



Request for an Accommodation Approved by Another Organization

Use this form if you have been approved for exam accommodations through another ABMS board or licensing/certification organization; i.e.: National Board of Medical Examiners (NBME), American Board of Pediatrics (ABP), etc.

See [New Accommodations Request Form](#) for other requests.

Note: Candidates must register for the exam prior to requesting accommodations.

Section A: Personal Information **Please complete the following information:**

First name: _____

Last name: _____

ABIM ID number: _____

Current phone number: _____

Current email address: _____

Section B: Exam Information **Title of exam (Internal Medicine or subspecialty) you are currently registered for:**

Check the corresponding box to indicate which exam type you are currently registered for:

- Initial Certification
- Maintenance of Certification (MOC)
- Knowledge Check-In (KCI)

**Section C:
Accommodations
Requested**

Please provide the following information:

A description of the accommodation you are currently requesting:

A description of the accommodation previously received through other organization:

Condition which necessitated the accommodation:

Section D: Confirmation Please check boxes below to verify you have:

Completed the Personal Information and exam sections of this form

Registered for your exam

Attached the approval letter from the organization that administered the exam for which you received the requested accommodation.

Attached a copy of any documentation sent to the other testing organization in support of the your request

ABIM accommodation requests and supporting documentation must be submitted by the registration deadline to: accommodations@abim.org.

Additional details regarding accommodations and submission deadlines are available on ABIM's website in the [Certification section](#) and [MOC section](#).