



TOP 10 MYTHS ABOUT ABPP/ABCN BOARD CERTIFICATION

AND REASONS WHY YOU SHOULD BECOME BOARD CERTIFIED IN CLINICAL NEUROPSYCHOLOGY

1. **ABCN is not for pediatric folks. ... FALSE.**

Each of the ABPP/ABCN examination procedures has been designed to minimize child versus adult biases. Nearly half the number of ABPP/ABCN-certified clinicians work with children or with both adults and children (Sweet et al, 2010). Clinical neuropsychologists who practice primarily with children have always had the option of submitting two "child" cases as their work samples, both of which are reviewed during the oral portion. During the fact-finding part of the exam, you can pick whether to be examined on a vignette involving a child or one involving an adult. During the ethics exam, you are asked about your ethical reasoning and standards of practice, be it child-focused or adult-focused. Many of the profession's most well known and respected pediatric neuropsychologists hold the ABCN certificate.

2. **ABCN is an "old boys" club. ... FALSE.**

One of the most widely perpetuated myths is that you have to be part of an "in" crowd to become ABPP/ABCN certified. Not true! Plus, it should be no surprise that about half of the ABPP/ABCN certified individuals are *women*!

3. **The credentials review is too stringent. ... FALSE.**

The criteria for credentials are very clearly stated on the ABCN website, and correspond to what now is standard training in our field. If your training is nontraditional, yep, there might be some questions asked – but be aware there are folks with ABCN certificates who trained in other countries, in non-clinical programs, and in a variety of ways – if, like theirs, your training is solid enough to stand up to scrutiny, you don't need to be concerned about the credential review.

4. **The ABCN written test is all "adult" stuff you don't need to know. ... FALSE.**

The written test content is fairly described on the AACN and BRAIN websites. Competent neuropsychologists need to possess broad-based knowledge of brain-behavior relationships, as well as basic neuropsychological principles that are fundamental to practice across the lifespan. For these reasons, as described on the AACN and BRAIN websites, exam content spans the full age range.

5. **The ABCN written test is way too hard. ... FALSE.**

The written exam is on par with the difficulty level of tests you've already taken and passed in the process of earning your doctorate and becoming licensed. Unlike those prior exams, the ABCN written exam is more narrowly focused on information pertaining to your chosen specialty, and thus should be focused on the strengths of your knowledge base. Understand what needs to be studied, review your grad school and post-doc notes, listen to your AACN-assigned mentor (get one if you don't have one; just check the AACN website), and join BRAIN and the likelihood of passing will be just as high for you as it is for the average physician or nurse taking their board exams.

6. **Getting tripped up on one step will be held against you. ... FALSE.**

After you pass the initial credential review you are allowed three tries at each step in the process before you are required to start over completely. The number of times that you attempt any given step is *never* revealed to the examiners. And, once you pass a step, you pass the step, regardless of how many times you have attempted it. Kudos to you!

7. **Not passing a step in the ABCN process means you are incompetent to practice neuropsychology or to be board certified. ... FALSE.**

This myth may have roots in the insecurity of individual applicants but is patently untrue. You can't pass through the process without being competent, but getting tripped up can happen for many reasons. Some get too anxious or don't test well. But people who come back and retake a step generally pass. Most people willing to commit to taking the exam end up demonstrating those essential competencies. And guess what? Whether they work with kids or with adults, the competencies that are really essential, are essentially the same. By attaining them, you become a better neuropsychologist.

8. **The only reason to do ABCN is so you can impress attorneys and get on lots of IME lists. ... FALSE.**

Well, that could be one reason, but there are many others. Board certification is essential to protect the public, particularly the most vulnerable populations (children, the elderly, the brain-injured). Board certification is a statement of your commitment to your profession and willingness to maintain your competence as a practitioner. Rigorous examination under peer review is critical to the profession and is a standard by which any medical professional is judged. Earning the ABCN certificate is a serious personal accomplishment with tremendous intrinsic value – well beyond any potential tangible gain.

9. **You need to be in the field for a long time OR Board certification is only for new grads. ... FALSE.**

There is no practice length requirement for ABPP/ABCN. New grads may have a fresher academic knowledge but may not have a natural flow in their clinical interviews and case conceptualizations. Mature clinicians may have a sophisticated clinical acumen, but may need to refresh their knowledge in areas with which they are less familiar.

10. **There is no reason for neuropsychologists to bother "getting boarded." ... FALSE.**

In fact, there are **AT LEAST** 15 great reasons to "get boarded":

Benefits to the Practitioner

- Better pay and job satisfaction
- Job security
- Streamlined credentialing process at state licensing boards, insurance companies, professional practice networks, and medical staff groups
- Interstate license and practice mobility
- Prestige within the profession
- Credibility in the eyes of colleagues and referral sources
- Renewed emphasis on learning
- Professional affirmation

Benefits to the Profession

- Set standards for competence
- Uniform training models for competence
- Increased breadth & depth of knowledge base of practitioners
- Intra-professional regulation

Benefits to the Public

- Reduced confusion
- Quality assurance

Adapted from:
Armstrong, K., Beebe, D.W., Hillsabeck, R.C. & Kirkwood, M.W. (2008). *Board Certification in Clinical Neuropsychology*. Oxford University Press

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