



American Board of Psychiatry and Neurology, Inc.

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

CERTIFICATION EXAMINATION IN ADDICTION PSYCHIATRY

The American Board of Psychiatry and Neurology, Inc. (ABPN) is a not-for-profit corporation dedicated to serving the public interest and the professions of psychiatry and neurology by promoting excellence in practice through certification and continuing certification processes.

The ABPN designs and develops the addiction psychiatry certification examination to assess the knowledge and reasoning skills needed to provide high quality patient care in the broad domain of the subspecialty. It utilizes two-dimensional content specifications. Within the two-dimensional format, one dimension is comprised of disorders and topics while the other is comprised of competencies and mechanisms that cut across the various disorders of the first dimension. By design, the two dimensions are interrelated and not independent of each other. All of the questions on the examination will fall into one of the disorders/topics and will be aligned with a competency/mechanism. For example, an item on alcohol use could focus on treatment, or it could focus on systems-based practice.

Candidates should use the detailed content outline as a guide to prepare for the certification examination. Please note that no single examination tests everything on the content outline.

For more information, please contact us at questions@abpn.org or visit our website at www.abpn.org.



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CERTIFICATION EXAMINATION IN ADDICTION PSYCHIATRY Content Blueprint

Number of questions: 220	
Dimension 1	
Psychiatric Disorders and Topics	
01. Alcohol-related disorders	15-19%
02. Caffeine-related disorders	1-3%
03. Cannabis-related disorders	8-14%
04. Other hallucinogen-related disorders	1-3%
05. Inhalant-related disorders	1-3%
06. Opioid-related disorders	9-15%
07. Sedative-, hypnotic-, or anxiolytic-related disorders	6-8%
08. Stimulant-related disorders	8-14%
09. Tobacco-related disorders	9-15%
10. Other (or unknown) substance-related disorders	1-3%
11. Gambling disorder	1-3%
12. Phencyclidine-related disorders	1-3%
13. Forensic issues pertinent to substance use and addictive disorders	2-4%
14. Other topics related to substance use and addictive disorders	12-18%



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Number of questions: 220		
Dimension 2		
Physician Competencies and Mechanisms		
A.	Neuroscience and mechanisms of disease	14-20%
B.	Behavioral/social sciences and psychosocial mechanisms of diseases	6-9%
C.	Clinical aspects of psychiatric and neuropsychiatric disorders	20-30%
D.	Diagnostic procedures	5-15%
E.	Treatment	25-35%
F.	Interpersonal and communication skills	2-4%
G.	Professionalism, ethics, and the law	2-4%
H.	Practice-based learning and improvement	1-2%
I.	Systems-based practice	2-4%



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01. Alcohol-related disorders
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Dimension 2
Physician Competencies and Mechanisms
A. Neuroscience and mechanisms of disease
I. Neuroanatomy
II. Cellular and molecular neurobiology
III. Neuropathology
IV. Genetics
V. Neurochemistry
VI. Neurophysiology
VII. Chronobiology (e.g., biological rhythms, sleep)
VIII. Other
B. Behavioral/social sciences and psychosocial mechanisms of diseases
I. Psychology
i. Experimental and behavioral psychology
ii. Neuropsychology, cognitive psychology
iii. Social psychology
iv. Psychoanalytic and psychodynamic psychology
v. Other
II. Sociology
III. Anthropology, culture, ethnicity, race, and spirituality
IV. Research design
V. Other
C. Clinical aspects of psychiatric and neuropsychiatric disorders
I. Epidemiology
II. Factors affecting psychiatric and neuropsychiatric disorders (predisposing, protective, and perpetuating factors, precipitants)
III. Clinical presentation, symptoms, and signs
IV. Comorbidity
V. Differential diagnosis
VI. Prognosis and course of illness
D. Diagnostic procedures
I. General physical and neurological examination
II. Psychiatric interview and mental status examination
III. Neuropsychological testing
IV. Diagnostic assessments and rating scales



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V. Laboratory testing
VI. Neuroimaging
VII. Other
E. Treatment
I. General treatment planning and decision making
II. General principles of psychopharmacology and neuropharmacology
i. Pharmacokinetics/pharmacodynamics
ii. Drug interactions
iii. Age, gender, and ethnicity issues
iv. Genomics
III. Specific pharmacologic agents
i. Tricyclics and heterocyclics
ii. Monoamine oxidase inhibitors
iii. Selective serotonin reuptake inhibitors (SSRI)
iv. Selective norepinephrine reuptake inhibitors (NRI)
v. Selective serotonin-norepinephrine reuptake inhibitors (SNRI)
vi. Other antidepressants
vii. Lithium
viii. Anticonvulsants
ix. Benzodiazepines
x. Beta blockers
xi. Alpha agonists
xii. Typical antipsychotics
xiii. Atypical antipsychotics
xiv. Psychostimulants
xv. Hypnotics and sedatives
xvi. Cognitive enhancers
xvii. Calcium channel blockers
xviii. Dopamine agonists (including L-DOPA)
xix. Anticholinergics
xx. Opioid agonists/antagonists
xxi. Other agents used in the management of psychiatric disorders
xxii. Other agents used in the management of neurologic disorders
xxiii. Other agents used in the management of other medical disorders
IV. Treatment of substance-related and addictive disorders
i. Pharmacologic



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a. Management of intoxication and withdrawal
b. Management of use and relapse prevention
c. Management of co-occurring conditions
ii. Nonpharmacologic
a. Management of intoxication and withdrawal
b. Management of use and relapse prevention
c. Management of co-occurring conditions
V. Treatment of pain
i. Pharmacologic
ii. Nonpharmacologic
VI. Treatment in special situations
i. Renal disease
ii. Hepatic disease
iii. Pregnancy
iv. Breast-feeding
v. Tardive dyskinesia and extrapyramidal symptoms
VII. Nonpharmacologic somatic treatment
i. Biofeedback
ii. Electroconvulsive therapy
iii. Phototherapy
iv. Chronotherapy
v. Vagal nerve stimulation
vi. rTMS (repetitive transcranial magnetic stimulation)
vii. Neurosurgical approaches
viii. Other
VIII. Psychotherapy
i. Supportive
ii. Cognitive and/or behavioral (including DBT)
a. Contingency management
iii. Interpersonal
iv. Psychodynamic and psychoanalytic
v. Couples and family
vi. Group
vii. Crisis intervention (e.g. critical incident debriefing, psychological debriefing/early intervention)
viii. Motivational interviewing



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ix. Other (e.g., hypnotherapy, sex therapy, mindfulness, meditation)
IX. Psychosocial interventions
i. Psychoeducation
ii. Vocational and occupational rehabilitation
iii. Self-help groups (e.g., AA, NA)
iv. Community-based treatment programs (e.g., halfway houses, day hospitals, multimodal treatment programs, therapeutic communities, opioid agonist treatment programs)
a. Nursing homes
v. Other
F. Interpersonal and communication skills
I. Communication with patients
II. Communication with other professionals
III. Communication with the public
IV. Communication with patients' families
V. Communication with the healthcare team
G. Professionalism, ethics, and the law
I. Sensitivity to diversity
II. Adherence to ethical principles (e.g., informed consent, research issues, clinical care)
III. Fatigue management, work-life balance, and physician well-being
IV. Professional behavior
V. Participation in the professional community
VI. Legal issues in psychiatry
VII. End of life issues
H. Practice-based learning and improvement
I. Development and execution of lifelong learning
i. Self-assessment and self-improvement
ii. Use of evidence in the clinical workflow
II. Formal practice-based quality improvement
I. Systems-based practice
I. Patient safety and the healthcare team
i. Medical errors, patient safety, quality improvement, and improvement activities
ii. Regulatory and educational activities related to patient safety
II. Resource management (e.g., utilization management and review, integration and systems of care, managed care issues)
i. Parity



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ii. Access to care
iii. Telepsychiatry
III. Community-based care
i. Community based programs
a. Other (e.g. nursing homes, skilled nursing facilities, assisted living)
ii. Prevention
iii. Recovery and rehabilitation
iv. Integrated care (collaborative care)
IV. Consultation to nonpsychiatric medical providers and nonmedical systems (e.g., military, schools, businesses, forensic)
V. Public health and prevention, and public policy
VI. Documentation of practice, management of records, insurance, and reimbursement