



Application for Recertified Medical Staff Recruitment Credentials, RMSR

We are pleased to provide you with the application for the Recertification in Medical Staff Recruitment (RMSR) credential. The final step in the application process will be verification of your eligibility. Please read and complete the following information to continue the process of obtaining your status as a Recertified Medical Staff Recruiter.

To qualify for recertification, credentials must be obtained within six months of CMSR expiration.

The CMSR credential is initially valid for three years. After three years, recertification credentials will be Recertified Medical Staff Recruiter, or RMSR. This enhanced credential will document the professional's ongoing commitment and experience, as well as provide credentials more advanced for the recruiter's career. The RMSR credential is then good for an additional three years. To obtain recertification status, CMSR's must have:

1. Current employment in medical staff recruitment.
2. Three full years as a CMSR.
3. Over the past three years, a total of 21 units calculated as one unit for each quarter year experience, and one unit for each six hours of approved Continuing Education Units (CEU). If the applicant does not have 21 units, the following may apply: Professional Contributions, Awards and Professional Designations, Association Membership (see below).
4. If you still do not meet the 21 units requirements, successful completion of the Current Examination will qualify you.
5. Current membership in the American Academy of Medical Management.

A documentation letter from the employer(s) is required, as is CEU verification. CEU subject matter can be physician recruitment or other medical staff development area. CEU topics approved will be given some flexibility to better coincide with the professional's customized career path as long as it is within the medical staff development arena. Decision of acceptance by the AAMM Certification Advisory Board is final.

Please note: Recruiters may elect to acquire Fellowship Credentials in addition to, or in place of recertification. (Fellowship in Medical Staff Development, FMSD.) Call for an application.

Units are measured as follows (21 units required):

1. Medical Staff Recruitment Experience Units: One unit for each quarter year full-time equivalent over the past 3 years (up to 12 total units).
2. Continuing Education Units: One unit for each accepted six hours of instruction over the past 3 years (no limit on the number of units). **If the applicant does not have 21 units, the following may be applied.**
3. Professional Contributions: One unit for each hour taught or each page published over the past three years (up to 2 total units).
4. Awards and Professional Designations over the past three years (up to 2 total units).

5. Association Membership over the past 3 years (up to 2 total units).

Attach all support documents as needed.

RMSR APPLICATION FORM

Name: _____
(As you would like it to appear on your Recertification certificate, should you meet application requirements.)

Title: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: (____) _____ Fax: (____) _____

Email Address: _____

Indicate your current experience in physician recruitment.

5-6 Years 7-8 Years 9-10 Years Over 10 Years

Indicate the type of organization you currently work with:

Integrated Delivery System Managed Care Company
 Hospital or Hospital System Military or Government
 Clinic/Physician Group Practice Other: _____

Experience in Medical Staff Recruitment

Unit credit: During the past three years, one unit for each quarter full-time equivalent (up to 12 total units).

This section seeks information about the number of years and percentage of time spent in medical staff recruitment over the past three years. This recognizes that a professional often has various recruitment responsibilities. Please provide appropriate employment data beginning with your current position, and describe your professional experiences. Attach a separate sheet if more space is needed. Please forward a letter from each employer to verify this information.

1. Current Title/Responsibility: _____

Description of responsibility: _____

% of time spent in these medical staff recruitment area(s):

Organization: _____

Address: _____

Employment: From ____/____ to ____/____ Total Years: _____
Mo/Yr Mo/Yr

2. Title/Responsibility: _____

Description of responsibility: _____

% of time spent in these medical staff recruitment area(s):

Organization: _____

Address: _____

Employment: From ____/____ to ____/____ Total Years: _____
Mo/Yr Mo/Yr

3. Title/Responsibility: _____

Description of responsibility: _____

% of time spent in these medical staff recruitment area(s):

Organization: _____

Address: _____

Employment: From ____/____ to ____/____ Total Years: _____
Mo/Yr Mo/Yr

Continuing Education

Unit Credit: During the past three years, one unit for each six contact hours of approved instruction. No limit on number of units.

Contact hours are the actual number of hours spent in classroom educational activity, excluding breaks. For each, please provide 1. verification of attendance, 2. course outline.

1. Name of Program: _____

Sponsor:

Date:

Location:

Contact Hours:

Type of Program:

2. Name of Program:

Sponsor:

Date:

Location:

Contact Hours:

Type of Program:

3. Name of Program:

Sponsor:

Date:

Location:

Contact Hours:

Type of Program:

4. Name of Program:

Sponsor:

Date:

Location:

Contact Hours: _____

Type of Program: _____

If the applicant does not have 21 units, the following may apply.

**Professional Contributions in the Field of
Medical Staff Development (Optional)**

Unit Credit: Up to 2 total units. One unit for each hour taught or each full page published during the past three years.

This can be accomplished through publishing articles, teaching at continuing education programs or universities or serving in leadership capacities in Medical Staff Recruitment related associations.

All of the contributions listed below should be substantially related to the profession of Medical Staff Recruitment in the past three years.

A. Authoring or Publishing an Article

In order to receive credit, attach a reprint of the article(s) in one or more Medical Staff Recruitment areas that you have authored and published in recognized national or regional publications. A quote attributed to you in an article does not apply.

B. Teaching and Speaking at Programs and Meetings

Please list teaching or speaking assignments at meeting and educational programs on Medical Staff Recruitment. Please attach verification of your speaking, with a copy of the promotional brochure and course outline. (Serving as a panelist will count as half credit.)

1. *Program or Publication:* _____

Title of Course or Publication: _____

Sponsoring _____ Organization: _____

Meeting or Publishing Date: _____ Location of Meeting: _____

Your specific session length: _____ or article length: _____

Speaking assignment: Speaker _____ (full credit) Panelist _____ (half credit)

2. *Program or Publication:* _____

Title of Course or Publication: _____

Sponsoring _____ Organization: _____

Meeting or Publishing Date: _____ Location of Meeting: _____

Your specific session length: _____ or article length: _____

Speaking assignment: Speaker _____ (full credit) Panelist _____ (half credit)

3. *Program or Publication:* _____

Title of Course or Publication: _____

Sponsoring _____ Organization: _____

Meeting or Publishing Date: _____ Location of Meeting: _____

Your specific session length: _____ or article length: _____

Speaking assignment: Speaker _____ (full credit) Panelist _____ (half credit)

Awards and Professional Designations

Up to two total units, one for each qualifying award and professional designation. During the past three years, any individual awards recognizing your medical staff recruitment expertise or professional designations, such as related certification or fellowship credentials.

Please provide complete information on the name, purpose, sponsoring organization, date, qualifications and any other data relevant to the award/recognition that you have earned.

1. _____

DATE RECEIVED: _____

2. _____

DATE RECEIVED: _____

3. _____

DATE RECEIVED: _____

Association Memberships

Up to two total units. One unit for each full-year membership of a national association or one-half unit for a local or state association during the past three years which is directly within the realm of medical staff recruitment.

Membership in professional associations related to the field of recruitment is strongly encouraged. Such membership exposes the member to industry trends as well as opportunities for professional enhancement.

**The American Academy of
Medical Management**

Actual year(s) of membership: _____

Other recognized national, state or local association(s) to which you currently, or previously held, membership:

Name of Association: _____

Actual year(s) of membership: _____

Name of Association: _____

Actual year(s) of membership: _____

I certify that all information contained in this application is accurate. I understand that all of the information I have provided herein may be verified, and I authorize such verification. I also agree, if awarded Recertification status, to abide by the rules and regulations set forth by The American Academy of Medical Management.

Application must be dated and signed.

Print Name: _____

Signature: _____

Date: _____

Mail completed and signed application, with all supporting documentation and application fee to:

The American Academy of Medical Management

560 West Crossville Road, Suite 103

Roswell, GA (Atlanta) 30075

Phone (770) 649-7150 Fax (770) 649-7552

www.ePracticeManagement.org

RMSR Application Fee: \$170.00 AAMM Members

PLEASE NOTE THAT FAXED APPLICATIONS CANNOT BE ACCEPTED

PLEASE KEEP A COPY FOR YOUR RECORDS