit are individuals who have completed an MD, DO or equivalent medical degree from another country, or who have obtained a Fifth Pathway certificate.

To designate (or certify) an activity for AMA PRA Category 1 Credit is the process by which an accredited provider, through compliance with AMA PRA rules, establishes that an activity meets AMA PRA standards and assigns a maximum number of credits.

AMA PRA Category 1 Credit is awarded (or issued) by an accredited provider to physicians who participate in their certified activities and claim credit. The AMA delegates to accredited providers the ability to award AMA PRA Category 1 Credit, in accordance with AMA PRA guidelines.

D. Ethical considerations for physicians and providers of CME

The AMA Principles of Medical Ethics (see back page for full text) provide the grounding tenet for CME and medical education generally:

V. A physician shall continue to study, apply, and advance scientific knowledge, maintain a commitment to medical education, make relevant information available to patients, colleagues, and the public, obtain consultation, and use the talents of other health professionals when indicated.

Accredited providers and physicians must both know and comply with the two AMA Council on Ethical and Judicial Affairs (CEJA) opinions that address the ethical obligations that underpin physician participation in CME, 8.061, “Gifts to physicians from industry” and 9.011, “Ethical issues in CME” (for the full text, go to www.ama-assn.org/go/cme). Certain CME idioms have shifted since the CEJA opinions were approved in 1990 and 1993. So in the full text of the opinions, “sponsors” describes providers and “programs” refers to activities.

The AMA expects accredited CME providers to present physicians with commercially unbiased, independent and objective information in all of their activities. Accredited providers meet the substance of the CEJA opinion requirements through compliance with the ACCME Standards for Commercial Support.
Accredited provider information

I. General information

This section describes the expectations for educational content, the types of activities accredited providers may designate for AMA PRA Category 1 Credit, the use of the Designation Statement and other guidelines. These guidelines are designed to encourage accredited providers to develop the most effective and transparent educational activities.

A. Educational content

Accredited CME providers should collaborate with their faculty, whenever possible, to ensure the content of the educational activities they designate for AMA PRA Category 1 Credit is accurate, current and objectively presented. Educational needs should guide activities and the development of their purpose and/or learning objectives. These needs may be driven and defined by individual physicians, groups of physicians and/or outside organizations.

Providers may certify non-clinical subjects (e.g., office management or physician-patient communication) for AMA PRA Category 1 Credit, so long as these are appropriate to a physician audience and benefit patient care or public health.

CME activities may describe or explain complementary and alternative health care practices. As with any quality CME activity, these need to include discussion of the existing level of scientific evidence that supports the practices. However, education that advocates specific alternative therapies or teaches how to perform associated procedures, without scientific evidence or general acceptance among the profession that supports their efficacy and safety, cannot be designated for AMA PRA Category 1 Credit.

B. Designating an activity for AMA PRA Category 1 Credit

To be designated for AMA PRA Category 1 Credit, educational activities must be planned by an accredited provider. Providers must assure that their activities:

- Conform to the AMA definition of CME (see page 2).
- Present content appropriate in depth and scope for a physician audience.
• Conform to both the relevant CEJA opinions (see page 3), as well as the ACCME Standards for Commercial Support, and are non promotional in nature.

• Address demonstrated educational needs.

• Communicate a clearly identified educational purpose and/or objectives.

• Use learning methodologies and format(s) appropriate to the activity’s educational purpose and/or objectives.

• Use evaluation mechanisms to assess an activity’s quality and relevance to its purpose and/or objectives.

• Include a means for the provider to record the actual credits claimed by each physician participant (physicians are ethically obligated to only claim credit consistent with the extent of their participation in a CME activity).

• Are designated for AMA PRA Category 1 Credit in advance; activities cannot be retroactively designated for Category 1 credit.

• Include the Designation Statement (see page 13) in any activity materials that reference CME, with the exception of “save the date” or similar notices (see page 13).

II. Types of provider designated AMA PRA Category 1 Credit™ activities and how to assign them credit

Accredited providers may designate the following types of activities for AMA PRA Category 1 Credit. All activities must comply with the AMA PRA Category 1 Credit requirements detailed previously. In addition:

• Providers should be aware of those activities that are available to physicians on a direct credit basis; i.e., providers do not designate them for credit, physicians claim the credit directly from the AMA (see page 16).

• Accredited providers do not designate activities for AMA PRA Category 2 Credit™ (see page 18).

A. Live activities

CME activities that physicians must attend (in person or virtually) in order to claim credit can be offered in a variety of formats that range
from national conferences and live Internet teleconferences to local workshops, seminars, grand rounds or departmental scientific meetings.

Assigning credit for learner participation in live activities

- Sixty minutes of physician participation (i.e., formal interaction between faculty and the physician audience) in a certified live activity equals one (1) AMA PRA Category 1 Credit.

- Activities may be designated for, and credit awarded to physicians in, 15 minute or 0.25 credit increments; in both cases providers or physicians may round to the nearest quarter hour.

- Simultaneous certified sessions within a live activity can only be counted once toward the designated maximum.

- If sections of a designated activity do not fit the AMA definition of CME, and are non promotional, then these sections must be clearly identified in the activity materials and excluded from the designated maximum amount of credit.

Providers may also award AMA PRA Category 1 Credit to their faculty for teaching at the provider’s designated live activities. This credit acknowledges the learning associated with the preparation for an original presentation.

Assigning credit for teaching at Category 1 live activities

- Faculty may be awarded two (2) AMA PRA Category 1 Credits for each hour they present at a live activity designated for such credit.

- Faculty may not claim simultaneous credit as physician learners for sessions at which they present; however, they may claim participant credit for other sessions they attend as learners at a designated live activity.

- Credit may only be claimed once for repeated presentations.

B. Enduring materials

Enduring materials include printed, recorded, audio, video and/or online/electronic activities that may be used over time at various locations, and that in themselves constitute a structured CME activity. To be designated for AMA PRA Category 1 Credit, enduring materials must:

- Provide clear instructions to the learner on how to successfully complete the activity.
• Provide access to appropriate bibliographic sources that allow for further study, and that reinforce and clarify specific activity topics.

• Provide for some type of learner interaction or self assessment; examples include patient-management case studies, a post-test, and/or application of new concepts in response to simulated problems.

Assigning credit for enduring materials
• Establish a good faith estimate (e.g., through a small focus group) of the amount of time a physician will take to complete the activity and satisfy its purpose and/or learning objectives.

• Sixty minutes equals one (1) AMA PRA Category 1 Credit. To calculate the Designation Statement’s credit maximum, providers may round to the nearest quarter hour or credit.

• Providers may choose to make credit contingent on passing a post-test or completing an exercise, but it is not required.

C. Journal-based CME

Journal-based CME describes the process by which accredited providers identify an article, within a peer-reviewed, professional journal, that serves as a planned learning activity. To designate journal-based CME activities for AMA PRA Category 1 Credit, providers must incorporate a mechanism for physician reflection and/or interaction with the article content. The latter can be accomplished through an evaluation or examination that physicians return to the provider.

Assigning credit for journal-based CME
• Providers may designate individual articles for one (1) AMA PRA Category 1 Credit. If a provider wishes to designate an article for a higher amount of credit, they must use the process described in the previous section for enduring materials.

D. New procedures

Through new procedures and skills courses, providers can train physicians on topics that allow them to request new or expanded clinical privileges. For these activities, usually surgical or with new medical devices, a provider must assess whether a physician has acquired the knowledge and skills to carry out the new procedure.

The AMA PRA requirements for new skills and procedures training consists of four levels so that providers and participants can clearly identify the depth and complexity of the course, and accurately represent
the level of skill or knowledge acquired. After completing a new procedure educational activity, physicians can present their credit certificate to the appropriate credentialing authority as documentation of his or her education and training. The four levels are:

1. **Verification of attendance:** the physician attended and completed the course.

2. **Verification of satisfactory completion of course objectives:** the physician satisfied all specified learning objectives.

3. **Verification of proctor readiness:** the physician can successfully perform the procedure under proctor supervision. A physician proctor can competently oversee another physician performing a given procedure.

4. **Verification of physician competence:** the physician can successfully perform the procedure without further supervision.

New procedures and skills education as a certified activity involves a detailed set of expectations, for either formal courses or clinical preceptorships. For complete information including appropriate certificate language, providers who certify new procedures activities for AMA PRA Category 1 Credit should refer to [www.ama-assn.org/go/pra](http://www.ama-assn.org/go/pra).

**E. Test item writing**

Test item writing activities describe a learning process wherein physicians contribute to the development of high stakes examinations, or certain self-assessment modules, by researching, drafting and defending potential questions. Additionally:

- The questions must be developed for examinations given by the National Board of Medical Examiners or a member board of the American Board of Medical Specialties (ABMS), or for peer reviewed, published, self-assessment educational activities from a national medical specialty society.

- The process for this activity must document guidance for the physician question writers on how to use evidence for writing quality questions.

- The assignments must be at a depth and scope that require a review of the literature and a knowledge of the evidence base for the questions. Physician question writers should document their review of evidence based literature.
• The physician question writers must personally participate in a group peer review of the questions. The question writers should revise their questions, when necessary, based on feedback from the peer group.

Assigning credit for test item writing

• Providers may designate each test item writing activity (the cycle described above) for a maximum of ten (10) AMA PRA Category 1 Credits.

F. Manuscript review (for journals)

Manuscript review activities describe a learning process in which physicians, under the collaborative direction of a journal editor and an accredited provider, critically review assigned journal manuscripts. Additionally:

• The texts to be reviewed must be original contributions to the medical literature that require multiple reviewers, e.g., not book reviews.

• The journal editor, working with the accredited provider, will need to educate reviewers about the CME process: establish objectives and criteria for content review, and provide all needed instructions.

• Manuscript review assignments must be at a depth and scope that require a review of the literature and a knowledge of the evidence base for the manuscripts reviewed. To the extent possible, this review of the evidence base should be documented.

• The accredited provider, working with the journal editor, should have an oversight mechanism to evaluate the quality of reviews submitted. This process should assure that physicians who submit substandard reviews do not continue to participate or receive credit for subsequent activities.

• Organizations that are not accredited providers, but that publish journals indexed by MEDLINE, may arrange joint sponsorship agreements with an accredited provider so that their manuscript reviewers can obtain AMA PRA Category 1 Credit.

Assigning credit for manuscript review

• Providers may designate each accepted manuscript review, as documented by the journal editor, for a maximum of three (3) AMA PRA Category 1 Credits.
G. Performance improvement

Performance improvement (PI) activities describe structured, long-term processes by which a physician or group of physicians can learn about specific performance measures, retrospectively assess their practice, apply these measures prospectively over a useful interval, and re-evaluate their performance. To award AMA PRA Category 1 Credit for PI activities, providers must:

- Establish an oversight mechanism that assures content integrity of the selected performance measures. These measures must be evidence based and well designed (e.g., clearly specify required data elements, data collection is feasible). PI activities may address any facet (structure, process or outcome) of a physician's practice with direct implications for patient care.

- Provide clear instructions to the learner that define the educational process of the PI activity (documentation, timelines, etc.) and establish how they can claim credit.

- Validate the depth of physician participation by a review of submitted PI activity documentation. Providers may award credit to physicians for completing defined stages of the PI activity. When requested, supply specific documentation of such credit to participating physicians.

- Provide adequate background information so that physicians can identify and understand the performance measures that will guide their PI activity, and the evidence base behind those measures. Providers may deliver this education through live activities, enduring materials or other means.

Providers must ensure that participating physicians integrate all three stages described below to develop a complete, structured performance improvement activity.

Stage A: Learning from current practice performance assessment
Assess current practice using identified performance measures, either through chart reviews or some other appropriate mechanism. Participating physicians should be actively involved in data collection and analysis.

Stage B: Learning from the application of PI to patient care
Implement an intervention based on the performance measures selected in Stage A, using suitable tracking tools (e.g., flow sheets). Participating physicians should receive guidance on appropriate parameters for applying an intervention and assessing performance change, specific to the performance measure and the physician's
Stage C: Learning from the evaluation of the PI effort

Re-evaluate and reflect on performance in practice (Stage B), by comparing to the assessment done in stage A. Summarize any practice, process and/or outcome changes that resulted from conducting the PI activity.

Assigning credit for PI activities

Physicians may be awarded incremental AMA PRA Category 1 Credit for completing each successive stage of a PI activity. Incremental credit for PI activities should be awarded as follows:

- Five (5) AMA PRA Category 1 Credits can be awarded for the completion of each of the three stages (A, B and C). Completion of the full PI cycle is not required.

- Providers may design PI activities so that physicians can enter at any of the three stages. Providers that do so must design a mechanism by which physicians who enter after stage A can document their completion of work equivalent to that described for the earlier stages.

- Physicians completing, in sequence, all three stages (A – C) of a structured PI activity may receive an additional five (5) AMA PRA Category 1 Credits, for a maximum of twenty (20) AMA PRA Category 1 Credits. This credit allocation acknowledges the best learning is associated with completing a well conceived PI activity.

1 A clinical performance measure is a mechanism that enables the user to quantify the quality of a selected aspect of care by comparing it to a criterion. (Institute of Medicine, 2000)


H. Internet point of care learning

Internet point of care (PoC) CME describes structured, self-directed, online learning by physicians on topics relevant to their clinical practice. Learning for this activity is driven by a reflective process in which physicians must document their clinical question, the sources consulted and the application to practice. To award AMA PRA Category 1 Credit for this activity, accredited providers must assure that they:
• Establish a process that oversees content integrity, with responsibilities that include, but are not limited to, the appropriate use and selection of professional, peer-reviewed literature, and keeping search algorithms unbiased.

• Provide clear instructions to the physician learner on how to access the portal/database, how their online activities will be tracked, and how the provider will award credit for their participation.

• Verify physician participation by tracking the topics and sources searched. Implement reasonable safeguards to assure appropriate use of this information.

• Provide access to some mechanism by which participants can give feedback on overall system effectiveness, and evaluate whether the activity met the participant’s learning objectives, or resulted in a change in knowledge, competence or performance as measured by physician practice application or patient health status improvement.

• Establish a mechanism by which participating physicians may claim AMA PRA Category 1 Credit for this learning cycle, if they:
  > Review original clinical question(s).
  > Identify the relevant sources from among those consulted.
  > Describe the application of their findings to practice.

Assigning credit for Internet PoC learning

AMA PRA Category 1 Credit for Internet PoC learning should be awarded as follows:

• Physicians conducting structured online searches on clinical topics may claim a half (0.5) AMA PRA Category 1 Credit for documented completion (either at the point of care or later) of the three step learning cycle defined above.

I. Other activities

Providers may designate other appropriately structured activities for AMA PRA Category 1 Credit. For example, committee work, learning plans/contracts, etc. that are developed in accordance with all the requirements for designated live activities (see page 5) can be eligible for AMA PRA Category 1 Credit.
III. General provider requirements and information

A. Designation Statement

Providers who designate activities for AMA PRA Category 1 Credit must use the following language in both announcement and activity materials:

The [name of accredited provider] designates this educational activity for a maximum of [number of credits] AMA PRA Category 1 Credit(s)™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

AMA PRA Category 1 Credit is a trademark of the American Medical Association. Accredited providers are required to use “AMA PRA Category 1 Credit™” whenever the complete phrase is first used in any publication, and periodically through the publication. This standard language, along with the Designation Statement, benefits both providers and physicians by clearly communicating the provider’s privilege to award AMA PRA Category 1 Credit on behalf of the AMA.

B. Activity announcements

Activity announcements describe all materials (such as brochures), in both print and electronic formats, that are designed to build awareness of the activity among the target physician audience. These should feature an activity’s educational content, with advertising for unrelated amenities playing a secondary role. Any announcement, if it references the maximum number of credits for which the provider has designated the activity, must clearly include the complete Designation Statement exactly as it is stated above.

A “save the date” announcement (such as a card mailer with limited space) may indicate that AMA PRA Category 1 Credit will be provided without stating an exact amount, but only if the provider has already certified the activity for AMA PRA Category 1 Credit. This announcement may read, “This activity has been approved for AMA PRA Category 1 Credit.”

Providers may never publish or announce that “AMA PRA credit has been applied for.”

C. Recording credit

Providers must record the actual number of AMA PRA Category 1 Credits claimed by each of their physician participants. These records
must be retained by providers, for each of their certified activities, for a minimum of six years. Providers may choose any system to accomplish this.

Providers should note that although it is necessary to uniquely identify the physicians who claim CME credit, AMA House of Delegates policy opposes the use of Social Security numbers to do so. An alternative available to providers is the Medical Education number, a unique 11 digit proprietary identifier assigned by the AMA to every U.S. physician.

D. Credit certificates for physicians

Only physicians may be awarded AMA PRA Category 1 Credit by accredited providers. Providers are not required to issue printed credit certificates to physicians, but must be able to provide a record of the credit awarded upon request (e.g., with a transcript). If providers choose to produce certificates, they should do so only at the conclusion of the educational activity, so that those physicians can accurately claim their credit for participating.

When issuing credit certificates, providers must base these on the actual credit claimed by the physician. Providers can achieve this in multiple ways. One procedure begins with the physician first claiming their amount of participation to the provider, continues with the provider recording these credits, and concludes with the provider producing a credit certificate that accurately reflects those credits. AMA PRA Category 1 Credit certificates for physicians should read as follows:

The [name of accredited provider] certifies that [name of physician] has participated in the educational activity titled [title of activity] at [location, when applicable] on [date] and is awarded [number of credits] AMA PRA Category 1 Credit(s).TM

Credit certificates for activities not conducted in a specified setting, such as enduring material or journal CME, do not need to include the location. For ongoing activities, such as PI, the date should reflect the date of completion. Different credit statements apply for new procedures and skills activities (see www.ama-assn.org/go/pra). Whether providers issue individual credit certificates or transcripts for their participant physicians, these should accurately reflect all pertinent details for each activity. Providers must document, at regular intervals or when the physician requests it, the credit awarded to their participating physicians.
E. Certificates of attendance for non-physicians

Providers may choose to issue non-physician health professionals a certificate of attendance that references AMA PRA Category 1 Credit, to help them document their attendance at certified educational activities. Attendance certificates for non-physician participants can read:

The [name of accredited provider] certifies that [name of participant] has participated in the educational activity titled [title of activity] at [location, when applicable] on [date]. This activity was designated for [number of credits] AMA PRA Category 1 Credit(s).™

F. Joint and co-sponsorship

If a certified activity is either jointly sponsored or co-sponsored, then the accredited provider reporting the activity through the ACCME or their CRR recognized state medical society must take full responsibility to designate the activity for credit and keep a record of the AMA PRA Category 1 Credit claimed for that activity. Where applicable, they may also issue credit certificates.

G. Provider monitoring

In addition to the ACCME accreditation process, the AMA monitors accredited providers’ activity brochures and announcements on a regular basis for compliance with AMA PRA credit system requirements. Whenever warranted, the AMA will proceed with follow-up inquiries to ascertain and address provider compliance with AMA PRA credit system requirements. In most cases, the AMA is able to assist providers with finding strategies that will bring their program and activities back into compliance with AMA PRA standards.

H. Withdrawal of privilege to designate credit

If an accredited provider refuses or fails to comply with the standards and requirements outlined in this booklet, the AMA will initiate a formal review process. Based on this review, the AMA reserves the right to withdraw a provider’s privilege to designate activities for AMA PRA Category 1 Credit. Decisions may be appealed to the AMA Council on Medical Education.
I. Direct AMA PRA Category 1 Credit™ activities

In addition to provider designated activities, physicians may claim AMA PRA Category 1 Credit™ directly from the AMA for learning that occurs in relationship to the activities defined in this section. To obtain credit from the AMA for these activities, physicians can either claim them on their AMA PRA certificate application or apply to the AMA for an AMA PRA Category 1 Credit certificate specific to that activity. (see back cover for directions and contact information).

These activities include:

A. Publishing articles

Publishing, as a lead author, an article in a journal included in the MEDLINE bibliographic database.

Documentation: a reprint or copy of the article’s first page.

Credit assignment: ten (10) AMA PRA Category 1 Credits per article.

B. Poster presentation

Preparing a poster presentation, which is also included in the published abstracts, for a conference designated for AMA PRA Category 1 Credit.

Documentation a copy of the page in the conference proceedings that lists the poster abstract and identifies the presenter.

Credit assignment: five (5) AMA PRA Category 1 Credits per poster.

C. Medically related advanced degrees

Obtaining a medically related advanced degree, such as a masters in public health, is eligible for AMA PRA Category 1 Credit (not available if the academic program certified individual courses for AMA PRA Category 1 Credit).

Documentation: a copy of the diploma or final transcript.

Credit assignment: twenty-five (25) AMA PRA Category 1 Credits.

Please note, the following two activities can be claimed for either an AMA PRA Category 1 Credit certificate or an AMA PRA certificate.
D. ABMS member board certification and Maintenance of Certification (MoC®)

Recognizes the educational effort associated with successfully completing an ABMS board certification process.

Documentation: a copy of the initial certificate, MoC certificate or the specialty board notification letter.

Credit assignment: twenty-five (25) AMA PRA Category 1 Credits; or

AMA PRA: a three-year AMA PRA certificate.

E. Accreditation Council for Graduate Medical Education accredited education

Recognizes the educational effort associated with successful participation in an Accreditation Council for Graduate Medical Education (ACGME) accredited residency or fellowship program.

Documentation: confirmed through the national graduate medical education census.

Credit assignment: twenty (20) AMA PRA Category 1 Credits per year (up to three years); or

AMA PRA: a one, two or three-year AMA PRA certificate; each year of completed training is accepted for one year of the AMA PRA (up to three years).

F. Independent learning

The AMA may award AMA PRA Category 1 Credit in recognition of exceptional learning experiences that physicians pursue independently of an accredited provider. Physicians seeking credit from the AMA for an independent learning activity must obtain approval well in advance. Proposals (send to CPPD) must define the educational need, learning objectives, content and learning methodology, timelines, and evaluation mechanism. Any faculty or educational institution involvement should be identified.

At the project’s conclusion, the physician learner is expected to submit a final report that includes the actual time spent on the project. Based the work and results captured by this report, the AMA will calculate and award AMA PRA Category 1 Credit. The AMA will approve projects at its discretion.
G. International Conference Recognition program

In 1990, the AMA House of Delegates asked the AMA to initiate a process to recognize international congresses that present quality educational opportunities for U.S. physicians. In response, the International Conference Recognition (ICR) program was instituted. Through the ICR program, the AMA approves a small number of events each year, providing physicians with an opportunity to claim AMA PRA Category 1 Credit for their participation at these international conferences (see back page for further information).

H. AMA PRA Category 2 Credit™ activities

AMA PRA Category 2 Credit is defined as all educational activities not designated for Category 1 that: comply with the AMA definition of CME; comply with the AMA ethical opinions on Gifts to Physicians from Industry and on Ethical Issues in CME (i.e., are not promotional); and a physician finds to be a worthwhile learning experience related to his/her practice. Accredited providers do not designate activities for AMA PRA Category 2 Credit.

Physicians may claim AMA PRA Category 2 Credit for such learning activities as: teaching residents, medical students or other health professionals; unstructured online searching and learning (i.e., not Internet PoC); reading authoritative medical literature; or participating in live activities not designated for AMA PRA Category 1 Credit. Other examples include:

- Consultation with peers and medical experts
- Small group discussions
- Self assessment activities
- Medical writing
- Preceptorships
- Research

In each case, the physician individually determines the educational value of those AMA PRA Category 2 activities in which he or she participates.

Documentation: self documented; physicians should self claim credit for appropriate AMA PRA Category 2 activities on their AMA PRA certificate application form.

Credit assignment: as with live activities, physicians may self claim one (1) AMA PRA Category 2 Credit for each 60-minute hour engaged in the learning activity. Physicians may claim credit in 15 minute, or 0.25 credit increments, and round to the nearest quarter hour.
II. The AMA Physician’s Recognition Award certificate

A. Professional recognition of accomplishments in CME

Since 1968, patients and colleagues have recognized the AMA PRA certificate as evidence of a physician’s commitment to keeping current with the advances in biomedical science, as well as other developments in medicine.

The AMA encourages all physicians to become involved in a program that honors them as professionals who participate in CME in order to better meet the expectations and needs of their patients.

In addition, the AMA PRA certificate is widely accepted by multiple entities as proof of participation in CME. Most state licensing boards and hospitals will accept the AMA PRA certificate as proof of having met CME requirements.

B. AMA PRA certificate requirements

Eligibility

Physicians may apply for the PRA if they hold a valid and current license issued by one of the United States’, Canadian, or Mexican licensing jurisdictions or are engaged in an ACGME accredited residency training program in the United States.

Physicians participating in certified CME are expected to comply with AMA ethical requirements, such as choosing activities for their educational value and not for any unrelated amenities (see page 3).

Credit requirements for the AMA PRA

In order to apply for an AMA PRA certificate, physicians must earn AMA PRA Category 1 Credit, either through provider designated activities (e.g., conferences, enduring materials, etc.) or from the AMA for direct credit activities (e.g., journal authorship, poster presentations, etc.).

In contrast, Category 2 activities are not designated by accredited providers and do not require documentation. Category 2 activities represent the range of learning an engaged physician undertakes in support of his or her formal educational efforts (e.g., research, consulting with colleagues, community based teaching, etc.). These activities serve as an important piece of the educational framework by which individual physicians prepare to maintain, change and/or improve the care they provide their patients.
The AMA offers one, two and three-year AMA PRA certificates (see back cover for links and contact information to obtain an application). The requirements for each are as follows:

**One-year certificate**
- Twenty (20) Category 1 credits and thirty (30) Category 1 or 2 credits (50 credits total)
- Or one year ACGME residency training

**Two-year certificate**
- Forty (40) Category 1 credits and sixty (60) Category 1 or 2 credits (100 credits total)
- Or two years ACGME residency training

**Three-year certificate**
- Sixty (60) Category 1 credits and ninety (90) Category 1 or 2 credits (150 credits total)
- Or three years ACGME residency training
- Or ABMS board certificate or MoC

In recognition of those physicians who consistently participate in CME at a higher level, the AMA PRA certificate with commendation is also available. Requirements are:

**One-year certificate with commendation**: ninety (90) credits total
- Sixty (60) credits Category 1
- Thirty (30) credits Category 1 or 2

**Two-year certificate with commendation**: one hundred and eighty (180) credits
- One hundred and twenty (120) credits Category 1
- Sixty (60) credits Category 1 or 2

**Three-year certificate with commendation**: two hundred and seventy (270) credits
- One hundred and eighty (180) credits Category 1
- Ninety (90) credits Category 1 or 2
The AMA requires that at least half of the credit applied toward the AMA PRA be within the physician's specialty or area of practice. Ethics, office management and physician-patient communication can serve as appropriate topics for CME, but are not considered specialty-specific education.

**Award duration**

The AMA PRA certificate is a prospective award, thus acknowledging past involvement in CME while, more importantly, signaling a commitment to ongoing participation in CME. The AMA awards the certificate based on the prior one to three years of CME attainment. The AMA PRA functions on the assumption that a physician will continue to participate in certified CME activities during the time their AMA PRA is current and valid. In this manner, physicians can both stay current with the field and document CME participation on their next AMA PRA application cycle.

The certificate's term begins on the date the physician reports on the application, expiring on the first day of the following month, one, two or three years in the future. For example, a physician applying for a three-year certificate on May 1, 2006, will be issued a certificate valid until May 1, 2009. If needed, physicians can request specific expiration dates with their AMA PRA applications.

**Activity-specific credit limits for the AMA PRA**

For the purpose of applying for an AMA PRA certificate, certain activities include specific limits on the amount of credit a physician can claim, per year, toward their AMA PRA:

**Teaching at Category 1 live activities:** Limit of ten (10) AMA PRA Category 1 Credits per year.

**Internet PoC:** Limit of twenty (20) AMA PRA Category 1 Credits per year.

**Manuscript review:** Limit of five (5) reviews—or fifteen (15) AMA PRA Category 1 Credits per year.

**Poster presentation:** Limit of one (1) poster—or five (5) AMA PRA Category 1 Credits per year.

**Publishing articles:** Limit of one (1) article—or ten (10) AMA PRA Category 1 Credits per year.
Transferable credit

Physicians may claim and identify on their AMA PRA application, credit earned within the following CME credit systems:

- American Academy of Family Physicians’ prescribed credit; claim on a one-to-one basis for AMA PRA Category 1 Credit
- American College of Obstetricians and Gynecologists’ formal learning cognates; claim on a one-to-one basis for AMA PRA Category 1 Credit

III. AMA PRA certificate reciprocity relationships

A. Reciprocity with professional organizations

An AMA PRA certificate can be issued to any physician who has met the certificate or CME requirements of the following organizations:

National professional organizations
National Medical Association (NMA)

National medical specialty societies
American Academy of Dermatology (AAD)
American Academy of Family Physicians (AAFP)
American Academy of Ophthalmology (AAO)
American Academy of Otolaryngology Head and Neck Surgery (AAOHNS)
American Academy of Pediatrics (AAP)
American College of Emergency Physicians (ACEP)
American College of Obstetricians and Gynecologists (ACOG)
American College of Preventive Medicine (ACPM)
American Psychiatric Association (APA)
American Society of Anesthesiologists (ASA)
College of American Pathologists (CAP)
American Society of Plastic Surgeons (ASPS)
American Urological Association Education and Research (AUA ER)
State medical societies
California Medical Association (CMA)
Medical Society of New Jersey (MSNJ)
Medical Society of Virginia (MSV)

Physicians may use correspondence that confirms they have met any of these organizations’ certificate (or CME) requirements to apply for their AMA PRA. Unless otherwise arranged by the physician or their member organization:

• These reciprocities function on a three-year cycle.
• The AMA PRA certificate will share the expiration date of the physician’s source document or certificate.

B. Jurisdictions that accept the AMA PRA certificate for licensing purposes

Although all U.S. jurisdictions requiring CME recognize the AMA PRA Category 1 Credit system, at this time the following state licensure boards will also accept a current and valid AMA PRA certificate as documentation of having met their CME requirements:

Alaska          Maine          Pennsylvania
Arkansas        Maryland       Puerto Rico
California      Massachusetts  Rhode Island
Delaware        Minnesota      Tennessee
Florida         Nebraska       Texas
Guam            Nevada         Utah
Hawaii          New Hampshire  Virgin Islands
Idaho           New Mexico     Washington
Illinois        North Dakota  West Virginia
Kansas          Ohio           Wisconsin
Kentucky        Oklahoma       Wyoming
States that accept an AMA approved, original AMA PRA certificate application for licensing:

Arizona
Iowa
Mississippi

For the most current information on states with CME requirements for licensure, always contact that jurisdiction directly. Contact information and additional data may be found online (www.ama-assn.org/ama1/pub/upload/mm/455/licensurerereg-06.pdf) or in the AMA’s annual publication, “State Medical Licensure Requirements and Statistics.”

C. JCAHO compliance

The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) requires that, at hospitals and health care organizations it accredits, physicians with clinical privileges document their CME. JCAHO will accept, subject to their review, correctly completed AMA PRA applications stamped “approved” by the AMA as documented physician compliance with JCAHO CME requirements. JCAHO, like the AMA PRA, requires that physicians conduct at least half of their reported CME in their specialty or area of clinical practice.

D. Disclaimer

Physicians should note that the AMA PRA does not serve as a direct measure of physician competency and should not be used for that purpose. Physician competency represents the assessment of many complex measures, of which CME participation is only one.
Principles of medical ethics

Preamble

The medical profession has long subscribed to a body of ethical state-
ments developed primarily for the benefit of the patient. As a member
of this profession, a physician must recognize responsibility to patients
first and foremost, as well as to society, to other health professionals,
and to self. The following Principles adopted by the American
Medical Association are not laws, but standards of conduct which
define the essentials of honorable behavior for the physician.

Principles of medical ethics

I. A physician shall be dedicated to providing competent medical
care, with compassion and respect for human dignity and rights.

II. A physician shall uphold the standards of professionalism, be
honest in all professional interactions, and strive to report
physicians deficient in character or competence, or engaging in
fraud or deception, to appropriate entities.

III. A physician shall respect the law and also recognize a responsi-
bility to seek changes in those requirements which are contrary
to the best interests of the patient.

IV. A physician shall respect the rights of patients, colleagues, and
other health professionals, and shall safeguard patient confi-
dences and privacy within the constraints of the law.

V. A physician shall continue to study, apply, and advance scien-
tific knowledge, maintain a commitment to medical education,
make relevant information available to patients, colleagues, and
the public, obtain consultation, and use the talents of other
health professionals when indicated.

VI. A physician shall, in the provision of appropriate patient care,
except in emergencies, be free to choose whom to serve, with
whom to associate, and the environment in which to provide
medical care.

VII. A physician shall recognize a responsibility to participate in
activities contributing to the improvement of the community
and the betterment of public health.

VIII. A physician shall, while caring for a patient, regard responsibil-
ity to the patient as paramount.

IX. A physician shall support access to medical care for all people.

Professional resources

The AMA Physician’s Recognition Award information booklet is available free online in Adobe Acrobat (PDF) format. Please visit our Web site at www.ama-assn.org/go/pra for more information about the AMA PRA and other topics of interest to the CME community.

To obtain an AMA PRA booklet, application (print or online), or for other information:
   Web: www.ama-assn.org/go/pra
   E-mail: pra@ama-assn.org
   Phone: (312) 464-4672

To obtain an application (print or online) for AMA PRA direct credit activities:
   Web: www.ama-assn.org/go/cme
   E-mail: pra@ama-assn.org
   Phone: (312) 464-5296

To order AMA PRA booklets in bulk (minimum order of 10):
   AMA Order Department
   Phone: (800) 621-8335

For questions regarding conferences sponsored by international organizations (the International Conference Recognition program):
   E-mail: cme@ama-assn.org
   Phone: (312) 464-5196

To subscribe to the CPPD Report, an AMA newsletter for the CME community, and/or our e-mail distribution list:
   E-mail: cppd@ama-assn.org
   Phone: (312) 464-4668

For more information on CEJA ethical opinions:
   Web: www.ama-assn.org/go/ceja
   Phone: (312) 464-5223

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