

A Member Board of the American Board of Medical Specialties (ABMS)

CONTINUING CERTIFICATION/MOC COMBINED EXAMINATION IN NEUROMUSCULAR MEDICINE

Content Blueprint

Nun	lumber of questions: 100							
1.	Motor r	Motor neuron disease (ALS, SMA, infectious/ postinfectious, paraneoplastic,						
	focal)							
2.	Root (c	Root (cervical/thoracic/L-S [disc, spondylosis, tumor]) 4-6%						
3.								
	trauma, congenital, hereditary, other])							
4.	Nerve		28-32%					
	A.	Mononeuropathy (cranial, somatic, etc.)						
	В.	Mononeuropathy multiplex						
	C.	Axonal (drugs/toxins, paraneoplastic, infectious, inflammatory,						
		hereditary, sarcoid, amyloid, porphyria, diabetes, etc.)						
	D.	Demyelinating/dysmyelinating disorders (inflammatory,						
		infectious/postinfectious, hereditary, toxic, diabetes,						
		paraprotein, paraneoplastic, etc.)						
	E.	Dorsal root ganglia (diabetes, nutritional, toxin, metabolic,						
		inflammatory, hereditary, etc.)						
	F.	Autonomic (diabetes, amyloid, hereditary, etc.)						
5.	NMJ (M	G, LEMS, botulism, toxins, congenital MG)	13-17%					
6.	Muscle	(dystrophies [DMD, Becker, FSHD, LGD, myotonic, OPMD],	28-32%					
	inflamn	natory [PM, DM, IBM, sarcoid, HIV], metabolic/endocrine, toxic						
	[statins], critical illness, congenital, mitochondrial, channelopathies,						
	rhabdo	myolysis [NMS, etc.], hyperCKemia, floppy infant)						
TOT	TOTAL							

Note: A more detailed content outline is shown below.



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Content Outline

1.	ent Areas Motor neuron disease (ALS, SMA, infectious/ postinfectious, paraneoplastic, focal)								
	A. Clinical								
		1.	Natural history/prognosis						
		2.	Symptoms and physical findings						
		3.	Anatomy						
		4.	Epidemiology						
		4.	Differential diagnosis						
	В.	Path	ogenesis						
	C.	Diag	nostic testing						
		1.	Physiology/electrophysiology						
		2.	Pathology (nerve, muscle, skin, other)						
		3.	Genetics						
		4.	Imaging						
		5.	Laboratory testing						
		6.	Immunology						
		7.	Comorbidity screening						
	D.	Mana	agement—acute and chronic						
		1.	Symptom management/disease modification						
			a. Pharmacology						
			b. Rehabilitation						
			i. Exercise						
			ii. Assistive devices						
			iii. Assistive technology						
			iv. Braces						
			v. Physical therapy/occupational therapy						
			vi. Pulmonary						
			vii. Speech/swallowing						
			viii. Nutritional management						
			c. Surgery						
			d. Quality of life						
		2.	Ethics/professionalism						
		3.	Counseling						



Г									
			a. Initial						
			b. End of life						
02.			al/thoracic/L-S [disc, spondylosis, tumor])						
	A.	Clinic							
		1.	Natural history/prognosis						
		2.	Symptoms and physical findings						
		3.	Anatomy						
		4.	Epidemiology						
	_	5.	Differential diagnosis						
	В.		athogenesis						
	C.		nostic testing						
		1.	Physiology/electrophysiology						
		2.	Pathology (nerve, muscle, skin, other)						
		3.	Genetics						
		4.	Imaging						
		5.	Laboratory testing						
		6.	Immunology						
		7.	Comorbidity screening						
	D.	Mana	gement—acute and chronic						
		1.	Symptom management/disease modification						
			a. Pharmacology						
			b. Rehabilitation						
			i. Exercise						
			ii. Assistive devices/technology						
			iii. Braces						
			iv. Physical therapy/occupational therapy						
			v. Pulmonary						
			c. Surgery						
			d. Quality of life						
		2.	Ethics/professionalism						
		3.	Counseling						
03.		-	hial/lumbosacral [inflammatory, infectious, neoplastic, trauma, congenital,						
	hereditary, other])								
	A.	Clinic							
		1.	Natural history/prognosis						
		2.	Symptoms and physical findings						
		3.	Anatomy						
		4.	Epidemiology						



		5. Differential diagnosis					
	B.	Pathogenesis					
	C.	Diagnostic testing					
		1. Physiology/electrophysiology					
		2. Pathology (nerve, muscle, skin, other)					
		3. Genetics					
		4. Imaging					
		5. Laboratory testing					
6. Immunology							
		7. Comorbidity screening					
	D.	Management—acute and chronic					
		1. Symptom management/disease modification					
		a. Pharmacology					
		b. Rehabilitation					
		i. Exercise					
		ii. Assistive devices/technology					
		iii. Braces					
		iv. Physical therapy/occupational therapy					
		v. Pulmonary					
		c. Surgery					
		d. Quality of life					
		2. Ethics/professionalism					
		3. Counseling					
04.	Nerve						
	Α.	Mononeuropathy (cranial, somatic, etc.)					
	В.	Mononeuropathy multiplex					
	C.	Axonal (drugs/toxins, paraneoplastic, infectious, inflammatory, hereditary, sarcoid, amyloid, porphyria, diabetes, etc.)					
	D.	Demyelinating/dysmyelinating disorders (inflammatory,					
	υ.	infectious/postinfectious, hereditary, toxic, diabetes, paraprotein,					
		paraneoplastic, etc.)					
	E.	Dorsal root ganglia (diabetes, nutritional, toxin, metabolic, inflammatory,					
	_,	hereditary, etc.)					
	F.	Autonomic (diabetes, amyloid, hereditary, etc.)					
		1. Clinical					
		a. Natural history/ prognosis					
		b. Symptoms and physical findings					
		c. Anatomy					
		d. Epidemiology					



				- · · · ·					
e. Differential diagnosis					agnosis				
			2. Pathogenesis3. Diagnostic testing						
		3.							
			a.			ectrophysiology			
			b.			rve, muscle, skin, other)			
			C.	Genet					
			d.	Imagi	ng				
			e.	Labor	atory tes	ting			
			f.		unology				
			g.	Como	rbidity s	creening			
		4.	Mana	gement-	ement—acute and chronic				
			a.	Symp	tom mar	nagement/disease modification			
				i.	Pharm	acology			
				ii.	Rehab	ilitation			
					aa.	Exercise			
					bb.	Assistive devices/ technology			
					cc.	Braces/orthotics			
					dd.	Physical therapy/ occupational therapy			
					ee.	Cardiopulmonary			
					ff.	Speech/swallowing			
					gg.	Nutritional management			
				iii.	Surger	у			
					aa.	Nerve biopsy			
				iv.	Quality	y of life			
			b.	Ethics	/profess	ionalism			
			c.	Couns	seling				
05.	ИМЈ (MG, LEN	MS, boti	ılism, t	oxins, co	ongenital MG)			
	A.	Clinica	al						
		1.	Natur	al histor	ry/progn	osis			
		2.	Symp	toms an	nd physic	al findings			
		3.	Anato	my		-			
		4.	Epide	miology	/				
		5.	Differe	ential di	agnosis				
	B.	Pathogenesis							
	C.	Diagnostic testing							
	D.				and chro	nic			
		1.				nt/disease modification			
			a.		nacology				



			i.	Cholinesterase inhibitors
			ii.	Immunomodulation
			iii.	IV lg
			b. Pla	asma exchange
			c. Ve	ntilatory support
			d. Su	rgery
			i.	Thymectomy
			ii.	Tracheotomy
			e. Re	habilitation
			i.	Exercise
			ii.	Assistive devices/technology
			iii.	Physical therapy/occupational therapy
			iv.	Pulmonary
			V.	Speech/swallowing
			vi.	Nutritional management
				uality of life
		2.		fessionalism
		3.	Councalin	~
06.		e (dystr		D, Becker, FSHD, LGD, myotonic, OPMD], inflammatory [PM, DM,
06.	IBM, s mitoc	e (dystr arcoid, hondria	ophies [DM HIV], metal	
06.	IBM, s	e (dystr arcoid, hondria	ophies [DM HIV], metak l, channelo	D, Becker, FSHD, LGD, myotonic, OPMD], inflammatory [PM, DM, polic/endocrine, toxic [statins], critical illness, congenital,
06.	IBM, s mitoc infant	e (dystr arcoid, hondria	ophies [DM HIV], metal II, channelo	D, Becker, FSHD, LGD, myotonic, OPMD], inflammatory [PM, DM, polic/endocrine, toxic [statins], critical illness, congenital,
06.	IBM, s mitoc infant	e (dystr arcoid, hondria :) Clinica	ophies [DM HIV], metak II, channelo al Natural hi	D, Becker, FSHD, LGD, myotonic, OPMD], inflammatory [PM, DM, polic/endocrine, toxic [statins], critical illness, congenital, pathies, rhabdomyolysis [NMS, etc.], hyperCKemia, floppy story/prognosis
06.	IBM, s mitoc infant	e (dystr arcoid, hondria :) Clinica 1.	ophies [DM HIV], metak II, channelo al Natural hi	D, Becker, FSHD, LGD, myotonic, OPMD], inflammatory [PM, DM, polic/endocrine, toxic [statins], critical illness, congenital, pathies, rhabdomyolysis [NMS, etc.], hyperCKemia, floppy
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06.	IBM, s mitoc infant A.	e (dystrarcoid, hondrias) Clinica 1. 2. 3. 4. 5. Pathopology Diagno 1. 2. 3.	ophies [DM HIV], metakal, channelonal Natural his Symptoms Anatomy Epidemiol Differentiagenesis ostic testing Physiology Pathology Genetics	D, Becker, FSHD, LGD, myotonic, OPMD], inflammatory [PM, DM, polic/endocrine, toxic [statins], critical illness, congenital, pathies, rhabdomyolysis [NMS, etc.], hyperCKemia, floppy story/prognosis s and physical findings ogy al diagnosis y/electrophysiology (muscle, skin, other)
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D.	Mana	Management—acute and chronic					
	1.	Symptom management/disease modification					
		a.	Pharm	acology			
		b.	Rehab	ilitation			
			i.	Exercise			
			ii.	Assistive devices			
			iii.	Assistive technology			
			iv.	Braces			
			٧.	Physical therapy/occupational therapy			
			vi.	Pulmonary			
			vii.	Speech/swallowing			
			viii.	Nutritional management			
		c.	Surger	y			
			i.	Muscle biopsy			
			ii.	Tendon release			
		d.	Qualit	y of life			
	2.	Ethics	chics/professionalism				
		a.	End of	life			
	3.	Couns	eling				