

**CPME 209c**  
**NEW SUBSPECIALTY CERTIFICATION APPLICATION AND**  
**REQUIREMENTS**

**COUNCIL ON PODIATRIC MEDICAL EDUCATION**

**May 2025**

**SUBMITTING A PROPOSAL FOR A NEW SUBSPECIALTY CERTIFICATION**

Subspecialty certification relates to a specific component of a specialty to which a practicing podiatric physician may devote a significant portion of time.

Subspecialty certification incorporates a specific and identifiable body of knowledge that may include certain procedural skills or practice modes but must not be limited only to training in a technical skill.

Recognized specialty boards can only offer their primary certification(s) and subspecialty certification(s).

Recognized specialty boards may issue subspecialty certification in the fields represented by such specialty boards.

**Process to Submit a Proposal for a Subspecialty Certification**

- Prior to submitting a proposal for a subspecialty certification to the SBRC and the CPME, the specialty boards must first consult among themselves, formally and in writing, to determine interest and willingness to collaborate.
- The recognized specialty board submits the proposal for a new subspecialty certification to the CPME staff.
- CPME staff will review the proposal for a subspecialty certification and determine if the proposal is complete. If the proposal is incomplete, additional information will be requested with a specified due date.
- Following staff review, the proposal will be forwarded to the SBRC chair, who will determine if the submitted proposal is complete and ready for dissemination to the community of interest.
- The community of interest will be surveyed for a period of at least 60 days following the submission of a new subspecialty certification proposal. These comments will be forwarded to the SBRC and the CPME as well as to the recognized specialty board so that the board may incorporate the feedback from the community of interest and modify its proposal for the subspecialty area.

- A subcommittee will be appointed by CPME to complete the initial review of the full application and the comments received from the community of interest. Based upon this review, the subcommittee will make a recommendation to the SBRC regarding next steps.
- The SBRC will review the survey comments and the complete proposal for a subspecialty certification within six (6) months.

The SBRC will make a recommendation to the CPME. The CPME will review the proposal for a new subspecialty area, the comments from the community of interest, and the recommendation of the SBRC, and will make an approval decision. The applicant board will be notified within 30 days of the CPME's decision.

SBRC recommendations and CPME decisions include:

- Approve the subspecialty area.
- Determine that additional information is needed. If a proposal for a subspecialty area remains incomplete for greater than six (6) months, the proposal will expire and must be resubmitted.
- Deny the proposal for a subspecialty area based on a determination that the proposal does not satisfactorily address all requirements.

Denial of a subspecialty area is not an appealable action. Prior approval of the CPME is required if any recognized specialty board proposes the creation of a new subspecialty certification.

## **SBRC Proposal for Subspecialty Designation**

### **General Information**

Board(s):

Contact Name:

Email:

Phone:

1. Provide the name of the proposed area of subspecialization:

*CPME Standard 12.1: In establishing a subspecialty certification, the recognized specialty boards shall first consult among themselves, formally and in writing, to determine interest and willingness to collaborate.*

Recognized specialty boards may apply for subspecialty certification collaboratively or individually after initial consultation.

- Are multiple recognized specialty boards requesting this certification?

- b. Consultation with existing recognized specialty boards about working together must have occurred. Provide a description of the process and its results in a written statement indicating concurrence or specific grounds for objection from each CPME-recognized specialty board.

## **Purpose, Status, and Need**

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CPME Standard 12.3: *Recognized specialty boards offering a subspecialty certification shall require the completion of a CPME-approved residency program and a minimum of one (1) year of fellowship training in a CPME-approved fellowship or an alternative pathway that will be available for 10 years following approval of the subspecialty. The recognized specialty board shall identify a rigorous process reflective of the subspecialty's KSAs for the alternative pathway.*

CPME Standard 12.4: *Subspecialty certification shall be:*

- a. *endorsed by the recognized specialty board(s) sponsoring the subspecialty certification;*
- b. *endorsed by the recognized specialty board(s) whose diplomates are being proposed for subspecialty certification; and*
- c. *approved by the CPME.*

While subspecialty certification is intended to apply primarily to diplomates of the sponsoring specialty board(s), recognized specialty boards may accept applicants holding certifications from another recognized specialty board with the endorsement of that specialty board.

2. Briefly state the purpose of the proposed area of subspecialization:

- a. Areas of subspecialization typically fall under one of these areas. Describe which of the following this proposal addresses:
  - Evolving area of practice
  - Area of practice limited in scope or size
  - Area supported by publications and research as a defined body of knowledge and practice.
- b. Describe how the existence of a body of scientific medical knowledge underlying the proposed area of subspecialty is, in large part, distinct from, or more detailed than that of other areas in which certification or subspecialization is offered.

3. Explain how this proposed subspecialty area addresses a distinct and well-defined patient population and care need. There must be a national, not regional, need for the subspecialty.

- a. What is the current number of podiatric physicians eligible for this subspecialty certification (along with the sources[s] of data)?

4. Identify the existing national societies that have a significant interest in the area of subspecialty. Additionally, indicate the size and scope of the societies, along with the source(s) of the data.

- a. Indicate the relationship of the national societies' membership with the proposed subspecialty designation.
  - b. Describe whether and how your specialty board has interacted with the key societies and stakeholders in developing this proposed designation.
5. Define the following characteristics of the subspecialty:
- a. Clinical competence
  - b. Scope of practice
  - c. Body of knowledge and skills.
6. Indicate whether there is any overlap between this area of subspecialty and existing specialty and subspecialty certifications.
7. Outline plans for evaluation of the impact of the proposed area of subspecialty on your own programs of specialty and subspecialty certification.
8. Outline plans for evaluation of the impact of the proposed area of subspecialty on other CPME-recognized specialty boards' programs of specialty and subspecialty certification.
9. Benefits to the public (include your rationale).
10. Explain the effects if this area of subspecialty is *not* approved.

### **Eligibility and Assessment**

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CPME Standard 12.5: *For approval of any subspecialty certification, the recognized specialty board must submit valid evidence that the subspecialty area:*

- a. contributes to new knowledge in the specialty area;*
- b. actively contributes to professional education; and*
- c. actively contributes to the research needs of the profession.*

Recognized specialty board(s) seeking authorization to issue subspecialty certification in a proposed area must provide assurance that the specialty board conducts an evaluation of the impact and effect of the proposed subspecialty certification on its own general and subspecialty training and practice as well as that of other recognized specialty board(s).

The mechanism and process for authorization is specified in the New Subspecialty Certification section of CPME 230.

11. What specialty and/or subspecialty certification(s) will a diplomate be required to hold and maintain in order to be eligible for this area of subspecialty?

12. Provide the clinical practice experience (both in terms of time and patient volume) in the area of the subspecialty practice, beyond initial training.
13. Describe the availability of current and future fellowship training for this subspecialty in a CPME-approved fellowship or an alternative pathway that will be available for 10 years following approval of the subspecialty.
14. List additional qualifications (if any).
15. Describe the assessment methods for candidates to gain this subspecialty certification.
  - a. Describe the rationale behind the method(s) required in the assessment process.

### **Implementation and Approval Process**

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CPME Standard 12.6: *The recognized specialty boards shall develop a policy for continuous certification for subspecialty certification.*

16. Outline the Continuing Certification (CC) program planned for this subspecialty designation. Include how the CC program will align with CC requirements for your diplomates' underlying certificate(s).
17. Indicate how the proposed area of subspecialty will be evaluated periodically (e.g., every five years) to assure that the area of subspecialty remains viable.
18. Provide an anticipated timeline for when your specialty board will assess candidates and when your specialty board will begin issuing this designation.
19. List key stakeholder groups from which the SBRC may wish to solicit commentary on the proposed area of subspecialty.
20. Additional attachment:
  - a. An example of how diplomates will be recognized for this subspecialty designation. (The acknowledgment that a diplomate has received a subspecialty certification may be in the form of a letter or an email, or a notation on a diplomate's online public record.)

Flow chart example of the subspecialty application process.

