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In This Issue:

CPEP Highlights

**CPEP Re-Entry
Program Overview**

**Patient Care
Documentation
Seminar dates**

**ProBE -
Professional/Problem-
Based Ethics
Program dates**

Quick Links:

**Receive a copy of the
[Clinical Practice Re-
Entry abstract](#),
presented at the
Federation of State
Medical Boards
Annual Meeting, May
'08**

Dear Stephanie,

With Summer in full swing, it's heating up outside as well as inside at CPEP! Our enrollment is up and keeping our staff busy during these hot months. In early August, we celebrated our 1st Anniversary of our successful collaboration with ProBE, Professional/Problem-Based Ethics Program.

Physicians Returning to Practice - Observations and findings from CPEP's Clinical Practice Re-Entry Program

By: Dr. Elizabeth S. Grace, CPEP Medical Director

This past Spring, our Clinical Practice Re-Entry Program was presented as a poster at the FSMB Annual Meeting in San Antonio. With more and more physicians who left practice on their own accord returning to medicine, enrollment in CPEP's Re-Entry program keeps growing. That being said, we felt it was a good time to share the research and findings about Re-Entry participants.

Who Are Re-Entry Physicians

Over the years CPEP has found that the backgrounds and needs of CPEP's Re-Entry participants are fairly diverse and unique. Participants originally left practice for a variety of reasons, including health issues (30%), family issues (30%), career change (30%) and retirement/other (10%). Most participants enrolled in the CPEP Re-Entry Program in order to demonstrate competency for licensure after time away from practice, while others came at the recommendation of a hospital, malpractice insurance company, health program, or other organization. Their years out of practice ranged significantly, from 2 to more than 20 years, with an average of approximately seven years. Ages of the participants ranged from their mid-thirties to those in their 70s, with an average age of 50 years old. Participants were preparing to return to a variety of specialties, including primary care (more than 50%), emergency medicine, dermatology, radiology, general surgery, anesthesiology, and others.

Approximately 20% of CPEP Re-Entry Program participants demonstrated limited educational needs during their competence assessment. On average 75% demonstrated moderate to considerable educational needs, best addressed through a structured educational process. A small portion of the participants (less than 10%) had global educational needs that would require residency level training to remediate.

To date, CPEP Re-Entry Program participants have successfully returned

to clinical practice using CPEP's specialized evaluative and directed educational approach. In fact, 100% of the physicians who demonstrated minimal educational needs or who completed the CPEP Re-Entry education process were able to obtain an active medical license.

Importance of Participation in a Re-Entry Program

Re-Entry physicians are a vital resource for the medical community. From our research, CPEP has found that these physicians are a heterogeneous group. So far, no specific factors have emerged that might predict a physician's ability and competence, however, trends may emerge as more physicians complete the program. Most importantly, CPEP data does indicate that state medical boards and other organizations requiring demonstration of clinical competence appear to be justified in this prerequisite. The CPEP Re-Entry Program is an effective means of facilitating physicians' safe and effective transition to medical practice.

Fall Seminars

CPEP's Fall programs are currently accepting participants. Registration is limited, please submit applications ASAP.

Patient Care Documentation Seminar

- September 12 Louisville, KY
- December 5 Denver, CO

ProBE - Professional/Problem-Based Ethics Program

- September 19-21 New Brunswick, NJ
- November 21-23 Denver, CO

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