



American Board of Administrative Medicine Qualifications Assessment Form

Date: _____

Applicant Name: _____ Position/Title: _____

Evaluator Name: _____ Position/Title: _____

Relationship to Applicant in his/her position: _____

Number of Years/Months supervising applicant in an executive/administrative position: _____

Administrative Medicine, as defined by the American Board of Administrative Medicine (ABAM), is the practice of physicians who, as executive leaders, manage the integration of clinical medicine, strategy, operations, and other business activities essential to achieve high quality healthcare.

The intent of this form is to verify and quantify the candidate's experience in relation to the requirements for ABAM certification. Please acknowledge that this is not a rating of their ability, but an indication of their actual involvement in performing activities related to the following categories in performing their administrative functions.

	0 = None	1 = Minimal	2 = Moderate	3 = Substantial
Finance / Accounting	0	1	2	3
Quality and Safety	0	1	2	3
Health Law / Corporate Compliance	0	1	2	3
Data analytics and Medical Information Integration	0	1	2	3
Health Policy and Governance	0	1	2	3
Professionalism / Leadership	0	1	2	3
Marketing, Strategy, and Business Development	0	1	2	3
Human Resources	0	1	2	3

Does the applicant have any executive leadership experience in any functions not listed above?

Are there any additional comments that you would like to share? _____

Signature of Evaluator: _____