THE PHYSICIAN REENTRY INTO THE WORKFORCE PROJECT
GLOSSARY OF REENTRY TERMS

AAP Definition of Physician Reentry: Returning to professional activity/clinical practice for which one has been trained, certified or licensed after an extended period.¹

AMA Definition of Physician Reentry: A return to clinical practice in the discipline in which one has been trained or certified following an extended period of clinical inactivity not resulting from discipline or impairment; distinct from remediation or retraining.²

Assessment: A system of evaluation of professional accomplishments using defined criteria and usually including an attempt at measurement either by grading on a rough scale or by assigning numerical value. The purpose of assessment in an educational context is to make a judgment about the level of skills or knowledge, to measure improvement over time, to evaluate strengths and weaknesses, to rank students for selection or exclusion, or to motivate.³

Clinically active practice: Clinically active status is defined as any amount of direct and/or consultative patient care that has been provided in the preceding 24 months.⁴

Clinically inactive practice: No direct and/or consultative patient care that has been provided in the past 24 months.⁴

Comprehensive Osteopathic Medical Variable-Purpose Examination (COMVEX): The evaluative instrument offered by the National Board of Osteopathic Medical Examiners for osteopathic physicians who need to demonstrate application of clinical knowledge for the practice of osteopathic medicine.⁵

Continuing Medical Education (CME): 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.⁶

Continuity of care: The delivery of a ‘seamless service’ through integration, coordination and the sharing of information between different providers, including “case management” and “multidisciplinary team working.” Continuity in the experience of care relates conceptually to patients’ satisfaction with both the interpersonal aspects of care and the coordination of that care.⁷

Criterion-referenced assessment: Testing against an absolute standard such as an individual’s performance against a benchmark.³

Education: The process whereby deficiencies in physician performance identified through an assessment system are corrected.⁵

Evaluation: A process that attempts to systematically and objectively determine the relevance, effectiveness, and impact of activities in light of their objectives. Evaluation can be related to structure, process, or outcome.³
**Flextime:** A work arrangement involving flexible starting and/or ending times for the work day. Benefits to flextime may include: preserving visibility on the job, maintaining accessibility to “your” patients, arranging hours around family or personal activities, and offering extended hours in your practice.

**Formative assessment:** Testing that is part of the developmental or ongoing teaching/learning process. It should include delivery of feedback to the student.

**Formative individual evaluation:** Providing feedback to an individual (usually a learner) in order to improve that individual’s performance. This type of evaluation identifies areas for improvement and provides specific suggestions for improvement serving as an educational tool.

**Hospital credentialing:** Credentialing is the practice by which hospitals evaluate and verify the qualifications of their healthcare providers to ensure that each individual practitioner possesses the necessary qualifications to provide medical services to patients. The process of credentialing and privileging occurs after a physician has already met the state’s licensure requirements.

**Hospital privileging:** The process occurring after the practitioner has met the credentialing requirements for the hospital during which the practitioner’s expertise in a specific practice is further evaluated. The process of credentialing and privileging occurs after a physician has already met the state’s licensure requirements.

**Impaired physician:** A physician who is unable to fulfill personal or professional responsibility because of psychiatric illness, alcoholism, or drug dependency.

**Lifelong learning:** Continuous training over the course of a professional career.

**Learning plan:** A specific, multi-faceted action plan designed to facilitate a physician’s reentry into the workforce. This plan would consist, at a minimum, of Continuing Medical Education, networking, staying abreast of changes in state licensure requirements, and volunteerism. Ideally, this learning plan is developed before the physician leaves clinical practice, and is implemented, on an ongoing basis, while the physician is on his or her leave of absence. Some components of the learning plan may be dictated by the physician’s state medical board, hospital credentialing committee, and/or the practice to which he or she plans to return.

**Leave of absence:** An extended period of time, usually longer than 6 months, away from the practice of medicine.

**Locum tenens:** Most commonly referring to temporary physicians, locum tenens doctors contract with recruitment agencies to perform medical services for a healthcare organization over a certain period of time. The physician works as an independent contractor paid through the staffing agency, which is in turn paid by the healthcare facility.

**Maintenance of Certification:** In 2000, the 24 member boards of the American Board of Medical Specialties (ABMS) agreed to evolve their recertification programs to one of continuous professional development - ABMS Maintenance of Certification® (ABMS MOC®). ABMS MOC assures that the physician is committed to lifelong learning and competency in a specialty and/or subspecialty by requiring ongoing measurement of six core competencies adopted by ABMS and the Accreditation Council for Graduate Medical Education (ACGME) in 1999.
**Maintenance of Licensure:** Maintenance of Licensure is a system of continuous professional development that requires all licensed physicians to demonstrate, as a condition of license renewal, their involvement in lifelong learning that is objective, relevant to practice and improves performance over time.\(^5\)

**Maintenance of Practice:** The process undertaken by a reentry physician or other healthcare professional of actively planning ahead for reentry into clinical practice by engaging in strategic career planning prior to leaving the clinical workforce.

**Mentee:** A physician who is reentering the workforce (clinical practice) and is working under the guidance of another individual, usually another physician in the same specialty and practice, to become familiar with day-to-day routine of the practice, identify areas where additional information/education is needed, and successfully transition back into the workforce.

**Mentor:** An individual, most often a physician, who helps acclimate the reentering physician to day-to-day clinical practice by providing guidance and support.

**Mentoring:** A dynamic, reciprocal relationship in a work environment between two individuals where, often but not always, one is an advanced career incumbent and the other is a less experienced person. The relationship is aimed at fostering the development of the less experienced person.\(^12\)

**Mini-residency:** A program of medical specialty education focused on achieving the competencies necessary to practice one’s specialty without direct supervision. It is usually not as long as a full graduate medical education residency program, since the focus is only on the competencies needed by the individual reentry candidate.

**Osteopathic Continuous Certification:** The American Osteopathic Association’s Bureau of Osteopathic Specialists (AOA BOS) has mandated that each specialty certifying board implement “Osteopathic Continuous Certification” (OCC). OCC will serve as a way for board certified DOs to maintain currency and demonstrate competency in their specialty areas. The American Osteopathic Association's seven core competencies are: 1) medical knowledge, 2) patient care, 3) practice-based learning and improvement, 4) interpersonal and communication skills, 5) professionalism, 6) systems-based practice, and 7) osteopathic philosophy and osteopathic manipulative medicine.\(^5\)

**Part-time/reduced-hours practice:** Work arrangements that involve a shortened work day, a shortened work week, or job sharing that results in working in working fewer hours.\(^8\)

**Physician Assistant Certification Maintenance Process:** The National Commission on Certification of Physician Assistants includes long-standing requirements for continuing medical education and regular retesting, which offers new self-assessment activities and performance improvement activities.\(^5\)

**Physician reentry program:** Structured curriculum and clinical experience which prepares physicians to return to clinical practice following an extended period of clinical inactivity.\(^2,5\)

**Physician reentry program system:** Provides a way of organizing and planning physician reentry programs.\(^2,5\)
Physician retraining: The process of updating one’s skills or learning the necessary skills to move into a new clinical area.²,³

Practice impact: Determine the overall effect of the physician’s departure on the practice.

Preceptor: A practicing physician who gives personal instruction, training, and supervision to a medical student, young physician, or physician who is reentering clinical practice after an extended absence.¹³

Preceptorship: A period of practical experience and training for a physician reentering the workforce that is supervised by an expert or specialist in a particular field.¹³

Remediation: The process whereby deficiencies in physician performance identified through an assessment system are corrected.²

Shadowing: Following a physician while he or she performs day-to-day duties. This is an observational experience only. It is intended to serve as a reminder or refresher for the reentry physician regarding routine activities.

Simulation: A method used in health care education to replace or amplify real patient experiences with scenarios designed to replicate real health encounters, using lifelike mannequins, physical models, standardized patients, or computers.¹⁴

Special Purpose Examination (SPEX): The SPEX is a multiple-choice examination of current knowledge requisite for the general, undifferentiated practice of medicine and is used by medical boards to reexamine a licensed or previously licensed physician’s ongoing level of basic medical knowledge.¹⁵

State member boards: State medical and osteopathic licensing boards that oversee the activities of the physicians licensed in the states, District of Columbia and U.S. Territories, assuring that a high standard of practice by the physicians is maintained.¹⁶

Summative assessment: Testing which often occurs at the end of a term or course, used primarily to provide information about how much the student has learned and how well the course was taught.⁹

Summative individual evaluation: measures whether specific objectives were accomplished by an individual in order to place a value on the performance of that individual. It may certify competency or lack of competency in performance in a particular area.

Tail coverage: A supplemental policy to claims-made liability insurance that provides coverage for any incident that occurs while the claims-made insurance was in effect although the claim was filed after the insurer-policyholder relationship was terminated.¹⁷

Telecommuting: Working at home during part of your scheduled hours of work.⁸

Telemedicine: The practice of medicine using electronic communication, information technology or other means between a physician in one location and a patient in another location with or without an intervening health care provider.¹⁸

Sources
¹The Physician Reentry into the Workforce Project webpage. http://physician-reentry.org/


American Board of Medical Specialties. Standards for ABMS MOC® (PARTS 1-4) Program. Approved March 16, 2009


American Medical Association House of Delegates and the AMA Council on Medical Education. HOD policy #300.988.


Adapted from a presentation made by Deborah Sowell, MD, FAAP 2006


Adapted from the definition of a preceptor in the Merriam Webster Dictionary: http://www.merriam-webster.com/dictionary/preceptor


Federation of State Medical Boards. Special Purpose Examination (SPEX)®. http://www.fsmb.org/plas_spex.html


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