The Recertification Exam: Then and Now

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Since 1970, when the author sat for the first family medicine certification exam, a lot has changed — but not everything.

Nicholas Pisacano, MD, (1924-1990) was a leader in the movement to get family practice (now family medicine) recognized as a major specialty and helped establish the American Board of Family Practice in 1969. In his teaching and work, he emphasized the importance of both technical skills and interpersonal skills in medicine, and he urged family physicians to be excellent at both.

I was in practice in 1970 when family doctors were first urged to take the examination to become board certified. My initial reaction to this announcement was, “Yet another test?” I had assumed that once I graduated from medical school, tests and quizzes (and the associated apprehension) would be behind me. But I knew that as a physician I never really stopped asking myself, “Are you keeping up? Are you reading the right journals?” I worried whether I knew the necessary, most recent developments in my field and whether I was prepared for whatever patients I might see each day. This was long before apps, practice guidelines, and Internet resources were available to refresh my memory and reassure me.

When Dr. Pisacano suggested a certification exam, I decided, “Why not? I might find some peace of mind if I pass, and if I don’t it will spur me on to study harder.” I joined the first group of doctors who took the test.

On test day, we had no idea what to expect. About 20 doctors assembled in an old classroom early in the morning: I was the only woman in the room, not unusual at that time. The first thing we noticed was that it was finger-stiffening cold in the room, and the temperature did not improve as the day wore on. We had to use pencils to mark our test sheets, but there was no pencil sharpener in the room when our pencils wore down. This was the first time I encountered scratch-out questions, which I enjoyed. They reminded me of lottery tickets, except that our prize was a correct diagnosis.

At a certain hour, the proctor told us it was time for the pathology slides. There were no blinds on the windows, so it was difficult to see the projected slides. The proctor, a resourceful gentleman, described to us what we were supposed to see, and then we drew conclusions from his descriptions.

In spite of these roadblocks, I finished on time and passed, which reassured me that my study habits were adequate and I was keeping up with the most recent developments in medicine. Family medicine was the first specialty to require regular recertification; therefore, I took and passed the exam several more times over the years, and each time the mechanics improved.

Recently, my daughter took her board recertification exam by sitting down at a computer — no pencils, no need for sharpeners, and no faded pathology slides. It occurred to me that, although a lot has changed about board exams in the past 45 years, two things remain the same: the anxiety associated with taking the exam and the relief upon finding out that you have passed.

About the Author
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