Opinion

Dr. Wink's Forty Winks: A Parable for Our Time?

In the 21st century, our attention spans are said to be getting ever shorter, as we gobble our news in short bites and our text messages in bytes shorter still. But even in the 19th century, readers were drawn to short stories, like those written by my role model Washington Irving. One of them bears retelling in an updated, even shorter version relevant to ophthalmology.

Rip Wink, MD, was a diplomate of the American Board of Ophthalmology (ABO). He had read in previous Opinions about Maintenance of Certification, required of many of his younger colleagues, but he had a lifetime certificate, so he didn't think it would affect him. He certainly was not about to sign up for a recertification process voluntarily! It was bad enough that he had to submit proof he'd attended 30 hours of continuing medical education annually to renew his medical license. But reading Opinions had made him sleepy, so he took a nap.

In the three years he was asleep, the Federation of State Medical Boards (FSMB) began implementing a new requirement for renewing and maintaining a license. It was a great surprise when he awoke to discover that his state medical board was mandating a new kind of continuing medical education. His state board was one of the first among the 69 independent boards (which are charged with assuring the competence of physicians) to imple-

ment the new rules that will eventually affect all jurisdictions and all medical practitioners.

Dr. Wink learned that there are three components to maintenance of licensure (MOL). The first is the licensee's self-directed, but objectively verifiable, learning activity. The second is an external knowledge and skills assessment to guide practice improvement activities. The third is the use of comparative data to assess the physician's patient outcomes and then applying that information to improve quality of care. Alas, on pinching himself—and after checking the FSMB website (www.fsmb.org/mol. html)—Dr. Wink realized this was not just a bad dream. He was sure that his state medical board would devise MOL components applicable to general medicine and not to ophthalmology. But then he discovered that the FSMB allows any physician participating in a specialty board Maintenance of Certification program to automatically fulfill all three components of MOL.

He vainly dug through his three years of accumulated correspondence, attempting to find the latest ABO newsletter describing what it calls MOC 2.0, and then found the information online at www.abop.org. At least it offered a reasonably easy path to MOL, and it was designed to be ophthalmology friendly.

He was mad as hell, though, that he wasn't going to be able to coast on his

lifetime ABO certificate. His lifetime certificate wasn't enough to satisfy the state medical board, which wanted MOC participation. He was steaming that somebody out there had "let this happen," and he was tempted to take it out on the leaders of all of the ophthalmology organizations he knew. But it turned out that they didn't make the rules (the FSMB did), and the ABO and the Academy were just trying to assist him in maintaining his license with as little disruption to him and his patients as possible.

Dr. Wink posted his tale on the *Eye-Net* blog (accessible via www.eyenet magazine.org) so you can supply a moral to the story, if you have one to add.



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