The Evolution of ABIM Governance

Our governance structure has changed a great deal since our founding in 1936. In 2016, our members on more than 50 boards and committees help shape ABIM’s programs and policies. It is a diverse group of physicians and public members (including patient advocates, allied professionals and non-internist physicians) and we thank them for their guidance and service.

**Regional Perspectives**

Our governance members hail from every region of the continental US, which helps bring rural, urban and other perspectives to our work at ABIM.

1936 Board of Directors

The founding ABIM Board of Directors consisted of nine men all of whom were from academia.

ABIM’s governance now includes a total of 365 practicing physicians, patient advocates, allied professionals, and non-internist physicians serving across 21 disciplines.

Break down of 2016 Governance Members

- **Board of Directors**: 12
- **Council**: 17
- **Specialty Boards**: 107
- **Self-Assessment Committees**: 173
- **Exam Committees**: 184
- **Self-Assessment Committees**: 221
- **Exam Committees**: 144

**100% Participating**

100% of the physicians serving ABIM participate in Maintenance of Certification (MOC).

**Direct Patient Care**

92% of ABIM’s physician governance members provide direct patient care.

**A Range of Healthcare Perspectives**

We are proud of the diversity of job functions among our governance population (physician and public members):

- **Clinical Practice**: 48%
- **Program Director**: 14%
- **Other**: 10%
- **Teaching**: 3%
- **Research**: 7%
- **Public Member**: 8%
- **Administration**: 10%
- **Research**: 7%
- **Public Member**: 8%
- **Administration**: 10%

**1936 Board of Directors**

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**THE PRACTICING PHYSICIAN PERSPECTIVE**

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**FRESH VOICES TO INFORM OUR PROGRAMS**

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**Footnotes**

1. Of the 365 unique ABIM governance members, several sit on multiple boards or committees.
2. ABIM’s programs are informed by a diverse range of physicians, some of whom are certified by other boards. All members must comply with the MOC Policy for Physicians Serving ABIM.
3. “Other” denotes an individual with a job function not outlined in the survey including a faculty position, consultant, society leader, retiree, and those with multiple roles.
4. Public members include patient advocates, allied professionals and non-internist physicians.

(Data circa August 2016 and is subject to change.)