Policies and Procedures for 2023 Obesity Medicine Certification Exam

Application Deadline
Early Deadline: July 10, 2023
Final Deadline: August 7, 2023

ABOM Certification Examination
October 2-14, 2023

Computer-Based Testing Centers
The matters described in this Policies & Procedures Manual are subject to change, without notice, at the sole discretion of the ABOM.
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Definition of Obesity Medicine
An obesity medicine physician is a physician with expertise in the field of obesity medicine. This field of medicine requires competency in and a thorough understanding of the treatment of obesity and the genetic, biologic, environmental, social, and behavioral factors that contribute to obesity. The obesity medicine physician employs therapeutic interventions including diet, physical activity, behavioral change, and pharmacotherapy. The obesity medicine physician utilizes a comprehensive approach, and may include additional resources such as nutritionists, exercise physiologists, psychologists and bariatric surgeons as indicated to achieve optimal results. Additionally, the obesity medicine physician maintains competency in providing pre- peri- and post-surgical care of bariatric surgery patients, promotes the prevention of obesity, and advocates for those who suffer from obesity.

Function of the ABOM
The American Board of Obesity Medicine (ABOM) serves the public and the field of obesity medicine by maintaining standards for assessment and credentialing physicians. Certification as an ABOM diplomate signifies specialized knowledge in the practice of obesity medicine and distinguishes a physician as having achieved competency in obesity care. Physicians who complete the ABOM certification process in obesity medicine are designated Diplomates of the American Board of Obesity Medicine.

PTI
Professional Testing, Inc. (PTI) is ABOM’s test development and test administration partner. Through ABOM’s partnership with PTI, exams are administered at Pearson VUE computer-based test centers.
There are two pathways for initial certification. Applicants may choose either pathway, based on their qualifications.

1. CME Pathway Qualifications for Certification

Required Credentials
- Proof of an active, unrestricted medical license in the U.S. or Canada. Training licenses are NOT accepted.
- Proof of completion of a residency in the U.S. or Canada.
- Proof of active board certification in an American Board of Medical Specialties (ABMS) member board or osteopathic medicine equivalent.

Required CME Credits
- A minimum of 60 credits of Continuing Medical Education (CME) on the topic of obesity is required for certification. All CME must be AMA PRA Category 1 Credit™, AOA Category 1-A, or Mainpro-M1.
- The CME credits must include at least 30 GROUP ONE credits earned through ABOM’s Primary Obesity Medicine CME Partners: Obesity Medicine Association, The Obesity Society/ObesityWeek, Harvard Blackburn Course in Obesity Medicine, Columbia/Weill Cornell Obesity Course.
- The remaining 30 CME credits may be completed through attendance at additional GROUP ONE credits or through GROUP TWO study, which includes at-home CME activities and/or attendance at other live meetings where obesity is the specific educational topic.

GROUP ONE (at least 30; no maximum; online or in person)
- Obesity Medicine Association
- Blackburn Course in Obesity Medicine
- Columbia University/Weill Cornell Obesity Course
- The Obesity Society/ObesityWeek
- Boston Course in Obesity Medicine

GROUP TWO (max 30)
- At-home or in-person CME on the topic of obesity that includes the word “obesity” in the activity title.

IMPORTANT INFORMATION REGARDING CME ACTIVITIES:
- All CME credits submitted to the ABOM are subject to review. The ABOM will not accept CME credit hours on topics outside the field of obesity medicine. The ABOM has sole discretion regarding whether a CME credit will be accepted for the CME Pathway. The ABOM CME requirement is intended to direct self-study in an in-depth and comprehensive manner that prepares applicants to become ABOM Diplomates but does not guarantee an applicant’s success.

2. Fellowship Pathway Qualifications for Certification

- Proof of an active, unrestricted medical license in the U.S. or Canada. Training licenses are NOT accepted.
- Proof of completion of a residency in the U.S. or Canada.
- Proof of active board certification in an American Board of Medical Specialties (“ABMS”) member board or osteopathic medicine equivalent.

- Proof of successful completion of an on-site clinical fellowship with an obesity component including didactic and clinical training in the following topics: The science and clinical aspects of obesity (epidemiology, pathophysiology, genetics); Understanding obesity stigma and bias and its impact on patient care; Adult medical obesity treatment (i.e. nutritional therapy, behavioral therapy, exercise physiology, pharmacotherapy); Metabolic and bariatric surgery risks, benefits, and complications; Medical complications/comorbidities associated with obesity; Healthcare disparities related to obesity care and public health and policy interventions; Pediatric medical obesity treatment [only required if applicable to fellowship]. Completion date of fellowship must be in the 36 months prior to the exam application deadline.

- Letter of attestation from fellowship director confirming acceptable training on the topic of obesity or obesity-related conditions must accompany the application. Refer to the ABOM website to download the attestation template.

- Please note: Effective August 15, 2023, only physicians who have completed a fellowship recognized by The Obesity Medicine Fellowship Council may apply for certification through the Fellowship Pathway. All other physicians should apply through the CME Pathway.

Application

The American Board of Obesity Medicine (ABOM) processes applications through its online application portal. All supporting documentation must accompany the application and can be uploaded at the online application portal.

No extensions will be provided for submission of supporting documentation beyond the applicable application deadline. The examination fee is submitted after you have been notified that you are eligible to sit for the exam.
Application Approval

The ABOM will notify applicants if they are, or are not, accepted as candidates for certification. ABOM, acting as a committee of the whole, reserves the right to deny or revoke certification if granting certification or permitting continuance of certification would adversely affect ABOM or is not in the best interest of patient health or public welfare or safety. If the applicant wishes to exercise the right to appeal this decision, the applicant must inform ABOM in writing of this intention within thirty (30) days of the date of receipt of written notification of the decision not to accept the application.

Any candidate whose license to practice medicine has been revoked, restricted or suspended in any way shall be ineligible for certification until such time as the encumbered license is reinstated in full. Should a license be revoked, restricted, or suspended following the submission of an application for certification, but prior to the notification of Diplomate status, the application and certification will be simultaneously invalidated.

It is the responsibility of the candidate to inform ABOM in writing immediately upon a change in licensure status. If the candidate fails to notify ABOM of any revocation, restriction, suspension, or probation within sixty (60) days after the effective date, he or she shall be ineligible to seek certification for up to one year following the reinstatement of full and unrestricted licensure.

For purposes of ABOM certification, a medical license is considered to be restricted if it is currently subject to any adverse action by a state or provincial licensing agency which encumbers the ability of a physician to diagnose, manage, and/or treat patients. Questions about licensure should be presented to the ABOM in writing.

ABOM reserves the right to revoke certification erroneously granted to unqualified candidates, including certification granted as a result of clerical errors.
Examination
The Certification Examination is administered during an established testing period at computer-based testing centers. Test centers are located throughout the United States and Canada. Contact ABOM for the most up-to-date list of testing centers.

Exam Development
ABOM has contracted with PTI to assist in the development, administration, scoring, and reporting of results for the certification examination. Using the Test Content Outline as a basis, the ABOM makes the final determinations regarding exam content and the number of items in each area.

Questions (items) for the exam are solicited from content area experts currently practicing obesity medicine. Item writers attend workshops and receive instruction to enable them to write high quality, practice-related test items. Test items undergo extensive editing and review by subject matter experts and professional test editors before approved to be placed on the examination.

Exam Question Format
Questions (items) are designed to test synthesis and analysis levels of cognitive skills as well as content knowledge. The exam is composed of objective multiple-choice questions with answer choices. There will be approximately 200 items on the exam.

Answer Strategy
You should consider answers to each question carefully and eliminate the least likely ones instead of randomly selecting an answer. Please keep in mind that there is no penalty for incorrect responses. Since test scores are based on the actual number of questions answered correctly, it is to the candidate’s advantage to select an answer for each question rather than leaving any blank. There is only 1 correct answer for each question.

Test Content Outline
The ABOM Test Content Outline is based on a detailed practice analysis conducted by the ABOM Board of Directors. A practice analysis involves extensive research, including survey data and judgments of subject matter experts, of the knowledge, tasks, and roles that describe obesity medicine practice. The ABOM Board of Directors develops a written exam from the Test Content Outline and includes a percentage of questions from each of the major content areas identified in the practice analysis.

Test Length and Format
The total testing time will be 5 hours, as follows:
• Four 60-minute test blocks, each with 50 items
• Break time – 35 minutes total break time available
  Candidates may use this time at their discretion during optional breaks following each exam block
• Pre-test computer tutorial, Pre-test non-disclosure acknowledgment, and Post-test survey – 25 minutes total
Examination Scheduling and Administration

Please see the ABOM Candidate Handbook on the ABOM website for detailed information about exam scheduling and administration.

Examination Communications via Email

All ABOM communications with candidates will be sent via email to the email address provided on the application submitted by the candidate. These communications will include notification of receipt of application, additional documentation requests from the ABOM Credentialing Committee, notification of approval to sit for the examination, scheduling documents and score reports.

Candidates are responsible for notifying ABOM immediately of any changes in their email address by emailing info@abom.org.

Report of Results

Examinee score reports will include content area performance profiles and a pass/fail decision. Candidates will be notified that Score Reports are ready to be downloaded 8-10 weeks from the closing of the test administration window.

Analysis of Examination Results

The examination is subject to close review, standard-testing and relevance-testing.

The ABOM Board of Directors and PTI staff members review items that did not perform adequately and determine whether the item should be used in scoring or not. Once scores are processed, staff from PTI and the ABOM meet for a careful review of the data to set a minimum passing score for the examination.

Retesting

Applicants who fail their first attempt are entitled to retake the examination one time, upon payment of a retesting fee, without resubmitting evidence of compliance with the qualifications stated previously. The candidate must retake the exam the following time it is offered or forfeit this opportunity. Any additional retesting will require a reapplication for board certification.

Applicants who forego their first attempt, by withdrawal or failure to appear, are entitled to take the examination one time, upon payment of a reinstatement fee, without resubmitting evidence of compliance with the qualifications stated previously. The candidate must take the exam the following time it is offered or forfeit this opportunity. Any additional retesting will require a reapplication for board certification.

Reapplication

ABOM declares void the application of a candidate who has failed to satisfy the examination requirement after two attempts. The candidate may reapply by submitting a new application. Such application shall be subject to the fees, rules, privileges and requirements that apply at the time of reapplication. Applicants whom ABOM determines meet existing eligibility requirements will be permitted to sit for the ABOM certification examination.

Reports Regarding the Quality of the Testing Site

If you encounter a problem during the administration of the test, immediately report such problem to the test center staff and send written notification to ABOM as set forth below.

Any and all complaints regarding the quality of the testing site, including, but not limited to, the professionalism of the proctor, computer glitches, software glitches, room temperature, distracting noises, lighting, examination interruption, etc. shall be sent in writing to ABOM no later than seven (7) calendar days after the candidate’s examination date via facsimile or certified mail to:

American Board of Obesity Medicine
Attn: Test Center Complaint
2696 S. Colorado Boulevard, Suite 340
Denver, CO 80222
303.770.9104 (Fax)

Any written complaints received by ABOM after the seven (7)-day deadline will not be considered by ABOM. The candidate shall retain proof of ABOM’s receipt of any complaint (i.e., a fax transmittal report or certified mail receipt). Such written complaint shall include “Test Center Complaint” in the subject line, a description of the problem/complaint, the candidate’s name, address, Scheduling Number, Candidate Identification number, the examination date, the test center name and location, and the building or room in which you were tested, if known. ABOM shall consider any timely written complaints and determine, in ABOM’s sole and absolute discretion, whether a corrective measure, if any, shall be provided to such candidate.
Purpose:
This policy provides the guidelines for the evaluation and granting of requests for reasonable accommodations in the administration of The American Board of Obesity Medicine ("ABOM") certification examinations to qualified applicants with disabilities and to ensure that the examination is administered in a manner that does not discriminate against such applicants in violation of the Americans with Disabilities Act (ADA).

Policy:
The ABOM will grant reasonable testing accommodations to qualified individuals with disabilities that timely apply and provide the necessary supporting documentation. All requests for accommodations will be considered on a case-by-case basis. It is the responsibility of the person with a disability to provide advance notice and appropriate documentation of the disability with a request for test accommodations. If an applicant identifies functional limitations or special needs that would prevent him or her from taking the certification exam under standard testing conditions, ABOM in consultation with its testing agency, will evaluate and respond to that applicant’s needs for special arrangements. Applicants will be notified of the decision regarding the request and the accommodations that will be provided.

Test Accommodations:
The American Board of Obesity Medicine provides reasonable and appropriate accommodations in accordance with the Americans with Disabilities Act for individuals with documented disabilities who demonstrate a need for accommodation. The ABOM determines whether accommodations are warranted and decides what specific accommodations may be reasonable for a particular examinee.
An applicant who wishes to request test accommodations to take a certifying examination due to a disability must complete the request at the time of application through ABOM’s online application portal.

Americans with Disabilities Act (ADA)
Deadlines and Fees

ABOM is a non-profit corporation. The directors of the Board serve without compensation.

In the event an application is not accepted, or the application is accepted and subsequently withdrawn by the candidate, fee(s) covering administrative services will be retained and the balance of any fees paid for the examination will be refunded according to the schedule stated in this manual.

Examination fees will be charged to candidates whether they have failed a previous examination, canceled a scheduled appointment for examination, or failed to appear for any examination for which they were properly scheduled.

Applicants may pay fees by credit card, using either Visa or MasterCard.

After the ABOM has accepted an application, the applicant is expected to take the next certifying examination offered. However, an applicant may withdraw by submitting a written notice. Refund of fees paid will be made according to the refund schedule.

Score Recheck Fee

Candidates agree to pay ABOM a score recheck fee of $100 per request.

Score recheck results will be reported within ten (10) business days of the request.

To request a score recheck please send the request and a check for $100 made out to American Board of Obesity Medicine to:

American Board of Obesity Medicine
Attn: Score Recheck
2696 S. Colorado Blvd #340
Denver CO 80222

2023 Fees

Deadlines
Early Deadline: July 10, 2023
Final Deadline: August 7, 2023

Fees
$1500 for applicants who pay by the early application deadline
$1750 for applicants who pay by the final deadline

Retake Fees
$450

Exam Refunds
• $1000 when withdrawing by August 1, 2023
• $500 withdrawing between August 2-15, 2023
• No Refunds after August 15, 2023
• Retest candidates are not eligible for refunds at any time
Diplomate Information

All Physician candidates who successfully complete the written certification examination shall be known as Diplomates of the American Board of Obesity Medicine. Diplomates receive an appropriate certificate which remains the property of the American Board of Obesity Medicine. The Diplomate to whom the certificate is issued is entitled to its possession unless it is revoked (see “Revocation of Diplomate Status.”) If a Diplomate’s certificate is lost or destroyed, the Board will issue a replacement certificate upon written request and justification. The certificate replacement fee must accompany the request. Contact the Board office for current fees.

Recertification

Diplomates have time-limited board certification status for 10 years. There are two pathways to recertification.

**JOURNAL ARTICLE REVIEW RECERTIFICATION PATHWAY (JARRP)**

- **Description:** The Journal Article Review Recertification Pathway (JARRP) is a maintenance of certification program that allows current diplomates to recertify by completing ongoing study of obesity medicine throughout the certification term.

- **Eligibility:** Diplomates who have taken the certification exam administered by the American Board of Obesity Medicine in 2012 or later.

**REQUIRED JOURNAL ARTICLE REVIEW POINTS**

- Earn a minimum of 60 Journal Article Review points during the 10-year certification period, including a minimum of 12 Journal Article Review points every two years. Journal Article Review points are earned by reading articles on the topic of obesity designated by the Maintenance of Certification Committee AND responding correctly to 75% of the post-article questions for each article. Each article completed successfully is worth 1 Journal Article point.

- For each article, if a diplomate does not answer 75% of the questions correctly the first time, the diplomate will be allowed the opportunity to try a second time to answer the questions correctly. There is only one retake opportunity per article.

- ABOM will post a minimum of 20 Journal Articles for review during each two-year cycle. Diplomates who do not earn the required Journal Article Review points from this pool of articles will be removed from the JARRP program.

**ADDITIONAL REQUIRED QUALIFICATIONS**

- At the end of the 10-year certification period, diplomates completing the required journal article review tests and earning at least 60 Journal Article Review points will need to show proof of an active medical license and proof of active certification in an ABMS board in order to be eligible for recertification.

- Diplomates successfully earning the required Journal Article Review points and providing proof of active medical license and active ABMS board certification will be granted another 10-year certification term.

**JARRP REMOVAL**

- Diplomates who do not maintain their active status in the JARRP program by earning the required number of Journal Article Review points every two years will be removed from the program. Diplomates removed from JARRP will be automatically moved to the Exam Recertification Pathway.

**EXAM RECERTIFICATION PATHWAY**

- **Eligibility:** Any diplomate whose most recent certification exam was administered before 2012 will be required to recertify through the exam pathway. All other diplomates may choose to recertify through the exam pathway.

**REQUIRED QUALIFICATIONS**

- At the end of the 10-year certification period, diplomates recertifying through the ABOM Exam Pathway will need to show proof of an active medical license, proof of active certification in an ABMS board, and proof of completion of a residency in order to be eligible for recertification.

- Diplomates providing proof of required qualifications and passing the recertification exam will be granted another 10-year certification term.

- The cost of the recertification exam is $500.

**RECERTIFICATION RETESTING**

- If the Diplomate does not pass the recertification exam during the final year of their certification term, he/she may take the exam the following year, upon payment of the recertification exam fee. If the Diplomate chooses not to take the recertification exam during his/her final year of certification, the incompletion will be considered as a failure on the exam during that year. The physician will not be considered a Diplomate during any time their certification term has lapsed.

- If a Diplomate does not pass or does not complete the exam for two (2) years in a row, the Diplomate may reinstate his/her board certification status by retaking and passing the Written Examination under the same terms as a new Candidate.
Lapse in Diplomate Status
Diplomates who do not successfully complete the Exam Recertification Pathway or the Journal Article Review Recertification Pathway during the year they are scheduled will be required to remove their certification status from their letterhead and any printed or web marketing materials.

Use of Diplomate Designation
Use of the ABOM Diplomate status or of the Board’s official logo in advertising media to imply official endorsement of the Diplomate or the Diplomate’s practice, methods, programs or products will be considered a violation of the terms and conditions of certification. The Board may terminate the Diplomate’s status upon a three-fourths (3/4ths) affirmative vote of the Board.

Ethical Requirements
ABOM is committed to maintaining a high level of ethical conduct and integrity by its Board and its Diplomates. Accordingly, Diplomates shall not only uphold a strong commitment to ethics and integrity but shall also comply with general principles of medical ethics, including but not limited to, the American Medical Association’s Code of Medical Ethics.

Revocation of Diplomate Status
A certificate is issued by ABOM with the understanding that it remains the property of the Board during the life of the Diplomate. A Diplomate must immediately inform ABOM if such Diplomate:

• Fails to comply with the continuing requirements for Diplomate status.
• Misuses the Diplomate designation.
• Commits fraud or misrepresentation in the application or recertification process.
• Fails to abide by the ABOM Bylaws or any rules or requirements established by the Board, including, but not limited to, ABOM’s Ethical Requirements.
• Has a license or certificate to practice medicine suspended, revoked, or otherwise limited.

Any certificate issued by the Board shall be subject to revocation if any of the aforementioned events occur.

Status of Individuals
The American Board of Obesity Medicine does not use the term “board eligible” because the term does not have a consistent definition.

Except as required by law, ABOM will respond to inquiries regarding the status of an individual by providing a statement of only whether the individual has been certified or not.
I. Basic Concepts – 25%
   A. Determinants of Obesity
      1. Lifestyle/Behavioral
      2. Environmental/Cultural
      3. Genetic
      4. Secondary
      5. Epigenetics and Fetal Environment
   B. Physiology/Pathophysiology
      1. Neurohormonal
      2. Enterohormonal/Microbiota
      3. Body Fat Distribution
      4. Pathophysiology of Obesity-Related Disorders/Comorbidities
      5. Body Composition and Energy Expenditure
      6. Energy Balance and Hormonal Adaptation to Weight Loss
      7. Obesity Related Cell Physiology and Metabolism
      8. Brain, Gut, Adipocyte Interaction
   C. Epidemiology
      1. Incidence and Prevalence, Demographic Distribution
      2. Across the Life Cycle
   D. General Concepts of Nutrition
      1. Macro and Micronutrients
      2. Gastrointestinal Sites of Nutrient Absorption
      3. Obesity Related Vitamin and Mineral Metabolism
      4. Macronutrient Diet Composition and Effects on Body Weight and Metabolism
   E. General Concepts of Physical Activity
      1. Biomechanics and kinesiology
      2. Cardiorespiratory Fitness and Body Composition

II. Diagnosis and Evaluation – 30%
   A. History
      1. Medications
      2. Family History
      3. Comorbidities/Assessment and evaluation
      4. Sleep
   B. Lifestyle/Behavior/Psychosocial
      1. Demographic/Socioeconomic/Cultural/Lifestyle/Occupational
      2. Physical Activity
      3. Nutrition/Diet
      4. Eating Disorders/Disordered Eating
      5. Body image disturbance
   C. Physical Assessment
      1. BMI
      2. Waist Circumference
      3. Physical Findings of obesity and Comorbid Conditions
      4. Vital Signs
      5. Underlying Syndromes
      6. Signs of Nutritional Deficiency
      7. Growth indices
   D. Procedures and Laboratory Testing
      1. Resting Metabolic Rate
      2. Body Composition Analysis
      3. Diagnostic Tests
         a. Comorbidities
         b. Secondary Obesity
   E. Screening Questionnaires
   F. Research Tools
III. Treatment – 40%

A. Behavior
   1. Behavioral Counseling Techniques/Therapies
   2. Self-Monitoring Techniques/Tools

B. Diet
   1. Calorie and Micro/Macronutrient
   2. Very Low Calorie Diet
   3. Meal Replacements
   4. Effect on Comorbid Conditions

C. Physical Activity
   1. Prescription
   2. Mechanisms of Action
   3. Effect on Comorbid Conditions

D. Pharmacotherapy, Pharmacology and Pharmacokinetics
   1. Risks, Benefits, and Adverse Effects
   2. Indications/Contraindications
   3. Monitoring and Follow Up
   4. Prescription Dose and Frequency
   6. Off Label Usage/Over-the-counter [OTC]
   7. Multi-drug/Combination Therapy
   8. Management of Drug-Induced Weight Gain
   9. Effect on Comorbid Conditions

E. Alternative, Emerging, and Investigational Therapies

F. Surgical Procedures
   1. Types, Risks, Benefits
   2. Indications and Contraindications
   3. Complications
   4. Pre-operative Assessment and Preparation
   5. Post-operative Management
      a. Medical Inpatient
      b. Medical Outpatient
      c. Nutritional
   6. Adolescent Surgery
   7. Effect on Comorbid Conditions

G. Strategies
   1. Age-Related Treatment
   2. Risks Associated with Excessive Weight Loss
   3. Management of Weight Plateau
   4. Prevention of Obesity and Weight Gain
   5. Management of Comorbid Conditions During Weight Loss
   6. Effect of Weight Loss on Comorbid Conditions
   7. Treatment of Comorbid Conditions

H. Pediatric obesity
   1. Treatment Guidelines
   2. Pharmacotherapy
   3. Bariatric Surgery
   4. Family Support and Participation

IV. Practice Management – 5%

A. Patient care Issues
   1. Weight Bias, Stigma/Discrimination
   2. Culturally Tailored Communication
   3. Ethics

B. Office Procedures
   1. Policies and Protocols
   2. Adult Obesity Management Guidelines and Recommendations
   3. Physician Personal Health Behaviors
   4. Online and remote management tools

C. Interdisciplinary Team

D. Advocacy/Public Health

E. Other
   1. Cost Effectiveness of Treatment Options
   2. Awareness of Societal Cost of Obesity
   3. Reimbursement and Coding

Please note: The American Board of Obesity Medicine certification exam covers information that pertains to individuals throughout the entire life cycle. The overall content of the exam includes:

- pediatric and adolescent content (15%)
- adult content (20%)
- content relevant to the entire life cycle (45%)

Within each domain detailed in the Test Content Outline there may be content related to pediatric and adolescent patients and/or adult patients.