

**2012 AMERICAN MEDICAL GROUP ASSOCIATION
MEDICAL GROUP COMPENSATION AND FINANCIAL SURVEY**

Conducted by
Sullivan, Cotter and Associates, Inc.

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Minneapolis, Minnesota 55402

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Instructions and General Information

Report data effective as of **January 1, 2012**.
Date for Issuance of Final Report: June 1, 2012

Survey Period: Calendar year 2011 or most recently completed fiscal year
Return the completed survey questionnaire by **March 31, 2012** to:

Ms. Sara Loos, Consultant
Sullivan, Cotter and Associates, Inc.
(612) 294-3648
saraloos@sullivancotter.com

You can download an electronic version of the questionnaire from AMGA's Web site, www.amga.org. If you have other questions concerning the survey, please contact Sara Loos at (612) 294-3648 or by email at saraloos@sullivancotter.com or Brad Vaudrey at (612) 294-3644 or bradvaudrey@sullivancotter.com.

This survey questionnaire is divided into five sections.

- I. **INDIVIDUAL PHYSICIAN COMPENSATION AND PRODUCTIVITY DATA** for provider data from January through December 2011, or your medical group's most recent fiscal year.
- II. **STARTING PROVIDER SALARIES** for positions filled from January through December 2011.
- III. **ADMINISTRATIVE POSITION SALARIES** for selected administrative positions as of December 2011, or your medical group's most recent fiscal year-end.
- IV. **GROUP AND COMPENSATION PROFILE** relates to your compensation plan, revenue mix and general information about your medical group.
- V. **FINANCIAL PROFILE** relates to your financial and staffing data. This section has four parts: Financial Operations Profile, Financial Profile by Specialty, Organizational Profit/Loss Statement and Administrative Operations Profile.

As a survey participant, you will receive a hard copy survey report book. The hard copy report contains national and regional summary tables of Clinical Compensation, Gross Productivity, Work RVUs and productivity ratios for Physician specialties and Advanced Practice Clinicians. It also contains national summary tables of Net Collections, Patient Visits, and Fringe Benefits for Physician specialties. Additionally, the hard copy report contains new hire base compensation data and base, bonus and total compensation for administrative positions. You may also elect to purchase an online version of the material for an additional cost of \$900 through AMGA's website.

Sullivan, Cotter and Associates, Inc. (SullivanCotter) gathers data pursuant to this questionnaire for purposes described on the SullivanCotter website. SullivanCotter keeps the information provided in this questionnaire confidential, as described herein. The data you provide is reported in SullivanCotter's surveys in the form of aggregated summary statistics. No organization's data is listed or reported in any identifiable way. The survey report is based on data provided by survey participants which is more than three months old; and each disseminated statistic is based on data from at least five organizations. Furthermore, the information is sufficiently aggregated so that no organization's data can be identified in the survey report.

In addition, data gathered for the survey report described above may also be used by SullivanCotter for research purposes, including but not limited to: publication of national reports, customized reports, and to supplement other SullivanCotter surveys and reports. In such a case, individual data may be used or disclosed in a non-summary form; however, in such instances, the data will be purged of any identifying information and no non-aggregated data will be reported. For proper attribution, your organization will be included as a listed participant in any survey or report in which your data is included.

OVERALL INSTRUCTIONS

1. Please use the specialty code listing found in this document. If you have any questions, feel free to contact Sullivan, Cotter and Associates, Inc. (SullivanCotter).
2. **Do not** gross up partial FTE or salaries, productivity, patient visits/consultations, or RBRVS units to annualized figures. This will be done by SullivanCotter.
3. Please fill out as much of the survey as possible in order to have the highest quality of information possible. We realize that there may be portions you may not be able to answer.
4. All returned surveys will be retained in a confidential file by **SullivanCotter**. Only summarized information from the aggregate database will be reported.
5. An electronic Excel spreadsheet file is available to input your clinic's data, **2012 AMGA Survey.XLS**. You may open the file and save it to your hard drive. The file contains macros that are not harmful to your system.

Section I: INDIVIDUAL PHYSICIAN COMPENSATION AND PRODUCTIVITY DATA

Column 1 **Physician ID** — This code is used to identify each physician from year to year. Please provide a code that identifies the physician only to your organization. **Do not use the physician's full SSN.**

Column 2 **Specialty Code** — The specialty code for each physician related to the area of medicine they practice. Refer to the specialty code listing that follows these instructions. Please remember to review these physician assignments to ensure an accurate submission. See page 17 of these instructions for a complete list of specialty codes. **A specialty listing can also be found in the electronic data submission file.**

Column 3 **FTE** — The full-time equivalent percentage of the individual physician. Only report physicians with a 0.5 clinical FTE or greater. **EXCEPTION:** All departmental chairs should be reported regardless of their clinical FTE status and identified in the "Department Chair" column. See definition of Department Chair in Column 16.

A full-time clinical (1.0 FTE) is defined as a physician fulfilling the minimum requirements of your organization to be classified as a full-time patient care employee (i.e., 36 hours of patient care activities per week). Many physicians work above this minimum level, but the reported FTE will not exceed 1.0. Other adjustment to this FTE status will not be common but include:

- Physicians receiving more than four weeks of short-term disability, maternity, sabbatical, military leave, etc. Vacation, holidays, allowed sick days and other normal benefits for time off will not affect the FTE status.
- A physician working in an operational administrative role that adjusts the clinical FTE status to below 1.0. This adjustment is intended for physician administrators with organizational or possibly section wide administrative responsibilities and who typically have a separate salary identified. No adjustments are to be made for department chairs or for serving on committees that do not materially affect clinical expectations. For example: A physician administrator who is 50 percent clinical and 50 percent administrative would be 0.5 clinical FTE. See Column 4 for reporting salary data that is attributed to clinical activity.
- A physician performing specific research activities funded separately by the medical practice that adjust the clinical FTE status to below 1.0. This physician has clear, separate material research responsibilities outside of his/her clinical expectations. See Column 4 for reporting salary data that is attributed to clinical activity.
- A physician performing specific administrative teaching activities, such as tutoring and/or lecturing not performed during patient care activities that adjust the clinical FTE status to below 1.0. These activities are funded separately by the medical practice. These adjustments are not for "typical" supervision and resident training while performing patient care activities. See Column 4 for reporting salary data that is attributed to clinical activity.

Keep in mind there are many organizations that inherently have less intensive administrative committee work, research, and/or teaching responsibilities blended in to their physician's role and salary while still expecting 1.0 clinical performance. Our intent is not to try to break out such fine detail but to capture the clear, material instances for certain individual physicians. It is our expectation that participants report FTEs in the same manner as in prior years.

Column 4 **Total Direct Compensation** — The total annual clinical compensation of the individual physician including base and variable compensation plus all voluntary salary reductions. Examples of clinical compensation would include but are not limited to: compensation paid as salary or production-based compensation plans, any type of additional bonuses or incentives, clinically related medical directorships, call coverage, ancillary or midlevel supervision stipends, other.

Excluded are any fringe benefits and employer payments to any type of retirement, pension, SERP or tax-deferred profit sharing plans.

Although the reported compensation should be all-inclusive for most physicians, participants should also exclude instances of:

- Specific compensation for administrative physicians whose FTE status was adjusted as defined in "Column 3: FTE." The excluded amount should relate to the amount of the FTE adjustment.

- Specific compensation for research physicians whose FTE status was adjusted as defined in “Column 3: FTE.” The excluded amount should relate to the amount of the FTE adjustment.
- Specific compensation for teaching physicians whose FTE status was adjusted as defined in “Column 3: FTE.” The excluded amount should relate to the amount of the FTE adjustment.
- Any signing bonuses recognized from a prior-year hire.
- A specific instance where the physician performs “moonlighting” duties not related to his/her specialty/department, is outside of normal clinical hours, and is compensated outside of the medical group’s compensation plan. For example, a family practitioner works nights or weekends in the Urgent Care at a hospital for an hourly rate, and production is not captured. There should be no FTE adjustment because this is done outside of his/her practice. Please feel free to call McGladrey with any questions.

Do not annualize any physician reported as < 1.0 *clinical* FTE.

Note of Purpose for columns 5-9: Interest in breaking out various compensation components came from several participating organizations. **It is important that all clinics report data in Column 4 as they have in the past.** Columns 5 -9 are optional and the data will be reviewed once results are analyzed.

Column 5 **Call Pay (Optional)** – If your organization compensates for call as a separate component, provide the amount paid here. This would include any call duties, standard or “abnormal call”. This compensation is not separate from the clinical FTE as reported in Column 3 **and is included in the Column 4 Total Compensation amount.** Column 5 is optional and the data will be reviewed once the results are analyzed.

Column 6 **Medical Directorship Pay (Optional)** – All compensation paid for Medical Directorship duties. Medical directorship would include performing clinical responsibilities for other areas such as ASCs, Home Care services, Hospice, hospital service lines (labs, imaging centers, etc.) and Long-Term Care facilities. This compensation is not separate from the clinical FTE as reported in Column 3 **and is included in the Column 4 Total Compensation amount.** Medical Directorship duties could include: attending meetings, clinical peer reviews, monitoring quality, technical and/or supervisory oversight, strategic development, and clinical patient complaints. Column 6 is optional and the data will be reviewed once results are analyzed

Column 7 **Supervisory Pay (Optional)** – If your organization compensates for Supervisory duties as a separate component, provide the amount paid here. This could include flat stipends, a portion of supervisee productivity, or production net of cost methods. This compensation is separate from the supervision of APCs (Column 8), Medical Directorships (Column 6) or Chair Compensation (Column 19). This compensation is not separate from the clinical FTE as reported in Column 3 **and is included in the Column 4 Total Compensation amount.** Column 7 is optional and the data will be reviewed once we analyze the results.

Column 8 **APC Supervision Pay (Optional)** – If your organization compensates for APC Supervisory duties as a separate component, provide the amount paid here. This could include flat stipends, a portion of APC productivity, or production net of cost methods. This compensation is not separate from the clinical FTE as reported in Column 3 **and is included in the Column 4 Total Compensation amount.** Column 8 is optional and the data will be reviewed once we analyze the results.

Column 9 **Non-CPT Code Patient Care Compensation (Optional)** — Report any other amounts that your organization pays for nonbillable patient care services. Examples are: stipends for travel, contract compensation for occupational health services, etc. Many organizations are now incorporating a formula-based compensation system and would like to know what compensation amount included in Column 4 is not attributed directly to billable, patient care activities (CPT codes). **This should be included in the Column 4: Total Direct Compensation amount.** Most organizations with a salary-based system will not be able to break out the data for this column.

Column 10 **Fringe Benefits** — This includes employer share of FICA, payroll and unemployment taxes; health, disability, life and workers’ compensation insurance; dues and memberships to professional organizations; professional development; state and local license fees; and employer payment to defined benefit and contribution, 401(k), 403(b) and unqualified retirement plans. Malpractice liability insurance is excluded.

Column 11 **Gross Charges** — The total charges reported for services produced by the physician before such charges are reduced by courtesy allowances, employee discounts, or non-collected accounts. Total charges are defined as the full dollar value, at the medical group's established non-discounted rates, for services provided for all patients. Gross productivity should include the medical group's full, non-discounted charges. Medicare charges should also be grossed up and *not* reported at the allowable charge. **These charges are professional activity only and thus should exclude retail income (e.g. optical, pharmacy, etc.), drugs, vaccines, etc. Productivity by various categories of physician extenders, such as nurse practitioners, nurse midwives, CRNAs, etc., should also be excluded from the data.** Charges should not include credits for the technical component of ancillary services. **Technical procedures supervised but not performed by the physician should be excluded.** Charges for codes with modifiers should be adjusted to reflect the modified amount. Report physicians with at least a 0.5 *clinical* FTE at their actual production amount. Guidelines for specific specialties are included below.

Allergy	Do not include antigen billings for the following CPT codes: 95144, 95145, 95146, 95147, 95148, 95149, 95165, and 95170.
Anesthesiology	Do not include CRNA only performed activity. Production from cases performed as a team should be reported as 50% credit to the physician.
Audiology	Do not include hearing aid sales.
Cardiology	Do not include technical component fees or technical components of global fees for EKGs GXTs, Echos, etc.
GI Medicine	Do not include technical component fees.
Medical Oncology	Do not include billings for drugs.
Neurology	Do not include technical component fees or technical components of global fees for EEGs, EMGs, or sleep studies.
OB/Gyn	Do not include technical component fees or technical components of global fees for ultrasound tests.
Optometry/ Ophthalmology	Do not include eyewear / contact sales.
Otolaryngology	Do not include production related to audiology services.
Pathology	Do not include technical component fees or technical components of global fees for pathology exams.
Pulmonary Disease	Do not include technical component fees or technical components of global fees for pulmonary tests.
Radiology	Do not include technical component fees or technical components of global fees for radiological exams.
Radiation Oncology	Do not include technical component fees or technical components of global fees for oncology services.

Column 12 **Collected Charges** — Indicate the dollar amount collected of gross charges as defined above. This will be net of contractual arrangements, discounts and bad debts.

Column 13 **Patient Visits** — The total number of patient visits during the calendar or most recent fiscal year. Patient visits are recorded as a face-to-face patient encounter. For surgical/anesthesia procedures, record the case as one visit and not the number of procedures performed. For global codes, such as deliveries, a visit should be recorded for each patient encounter in the global code. In the event that a patient visits two or more separate departments during the day and sees a physician in each department, this is recorded as a patient visit at each department. If a patient has only an ancillary service, as ordered by a physician, but has no personal physician contact, this should not be recorded as a physician patient visit (examples would be lab tests, EKGs, EEGs, injections, etc.). If the patient was seen only by a non-physician provider or technician, no visit should be recorded. Multiple visits by a single patient to a single physician during the same day are counted only as one visit. If your organization cannot exclude these types of visits, then please exclude the visit information. Report physicians with at least a 0.5 FTE at their actual visit/consultation amount.

Column 14 **Work RVUs: Resource Based Relative Value Scale (RBRVS) Units** — Report calculated work relative value units (RVUs), as measured by the RBRVS, not weighted by a conversion factor attributed to ambulatory care, inpatient care, and other professional services performed by each physician in the medical group using the 2011 Centers for Medicare and Medicaid Services (CMS) scale. A work relative value unit is a non-monetary unit of measure that indicates the *professional* value of services provided by a physician or allied health care professional. Report full-time equivalent (FTE) physicians with at least a 0.5 *clinical* FTE at their actual RVU amount. In order to make your work RVUs more compatible, all code frequencies with the modifiers described below should be adjusted by the indicated percentage. For

example, a modifier of 80 (99210-80) indicates that the procedure was recorded as a surgery assist and therefore the department only received approximately 16.0% of the original RVU value. For Occupational Health physicians performing corporate or contracted services, either report RVU production for these services or indicate that they cannot be reported. If multiple modifiers are used, report work RVUs calculated using multiple modifiers.

For Anesthesiologists, please report ASA values in this column as opposed to RVUs. The ASA values should include base units and time component.

Important Note Regarding Modifier 50: SullivanCotter requests participants adjust volume of CPT codes based on any modifiers attached to the individual codes. There is a special circumstance with modifier 50. Medicare reimburses the code with the modifier at 150%. Many other payers reimburse by a two-code combination: one code without the modifier at 100%, another code with the modifier at 50%. When reporting bilateral data, please adjust the Medicare volume appropriately to reflect proper volume (i.e. multiplying Medicare volume by 3).

Modifier	Brief Descriptions	% Adjusted	
22	Unusual Procedural Services		125.0%
50	Bilateral	50.0%	100.0%
51	Multiple		50.0%
52	Reduced Values		50.0%
53	Discontinued Procedure		50.0%
54	Surgical Care Only		70.0%
55	Post-op Only		20.0%
56	Pre-op Only		10.0%
62	Two Surgeons		62.5%
74	Discontinued ASC Procedure		50.0%
76	Repeat Procedure		70.0%
78	Return to OR During Post-op		70.0%
80	Assistant Surgeon		16.0%
81	Minimum Surgery Assist		16.0%
82	Assistant Surgeon — no resident available		16.0%
AS	Surgery Assist		16.0%
TC	Technical Component		0.0%

Column 15 **Total RVUs** — Total RVUs is the work RVU (defined above) with the addition of the values assigned for malpractice expense (MP) and practice expense (PE) as stipulated in last year's Centers for Medicare & Medicaid Services (CMS) scale. Report total RVUs for the professional medical and surgical procedures performed by the provider, excluding the TC and ancillary values. Report either the facility or nonfacility rates that were determined for each procedure in your system.

Column 16 **Department Chair** — Enter "Y" or "N" to represent yes or no regarding whether the staff member is a department chair. Department Chair shall include only the staff member who is considered the Chair of the Department for each specialty. Within large departments, there may be more than one identified Department Chair. Department Chairs are responsible for the financial and operating results achieved by the department. Do not include Section Heads or any other positions that have broader level responsibilities and that may oversee an entire set of departments or a set of specialties. Division or Section Chair can be reported in the Administrative Section III position #5185.

Column 17 **Department Chair Compensation** – For Department Chairs, as designated in column 16, please indicate the compensation or stipend amount paid to that physician for performing Department Chair duties. This amount should be included in the Total Direct Compensation number reported in column 4.

Column 18 **Department Chair Administrative FTE** - For Department Chairs, please indicate the administrative FTE attributed to those duties

Column 19 **Physician's Years in Specialty** — The total number of years the physician has been working in that particular specialty, beginning at the time the physician completed the latter of the residency or fellowship.

Column 20 **Date of Hire** — The date of hire for the physician.

Column 21 **Physician's Age** — The age of the physician.

Section II: STARTING PROVIDER SALARIES

In Section II, indicate the starting salaries for the physicians hired in 2011. New residents have recently completed their residency and are considered new hires. Experienced physicians have worked in the medical field at another facility and became employed by your facility in 2011. This should be an annualized salary for 2011 or the most recent fiscal year. Report only those physicians that are Board-certified or Board-eligible.

Column 1 **Specialty Code** — The specialty code for each physician related to the area of medicine he/she practices. Please remember to review these physician assignments to ensure an accurate submission. (See the Specialty Listing section of these instructions for a complete list of specialty codes).

Column 2 **Experienced Starting Salary** — Indicate the starting salary for the experienced physician hire. Experienced physicians have worked in the medical field at another facility for at least three years and have been recently employed by your facility.

Column 3 **New Resident Starting Salary** — Indicate the starting salary for the new resident hire. New residents have just completed their residency and are considered new hires.

Column 4 **Retaining/Signing Bonus** — These incentives are the “norm” for today’s recruiting tools. Report the total amount of the bonus each new hire was awarded. If the amount is awarded based over a number of years, report the aggregate amount to be paid over the life of the arrangement. If the Retaining/Signing Bonus is in the form of a forgivable loan, please do not include the interest being forgiven in your data reported.

Section III: ADMINISTRATIVE AND PHYSICIAN LEADERSHIP COMPENSATION

Reported here in Section III will be the salary and bonus data for administrative and physician leadership staff in 2011. A listing of the positions included in this survey can be found in the survey tool and on page 17 of these instructions.

- Column 1 **Position Number** - Enter the position number associated with the survey position. If you are reporting more than one of these positions, please insert a row and include the position number and title. .
- Column 2 **Position Title** – This is the position title that corresponds to the Position Number listed in column 1. If you are reporting more than one of these positions, please insert a row and include the position number and title. .
- Column 3 **Incumbent ID** - This code is used to identify each incumbent from year to year. Please provide a code that identifies the incumbent only to your organization. Do not use the incumbent's full SSN.
- Column 4 **Base Salary** — Enter the annual base compensation for the incumbent including any base salary deferred through election. Please exclude anticipated cash distributions or deferred compensation based on prior-year performance, rewards or incentives. (Base pay does not include payments made under the normal retirement, benefits, pension or profit sharing plans.) Use rates in effect on January 1, 2011, and report data in annual, whole dollars (e.g., \$25,568).
- Column 5 **Total Salary** - The total combined salary of Column 4 + Column 7.
- Column 6 **Annual Short-Term Bonus Eligible (Y/N)** - Is this position short-term (one year or less) bonus eligible? Indicate Y or N
- Column 7 **Annual Short-Term Incentive/Bonus Amount** - Identify the bonus amount received in the most recently completed fiscal or calendar year.
- Column 8 **If Bonus eligible, what are the non-productivity measures tied to bonus pay?** – If this position is bonus eligible and there are non-productivity measures tied to this position. For example, patient satisfaction, access, quality/clinical outcomes.
- Column 9 **Long-Term Incentive Eligible (Y/N)** - Is this position long-term (greater than one year) bonus eligible? Indicate Y or N
- Column 10 **Long-Term Target Maximum as a % of Base** - Enter the maximum long-term incentive payout the incumbent is eligible to receive as a percentage of base salary
- Column 11 **Long-Term Payout as a % of Base** - Enter the incumbent's actual percentage payout for long-term incentives as a percentage of base salary.
- Column 12 **Fringe Benefit %** - Report the approximate percentage value of fringe benefits to base salary. Fringe benefits include the employer's share of FICA, payroll and unemployment taxes, health, disability, life and workers compensation insurance; all employer contributions to retirement plans including defined benefit and contribution plans, 401(k), 403(b), and any non-qualified retirement plans.
- Column 13 **Number of FTEs this position oversees** - Enter the total number of FTEs (physician or non-physician) this position oversees or the number that reports up to this position.
- Column 14 **Is this Incumbent an MD (Y/N)** – Indicate if the incumbent is a board certified physician with a Y or N.
- Column 15 **If Yes, what is the Physician's specialty?** – If yes, in column 14, indicate what is the physician's specialty code. The specialty code the physician is related to the area of medicine they practice. See page 17 of these instructions for a complete list of specialty codes.
- Column 16 **Clinical FTE** - For those MDs listed who still have clinical responsibilities, please indicate the clinical FTE.
- Column 17 **Administrative FTE** - Indicate the administrative FTE attributed to this position.
- Column 18 **Other FTE** - If there are additional responsibilities for this position, for example Research, Teaching, etc... please indicate that FTE here.

Column 19 **Clinic (C) or Health System (H)** - If you are a health system with both Clinical and Health System level administrative positions, please report the top positions at both the health system and the clinic. Indicate an "H" for a health system level position or a "C" for a clinic level position.

Section IV: PART A & B: GROUP AND COMPENSATION PROFILE

This section includes a series of questions to assist us in reporting demographics, parameters in your organizational structure and compensation plans. If you have specific questions regarding this section, please feel free to contact SullivanCotter

Section V: PART A — FINANCIAL OPERATIONS PROFILE

This section contains questions to assist with benchmarking the financial aspects of your organization. Below are further clarifications of certain questions, indicated by question number.

Question 1: Inclusion of Off-Site Information

If you need to include off-site information, be sure that the clinics have the ability to: (a) separate physician and midlevel FTEs and CPT codes into individual specialties and (b) separate revenue and personnel expenses into individual specialty financial statements.

Question 4: Allocation of Discounts to Specialties

Please only answer this question if your discounts to charges are currently allocated to various specialties within your practice; otherwise leave it blank.

Question 6: Net Patient Care Revenue Groupings

The aggregate of these percentages must add to 100 percent. This table is important information because SullivanCotter will be incorporating these results in the report.

Medicare — U.S. health insurance program for people ages 65 and over, disabled persons and others. Include all noncapitated programs under Medicare.

Medicare — Capitated — Include all capitated programs under Medicare.

Medicaid — A federally aided, state-operated and administered program that provides medical benefits for certain indigent or low-income persons in need of health and medical care. The benefits, program eligibility, rates of payment for providers, and methods of administering the program are determined by the state subject to federal guidelines. Include all noncapitated programs under Medicaid, such as PMAP.

Medicaid — Capitated — Include all capitated programs under Medicaid.

Other government insurance — All other health insurance that is federally funded, for example CHAMPUS.

Non-capitated contracted plans — Managed care plans which health services that are covered, are paid for on a variable reimbursement schedule. This is for HMO and PPO-type plans.

Commercial capitated plans — Nongovernment funded managed care plans under which health services are paid for on the basis of a fixed rate per eligible member without regard to the actual number or nature of services provided to each enrollee; typically paid per member per month.

Non-contracted plans (indemnity) — Standard type of health insurance where benefits are paid in a predetermined amount in the event of a covered loss. These plans are specifically not HMO or PPO-type plans.

Self-pay — The responsibility for paying the entire cost of services is assumed by the patient or guarantor of the account.

Workers compensation — A benefit provided by employers to cover health care expenses for job-related illnesses and injuries.

Section V: PART B — FINANCIAL PROFILE BY SPECIALTY

Column 1 **Specialty Code** — The specialty code for each area of medicine. (See the **Specialty Listing** section of these instructions for a complete list of specialty codes.)

Column 2 **Gross Professional Patient Care Revenue** — Professional services provided by all providers, including physicians, allied health care providers and extenders, such as nurses and medical assistants. All Medicare and commercial contract charges should be based on the clinic's undiscounted fee schedule, and adjustments should be reported in the "Discounts/adjustments" column. All capitated patient care charges should be based on the clinic's undiscounted fee schedule, and the adjustments should be reported in the "Discounts/adjustments" column. This line should not include ancillary revenue, which is listed in Column 3.

Column 3 **Gross Lab, Radiology, Imaging and Other Ancillary Revenue** — Ancillary revenue from all radiology, laboratory services, X-ray, injections, immunizations, chemotherapy and other ancillaries from the respective specialty. If your group is a health system and is unable to provide these dollars as they are collected in the hospital's system, please leave blank.

Column 4 **Discounts and Adjustments** — The difference between gross revenue and the amount actually collected from patients and/or third-party payers. Such discounts would include Medicare/Medicaid discounts, contractual adjustments, charity care, capitation contract adjustments, etc.

Full-time Equivalent (FTE) — The full-time equivalent percentage based upon the workweek requirements for the clinic. These columns should be the aggregate FTEs for each position type:

- Physician
- Advance Practice Clinicians — Non-physician providers including PA, Midwife, CSW, Audiology, etc.
- Nursing — RNs, LPNs
- Technician — All FTE expenses related to positions providing ancillary tests (lab or radiology should be excluded unless the specialty is diagnostic radiology or pathology), such as physical therapy, optical shop, oncology, and FTEs performing technical support for services such as EEGs, EKGs, sonograms, etc.
- Other Direct Patient Care Support — Anyone with direct patient care contact on a regular basis in the front office directly assigned to that department. For example, nurse aides, medical assistant, medical receptionist, medical secretary and department manager. This should not include back office support such as finance, administration, billings and collections, HR or IS. These positions are collected in Section V Part D.

Salaries — Salaries shall mean the annual compensation of the staff members, including base and variable compensation, stipends, profit sharing, and voluntary salary reductions (401(k), 403(b), MSPs, dental, etc.). Compensation should **exclude any benefits and employer payments under retirement and/or pension plans**.

Benefits — This includes employer share of FICA, payroll and unemployment taxes; health, disability, life and workers' compensation insurance; dues and memberships to professional organizations; professional development; state and local license fees; and employer payment to defined benefit and contribution, 401(k), 403(b) and nonqualified retirement plans. Exclude malpractice liability insurance.

Column 20 **Medical Supplies and Drugs** — Medical supplies, drugs, linens, uniforms/laundry and minor equipment and tools used to provide medical and surgical services to patients.

Column 21 **Professional and Liability Insurance** — General liability and total malpractice insurance expense specific to the specialty being reported.

Column 22 **Other Direct Costs** — Other direct expenses not classified above related to building and occupancy, purchased services, allocated administrative supplies, depreciation, maintenance, etc.

Section V: PART C — ORGANIZATION PROFIT/LOSS STATEMENT

Gross professional patient care revenue — Revenue associated with patient care activities, based on the practice's undiscounted fee schedule. If you have a separate fee schedule for Medicare services, please gross up the fees for all Medicare services to your clinic's undiscounted fee schedule.

- A. **Gross professional medical and surgical charges** — Professional services provided by all providers, including physicians, allied health care providers and extenders, such as nurses and medical assistants. All Medicare and commercial contract charges should be based on the clinic's undiscounted fee schedule, and adjustments should be reported in the "Discounts/adjustments" line. All capitated patient care charges should be based on the clinic's undiscounted fee schedule, and the adjustments should be reported in the "Discounts/adjustments" line. This line should not include ancillary revenue listed in line B.
- B. **Gross lab, radiology, imaging and other ancillary charges** — The gross charges for radiology, laboratory services, X-ray, injections, immunizations, chemotherapy and other drug charges. If your group is a health system and is unable to provide these dollars as they are collected in the hospital's system, please leave blank and refer to line F.
- C. **Discounts and adjustments** — The difference between gross revenue and the amount actually expected to be collected from patients and/or third-party payers. Such discounts include Medicare/Medicaid discounts, contractual adjustments, charity care, capitation contract adjustments, etc. There are subcategories for discounts and adjustments.
- D. **Net medical revenue** — The total of lines A plus B, minus line C.
- E. **Other medical revenue** — Other revenue related to physician or medical activities, such as teaching, directorships and honorariums from outside facilities, sale of nonancillary goods, etc.
- F. **Health system funding** — If you indicated that you are hospital-owned or part of a health system, provide any additional funding from the hospital or health system.
- G. **Non-medical revenue** — Revenues that are not related to patient care services. Examples would be rental, interest and investments, capital gains, etc.

Salaries — Salaries shall mean the annual compensation of the staff members, including base and variable compensation, stipends, profit sharing, and voluntary salary reductions (401(k), 403(b), MSPs, dental, etc). Compensation should **exclude any benefits and employer payments under retirement and/or pension plans.**

Position	Brief Description
H. – J. Physician	
K. – L. Advanced Practice Clinicians	Nonphysician providers including PA, Midwife, CSW, Audiology, etc.
M. Nursing	RNs, LPNs
N. Medical assistants, nurse's aides	
O. Clinical lab	All FTE expense related to the lab (i.e., technicians, secretaries, nurses, etc.)
P. Radiology & imaging	All FTE expense related to the r and i (i.e., technicians, secretaries, nurses, etc.)
Q. Technician	All FTE expenses related to positions providing ancillary tests not related to lab or radiology, such as physical therapy, optical shop, oncology, and FTEs performing technical support for services such as EEGs ,EKGs, sonograms, etc.
R. Other direct patient care support	Anyone with direct patient care contact on a regular basis in the front office directly assigned to that department, such as medical receptionist, medical secretary, department manager. This should not include back office support such as finance, administration, billings and collections, HR, IS. These positions are collected lines on S–AA.
S. Head leadership administration	All FTEs in head leadership functions not detailed in this table, i.e., CEO, CFO, CMO, etc. Positions categorized as Head Leadership in Section III.
T. Operational director	All FTEs in leadership functions not detailed in this table, i.e., Business Office Manager, Finance Director, Human Resources Director, etc. Positions categorized as Operational Directors in Section III.
U. Managed care administration	Q&A, compliance, medical education managers, contract managers, etc.

V. Patient accounting	Billings and collections (patient financial data collection, financial counseling, charge data entry, claims submission, billing, third-party payer follow-up, monthly statements, collections, calls/letters and payment posting), postings, etc.
W. General accounting	Salaries related to your general accounting office staff, including AR, AP, general ledger, payroll, bookkeeping and other positions in charge of cash flow statements or balance sheets.
X. Information systems	Salaries related to your IT department/system support.
Y. Building management	Building maintenance, housekeeping, security, parking.
Z. Medical records & support	Medical records, medial secretaries, transcribers, receptionists.
AA. Other employed support staff	
BB. Total contracted & outsourced support	Services that are provided to the clinic and do not have FTEs associated with the expense should be included here.

I., L. & CC. **Benefit expense** — This includes employer share of FICA, payroll and unemployment taxes; health, disability, life and workers' compensation insurance; dues and memberships to professional organizations; professional development; state and local license fees; employer payment to defined benefit and contribution, 401(k), 403(b) and nonqualified retirement plans. Malpractice liability insurance is excluded.

J. **Physician retirement plans expense** — Employer payments to defined benefit plans and/or nonqualified retirement plans.

DD. **Medical and surgical supplies and drug expense** — Medical supplies, drugs, linens, uniforms/laundry, and minor equipment and tools used to provide medical and surgical services to patients. **Do not include** chemotherapy, laboratory, radiology or other ancillary services supplies, as these are included in individual expense lines below.

EE. **Diagnostic radiology expense** — Medical supply costs as well as equipment costs related to generating radiology income. Include depreciation, rent, repairs and maintenance (including maintenance contracts) on specialized bio-med equipment used by radiology.

FF. **Laboratory expense** — Medical supply costs as well as equipment costs related to generating laboratory income. Include depreciation, rent, repairs, and maintenance (including maintenance contracts) on specialized bio-med equipment used by laboratory.

GG. **Other ancillary expense** — Medical supply costs of the other ancillary services and depreciation, rent, repairs, and maintenance (including maintenance contracts) on clinical equipment used by other ancillary service departments other than clinic laboratory and radiology equipment.

HH. **Building and occupancy expense** — Building depreciation, rent, building repairs, maintenance including monthly fees and contract costs, security (excluding salaries), biohazard waste removal, utilities, amortization, leasehold improvements and other occupancy expenses not recorded elsewhere.

II. **Professional and liability insurance** — General liability and malpractice insurance.

JJ. **Other insurance expense** — All other insurance expenses not part of professional insurance.

KK. **Information services expense** — Telephone, answering services, computer depreciation/amortization, computer supplies, software and electronic data processing. **Do not include** specialized bio-med equipment used by laboratory, radiology and other ancillary service departments.

LL. **Furniture and equipment expense** — Depreciation, rent, repairs and maintenance of furniture, fixtures and other office equipment. **Do not include** specialized bio-med equipment used by laboratory, radiology and other ancillary service departments.

MM. **Administrative supplies** — Office supplies, medical forms, printing, postage, books, subscriptions, delivery and courier services, copying, medical records, purchased administrative services (transcription, payroll, collection) and other administrative expenses.

NN. **Marketing expense** — Marketing, advertising, brochures, community programs and patient education not charged to the patient, etc.

- OO. **Professional fees** — All charges due to outsourced responsibilities, temporary or contracted personnel, consulting, legal, etc., such as the use of billing, transcription or housekeeping companies. These should not be legal department employees of the clinic.
- PP. **Interest expense** — Payments made for the use of borrowed funds, e.g., loan and mortgage interest, points and fees.
- QQ. **Bad debt expense** — Receivables or charges that are written off as uncollectible or assigned to a collection agency.
- RR. **Other expense** — Any expense not elsewhere classified.
- UU. **Non-medical expense** — All expenses related to the “Non-medical revenue” line, taxes, etc.

Section V: PART D — ADMINISTRATIVE OPERATIONS PROFILE

Please note that this table is divided into specific departments; other departments need not be reported.

Staff FTEs — The number of staff associated with the department.

Managers/supervisors FTEs — Include any personnel that are responsible for supervising or managing staff-level personnel. Do not include personnel that delegate tasks to administrative people only.

Salaries — The annual compensation based on the current compensation rate plus any deferred compensation, tax-deferred annuities, and any anticipated cash distributions during the next 12 months based on prior-year performance, but excluding any payments under the normal retirement, pension or profit sharing plans.

Benefits — Payroll taxes; health, dental, disability and life insurance; retirement, pension or profit sharing contributions; dues, licenses, education and subscriptions; meetings; travel; vehicle; parking; cell phones and pagers; meals and entertainment paid to or for staff.

Claims submitted —The total number of claims submitted to all payers in your most recently completed fiscal year.

General Accounting	Salaries and FTEs related to your general accounting office staff, including AR, AP, general ledger, payroll, bookkeeping and other positions in charge of cash flow statements or balance sheets.
Information Systems	Salaries and FTEs related to your IT department/system support for computer, telephone and data processing technical support.
Managed Care Administration	Q&A, compliance, medical education managers, contract managers, etc.
Nursing	Total FTEs of RNs and LPNs in your organization.
Medical Assistants/Nurse Aides	Total FTEs in your organization.
Patient Accounting	Billings & collections (patient financial data collection, financial counseling, charge data entry, claims submission, billing, third-party payer follow-up, monthly statements, collections, calls/letters and payment posting), postings, etc.
Human Resources	Salaries and FTEs in your Human Resource department. Included would be staff responsible for general HR responsibilities, including responsibilities of job description, performance review, compensation, benefits, grievances, policy development, personnel files and safety. Exclude legal counsel and recruiting.
Building Management	Building maintenance, housekeeping, security, parking.
Materials Management	Salaries and FTEs for your Material Management department. Include purchasing, receiving, inspection, inventory and distribution of supplies and drugs.
Medical Records and Support	Medical records, medial secretaries, transcribers, receptionists.

2012 AMGA Specialty Listing

Medical Specialties		Ph.D. Positions
1005 Addictive Medicine	1447 Psychiatry - Neurophysiology	3020 Ph.D. Only: Biochemistry
1000 Allergy	1441 Psychiatry - Inpatient	3050 Ph.D. Only: Diagnostic Radiology
1007 Bariatric Medicine (Non-Surgical)	1442 Psychiatry - Outpatient	3055 Ph.D. Only: Imaging (Physicist)
1010 Cardiology - Cath Lab	1451 Pulmonary Disease (with Critical Care) *	3060 Ph.D. Only: Immunology
1020 Cardiology - Echo Lab/Nuclear	1450 Pulmonary Disease (without Critical Care) *	3070 Ph.D. Only: Microbiology
1030 Cardiology - Electrophysiology Pacemaker	1452 Pulmonary Intensivist *	3075 Ph.D. Only: Neurophysiology
1040 Cardiology - General	1460 Reproductive Endocrinology	3215 Ph.D. Only: Neuropsychology
1050 Cardiology - General - Branch	1470 Rheumatologic Disease	3100 Ph.D. Only: Nuclear Medicine
1443 Consult Liaison Psychiatrist *	1475 Sleep Lab	3140 Ph.D. Only: Other Laboratory
1060 Critical Care Medicine	1480 Sports Medicine	3150 Ph.D. Only: Pathology
1070 Dermatology	1490 Urgent Care	3210 Ph.D. Only: Psychology
1080 Dermatology - Branch	1500 Wound Care	3211 Ph.D. Only: Psychology - Child
1090 Dermatology - Mohs		3220 Ph.D. Only: Radiation Therapy
1100 Endocrinology	Surgical Specialties	
1110 Family Medicine	2005 Bariatric Surgery	Other Healthcare Providers
1120 Family Medicine - Branch	2007 Breast Surgery	3000 Audiology
1115 Family Medicine with Obstetrics	2008 Burn Surgery *	3025 Certified Nurse Specialist
1125 Family Medicine with Obstetrics - Branch	2010 Cardiac / Thoracic Surgery	3030 Certified Registered Nurse Anesthetist
1130 Gastroenterology	2241 Cardiac/Thoracic Surgery - Pediatric	3035 Chiropractor
1140 Gastroenterology - Branch	2015 Cardiovascular Surgery	3040 Dentistry
1465 Genetics	2020 Colon & Rectal Surgery	3041 Dentistry - Pediatric
1468 Genetics - Clinical Molecular	2030 Emergency Care	3065 Epidemiology
1150 Geriatrics	2035 Emergency Care - Pediatrics	3080 Midwife
1180 Hematology & Medical Oncology	2050 General Surgery	3090 Nuclear Medicine - Non Radiologist (Dosimetrist)
1183 Hepatology *	2060 General Surgery - Branch	3112 Nurse Practitioner - Geriatric
1186 Hospitalist- Family Medicine	2090 Neurological Surgery	3113 Nurse Practitioner - Medical Specialty
1185 Hospitalist- Internal Medicine	2095 Neurological Surgery - Pediatrics	3115 Nurse Practitioner - Primary Care
1260 Hospitalist- Nocturnist	2080 OB/GYN - Branch	3117 Nurse Practitioner - Surgical Specialty
1187 Hospitalist- Pediatrics	2070 OB/GYN - General	3118 Nutritionist (Non MD)
1190 Hypertension & Nephrology	1160 OB/GYN - Gynecological Oncology	3120 Occupational Therapist
1200 Infectious Disease	1170 OB/GYN - Gynecology Only	3130 Optometrist
1210 Internal Medicine	1245 OB/GYN - Laborist	3042 Orthodontics *
1220 Internal Medicine - Branch	1420 OB/GYN - Maternal Fetal Medicine / Perinatology	3155 Perfusionist *
1215 Internal Medicine - Office Only	1270 OB/GYN - Obstetrics	3160 Pharmacist
1191 Nephrology Only	2075 OB/GYN - Urogynecology	3170 Physical Therapist
1252 Neurology - Epilepsy/EEG Lab *	2097 Oculo-Facial / Oculoplastic	3180 Physician Assistant - Medical
1250 Neurology	2098 Oncology - Surgical	3185 Physician Assistant - Surgical
1253 Neurology - EMG Lab *	2100 Ophthalmology	3182 Physician Assistant - Primary Care
1255 Neurology - Stroke	2110 Ophthalmology - Branch	3195 Podiatry - Medical
1448 Neuropsychiatry	2120 Ophthalmology - Orbital	3205 Podiatry - Medical - Branch
1265 Nutritionist (MD)	2250 Ophthalmology - Pediatrics	3190 Podiatry - Surgical
1280 Occupational / Environmental Medicine	2105 Ophthalmology - Refractive	3200 Podiatry - Surgical - Branch
1315 Ophthalmology - Medical	2130 Ophthalmology - Retinal Surgery	3212 Psychology (Master's Level)
1230 Ophthalmology - Medical Retinal	2140 Oral Surgery	3230 Social Worker
1310 Orthopedic - Medical	2135 Oral-Maxillofacial Surgery *	3235 Speech Pathology
1437 Pain Management- Non-Anesthesiology	2145 Orthopedic Oncology	
1317 Palliative Care	2280 Orthopedic Sports Medicine	Radiology/Anesthesiology/Pathology
1320 Pediatrics - General	2150 Orthopedic Surgery	2000 Anesthesiology
1325 Pediatrics & Adolescent - Adolescent Medicine	2160 Orthopedic Surgery - Branch	2230 Anesthesiology - Pain Clinic
1330 Pediatrics & Adolescent - Allergy	2175 Orthopedic Surgery - Foot and Ankle	4005 Anesthesiology - Pediatric *
1340 Pediatrics & Adolescent - Branch	2170 Orthopedic Surgery - Hand	4000 Biochemistry (M.D. Only)
1350 Pediatrics & Adolescent - Cardiology	2180 Orthopedic Surgery - Joint Replacement	4010 Dermatopathology
1085 Pediatrics & Adolescent - Dermatology	2200 Orthopedic Surgery - Pediatrics	4030 Diagnostic Radiology (M.D. Interventional)
1355 Pediatrics & Adolescent - Developmental-Behavioral	2190 Orthopedic Surgery - Spine	4020 Diagnostic Radiology (M.D. Neuro-Interventional)
1360 Pediatrics & Adolescent - Endocrinology	2285 Orthopedic Surgery - Trauma	4040 Diagnostic Radiology (M.D. Non-Interventional)
1370 Pediatrics & Adolescent - Gastroenterology	2210 Otolaryngology	4045 Diagnostic Radiology - Pediatric *
1375 Pediatrics & Adolescent - Genetics	2220 Otolaryngology - Branch	4050 Immunology (M.D. Only)
1380 Pediatrics & Adolescent - Hem/Onc	2215 Otolaryngology - Head & Neck Surgery	4060 Laboratory Hematology
1382 Pediatrics & Adolescent - Infectious Disease	2240 Pediatric Surgery	1175 Mammography
1384 Pediatrics & Adolescent - Intensive Care	2260 Plastic & Reconstruction	4070 Microbiology (M.D. Only)
1386 Pediatrics & Adolescent - Internal Medicine	2265 Plastic & Reconstruction - Pediatrics	4080 Nuclear Medicine (M.D. Only)
1240 Pediatrics & Adolescent - Neonatology	2275 Thoracic Surgery	4090 Other Laboratory (M.D. Only)
1390 Pediatrics & Adolescent - Nephrology	2300 Transplant Surgery - Kidney	2270 Pathology - Anatomic (M.D. Only)
1400 Pediatrics & Adolescent - Neurology	2310 Transplant Surgery - Liver	4103 Pathology - Clinical (M.D. Only)
1410 Pediatrics & Adolescent - Pulmonary	2292 Transplant Surgery - Medical	4100 Pathology - Combined (M.D. Only)
1415 Pediatrics & Adolescent - Rheumatology	2290 Transplant Surgery - Thoracic	4105 Pathology - Pediatric *
1417 Pediatrics & Adolescent - Urgent Care	2295 Trauma Surgery	4107 Pathology - Surgical *
1430 Physical Medicine & Rehabilitation	2320 Urology	4110 Pharmacology
1440 Psychiatry	2330 Urology - Branch	4120 Physiology (M.D. Only)
1445 Psychiatry - Child	2335 Urology - Pediatrics	4130 Radiation Therapy (M.D. Only)
1446 Psychiatry - Geriatric	2340 Vascular Surgery	

*Indicates New Specialty in 2012

Branch Specialties — These specialties have the same basic definition as the main specialty. These physicians are located in small satellite or branch offices at least five miles from the main campus. The branch office practices primarily as their own separate entity, and often has different compensation and/or performance expectations than their main campus colleagues. There would not be teaching responsibilities at these locations.

Medical Specialties

- 1000 Allergy:** Certified by the American Board of Allergy and Immunology. Trained in evaluation, physical and laboratory diagnosis, and management of disorders involving the immune system.
- 1005 Addictive Medicine:** Certified by the American Society of Addiction Medicine. These physicians specialize in the treatment of addiction and focus on addictive diseases and have had special training focusing on the prevention and treatment of such diseases.
- 1007 Bariatric Medicine (nonsurgical):** Certified by the American Board of Bariatric Medicine. Bariatric medicine, or bariatrics, refers to the branch of medicine which is concerned with the treatment of obesity and associated conditions, as well as its causes and preventive techniques.
- 1010 Cardiology — Cath Lab:** Certified by the American Board of Internal Medicine with a certificate of special qualification in Cardiovascular Disease and a certificate of added qualification in Interventional Cardiology. At least 70 percent of the physician's time is spent in this specialized field of Cardiology.
- 1020 Cardiology — Echo Lab/Nuclear:** Certified by the American Boards of Internal Medicine *and* Nuclear Medicine with a certificate of special qualification in Cardiovascular Disease and a certificate of added qualification in Cardiac Electrophysiology. At least 70 percent of the physician's time is spent in this specialized field of Cardiology.
- 1030 Cardiology — Electrophysiology Pacemaker:** Certified by the American Board of Internal Medicine with a certificate of added qualification in Cardiac Electrophysiology. A field of special interest within the subspecialty of cardiovascular disease, which involves intricate technical procedures to evaluate heart rhythms and determine appropriate treatment for them. At least 70 percent of the physician's time is spent in this specialized field of Cardiology.
- 1040 Cardiology — General:** Certified by the American Board of Internal Medicine with a certificate of special qualification in Cardiovascular Disease. An internist who specializes in diseases of the heart, lungs, and blood vessels and manages complex cardiac conditions such as heart attacks and life-threatening, abnormal heartbeat rhythms. This specialty should capture the remaining cardiologists not defined in the Cardiology subspecialties
- 1060 Critical Care Medicine:** Certified by the American Board of *either* Internal Medicine *or* Anesthesiology with a certificate of special qualification in Critical Care Medicine. Diagnoses, treats and supports patients with multiple organ dysfunction. May facilitate and coordinate patient care among the primary physician, the critical care staff, and other specialists.
- 1070 Dermatology:** Certified by the American Board of Dermatology. Trained to diagnose and treat pediatric and adult patients with benign and malignant disorders of the skin, mouth, external genitalia, hair and nails, as well as a number of sexually transmitted diseases. Has had additional training and experience in the diagnosis and treatment of skin cancers, melanomas, moles, and other tumors of the skin, management of contact dermatitis, and other allergic and nonallergic skin disorders, and in the recognition of the skin manifestation of systemic and infectious diseases. Has special training the dermatopathology and in the surgical techniques used in dermatology. Also has expertise in the management of cosmetic disorders of the skin such as hair loss and scars, and the skin changes associated with aging.
- 1090 Dermatology — Mohs:** Certified by the American Board of Dermatology. Specializes in performing surgery used for the treatment of skin cancer, especially basal cell or squamous cell carcinoma of the skin. Has the expertise to diagnose and monitor diseases of the skin including infectious, immunological, degenerative, and neoplastic diseases. This entails the examination and interpretation of specially prepared tissue sections, cellular scrapings, and smears of skin lesions by means of routine and special (electron and fluorescent) microscopes.
- 1100 Endocrinology:** Certified by the American Board of Internal Medicine with a certificate of special qualification in Endocrinology, Diabetes, and Metabolism. This physician concentrates on disorders of the internal (endocrine) glands such as the thyroid and adrenal glands. Also deals with disorders such as diabetes, metabolic and nutritional disorders, pituitary diseases, and menstrual and sexual problems.

- 1110 Family Medicine:** Certified by the American Board of Family Practice. Trained to diagnose and treat a wide variety of ailments in patients of all ages. Receives a broad range of training that includes internal medicine, pediatrics, obstetrics and gynecology, psychiatry, and geriatrics. Special emphasis is placed on prevention and the primary care of entire families, utilizing consultations and community resources when appropriate.
- 1115 Family Medicine With Obstetrics:** Certified by the American Board of Family Practice with additional training or experience in obstetrics.
- 1130 Gastroenterology:** Certified by the American Board of Internal Medicine with a certificate of special qualification in Gastroenterology. Specializes in diagnosis and treatment of diseases of the digestive organs including the stomach, bowels, liver, and gallbladder. This specialist treats conditions such as abdominal pain, ulcers, diarrhea, cancer, and jaundice and performs complex diagnostic and therapeutic procedures using endoscopes to see internal organs.
- 1465 Genetics:** Certified by the American Board of Medical Genetics. A specialist trained in diagnostic and therapeutic procedures for patients with genetically linked diseases. This specialist uses modern cytogenetic, radiologic, and biochemical testing to assist in specialized genetic counseling, implements necessary therapeutic interventions, and provides prevention through prenatal diagnosis. A medical geneticist plans and coordinates large scale screening programs for inborn errors of metabolism, hemoglobinopathies, chromosome abnormalities and neural tube defects.
- 1468 Genetics — Clinical Molecular:** Certified by the American Board of Medical Genetics. A specialist who demonstrates competence in performing and interpreting molecular analyses relevant to the diagnosis and management of human genetic diseases, and is a consultant regarding laboratory diagnosis of a broad range of inherited disorders.
- 1150 Geriatrics:** Certified by the American Board of *either* Family Practice *or* Internal Medicine with a certificate of added qualification in Geriatric Medicine. Has special knowledge of the aging process and special skills in the diagnostic, therapeutic, preventive, and rehabilitative aspects of illness in the elderly. Also, cares for geriatric patients in the patient's home, the office, long-term care settings such as nursing homes, and the hospital.
- 1180 Hematology and Medical Oncology:** Certified by the American Board of Internal Medicine with certificates of special qualification in Hematology and Medical Oncology. Hematology: An internist with additional training who specializes in diseases of the blood, spleen, and lymph glands. This specialist treats conditions such as anemia, clotting disorders, sickle cell disease, hemophilia, leukemia, and lymphoma. Medical Oncology: An internist who specializes in the diagnosis and treatment of all types of cancer and other benign and malignant tumors. This specialist decides on and administers chemotherapy for malignancy, as well as consulting with surgeons and radiotherapists on other treatments for cancer.
- 1183 Hepatology:** Certified by the American Board of Internal Medicine with a certificate of special qualification in Gastroenterology. A specialist who focuses on diagnosing and treating liver disease.
- 1185 Hospitalist — Internal Medicine:** Certified by the American Board of Internal Medicine. At least 70 percent of time spent in the hospital. Is a Internal Medicine physician practicing as a Hospitalist
- 1186 Hospitalist — Family Medicine:** Certified by the American Board of Family Practice. At least 70 percent of time spent in the hospital. Is a Family Medicine physician practicing as a Hospitalist.
- 1187 Hospitalist — Pediatrics:** Certified by the American Board of Pediatrics. At least 70 percent of time spent in the hospital. Is a Internal Medicine physician practicing as a Hospitalist.
- 1260 Hospitalist — Nocturnist:** A hospital-based physician who only works overnight. Nocturnists are usually trained in Internal Medicine and have experience in hospital medicine. However, there are nocturnists trained in other specialties, such as Psychiatry or Family Medicine.
- 1190 Hypertension and Nephrology:** Certified by the American Board of Internal Medicine with a certificate of special qualification in Nephrology. An internist who treats disorders of the kidney, high blood pressure, fluid and mineral balance, and dialysis of body wastes when the kidneys do not function. This specialist consults with surgeons about kidney transplantation.
- 1200 Infectious Disease:** Certified by the American Board of Internal Medicine with a certificate of special qualification in Infectious Diseases. Deals with infectious diseases of all types and in all organs, including conditions requiring selective

use of antibiotics. This specialist diagnoses and treats AIDS patients and patients with fevers that have not been explained. May also have expertise in preventive medicine and conditions associated with travel.

- 1210 Internal Medicine:** Certified by the American Board of Internal Medicine. A physician who provides long-term, comprehensive care in the office and the hospital, managing both common and complex illnesses of adolescents, adults, and the elderly. Trained in the diagnosis and treatment of cancer, infections, and diseases affecting the heart, blood, kidneys, joints, and digestive, respiratory and vascular systems. Also trained in the essentials of primary care internal medicine, which incorporates an understanding of disease prevention, wellness, substance abuse, mental health, and effective treatment of common problems of the eyes, ears, skin, nervous system, and reproductive organs.
- 1215 Internal Medicine — Office Only:** Similar to Internal Medicine — Traditional (1210), but functions only in office setting. Does not function in the hospital or on call.
- 1191 Nephrology Only:** Certified by the American Board of Internal Medicine with a certificate of special qualification in Nephrology. An internist that treats disorders of the kidney, regulates blood pressure, fluid and mineral balance, and dialysis of body wastes when the kidneys do not function.
- 1250 Neurology:** Certified by the American Board of Psychiatry and Neurology. A neurologist specializes in the diagnosis and treatment of all types of disease or impaired function of the brain, spinal cord, peripheral nerves, muscles, and autonomic nervous system, as well as the blood vessels that relate to these structures.
- 1252 Neurology — Epilepsy/EEG Lab:** Certified by the American Board of Psychiatry and Neurology, A Neurologist or Child Neurologist who focuses on the evaluation and treatment of adults and children with recurrent seizure activity and seizure disorders. Specialists in Epilepsy (Epileptologists) possess specialized knowledge in the science, clinical evaluation and management of these disorders.
- 1253 Neurology — EMG Lab:** Certified by the American Board of Psychiatry and Neurology. A Neurologist works primarily in a specialty Laboratory dedicated to the investigation of diseases of nerves and muscles, the Electromyography (EMG) Laboratory. These are doctors who specialize in the diagnosis and testing of diseases of the peripheral nervous system.
- 1255 Neurology — Stroke:** Certified by the American Board of Psychiatry and Neurology, with a certificate of added qualification in stroke neurology. Specializes in the diagnosis and treatment of all types of disease or impaired function of the brain, spinal cord, peripheral nerves, muscles, and autonomic nervous system, as well as the blood vessels that relate to these structures
- 1448 Neuropsychiatry:** Certified by the American Board of Psychiatry and Neurology. Specializes in the psychiatric care of persons with disorders of brain function to include diagnostic skills, neurological and mental status examinations, cognitive testing, electrophysiological testing, neuro-imaging, differential diagnosis, crisis intervention, application of time-limited psychotherapy, and referral for rehabilitative therapies.
- 1265 Nutritionist (MD):** Board Certified physicians in Internal Medicine or Family Medicine with fellowships in Clinical Nutrition and/or Bariatric Medicine. Nutritionists can help patients with special needs, allergies, health problems, or a desire for increased energy or weight change devise healthy diets. Clinicians to quickly understand and apply responsible nutrition information in managing disease and promoting health. The Nutritionist assesses a person's nutritional needs to achieve normal physiological function. Assessment includes the use of appropriate test and observations such as case history, anthropomorphic measurements, physical signs, laboratory tests, and nutrition/lifestyle analysis to determine an educational nutrition program. Assessment also provides the basis for referral to a licensed physician, or other health care professional and determination of educational protocol. This may include nutrition / lifestyle modification, nutritive supplementation, and understanding of physiological/biochemical pathways. . At least 70 percent of time is spent performing these duties.
- 1280 Occupational/Environmental Medicine:** Certified by the American Board of Preventive Medicine. At least 70 percent of time is spent on the control of environmental factors that may adversely affect health *or* the control and prevention of occupational factors that may adversely affect health safety. This specialist works with large population groups as well as with individual patients to promote health and understand the risks of disease, injury, disability, and death, seeking to modify and eliminate these risks.
- 1315 Ophthalmology — Medical:** An ophthalmologist for whom 70 percent of time is involved with the diagnoses and non-surgical treatment of ocular and visual disorders.

- 1230 **Ophthalmology — Medical Retinal:** Certified by the American Board of Ophthalmology. At least 70 percent of time is spent in the diagnosis and non-surgical treatment of retinal disorders.
- 1310 **Orthopedic — Medical:** Certified by the American Board of Orthopaedic Surgery. At least 70 percent of time in practice involves the non-surgical treatment of musculoskeletal disorders.
- 1317 **Palliative Care:** Board certification for physicians in palliative care is through the American Board of Hospice and Palliative Medicine; programs provide 1-2 years of specialty training following a primary residency. Palliative Care reduces the severity of a disease or slows its progress rather than providing a cure. For incurable diseases, in cases where the cure is not recommended due to other health concerns, and when the patient does not wish to pursue a cure, palliative care becomes the focus of treatment. It may occasionally be used in conjunction with curative therapy.
- 1320 **Pediatrics — General:** Certified by the American Board of Pediatrics. A pediatrician is concerned with the physical, emotional, and social health of children from birth to young adulthood. Care encompasses a broad spectrum of health services ranging from preventive health care to the diagnosis and treatment of acute and chronic diseases. A pediatrician deals with biological, social, and environmental influences on the developing child, and with the impact of disease and dysfunction on development. A pediatrician who specializes in adolescent medicine is a multi-disciplinary health care specialist trained in the unique physical, psychological, and social characteristics of adolescents, their health care problems and needs.

For pediatric subspecialties, report physicians who spend at least 70 percent of their time in the respective subspecialized area.

- 1325 **Pediatrics and Adolescent — Adolescent Medicine:** Certified by the American Board of Pediatrics with a certificate of added qualification in Adolescent Medicine. A pediatrician who specializes only in adolescent medicine is a multi-disciplinary health care specialist trained in the unique physical, psychological, and social characteristics of adolescents, their healthcare problems and needs.
- 1330 **Pediatrics and Adolescent — Allergy:** Certified by the American Board of Pediatrics with a certificate of added qualification in Clinical and Laboratory Immunology. Trained in evaluation, physical and laboratory diagnosis, and management of disorders involving the immune system.
- 1350 **Pediatrics and Adolescent — Cardiology:** Certified by the American Board of Pediatrics with a certificate of special qualification in Pediatric Cardiology. A pediatric cardiologist provides comprehensive care to patients with cardiovascular problems. This specialist is skilled in selecting, performing, and evaluating the structural and functional assessment of the heart and blood vessels, and the clinical evaluation of cardiovascular disease.
- 1085 **Pediatrics and Adolescent — Dermatology:** Certified by the American Board of Dermatology. Through additional special training, has developed expertise in the treatment of specific skin disease categories with emphasis on those diseases that predominate in infants, children and adolescents.
- 1355 **Pediatrics and Adolescent — Developmental-Behavioral:** Certified by the American Board of Pediatrics. A pediatrician with special training and experience who aims to foster understanding and promotion of optimal development of children and families through research, education, clinical care, and advocacy efforts. This physician assists in the prevention, diagnosis, and management of developmental difficulties and problematic behaviors in children, and in the family dysfunctions that compromise children's development.
- 1360 **Pediatrics and Adolescent — Endocrinology:** Certified by the American Board of Pediatrics with a certificate of special qualification in Pediatric Endocrinology. A pediatrician who provides expert care to infants, children and adolescents who have diseases that result from an abnormality in the endocrine glands (glands which secrete hormones). These diseases include diabetes mellitus, growth failure, unusual size for age, early or late pubertal development, birth defects, the genital region, and disorders of the thyroid, the adrenal and pituitary glands.
- 1370 **Pediatrics and Adolescent — Gastroenterology:** Certified by the American Board of Pediatrics with a certificate of special qualification in Pediatric Gastroenterology. A pediatrician who specializes in the diagnoses and treatment of diseases of the digestive systems of infants, children, and adolescents. This specialist treats conditions such as abdominal pain, ulcers, diarrhea, cancer, and jaundice and performs complex diagnostic and therapeutic procedures using lighted scopes to see internal organs.

- 1375 **Pediatrics and Adolescent — Genetics:** Certified by the American Board of Medical Genetics with a certificate of special qualification in Pediatric Pathology. At least 70 percent of time is spent with pediatric patients.
- 1380 **Pediatrics and Adolescent — Hem/Onc:** Certified by the American Board of Pediatrics with a certificate of special qualification in Pediatric Hematology-Oncology. A pediatrician trained in the combination of pediatrics, hematology and oncology to recognize and manage pediatric blood disorders and cancerous diseases.
- 1382 **Pediatrics and Adolescent — Infectious Disease:** Certified by the American Board of Pediatrics with a certificate of special qualification in Pediatric Infectious Disease. A pediatrician trained to care for children in the diagnosis, treatment and prevention of infectious diseases. This specialist can apply specific knowledge to affect a better outcome for pediatric infections with complicated courses, underlying diseases that predispose to unusual or severe infections, unclear diagnoses, uncommon diseases, and complex or investigational treatments.
- 1384 **Pediatrics and Adolescent — Intensive Care:** Certified by the American Board of Internal Medicine with special certification in Critical Care. At least 70 percent of time is spent with pediatric and adolescent patients in a hospital intensive care unit.
- 1386 **Pediatrics and Adolescent — Internal Medicine:** Certified by the American Board of Internal Medicine or Family Practice with a certificate of added qualification in Adolescent Medicine. A multi-disciplinary health care specialist trained in the unique physical, psychological, and social characteristics of adolescents, and their health care problems and needs.
- 1240 **Pediatrics and Adolescent — Neonatology:** Certified by the American Board of Pediatrics with a certificate of special qualification in Neonatal-Perinatal Medicine. A pediatrician whose principle care is for sick newborn infants. Clinical expertise is used for direct patient care and for consulting with obstetrical colleagues to plan for the care of mothers who have high-risk pregnancies.
- 1390 **Pediatrics and Adolescent — Nephrology:** Certified by the American Board of Pediatrics with a certificate of special qualification in Pediatric Nephrology. A pediatrician who deals with the normal and abnormal development and maturation of the kidney and urinary tract, the mechanisms by which the kidney can be damaged, the evaluation and treatment of renal diseases, fluid and electrolyte abnormalities, hypertension, and renal replacement therapy.
- 1400 **Pediatrics and Adolescent — Neurology:** Certified by the American Board of Psychiatry and Neurology with Special Qualifications in Child Neurology. A neurologist specializes in the diagnosis and treatment of all types of disease or impaired function of the brain, spinal cord, peripheral nerves, muscles, and autonomic nervous system, as well as the blood vessels that relate to these structures. A child neurologist has special skills in the diagnosis and management of neurologic disorders of the neonatal period, infancy, early childhood, and adolescence.
- 1410 **Pediatrics and Adolescent — Pulmonary:** Certified by the American Board of Pediatrics with a certificate of special qualification in Pediatric Pulmonology. A pediatrician dedicated to the prevention and treatment of all respiratory diseases affecting infants, children and young adults. This specialist is knowledgeable about the growth and development of the lung, assessment of respiratory function in infants and children, and experienced in a variety of invasive and noninvasive diagnostic techniques.
- 1415 **Pediatrics and Adolescent — Rheumatology:** Certified by the American Board of Pediatrics with a certificate of special qualification in Pediatric Rheumatology. A pediatrician who treats diseases of joints, muscle, bones, and tendons. A pediatric rheumatologist diagnoses and treats arthritis, back pain, muscle strains, common athletic injuries, and "collagen" diseases.
- 1417 **Pediatrics and Adolescent — Urgent Care:** Certified by the American Board of Pediatrics. At least 70 percent of time is spent in the urgent care setting treating pediatric patients, including satellite clinics.
- 1430 **Physical Medicine and Rehabilitation:** Certified by the American Board of Physical Medicine and Rehabilitation. Physical medicine and rehabilitation, also referred to as physiatry, is the medical specialty concerned with diagnosing, evaluating, and treating patients with physical disabilities. These disabilities may arise from conditions affecting the musculoskeletal system such as neck and back pain, sport injuries, or other painful conditions affecting the limbs, for example carpal tunnel syndrome. Alternatively, the disabilities may result from neurological trauma or disease such as spinal cord injury, head injury, or stroke. A physician certified in physical medicine and rehabilitation is often called a physiatrist. For diagnosis and evaluation, a physiatrist may include the techniques of electromyography to supplement the

standard history, physical, X-ray, and laboratory examinations. The physiatrist has expertise in the appropriate use of therapeutic exercise, prosthetics (artificial limbs), orthotics, and mechanical and electrical devices.

- 1437 Pain Management- Non-Anesthesiology:** A physician who has a special certificate in Pain Management. These physicians provide a high level of care, either as a primary physician or consultant, for patients experiencing problems with acute, chronic or cancer pain in both hospital and ambulatory settings. Patient care needs may also be coordinated with other specialists. At least 70 percent of their time is spent in Pain Management- Non Anesthesiology.
- 1440 Psychiatry — General:** Certified by the American Board of Psychiatry and Neurology. A psychiatrist specializes in the prevention, diagnosis, and treatment of mental, additive, and emotional disorders such as schizophrenia and other psychotic disorders, mood disorders, anxiety disorders, substance-related disorders, sexual and gender identity disorders, and adjustment disorders. The psychiatrist is able to understand the biologic, psychologic, and social components of illness, and therefore is uniquely prepared to treat the whole person. The main form of treatment used by a psychiatrist is psychopharmacology. A psychiatrist is qualified to order diagnostic laboratory tests and to prescribe medications, evaluate and treat psychologic and interpersonal problems, and to intervene with families who are coping with stress, crises, and other problems in living. Use this definition if the physician spends equal time in an inpatient and outpatient setting.
- 1441 Psychiatry — Inpatient:** Using the above definition for Psychiatry — General, Inpatient psychiatry treatment in a more temporary setting. At least 70 percent of the physician's time is spent with in an inpatient setting.
- 1442 Psychiatry — Outpatient:** Using the above definition for Psychiatry — General, Outpatient psychiatry treatment is more ongoing. At least 70 percent of the physician's time is spent with in an outpatient setting.
- 1445 Psychiatry — Child:** Certified by the American Board of Psychiatry and Neurology with a certificate of special qualification in Child & Adolescent Psychiatry. A psychiatrist with additional training in the diagnosis and treatment of developmental, behavioral, emotional, and mental disorders of childhood and adolescence.
- 1446 Psychiatry — Geriatric:** Certified by the American Board of Psychiatry and Neurology. A psychiatrist with expertise in the prevention, evaluation, diagnosis, and treatment of mental and emotional disorders in the elderly. The geriatric psychiatrist seeks to improve the psychiatric care of the elderly both in health and in disease.
- 1447 Psychiatry — Neurophysiology:** Certified by the American Board of Psychiatry and Neurology. A psychiatrist with expertise in the diagnosis and management of central, peripheral, and autonomic nervous system disorders using a combination of clinical evaluation and electrophysiological testing such as electroencephalography (EEG), electromyography (EMG), and nerve conduction studies (NCS).
- 1443 Consult Liaison Psychiatrist:** Certified by the American Board of Psychiatry and Neurology with fellowship training in Psychosomatic Medicine. These physicians work in areas such as psycho-oncology or psychocardiology. They consult with medical and surgical colleagues on patients with such mental and emotional disorders such as delirium, dementia, depression, and psychosis as these can often be secondary or exacerbating the medical/surgical illness. This specialty consults and is a liaison on the medical and surgical floors, rather than in a closed unit
- 1450 Pulmonary Disease (without Critical Care):** Certified by the American Board of Internal Medicine with a certificate of special qualification in Pulmonary Diseases. Treats diseases of the lungs and airways. Diagnoses and treats cancer, pneumonia, pleurisy, asthma, occupational diseases, bronchitis, sleep disorders, emphysema, and other complex disorders of the lungs.
- 1451 Pulmonary Disease (with Critical Care):** Certified by the American Board of Internal Medicine with a certificate of special qualification in Pulmonary Diseases. Treats diseases of the lungs and airways. Diagnoses and treats cancer, pneumonia, pleurisy, asthma, occupational diseases, bronchitis, sleep disorders, emphysema, and other complex disorders of the lungs. Greater than 50% of time is spent in a critical care setting.
- 1452 Pulmonary Intensivist:** Certified by the American Board of Internal Medicine with a certificate of special qualification in Pulmonary Diseases. Treats diseases of the lungs and airways. Diagnoses and treats cancer, pneumonia, pleurisy, asthma, occupational diseases, bronchitis, sleep disorders, emphysema, and other complex disorders of the lungs. Primary scope of practice is in a hospital intensive care unit.

- 1460 Reproductive Endocrinology:** Certified by the American Board of Obstetrics and Gynecology with a certificate of special qualification in Reproductive Endocrinology.
- 1470 Rheumatologic Disease:** Certified by the American Board of Internal Medicine with a certificate of special qualification in Rheumatology. An internist who treats diseases of joints, muscle, bones, and tendons. This specialist diagnoses and treats arthritis, back pain, muscle strains, common athletic injuries and "collagen" diseases.
- 1475 Sleep Lab:** An Internist with demonstrated expertise in the diagnosis and management of clinical conditions that occur during sleep, that disturb sleep, or that are affected by disturbances in the wake-sleep cycle. This specialist is skilled in the analysis and interpretation of comprehensive polysomnography, and well-versed in emerging research and management of a sleep laboratory. This subspecialty includes the clinical assessment, polysomnographic evaluation and treatment of sleep disorders including insomnias, disorders of excessive sleepiness (e.g., narcolepsy), sleep-related breathing disorders (such as obstructive sleep apnea), parasomnias, circadian rhythm disorders, sleep-related movement disorders and other conditions pertaining to the sleep-wake cycle. At least 70 percent of time is spent in the treatment of sleep disorders
- 1480 Sports Medicine:** Certified by the American Board of *either* Emergency Medicine *or* Family Practice *or* Internal Medicine *or* Pediatrics, with a certificate of added qualification in Sports Medicine. Is responsible for continuous care in the field of sports medicine, not only for the enhancement of health and fitness, but also for the prevention and management of injury and illness. Has knowledge and experience in the promotion of wellness and the role of exercise in promoting a healthy lifestyle. Knowledge of exercise physiology, biomechanics, nutrition, psychology, physical rehabilitation and epidemiology is essential to the practice of sports medicine. At least 70 percent of time is spent in nonsurgical orthopedic procedures.
- 1490 Urgent Care:** Certified by the American Board of Internal Medicine. At least 70 percent of time is spent in the urgent care setting, including satellite clinics.
- 1500 Wound Care:** A physician with specialized training in the evaluation, treatment and healing of chronic wounds. A chronic, non-healing wound is one that does not heal in six to eight weeks with traditional wound care. Some treatment options a wound care specialist may provide include: Doppler Evaluation, Wound Debridement, Wound Dressings, Negative Pressure Therapy, Orthopedic, Vascular and Plastic Surgery, Nutrition Counseling or Diabetes Counseling. At least 70 percent of time is spent in the performing wound care.

Surgical Specialties

- 2005 Bariatric Surgery:** Certified by the American Board of Surgery. The surgeon specializes in performing gastric bypass surgery, generally treatment for obesity. The surgeon provides preoperative, operative, and postoperative care to surgical patients. At least 50 percent of time is spent in the Bariatric practice.
- 2007 Breast Surgery:** A surgeon who is especially skilled in operating on the breast. A breast surgeon may biopsy a tumor in the breast and if it is malignant, remove the tumor. A breast surgeon may also do breast reconstruction following a mastectomy for breast cancer. The surgeons who carry out this type of breast reconstruction may be breast oncology surgeons or plastic surgeons. (Surgeons trained in both these specialties are known as oncoplastic surgeons.)
- 2008 Burn Surgery:** Certified by the American Board of Surgery with an additional burn fellowship. A surgeon who is especially skilled in operating on and treating burn victims. At least 70% of time is spent performing burn related surgeries.
- 2010 Cardiac/Thoracic Surgery:** Certified by the American Board of Thoracic Surgery. Procedures such as cardiac catheterization, angiography, electrocardiography, echocardiography, imaging techniques, endoscopy, tissue biopsy, and biologic and biochemical tests appropriate to thoracic diseases and evolving techniques, such as laser therapy, endovascular procedures, electrophysiologic procedures and devices, thoracoscopy and thoracoscopic surgery. The scope of thoracic surgery encompasses knowledge of normal and pathologic conditions of both cardiovascular and general thoracic structures. This includes congenital and acquired lesions (including infections, trauma, tumors, and metabolic disorders) of both the heart and blood vessels in the thorax, as well as diseases involving the lungs, pleura, chest wall, mediastinum, esophagus, and diaphragm. In addition, the ability to establish a precise diagnosis, an essential step toward proper therapy, requires familiarity with diagnostic procedures such as cardiac catheterization, angiography, electrocardiography, echocardiography, imaging techniques, endoscopy, tissue biopsy, and biologic and biochemical tests appropriate to thoracic diseases. It is essential that the thoracic surgeon be knowledgeable and experienced in

evolving techniques, such as laser therapy, endovascular procedures, electrophysiologic procedures and devices, thoracoscopy and thoracoscopic surgery

- 2241 Cardiac/Thoracic Surgery — Pediatric:** Certified by the American Board of Thoracic Surgery with additional fellowship training in Pediatric Cardiac/Thoracic Surgery. These surgeons treat infants, children and adolescents with congenital or acquired heart and/or thoracic diseases. Treatment includes consultation and surgical intervention for a broad range of cardiothoracic conditions, from general thoracic and esophageal problems to complex cardiac procedures for repair of birth abnormalities. Procedures include: general thoracic surgery, diagnosis and treatment of congenital heart defects in children, tumor removal, lung biopsies, esophageal surgery, and treatment of aortic and mitral valve disease. At least 70% of time is spent performing pediatric Cardiac/Thoracic surgeries.
- 2015 Cardiovascular Surgery:** Certified by the American Board of Surgery with cardiac surgery fellowship combined with vascular surgery. A Cardiovascular Surgeon performs operations on the heart and blood vessels of the body. This may include replacement of heart valves, or bypasses of blocked coronary arteries. Training in the specialization of cardiovascular surgery involves the completion of a general surgery residency program followed by two or three more years of specialized training in all of the aspects of heart, blood vessel and chest surgery. Some surgeries include: Permanent transvenous pacemaker insertion, Cardiac surgery of the coronary artery (bypass); treatment of valvular heart disease, artery problems, carotid artery problems or Microvascular surgery for diabetic leg ulcers.
- 2020 Colon and Rectal Surgery:** Certified by the American Board of Colon & Rectal Surgery. Trained to diagnose and treat various diseases of the intestinal tract, colon, rectum, anal canal, and perianal area by medical and surgery means. Also deals with other organs and tissues (such as the liver, urinary, and female reproductive system) involved with primary intestinal disease. Have the expertise to diagnose and manage anorectal conditions in the office setting. Also treat problems of the intestine and colon, and perform endoscopic procedures to evaluate and treat problems such as cancer, polyps, and inflammatory conditions.
- 2030 Emergency Care:** Certified by the American Board of Emergency Medicine. Focuses on the immediate decision-making and action necessary to prevent death or any further disability both in the pre-hospital setting by directing emergency medical technicians and in the emergency department. Provides immediate recognition, evaluation, care, stabilization and disposition of a generally diversified population of adult and pediatric patients in response to acute illness and injury.
- 2035 Emergency Care — Pediatrics:** Certified by the American Board of Emergency Medicine *or* the American Board of Pediatrics, with a certificate of added qualification in Pediatric Emergency Medicine. An emergency physician who has special qualifications to manage emergencies in infants and children.
- 2050 General Surgery:** Certified by the American Board of Surgery. A surgeon manages a broad spectrum of surgical conditions affecting almost any area of the body. The surgeon establishes the diagnosis and provides the preoperative, operative, and postoperative care to surgical patients and is usually responsible for the comprehensive management of the trauma victim and the critically ill surgical patient. The surgeon uses a variety of diagnostic techniques, including endoscopy, for observing internal structures, and may use specialized instruments during operative procedures. A general surgeon is expected to be familiar with the salient features of other surgical specialties in order to recognize problems in those areas and to know when to refer a patient to another specialist.
- 2090 Neurological Surgery:** Certified by the American Board of Neurological Surgery. Provides the operative and non-operative management (i.e., prevention, diagnosis, evaluation, treatment, critical care, and rehabilitation) of disorders of the central peripheral, and autonomic nervous systems, including their supporting structures and vascular supply; the evaluation and treatment of pathological processes which modify function or activity of the nervous system; and the operative and non-operative management of pain. Treats patients with disorders of the nervous system; disorders of the brain, meninges, skull, and their blood supply, including the extracranial carotid and vertebral arteries, disorders of the pituitary gland; disorders of the spinal cord, meninges, and vertebral column, including those which may require treatment by spinal fusion or instrumentation; and disorders of the cranial and spinal nerves throughout their distribution.
- 2095 Neurological Surgery — Pediatrics:** A neurological surgeon who spends at least 70 percent of his/her time with pediatric patients.
- 2070 OB/GYN — General:** Certified by the American Board of Obstetrics and Gynecology. An obstetrician/gynecologist possesses special knowledge, skills, and professional capability in the medical and surgical care of the female reproductive system and associated disorders. This physician serves as a consultant to other physicians, and as a primary physician for women.

- 1160 **OB/GYN — Gynecological Oncology:** Certified by the American Board of Obstetrics and Gynecology with a certificate of special qualification in Gynecologic Oncology. An obstetrician/gynecologist who provides consultation and comprehensive management of patients with gynecologic cancer.
- 1170 **OB/GYN — Gynecology Only:** Certified by the American Board of Obstetrics and Gynecology. A gynecologist possesses special knowledge, skills, and professional capability in the medical and surgical care of the female reproductive system and associated disorders. This physician serves as a consultant to other physicians, and as a primary physician for women.
- 1245 **OB/GYN — Laborist:** Certified by the American Board of Obstetrics and Gynecology. An obstetrician/gynecologist physician who works full time in a hospital, delivering babies only. A laborist does not see patients in an office setting, as a traditional obstetrician/gynecologist does.
- 1420 **OB/GYN — Maternal Fetal Medicine/Perinatology:** Certified by the American Board of Obstetrics and Gynecology. An obstetrician/gynecologist who cares for, or provides consultation on, patients with complications of pregnancy. This specialist has advanced knowledge of the obstetrical, medical, and surgical complications of pregnancy, and their effect on both the mother and the fetus. He/she also possesses expertise in the most current diagnostic and treatment modalities used in the care of patients with complicated pregnancies.
- 1270 **OB/GYN — Obstetrics:** Certified by the American Board of Obstetrics and Gynecology. An obstetrician possesses special knowledge, skills, and professional capability in the medical and surgical care of the female reproductive system and associated disorders. This physician serves as a consultant to other physicians, and as a primary physician for women.
- 2075 **OB/GYN — Urogynecology:** Certified by the American Board of Obstetrics and Gynecology. These doctors become specialists with additional training and experience in the evaluation and treatment of conditions that affect the female pelvic organs, and the muscles and connective tissue that support the organs. They specialized in the care of women with Pelvic Floor Dysfunction. The Pelvic Floor is the muscles, ligaments, connective tissue, and nerves that help support and control the rectum, uterus, vagina, and bladder.
- 2097 **Oculo — Facial/Oculoplastic:** Certified by the American Board of Plastic Surgery or Ophthalmology with training in Ocular Facial. Plastic and Reconstructive surgery of the periorbital and facial tissues including eyelids & eyebrows, cheeks, orbit, and lacrimal (tear) system. Eye Plastic surgeons are ophthalmologists who have completed extensive post-residency training in this unique sub-specialty. This is a highly specialized area of plastic surgery that focuses on the area around the eyes, forehead and midface These include drooping eyelids (ptosis), eyelid malposition (entropion, ectropion), and eyelash abnormalities. They treat tumors of the eyelids and orbit, trauma, congenital abnormalities, thyroid eye disease, tearing problems and blinking difficulties (blepharospasm, hemifacial spasm).
- 2098 **Oncology — Surgical:** is the branch of surgery which focuses on the surgical management of malignant neoplasms (cancer). There are currently 14 surgical oncology fellowship training programs in the United States that have been approved by the Society of Surgical Oncology. While many general surgeons are actively involved in treating patients with malignant neoplasms, the designation of "surgical oncologist" is generally reserved for those surgeons who have completed one of the approved fellowship programs.
- 2100 **Ophthalmology:** Certified by the American Board of Ophthalmology. An ophthalmologist has the knowledge and professional skills needed to provide comprehensive eye and vision care. Ophthalmologists are medically trained to diagnose, monitor, and medically or surgically treat all ocular and visual disorders. This includes problems affecting the eye and its component structures, the eyelids, the orbit and the visual pathways. In so doing, an ophthalmologist prescribes vision services, including glasses and contact lenses.
- 2120 **Ophthalmology — Orbital:** Certified by the American Board of Ophthalmology with a practice that is limited to the diagnosis, treatment, and surgical treatment of eye socket and ocular area. Does not include cataract surgery, refractive surgery, and traditional medical treatments such as vision, contact lenses, etc.
- 2250 **Ophthalmology — Pediatrics and Adolescent:** Certified by the American Board of Ophthalmology. An ophthalmologist has the knowledge and professional skills needed to provide comprehensive eye and vision care. Ophthalmologists are medically trained to diagnose, monitor, and medically or surgically treat all ocular and visual disorders. This includes problems affecting the eye and its component structures, the eyelids, the orbit and the visual pathways. In so doing, an

- ophthalmologist prescribes vision services, including glasses and contact lenses. At least 70 percent of time is spent with pediatric patients.
- 2105 **Ophthalmology — Refractive:** Certified by the American Board of Ophthalmology. At least 70 percent of time is spent in refractive surgery, including laser correction surgery.
- 2130 **Ophthalmology — Retinal Surgery:** Certified by the American Board of Ophthalmology. At least 70 percent of time is spent in retinal surgery.
- 2140 **Oral Surgery:** Certified by the American Boards of Dentistry *and* General Surgery. At least 70 percent of time is spent in surgery related to the mouth region.
- 2135 **Oral-Maxillofacial Surgery:** Certified by the American Boards of Dentistry with additional fellowship in Oral-Maxillofacial Surgery. This surgeon is skilled in a wide spectrum of diseases, injuries and defects in the head, neck, face, jaws and the hard and soft tissues of the oral and maxillofacial region. They treat the entire craniomaxillofacial complex: anatomical area of the mouth, jaws, face, skull, as well as associated structures.
- 2145 **Orthopedic Oncology:** An orthopedic oncologist specializes in the diagnosis and treatment of primary benign and malignant (cancerous) bone and soft-tissue tumors. Following an orthopedic surgical residency, a fellowship in orthopedic oncology lasting one to two years is to be completed. During this time, the physician will learn in depth about the pathology and treatment of various forms of primary malignant neoplasm affecting the bony structures of the human body.
- 2280 **Orthopedic Sports Medicine:** Certified by the American Board of Orthopaedic Surgery. An orthopedic surgeon is trained in the preservation, investigation and restoration of the form and function of the extremities, spine, and associated structures by medical and physical means. At least 70 percent of time is spent on sports-related injuries.
- 2150 **Orthopedic Surgery:** Certified by the American Board of Orthopaedic Surgery. An orthopedic surgeon is trained in the preservation, investigation and restoration of the form and function of the extremities, spine, and associated structures by medical, surgical, and physical means. An orthopedic surgeon is involved with the care of patients whose musculoskeletal problems include congenital deformities, trauma, infections, tumors, metabolic disturbances of the musculoskeletal system, deformities, injuries, and degenerative diseases of the spine, hands, feet, knee, hip, shoulder, and elbow in children and adults. An orthopedic surgeon is also concerned with primary and secondary muscular problems and the effects of central or peripheral nervous system lesions of the musculoskeletal system.
- 2175 **Orthopedic Surgery — Foot and Ankle:** An orthopedic surgeon who spends at least 70 percent of his/her time on foot and/or ankle cases.
- 2170 **Orthopedic Surgery — Hand:** Certified by the American Board of Orthopaedic Surgery with a certificate of added qualification in Hand Surgery. A specialist trained in the investigation, preservation and restoration by medical, surgical, and rehabilitative means of all structures of the upper extremity directly affecting the form and function of the hand and wrist.
- 2180 **Orthopedic Surgery — Joint Replacement:** Certified by the American Board of Orthopaedic Surgery. At least 70% percent of time is spent in the surgical treatment of degenerative diseases of the knee, hip, shoulder, and ankle.
- 2200 **Orthopedic Surgery — Pediatrics:** Certified by the American Board of Orthopaedic Surgery. At least 70 percent of time is spent with pediatric patients.
- 2190 **Orthopedic Surgery — Spine:** Certified by the American Board of Orthopaedic Surgery. At least 70 percent of time is spent in the surgical treatment of diseases of the spine.
- 2285 **Orthopedic Surgery — Trauma:** Certified by the American Board of Orthopaedic Surgery. At least 70 percent of time is spent on the treatment of trauma injuries. Likely located in an emergency unit.
- 2210 **Otolaryngology:** Certified by the American Board of Otolaryngology. An otolaryngologist — head and neck surgeon provides comprehensive medical and surgical care for patients with diseases and disorders that affect the ears, nose, throat, the respiratory and upper alimentary systems and related structures of the head and neck. An otolaryngologist

diagnoses and provides medical and/or surgical therapy or prevention of diseases, allergies, neoplasms, deformities, disorders and/or injuries of the ears, nose, sinuses, throat, respiratory and upper alimentary systems, face, jaws, and the other head and neck systems. Head and neck oncology, facial plastic and reconstructive surgery, and the treatment of disorders of hearing and voice are fundamental areas of expertise.

- 2215 Otolaryngology — Head and Neck Surgery:** An otolaryngologist with additional training in plastic and reconstructive procedures within the head, face, neck and associated structures, including cutaneous head and neck oncology and reconstruction, management of maxillofacial trauma, soft tissue repair, and neural surgery. The field is diverse and involves a wide age range of patients, from the newborn to the aged. While both cosmetic and reconstructive surgery is practiced, many additional procedures interface with them.
- 2240 Pediatric Surgery:** Certified by the American Board of Surgery with a certificate of special qualification in Pediatric Surgery. A surgeon with expertise in the management of surgical conditions in premature and newborn infants, children, and adolescents.
- 2260 Plastic and Reconstruction:** Certified by the American Board of Plastic Surgery. A plastic surgeon deals with the repair, reconstruction, or replacement of physical defects of form or function involving the skin, musculoskeletal system, craniomaxillo facial structures, hand, extremities, breast and trunk, and external genitalia. He/she uses aesthetic surgical principles not only to improve undesirable qualities of normal structures but in all reconstructive procedures as well. A plastic surgeon possesses special knowledge and skill in the design and surgery of grafts, flaps, free tissue transfer and replantation. Competence in the management of complex wounds, the use of implantable materials, and in tumor surgery is required.
- 2265 Plastic and Reconstruction — Pediatrics:** A plastic surgeon that spends at least 70 percent of his/her time with pediatric patients.
- 2275 Thoracic Surgery:** Certified by the American Board of Thoracic Surgery. A thoracic surgeon provides the operative, perioperative, and critical care of patients with pathologic conditions within the chest. Included is the surgical care of coronary artery disease, cancers of the lung, esophagus and chest wall, abnormalities of the trachea, abnormalities of the great vessels and heart valves, congenital anomalies, tumors of the mediastinum, and diseases of the diaphragm. The management of the airway and injuries of the chest is within the scope of the specialty. Thoracic Surgeons have the knowledge, experience and technical skills to accurately diagnose, safely operate upon and effectively manage patients with thoracic diseases of the chest. This requires substantial knowledge of cardiorespiratory physiology and oncology, as well as capability in the use of heart assist devices, management of abnormal heart rhythms and drainage of the chest cavity, respiratory support systems, endoscopy and invasive and noninvasive diagnostic techniques. The management of the airway and injuries of the chest is within the scope of the specialty. At least 90 percent of his/her time is spent performing Thoracic related procedures. Use the Cardiac / Thoracic Surgery specialty for physicians performing both areas.
- 2300 Transplant Surgery — Kidney:** Certified by the American Board of Surgery with special certification in transplant surgery. This physician's practice is predominantly related to kidney procedures.
- 2310 Transplant Surgery — Liver:** Certified by the American Board of Surgery with special certification in transplant surgery. This physician's practice is predominantly related to liver procedures.
- 2292 Transplant Surgery — Medical:** Certified by the American Board of Surgery with special certification in transplant surgery. Transplant Surgeons will have experience with histocompatibility/immunology, infectious disease, and the preoperative and postoperative management of patients who require transplantation, as well as in performance and interpretation of special diagnostic techniques necessary for the management of rejection and other problems in transplant recipients.
- 2290 Transplant Surgery — Thoracic:** Certified by the American Board of Surgery with special certification in transplant surgery. This physician's practice is predominantly related to cardiac procedures.
- 2295 Trauma Surgery:** Certified by the American Board of Surgery with special certification in critical care surgery. They have expertise in the management of the critically ill and postoperative patient, particularly the trauma victim, who specializes in critical care medicine diagnoses, treats and supports patients with multiple organ dysfunction. This specialist may have administrative responsibilities for intensive care units and may also facilitate and coordinate patient care among the primary physician, the critical care staff, and other specialists.

- 2320 **Urology:** Certified by the American Board of Urology. An urologist manages benign and malignant medical and surgical disorders of the genitourinary system and the adrenal gland. This specialist has comprehensive knowledge of, and skills in, endoscopic, percutaneous, and open surgery of congenital and acquired conditions of the urinary and reproductive systems and their contiguous structures.
- 2335 **Urology — Pediatrics:** Certified by the American Board of Pediatrics with a certificate of special qualification in Pediatric Urology. A pediatrician who manages benign and malignant medical and surgical disorders of the genitourinary system and the adrenal gland. This specialist has comprehensive knowledge of, and skills in, endoscopic, percutaneous, and open surgery of congenital and acquired conditions of the urinary and reproductive systems and their contiguous structures.
- 2340 **Vascular Surgery:** Certified by the American Board of Surgery with a certificate of added qualification in General Vascular Surgery. A vascular surgeon has expertise in the management of surgical disorders of the blood vessels, excluding the intracranial vessels of the heart. A Vascular Surgeon has expertise in the diagnosis and care of patients with diseases and disorders affecting the arteries, veins and lymphatic systems, excluding vessels of the brain and heart. Common procedures performed by Vascular Surgeons include the opening of artery blockages to prevent stroke, correction of artery blockages in the legs and abdominal organs, repair of veins to improve circulation, treatment of aneurysms (bulges) in the aorta, and care of patients suffering vascular trauma. Vascular Surgeons perform open surgery as well as endovascular (minimally invasive) procedures using balloon angioplasty and stents, and are also trained in the treatment of vascular disease by medical (non-surgical) means. Vascular Surgeons also perform non-invasive diagnostic testing to detect vascular problems.

Anesthesiology/Pathology/Radiology

- 2000 **Anesthesiology:** Certified by the American Board of Anesthesiology. Trained to provide pain relief and maintenance, or restoration, of a stable condition during and immediately following an operation, an obstetric or diagnostic procedure. Also provides medical management and consultation in pain management and critical care medicine. Anesthesiologists diagnose and treat acute, longstanding, and cancer pain problems; diagnose and treat patients with critical illnesses or severe injuries; direct resuscitation in the care of patients with cardiac or respiratory emergencies, including the need for artificial ventilation; and supervise post anesthesia recovery.
- 2230 **Anesthesiology — Pain Clinic:** Certified by the American Board of Anesthesiology with a certificate of added qualification in Pain Management. An anesthesiologist who provides a high level of care, either as a primary physician or consultant, for patients experiencing problems with acute, chronic and/or cancer pain in both hospital and ambulatory settings.
- 4005 **Anesthesiology — Pediatric:** Certified by the American Board of Anesthesiology. An Anesthesiologist who specializes in Pediatric Anesthesiology provides anesthesia for neonates, infants, children and adolescents undergoing surgical, diagnostic or therapeutic procedures as well as appropriate pre- and post-operative care, advanced life support, and acute pain management.
- 4010 **Dermatopathology:** Certification by the American Board of Pathology or Dermatology with a certificate of added qualification in Dermatopathology. A dermatopathologist has the expertise to diagnose and monitor diseases of the skin including infectious, immunologic, degenerative, and neoplastic diseases. This entails the examination and interpretation of specially prepared tissue sections, cellular scrapings, and smears of skin lesions by means of routine and special (electron and fluorescent) microscopes.
- 4030 **Diagnostic Radiology (M.D. interventional):** Certified by the American Board of Radiology with a certificate of added qualification in Vascular & Interventional Radiology. A radiologist who diagnoses and treats diseases by various radiologic imaging modalities. These include fluoroscopy, digital radiography, computed tomography, sonography and magnetic resonance imaging.
- 4020 **Diagnostic Radiology (M.D. neuro-interventional):** A radiologist who diagnoses and treats diseases utilizing imaging procedures as they relate to the brain, spine and spinal cord, head, neck, and organs of special sense in adults and children.
- 4040 **Diagnostic Radiology (M.D. noninterventional):** Certified by the American Board of Radiology. A radiologist who utilizes x-ray, radionuclides, ultrasound, and electromagnetic radiation to diagnose and treat disease.

- 4060 **Laboratory Hematology:** Certified by the American Board of Pathology with a certificate of special qualification in Hematology.
- 1175 **Mammography:** Certified by the American Board of Radiology with special certification in mammography. A mammographer is a radiologist with greater than 70 percent of his/her practice in mammography.
- 4070 **Microbiology (M.D. Only):** Certified by the American Board of Pathology with a certificate of special qualification in Medical Microbiology. A physician who is expert in the isolation and identification of microbial agents that causes infectious disease. Viruses, bacteria, and fungi, as well as parasites are identified and, where possible, tested for susceptibility to appropriate antimicrobial agents.
- 4080 **Nuclear Medicine (M.D. Only):** Certified by the American Board of Nuclear Medicine. A nuclear medicine specialist employs the properties of radioactive atoms and molecules in the diagnosis and treatment of disease, and in research. The nuclear medicine specialist has special knowledge in the biologic effects of radiation exposure, the fundamentals of the physical sciences and the principles and operation of radiation detection and imaging instrumentation systems.
- 4090 **Other Laboratory (M.D. Only):** A laboratory physician that is not classified elsewhere.
- 4100 **Pathology — Combined (M.D. Only):** Certified by the American Board of Pathology for Combined Anatomic and Clinical Pathology. A pathologist deals with the causes and nature of disease and contributes to diagnosis, prognosis, and treatment through knowledge gained by the laboratory application of the biologic, chemical, and physical sciences. A pathologist uses information gathered from the microscopic examination of tissue specimens, cells, and body fluids, and from clinical laboratory tests on body fluids and secretions for the diagnosis, exclusion, and monitoring of disease.
- 2270 **Pathology — Anatomic (M.D. Only):** Certified by the American Board of Pathology in Anatomic Pathology. Performs surgical procedures in the diagnosis and identification of diseases. And deals with the morphologic changes in the tissues, gross and microscopic; pathological anatomy.
- 4103 **Pathology — Clinical (M.D. Only):** Certified by the American Board of Pathology for Clinical Pathology and deals with the study of disease and disease processes by means of chemical, microscopic, and serologic examinations.
- 4105 **Pathology — Pediatric (M.D. Only):** Certified by the American Board of Pathology. A Pediatric Pathologist is expert in the laboratory diagnosis of diseases that occur during fetal growth, infancy and child development. The practice requires a strong foundation in general pathology and substantial understanding of normal growth and development, along with extensive knowledge of pediatric medicine.
- 4107 **Pathology — Surgical (M.D. Only):** Certified by the American Board of Pathology in Anatomic Pathology with a Surgical Pathology fellowship. A Surgical Pathologist examines gross and microscopic surgical specimens, as well as biopsies submitted by non-surgeons such as general internists, medical subspecialists, dermatologists, and interventional radiologists. The practice of surgical pathology allows for definitive diagnosis of disease (or lack thereof) in any case where tissue is surgically removed from a patient. The pathologist may perform evaluations of molecular properties of tissue by immunohistochemistry or other laboratory tests.
- 4130 **Radiation Therapy (M.D. Only):** A radiation oncologist physician certified by the American Board of *either* Pathology *or* Radiology.

Ph.D. Only Positions

- 3020 **Ph.D. Only — Biochemistry:** Biochemists study such things as the structures and physical properties of biological molecules, including proteins, carbohydrates, lipids, and nucleic acids; the mechanisms of enzyme action; the chemical regulation of metabolism; the chemistry of nutrition; the molecular basis of genetics, the chemistry of vitamins; energy utilization in the cell; and the chemistry of the immune response.
- 3050 **Ph.D. Only — Diagnostic Radiology: (Physicist)** This is a subspecialty concerned with or aiding in diagnosis using radiology. A Diagnostic Radiologists uses ionizing and nonionizing radiation for the diagnosis and treatment of disease.
- 3055 **Ph.D. Only — Imaging (Physicist):** This specialty provides clinical medical imaging physics services using radiological imaging equipment. Clinical medical physicists are Board certified (American Board of Radiology, American Board of

Medical Physics and/or the American Board of Science in Nuclear Medicine) and maintain clinical credentials in independent specialties of medical imaging physics. Imaging Physicists perform independent research in digital x-ray imaging, magnetic resonance imaging (MRI), x-ray computed tomography (CT), nuclear medicine physics (imaging and therapy) and optical imaging.

- 3060 **Ph.D. Only — Immunology:** Certified by the American Board of Allergy and Immunology. Clinical treatments and ongoing research programs in molecular aspects of lymphocyte differentiation and function, including MHC expression and peptide interactions; class I MHC structure and function; germinal center biology; HIV pathogenesis; immune responses to gene therapy; inflammation and allergy; signal transduction; and V(D)J recombination.
- 3070 **Ph.D. Only — Microbiology:** A medical provider who is an expert in the isolation and identification of microbial agents that cause infectious disease.
- 3075 **Ph.D. Only — Neurophysiology:** Ph.D. A psychiatrist with expertise in the diagnosis and management of central, peripheral and autonomic nervous system disorders using a combination of clinical evaluation and electrophysiologic testing such as electroencephalography (EEG), electromyography (EMG), and nerve conduction studies (NCS).
- 3215 **Ph.D. Only — Neuropsychology:** A Ph.D. psychologist who has completed special training in the neurobiological causes of brain disorders, and who specializes in diagnosing and treating these illnesses using a predominantly medical (as opposed to psychoanalytical) approach.
- 3100 **Ph.D. Only — Nuclear Medicine:** The branch of medicine concerned with the use of radioisotopes in the diagnosis, management, and treatment of disease. Nuclear medicine uses small amounts of radioactive materials or radiopharmaceuticals, substances that are attracted to specific organs, bones, or tissues
- 3140 **Ph.D. Only — Other Laboratory:** A laboratory physician that is not classified elsewhere.
- 3150 **Ph.D. Only — Pathology:** A Ph.D. specialist in pathology; They practices evaluates or supervise diagnostic tests, using materials removed from living or dead patients, and functions as a laboratory consultant to clinicians, or who conducts experiments or other investigations to determine the causes or nature of disease changes
- 3210 **Ph.D. Only — Psychology:** A professional specializing in diagnosing and treating diseases of the brain, emotional disturbance, and behavior problems. Psychologists use psychotherapy as the primary form of treatment. In addition to their Ph.D. and Board certification, they may have additional training in a specialized type of therapy.
- 3211 **Ph.D. Only — Psychology — Child:** A professional specializing in diagnosing and treating diseases of the brain, emotional disturbance, developmental problems and behavior problems in children. Psychologists use play and other psychotherapy as treatment and their practice is limited to children. In addition to their Psychology Ph.D., they may also have other qualifications, including additional training in Child Psychology.
- 3220 **Ph.D. Only — Radiation Therapy:** (Physicist) Radiation Therapists specialize in the use of high-energy rays to damage cancer cells, stopping them from growing and dividing. Radiation therapists use radiation therapy to locally treat cancer cells only in the affected area. They have a PhD in physics, medical physics or a physical science and also is board certified by the American Board or Radiology in Therapeutic Radiologic Physics or by the American Board of Medical Physics in Radiation Oncology Physics.

Other Health Care Providers

- 3000 **Audiology:** A health care professional who is trained to evaluate hearing loss and related disorders, including balance disorders and tinnitus (ringing in the ears) and to rehabilitate individuals with hearing loss and related disorders. An audiologist uses a variety of tests and procedures to assess hearing and balance function. Audiologists fit and dispense hearing aids and other assistive devices for hearing.
- 4000 **Biochemistry (M.D. Only):** Biochemists study such things as the structures and physical properties of biological molecules, including proteins, carbohydrates, lipids, and nucleic acids; the mechanisms of enzyme action; the chemical regulation of metabolism; the chemistry of nutrition; the molecular basis of genetics, the chemistry of vitamins; energy utilization in the cell; and the chemistry of the immune response.

- 3025 **Certified Nurse Specialist:** All clinical nurse specialists are registered nurses (RNs) who hold a master's degree in nursing with a focus on a specific specialty. These nursing professionals usually work in a hospital setting delivering direct patient care, teaching staff and patients, consulting with other professionals, and providing leadership and supervision in the workplace.
- 3030 **Certified Registered Nurse Anesthetist:** Certified registered nurse anesthetists are degreed RNs with critical care experience and graduate training in the delivery of anesthesia. CRNAs, under a doctor's supervision, administer intravenous, spinal, and other anesthetics as needed for surgical operations, deliveries, and other medical and dental procedures. They control the flow of gases or injected fluids to maintain the needed anesthetic state of the patient.
- 3035 **Chiropractor:** Requires minimally two years of college and four years in a chiropractic school. Chiropractic defined as a system of diagnosis and treatment that is based upon the concept that the nervous system coordinates all of the body's functions and holds that disease results from a lack of normal nerve function and employs manipulation and specific adjustment of body structures. Chiropractors work to manipulate the spine with their hands to realign the vertebrae and relieve the pressure on the nerves.
- 3040 **Dentistry:** The evaluation, diagnosis, prevention and/or treatment (non-surgical, surgical, or related procedures) of diseases, disorders, and/or conditions of the oral cavity, maxillofacial area and/or the adjacent and associated structures and their impact on the human body.
- 3041 **Dentistry — Pediatric:** Licensed by the state board of dentistry, a pediatric dentist specializes in both primary and comprehensive preventive and therapeutic oral health care for infants and children through adolescence, including those with special health care needs.
- 3065 **Epidemiology:** Focus on aspects of determining the occurrences and risk factors of disease, and practicing of prevention and treatment of disease. This can include surveillance and monitoring, screening, establishing and administering intervention programs for prevention or treatment of diseases, designing studies for determining risk factors of effectiveness of prevention approaches, and analyzing data.
- 4050 **Immunology (M.D. Only):** Certified by the American Board of *either* Allergy and Immunology *or* Internal Medicine with a certificate of added qualification in Clinical and Laboratory Immunology. Utilizes various laboratory tests and complex procedures to diagnose and treat disorders characterized by defective responses of the body's immune system.
- 3080 **Midwife:** Trained to assist a woman during childbirth. Midwives also provide prenatal care for pregnant women, birth education for women and their partners, and care for mothers and newborn babies after the birth.
- 3090 **Nuclear Medicine — Non-radiologist (Dosimetrist):** The branch of medicine concerned with the use of radioisotopes in the diagnosis, management, and treatment of disease. Nuclear medicine uses small amounts of radioactive materials or radiopharmaceuticals, substances that are attracted to specific organs, bones, or tissues.
- 3112 **Nurse Practitioner — Geriatric:** A Geriatric Nurse Practitioner is a state-licensed nurse and specializes in the branch of medicine concerned with the diagnosis, treatment and prevention of disease in older people and the problems specific to aging. An NP may function as a primary direct provider of health care and prescribe medications.
- 3113 **Nurse Practitioner — Medical Specialty:** Is a state-licensed nurse, and primary function involves any specialty found in the "Medical Specialties" of this document with the exception of: Family Practice, Internal Medicine, Pediatrics, Geriatrics, and any subspecialties of the above. The NP specializes in providing the patient with a broad spectrum of care, both preventive and curative, over a period of time and to coordinate all of the care the patient receives. An NP may function as a primary direct provider of health care and prescribe medications or as a support position for physicians.
- 3115 **Nurse Practitioner — Primary Care:** Is a state-licensed nurse, and primary function involves the specialties of Family Practice, Internal Medicine, Pediatrics and any subspecialties of the above. The NP specializes in providing the patient with a broad spectrum of care, both preventive and curative, over a period of time and to coordinate all of the care the patient receives. A primary care NP often functions as a primary direct provider of health care and prescribe medications.
- 3117 **Nurse Practitioner — Surgical Specialty:** Is a state-licensed nurse, and primary function involves any specialty found in the "Medical Specialties" of this document. The NP specializes in providing the patient with a broad spectrum of care and helps coordinates the care the patient receives. A surgical NP functions as a support position for physicians.

- 3118 Nutritionist:** In a hospital or nursing home, a person who plans and/or formulates special meals for patients. It can also simply be a euphemism for a cook who works in a medical facility but who does not have extensive training in special nutritional needs. In clinical practice, a specialist in nutrition. Nutritionists can help patients with special needs, allergies, health problems, or a desire for increased energy or weight change devise healthy diets. Some nutritionists in private practice are well- trained, hold a degree and are licensed. Training requirements vary by state.
- 3120 Occupational Therapist:** A licensed health professional that is trained to evaluate patients with joint conditions, such as arthritis, to determine the impact the disease on their activities of daily living. Occupational therapists can design and prescribe assistive devices that can improve the quality of the activities of daily living for patients with arthritis and other conditions of the muscles and joints.
- 3130 Optometrist:** An optometrist is a Doctor of Optometry, an O.D. A health care professional who is licensed to provide primary eye care services. Optometrists examine and diagnose eye diseases such as glaucoma, cataracts, and retinal diseases, diagnose related systemic (bodywide) conditions such as hypertension and diabetes that may affect the eyes, examine, diagnose and treat visual conditions such as nearsightedness, farsightedness, astigmatism and presbyopia, and prescribe glasses, contact lenses, low vision rehabilitation and medications. Optometrists also perform minor surgical procedures such as the removal of foreign bodies.
- 3042 Orthodontics:** The diagnosis, prevention, interception and treatment of all forms of malocclusion of the teeth and associated alterations in their surrounding structures; the design, application and control of functional and corrective appliances; and the guidance of the dentition and its supporting structures to attain and maintain optimum occlusal relations in physiologic and esthetic harmony among facial and cranial structures.
- 3155 Perfusionist:** A specialized health professional who operates the heart-lung machine during cardiac surgery and other surgeries that require cardiopulmonary bypass. The perfusionist's main responsibility is to support the physiological and metabolic needs of the cardiac surgical patient so that the cardiac surgeon may operate. The perfusionist is solely responsible for the circulatory and respiratory functions of the heart-lung machine. Perfusionists can be involved in procurement of cardiothoracic donor organs for transplant.
- 3160 Pharmacist:** A professional who fills prescription. Pharmacists are familiar with medication ingredients, interactions, cautions, and hints. Pharmacists prepare and distribute medicines and to give information about them.
- 4110 Pharmacology:** Pharmacology is the branch of medicine and biology concerned with the study of drug action. More specifically, it is the study of the interactions that occur between a living organism and chemicals that affect normal or abnormal biochemical function.
- 3170 Physical Therapist:** Trained and certified by a state or accrediting body to design and implement physical therapy programs. Physical Therapists use specially designed exercises and equipment to help patients regain or improve their physical abilities. Physical therapists work with many types of patients, from infants born with musculoskeletal birth defects, to adults suffering from sciatica or the after- effects of injury, to elderly post-stroke patients.
- 3180 Physician Assistant — Medical:** PA training programs are accredited by the National Commission on Certification of Physician Assistants. They work under the supervision of a licensed doctor (an MD) or osteopathic physician (a DO). A PA can perform histories and physical examinations that do not go beyond a particular level. A PA can order any test which he or she is competent to interpret and provide the appropriate treatment. PAs follow patients through their hospital course or their course of treatment in a clinic setting.
- 3182 Physician Assistant — Primary Care:** PA training programs are accredited by the National Commission on Certification of Physician Assistants. They work under the supervision of a licensed doctor (an MD) or osteopathic physician (a DO). A PA can perform histories and physical examinations that do not go beyond a particular level. A PA can order any test which he or she is competent to interpret and provide the appropriate treatment. PAs follow patients through their hospital course or their course of treatment in a clinic setting.
- 3185 Physician Assistant — Surgical:** PA training programs are accredited by the National Commission on Certification of Physician Assistants. A mid-level medical practitioner who works under the supervision of a licensed doctor (an MD) or osteopathic physician (a DO). PAs can practice in virtually all surgical specialties, provided they are properly trained and supervised. PAs can be 2nd and 3rd assists in surgical procedures and can perform simple surgical procedures such as laceration repair, etc.

- 4120 **Physiology (M.D. Only):** Physiology is the science of the function of living systems. This includes how organisms, organ systems, organs, cells, and bio-molecules carry out the chemical or physical functions that exist in a living system.
- 3195 **Podiatry — Medical:** A podiatrist is a provider that specializes in the evaluation and treatment of diseases of the foot and emphasizes in health and conditions affecting the lower extremities.
- 3190 **Podiatry — Surgical:** A podiatrist is a provider that specializes in the evaluation and treatment of diseases of the foot. They perform surgical procedures on the foot.
- 3212 **Psychology (Master's Level):** A professional specializing in diagnosing and treating diseases of the brain, emotional disturbance, and behavior problems. Psychology practitioners use psychotherapy as treatment. These providers have a certified masters in Psychology.
- 3230 **Social Worker:** A social worker helps individuals deal with a variety of mental health and daily living problems to improve overall functioning. A social worker usually has a master's degree in social work and has studied sociology, growth and development, mental health theory and practice, human behavior/social environment, psychology, research methods.
- 3235 **Speech Pathology:** A specialist who evaluates and treats communication disorders and swallowing problems. Speech pathologists usually have an MA or doctorate in their specialty, as well as a Certificate of Clinical Competence (CCC) earned by working under supervision.

*Most definitions are from *Which Medical Specialist For You*, revised edition of March 2003, published by The American Board of Medical Specialties, Evanston, Illinois, and the Web site www.abms.org.

Administrative and Physician Leadership Positions

Head Leadership Positions

- 5170 **Chief Compliance Officer (CCO)** - Responsible for maintaining contracts and processes such that adherence to federal and state regulations are maintained.
- 5000 **Chief Financial Officer (CFO)** - This position is responsible for the organization's financial management, financial planning, fiscal policies, and administration of accounting practices. Directs and coordinates business office activity (insurance claims, filing, billing, collections, and accounts receivable).
- 5010 **Chief Information Officer (CIO)** - Manages systems and computer activities, hardware, software, programming, networks, systems design and implementation. Designs and implements processes to automate or streamline operations. This is a vice president level position.
- 5015 **Chief Medical Officer (CMO)-MD** - Develops and implements strategic goals related to the quality improvement and management programs followed by medical and nursing staff. Develops policies, practices, and systems to monitor and implement quality control standards and measurements while ensuring compliance with regulatory agency's standards and requirements.
- 5017 **Chief Medical Informatics Officer (CMIO) — MD —** Develops and manages the organization's capabilities in information systems and tools that are applied to medical information. Coordinates analytical support for medical management, including profiling, health economics and business analytics/performance metrics. Works with the Information Systems department to prioritize medical management needs. This position typically reports to the Chief Medical Officer (CMO) or Chief Information Officer (CIO).
- 5025 **Chief Nursing Officer (CNO)** – Exercises leadership responsibility over the practice of Nursing as a member of the executive team. Responsible for evaluating, developing, recommending, and implementing policies and procedures related to the delivery of safe and efficient high quality nursing care. Directs and coordinates the activities of a staff of managerial, professional/technical, and auxiliary nursing personnel.
- 5035 **Chief of Medical Staff** – This position is elected by the medical staff and acts as a liaison between the medical staff and administration. Chief of Staff is required to ensure that the projects and policies get completed in timely manner. The principle duty of Chief of Staff is to ensure that the executive decisions are carried out and oversee that staff members follow these guidelines. Generally practices medicine for at least 50 percent of work time. This is typically a one to two-year term. This position requires a licensed physician
- 5140 **Chief Operating Officer (COO)** - This position may be considered the Vice President of Operations and is responsible for the daily operations of the medical practice and/or other affiliated organizations. Assists the CEO with planning and leadership of patient and non-patient care activities. This position reports to the CEO or President.
- 5045 **Dean, School of Medicine** – An academic dean is a senior administrator at a college or university who has authority over the school of medicine. They report to a provost or chancellor. The academic dean is responsible for approving faculty hiring, overseeing budget, fundraising, setting academic rules and policies, developing academic programs and performing other administrative functions within the school of medicine. The academic dean must have the ability to improve school programs and monitor policies, while making sure all accreditation, State, and Federal criterion concerning academics is strictly followed.
- 5060 **Hospital Administrator** – Directs and coordinates all hospital operations. This is the top management position within the hospital reporting to the hospital board or corporate/system executive.
- 5070 **Medical Director** – Primary function is to manage and coordinate all medical and related services of the clinic, with the exception of nursing services, under the direction of the governing board. This position interacts with the Physician Administrator and acts as a liaison and representative for the physician teams.

- 5075 **Associate Medical Director** – Responsible for providing physician leadership and support for clinical process analysis and improvement in the ambulatory setting, including creating goals and plans aimed at improving patient, staff and clinician satisfaction, practice efficiency, care outcomes and financial performance. Provides physician leadership to the planning and implementation of electronic health record applications. Reports to the Medical Director
- 5090 **Non-physician Administrator (CEO/CAO)** – A non-physician that plans, directs, and coordinates the administrative activity of the organization; participates with governing board in planning and determining the strategic goals; and is responsible for all operating and financial performance. This is the top non-physician management position.
- 5100 **Physician Administrator (CEO)** – A physician that plans, directs, and coordinates the administrative activity of the organization; participates with governing board in planning and determining the strategic goals; and is responsible for all operating and financial performance. This is the top physician management position and reports directly to the governing board.
- 5095 **President/Chancellor** – The chancellor is the chief executive officer of a university or college campus. Chancellors guide the financial direction and academic operations. This position reports to the institution's board of trustees. The President/Chancellor is responsible planning the college's budget, overseeing the attainment and appropriation of the institution's funds. They also must develop a long-term strategic plan for the college's future, which includes developing and implementing programs and services and bringing new technologies to the college.

Operational Directors

- 5150 **Business Office Manager** – This position is responsible for implementing the credit and collection policies and collection activities. They may also be responsible for patient accounts, insurance, billings, cashiering, coding, third party contracting, fee setting, and reimbursements.
- 5130 **Clinical Research Director** – Responsible for all research activities, grants, and drug studies. Also responsible for monitoring and complying with all state and federal government rules/regulations that are applicable to research activities. Directs all public relations activities concerning research and development.
- 5110 **Contracting Director** – Responsible for the overseeing, negotiations, and maintenance of the organizations medical revenue contracts. The contracts include commercial and/or governmental, capitated and/or non-capitated.
- 5085 **Director of Development**- Directs and coordinates fundraising programs for the organization, such as the annual fund, planned (deferred) giving, foundation and corporate fundraising, direct mail and phone solicitations, grant proposals, donor research, donor recordkeeping, donor recognition, special fundraising events, etc.
- 5180 **Division Operations Director** - Oversees a group of diverse clinic and/or hospital departments, but not all clinic or hospital departments. Reports to COO or CAO.
- 5185 **Division or Section Chair** – Oversees a set of specialties or set of departments. This position is has broader level responsibilities than a Department Chair.
- 5190 **Finance Director** – Responsible for preparing financial statements, supervises the financial departments as well as the internal accounting systems. Controller would be a similar title, reporting to the CFO.
- 5030 **Head of Facilities** – Responsible for major building projects and facilities expansions, space planning, remodeling of current facilities, maintenance of equipment and facilities. Responsible for operation and maintenance of facility.
- 5055 **Head of Faculty Practice Plan** – Responsible for management of a coordinated physician workforce through clinical program operational and financial integration. This position is responsible for cost-effective and patient-sensitive ambulatory care management, multidisciplinary program formation, and market diversification.
- 5068 **Head of Graduate Medical Education** – Responsible for the distribution of pertinent information to departments with residents such as resident training application forms, postgraduate training programs, hiring processes for acceptance of residents, and monitoring resident credentials. This position records training assignments for Medicare

- reimbursement for training postgraduate physicians and monitors Continuing Medical Education credits. This position prepares the yearly budget allocated for postgraduate training and monitors it throughout the fiscal year.
- 5050 **Health Plan Director** – In charge of all basic non-medical operations, i.e., plan operations, membership enrollment, plan marketing, claims processing/reporting, and health plan quality assurance data collection/reporting.
- 5040 **Human Resources Director** – This position is responsible for human resources or personnel administration to include employee/labor relations, employment, wage and benefit administration, staff development, policy design, and employee safety. Reports to the CEO.
- 5160 **In-house Legal Counsel** – This position may be considered the Vice President of Legal. They are responsible for legal matters related to malpractice, corporate, human resources, contracts, etc.
- 5071 **Medical Director- Behavioral Health** – Responsible for overseeing the range of services related to Behavioral Medicine. Directs the planning, implementation and marketing of services to meet the organization's objectives. This position requires a licensed physician.
- 5072 **Medical Director- Cancer Center** – Responsible for managing and directing activities of a Cancer Center. Administers Cancer Center programs and policies. Responsible for ensuring the Cancer Center meets quality, financial and operating objectives. This position requires a licensed physician.
- 5073 **Medical Director- Cardiology** – Responsible for overseeing the range of services related to Cardiology. Directs the planning, implementation and marketing of services to meet the organization's objectives. This position requires a licensed physician.
- 5074 **Medical Director- Hospice** –Responsible for managing and directing the medical activities of the organization's Hospice program. Responsible for ensuring the Hospice program is in compliance with medical quality standards. This position requires a licensed physician.
- 5065 **Medical Director- Long Term Care** –Responsible for managing and directing the medical activities of the organization's Long-Term Care Program. Responsible for ensuring the Long-Term Care Program is in compliance with medical quality standards. This position requires a licensed physician.
- 5076 **Medical Director- Multi-specialty Group** –Responsible for managing and directing the activities of a Multi-Specialty Group (generally three or more specialties) and administering the group's programs and policies. Ensures clinic operations meet financial, quality and productivity goals. This position requires a licensed physician.
- 5077 **Medical Director- Primary Care Group** –Responsible for managing and directing the activities of a Primary Care Group (Family Practice, Internal Medicine, Pediatrics and/or possibly Obstetrics/Gynecology) and administering the group's programs and policies. Ensures clinic operations meet financial, quality and productivity goals. This position requires a licensed physician.
- 5078 **Medical Director- Surgery** –Responsible for overseeing the range of services within the Department of Surgery. Directs the planning, implementation and marketing of services to meet the organization's objectives. This position requires a licensed physician.
- 5079 **Medical Director- Utilization Review** –Responsible for managing and directing the organization's Utilization Review program designed to oversee the appropriateness and necessity of medical care provided. This position requires a licensed physician.
- 5080 **Medical Education Director** – Responsible for administration of education activities including medical school, residency programs, allied health programs, and extramural funding.
- 5200 **Medical Records Director** – Oversees all medical records personnel and budget, typically holds a professional license in medical records management, reporting to the COO.

- 5205 **Medical Staff Services/Physician Services Director** – A senior level management position responsible for the physician recruitment functions in addition to other services which may include credentialing, contracting, retention, physician practice management or physician relations. Supervises and directs personnel assigned to these functions, attends senior management meetings and makes decisions dealing with staffing, budget, strategic planning, credentialing, contracts or more.
- 5020 **Nursing Director** – This position is responsible for planning and directing the activities of nursing staff and ancillary nursing personnel. Additionally, they are responsible for annual operational and financial planning. Reviews and evaluates nursing service to ensure the quality of patient care and effective use of resources. Develops and interprets policies and procedures relating to nursing activities. Nursing units would have a reporting relationship to this individual.
- 5105 **Office Manager** – This position is responsible for the non-medical activities of a practice. This position is responsible for the daily operations of the organization. It may oversee some financial activities such as billing and collections. A health system may have several office managers.
- 5210 **Physician Recruiter- Manager** – Responsible for the recruitment function. Duties may include recruitment sourcing strategies, managing and directing recruitment personnel, budget, staffing, physician relations and contracting.
- 5215 **Physician Recruiter- Senior** – Recruits physicians and providers to meet organization's needs. Duties include sourcing, site visits, physician relations, and closing contracts. 4 – 10 years of physician recruiting experience.
- 5220 **Physician Recruiter- Staff Level** – Recruits physicians and providers to meet organizations needs, Duties include sourcing, site visits, physician relations, and closing contracts. 1 – 3 years of physician recruiting experience.
- 5120 **Public Affairs / Marketing Director** – Responsible for planning, designing, and implementing marketing, public relations, and media activities.
- 5221 **Quality Improvement Director** – Primary function is to provide leadership and direction for quality improvement activities at the organization. This position is responsible for the development and maintenance of processes and procedures that monitor and improve quality.