



American Board of Homeopathic Medicine

Diplomate Examination

Bulletin of Information for Applicants 2024

Introduction

This Bulletin contains information that should prove helpful for all applicants. It is updated as necessary. The policies and procedures in this edition pertain to the year 2024 exams. Examinees should consult the most recent edition of the Bulletin.

The ABHM Diplomate Examination typically consists of two parts, each of which will be more thoroughly described in this bulletin. The two parts are: 1) the written examination, which must be passed first, and 2) the submittal of 10 case histories (5 chronic, 5 acute) from the applicant's practice. On occasion, as the need arises, an oral examination may be required of an applicant.

Eligibility

The Diplomate Examination was established as a service to the profession and serves the ABHM by providing exams for licensed physicians (MD, DO), nurse practitioners (NP), physician assistants (PA), and dentists (DDS, DMD) who have been approved by the ABHM. No applicant will be permitted to sit for the examination unless the applicant has been approved by the ABHM.

Registration Procedure

To take the exam, applicants should request an application from the ABHM. Information will be sent which describes eligibility requirements for certification. The applicant will complete the application and return it to the ABHM mailing address along with the \$500 exam fee. The applicant may take the examination at a location of his or her choosing, and will be responsible for setting up a suitable proctoring arrangement. Most universities and colleges have testing centers that will provide this service for a fee. Any Diplomate of the ABHM, if agreeable, can also serve as a proctor.

Special Arrangements for Applicants with Disabilities

Special testing arrangements may be made for applicants with currently documented visual, hearing, physical, or learning disabilities. Requests for special arrangements should be made as far in advance of the exams as possible but must be made at least two months prior to the exams. If the exam committee determines that the applicant requires only minor adjustments in the testing environment, the applicant may be able to test under standard conditions. If a need for special arrangements is determined, the exam committee will work with the applicant in arranging for a test reader, test recorder, separate testing room, or additional testing

time. Applicants requesting that special arrangements be made must submit to the exam committee:

Letter from the applicant describing the nature of the disability and specific requirements;

Signed letter on official letterhead from a certified specialist documenting the disability.

Fees

First Attempt.....\$500

Retake*.....\$250-500 (fee determined by the extent of the examination that has to be retaken.)

*Applicants who fail the written exam or the case submissions exam may retake the exam the following year (only) for the reduced fee above.

Special Testing Arrangements: Fees will be determined on an individual basis.

The Written Exam

The written ABHM Diplomate Exam is an advanced level examination designed to test the knowledge and skills required for Diplomate status (DABHM) in homeopathy.

Description Of Written Examination

There are two parts to the examination. Part I is a closed book section and contains approximately 115 multiple choice, true/false, and matching questions. Of these 100 questions, 50 pertain to *materia medica* (keynotes, characteristics, differentiation between similar remedies, correct prescribing, etc.); 30 involve case analysis; 30 relate to homeopathic philosophy as reflected in the *Organon of Medicine* by Samuel Hahnemann, and 5 concern pharmacy considerations.

Part II contains approximately 50 items requiring short answers regarding the use of the *Repertory*. Applicants should bring their laptop computer containing their repertory of choice (should be in the Kentian repertorial format, which includes such computerized repertories as Kent's Repertory, Complete Repertory, Synthesis Repertory, Complete Dynamic, Cara, etc.) or a printed repertory of similar

formatting. If using some other repertory, please inquire with the ABHM for approval. Use of computerized repertories are permitted for the exam.

Examination Assembly

Items for the exams have been written by Diplomates of the ABHM. These items are submitted on special forms detailing the source of the items, the reference for the correct answer, and information about the item writer. Submitted items will be screened, rewritten as necessary, and assembled into exams by the ABHM. New items will be added to a computerized item bank, and the exams will be assembled and sent to selected physician members for final proofreading. Corrected exams will be produced as test booklets and sent to the exam sites for administration.

Score Reports

The written examination is scored by hand by the Examination Committee. Results should be available to examinees within one month of the exam date, if not sooner. A passing score for the written examination is 70%.

Date of the Exam

The written examination will be arranged to accommodate, as much as is possible, the applicant and the examiner. The exact date will be announced.

Case Histories Requirements

After successfully passing the written portion of the examination, the applicant must submit ten typed case histories—(5 chronic, 5 acute)—within six months of passing the written exam. Each chronic case must include follow-up visits for a minimum of one year, preferably 2-3 years, from the date of the initial case taking.

Each case history must include: a typed case history, repertorization of the initial case (and subsequent follow-ups if necessary), analysis of the case with remedy differential diagnosis (to include at least 2 additional remedies) and initial prescription; each subsequent follow-up must contain an analysis of the effects of the preceding remedy as well as justification for any new prescriptions; a physical exam (unless not pertinent).

How Case Reports Will Be Evaluated

Case reports will be evaluated according to their adherence to the tenets of "classical homeopathy," the definition of which is reflected in the following requirements:

1. The case should be taken in its entirety and should include all relevant information pertaining to the following: all physical and emotional complaints, generalities, modalities, sleep patterns, menstrual history, sexual history, food desires and aversions, review of systems, past medical history, family history, social history, and physical examination (where appropriate).
2. Selection of the most similar remedy according to clearly understood homeopathic precepts which include any or all of the following criteria, as the case allows: totality of characteristic symptoms, generalities; strange, rare, and peculiar symptoms; keynote, symptom combinations, causation, miasmatic history, and lastly, pathology.
3. Evaluations of the effects of each prescription according to its impact upon the mental, emotional, and physical aspects of the patient; i.e., the prescription's total effect upon the individual must be noted, not only its effect upon presenting complaints.
4. Implicit in the Board's understanding of the term "Hahnemannian Classical Homeopathy" is the prescription of but a single similar remedy at any given time in accord with the precepts detailed in the *Organon of Medicine* by Samuel Hahnemann.
5. Case analysis based upon such methodologies as Applied Kinesiology, electroacupuncture according to Vohl (EAV) (or similar) instruments, or other non-classical methods will be rejected.

Case histories will be subjected to an initial preliminary inspection. Any apparent deficiencies will be reported to the applicant, who will then be required to supply all additional information requested. Should any of the case histories then fail to meet ABHM standards or the applicant fail to respond, his or her application will be denied. \$250 of the examination fee will be refunded to the applicant costs.

The Oral Examination (if required by the case reviewers)

Part One consists of a review of the 10 case histories submitted by the applicant. Examiners may ask any question that occurs to them while reviewing the cases, such as questions about *materia medica* differentials, practice methodology, homeopathic philosophy, case management, etc. The applicant may also be asked to respond to any criticism or comments about the cases made by the examiners.

Part Two consists of an additional few general questions pertaining to any aspect of homeopathic knowledge/practice — in essence, oral essay questions.

Within 2-4 weeks of the oral exam, applicants will be notified in writing of their performance on the exam.

Requirements for Maintaining DABHM Status

The ABHM wishes to make it clear from the outset that specific minimum requirements have been established to maintain DABHM status once it has been awarded. These requirements are the following: Completion of a minimum of 10 credit hours of continuing homeopathic education (C.H.E.) each year or 30 (C.H.E.) every 3 years.

Contacts

Applications should be obtained from and, when completed, returned to the following:

American Board of Homeopathic Medicine Administrative Office c/o Irene Sebastian, MD, PhD, DABHM
1532 Hamilton Ln Vestavia Hills, AL 35243
Email: sebastian.irene@gmail.com

Questions about the exam should be directed to the following:
George Guess, MD, DABHM 909 Summit View Ln Charlottesville, VA 22903
434-823-1021
Email: gguessmd@gmail.com

A Concise Study Guide Recommendation for the American Board of Homeopathic Medicine Written and Oral Examinations

The primary material for study prior to the written portion of the ABHM examination should consist of the culmination of formal training, informal study, and practice of the art. We have assembled some additional suggestions by one of our recent graduates of the ABHM certification process on his preparation for the examination and present it here so that it may be of some guidance to the applicant. Below is a brief description of this member's approach to study of *materia medica*, repertorization, case taking, case analysis, and homeopathic philosophy. This is presented as a resource for your consideration, but should not be considered an all inclusive list of material knowledge required for the examination.

Recommended Method of *Materia Medica* Study

Polychrest Medicines:

Study 30-35 main or so-called polychrests. This process of study should include every aspect of these remedies. You should know the mental-emotional state, the modalities, the primary organs involved in the remedies, how they differ from one another, and what is the overall picture of the remedy. This should be known in detail, and easily accessible.

Polychrest medicines that are typically used every week in an active homeopathic practice:

<i>Aconitum napellum</i>	<i>Carcinocinum</i>	<i>Nux vomica</i>
<i>Arnica montana</i>	<i>China officinalis</i>	<i>Phosphorus</i>
<i>Argentum metallicum</i>	<i>Conium maculatum</i>	<i>Pulsatilla nigricans</i>
<i>Argentum nitricum</i>	<i>Ferrum metallicum</i>	<i>Rhus toxicodendron</i>
<i>Arsenicum album</i>	<i>Gelsemium</i>	<i>Sepia</i>
<i>Aurum metallicum</i>	<i>Ignatia amara</i>	<i>Silicea</i>
<i>Baryta carbonica</i>	<i>Kali carbonicum</i>	<i>Staphysagria</i>
<i>Belladonna</i>	<i>Lachesis mutus</i>	<i>Stramonium</i>
<i>Bryonia</i>	<i>Lycopodium clavatum</i>	<i>Sulphur</i>
<i>Calcarea carbonica</i>	<i>Medorrhinum</i>	<i>Tuberculinum</i>
<i>Calcarea phosphoricum</i>	<i>Mercurius vivus</i>	
<i>Carbo vegetabilis</i>	<i>Natrum muriaticum</i>	

Other Less Frequently Used Medicines:

Study of smaller or less frequently used medicines is also important to help you in your homeopathic practice. Study about 200 smaller remedies by finding the 2 or 3

main qualities of those remedies in Morrison's *Desktop Guide* or Boericke's *Materia Medica*. It may be helpful to write the 2-3 main qualities on flash cards and memorize them. Smaller remedies include all the remainder of the remedies in the *materia medica* (around 1300). In practice, most homeopathic physicians use 200-300 remedies on a regular basis with less frequent use of the other remedies. A list of these remedies often includes the following:

Abies canadensis	Aurum metallicum	Cantharis vesicatoria
Abies nigra	Aurum muriaticum	Capsicum annuum
Abrotanum	Aurum muriaticum	Carbo animalis
Aconitum napellus	natronatum	Carbo vegetabilis
Actaea spicata	Badiaga	Carbolicum acidum
Aesculus glabra	Baptisia tinctoria	Carboneum sulphuratum
Aethusa cynapium	Baryta carbonica	Carcinosinum burnett
Agaricus muscarius	Baryta muriatica	Carduus marianus
Agnus castus	Belladonna	Castor equi
Allium cepa	Bellis perennis	Caulophyllum thalictroides
Aloe socotrana	Benzoicum acidum	Causticum hahnemanni
Aluminum oxydatum	Berberis vulgaris	Ceanothus americanus
(Alumina)	Bismuthum subnitricum	Cedron
Ambra grisea	Blatta orientalis	Chamomilla vulgaris
Ammonium carbonicum	Borax veneta	Chelidonium majus
Anacardium orientale	Bothrops lanceolatus	Chimaphila umbellata
Anagallis arvensis	Bovista lycoperdon	China officinalis
Angustura vera	Bromium	Chininum sulphuricum
Anthracinum	Bryonia alba	Chloralum hydratum
Antimonium crudum	Bufo rana	Chlorum
Antimonium tartaricum	Cactus grandifloras	Cicuta virosa
Apis mellifica	Cadmium sulphuratum	Cimicifuga racemosa
Apocynum cannabinum	Caladium sequinum	Cina maritima
Argentum metallicum	Calcarea arsenicosa	Cinnabaris
Argentum nitricum	Calcarea carbonica	Cistus canadensis
Arnica montana	Calcarea fluorata	Clematis erecta
Arsenicum album	Calcarea phosphorica	Cobaltum metallicum
Arsenicum iodatum	Calcarea silicata	Cocaerythroxyton coca
Artemisia vulgaris	Calcarea sulphurica	(Coca)
Arum triphyllum	Calendula officinalis	Cocculus indicus
Aruno mauritanica	Camphora	Coccus cacti
Asafoetida	Cannabis indica	Coffea cruda
Asarum europaeum	Cannabis sativa	Colchicum autumnale

Collinsonia canadensis	Hypericum perforatum	Melilotus officinalis
Colocythis	Ignatia amara	Mephitis putorius
Conium maculatum	Iodium purum	Mercurius corrosivus
Corallium rubrum	Ipecacuanha	Mercurius iodatus flavus
Crocus sativus	Iris versicolor	Mercurius iodatus ruber
Crotalus cascavella	Jacaranda caroba	Mercurius solubilis
Crotalus horridus	Jalapa	hahnemanni
Croton tiglium	Juglans cinerea	Mezereum
Cubeba officinalis	Juglans regia	Moschus moschiferus
Cuprum metallicum	Kali arsenicosum	Murex purpurea
Curare woorari	Kali bichromicum	Muriaticum acidum
Cyclamen europaeum	Kali bromatum	Naja tripudians
Digitalis purpurea	Kali carbonicum	Natrum arsenicum
Dioscorea villosa	Kali ferrocyanatum	Natrum carbonicum
Dolichos pruriens	Kali iodatum	Natrum muriaticum
Drosera rotundifolia	Kali nitricum	Natrum phosphoricum
Dulcamara	Kali phosphoricum	Natrum sulphuricum
Elaps corallinus	Kali sulphuricum	Nitricum acidum
Equisetum hyemale	Kalmia latifolia	Nux moschata
Erigeron canadensis	Kreosotum	Nux vomica
Eupatorium perfoliatum	Lac canium	Ocimum canum
Euphrasia officinalis	Lachesis muta	Oenanthe crocata
Ferrum iodatum	Lacticum acidum	Oleander
Ferrum metallicum	Lactuca virosa	Oleum animale aethereum
Ferrum phosphoricum	Lac vaccinum defloratum	dippeli
Fluoricum acidum	Lathyrus sativa	Onosmodium virginianum
Formica rufa	Latrodictus mactans	Opium
Gambogia	Laurocerasus officinalis	Origanum majorana
Gelsemium sempervirens	Lecithinum	Oxalicum acidum
Glonoinum	Ledum palustre	Paeonia officinalis
Gnaphthaliun	Lemna minor	Palladium metallicum
polycephalum	Lilium tigrinum	Paireira brava
Graphites	Lithium carbonicum	Paris quadrifolia
Gratiola officinalis	Lobelia inflata	Petroleum
Grindelia robusta	Lycopodium clavatum	Petroselinum sativum
Guaiacum officinale	Lycopus virginicus	Phellandrium aquaticum
Hamamelis macrophylla	Lyssinum	Phosphoricum acidum
Hecla lava	Magnesia carbonica	Phosphorus
Helleborus niger	Magnesium muriaticum	Physostigma venenosum
Helonias dioica	Magnesium phosphoricum	Phytolacca decandra
Hepar sulphuris calcareum	Mancinella venenata	Picricum acidum
Hydrastis canadensis	Manganum carbonicum	Piper methysticum
Hyoscyamus niger	Medorrhinum	Platinum metallicum

Plumbum metallicum
Podophyllum pelatum
Prunus spinosa
Psorinum
Ptelea trifolata
Pulsatilla nigricans
Pyrogenium
Radium bromatum
Ranunculus bulbosus
Raphanus sativus
Ratanhia peruviana
Rheum palmatum
Rododendron chrysanthum
Rhus Toxicodendron
Rhus venenata
Robinia pseudacacia
Rumex crispus
Ruta graveolens
Sabadilla officinalis
Sabina officinalis
Sambucus nigra
Sanguanaria canadensis
Sanicula aqua
Sarsaparilla officinalis

Scutellaria laterifolis
Secale cornutum
Selenium
Senega officinalis
Sepia succus
Silica terra
Sinapis nigra
Spigelia anthelmia
Spongia tosta
Squilla maritima
Stannum metallicum
Staphysagria
Stellaria media
Sticta pulmonaria
Stramonium
Strontium carbonicum
Strychninum purum
Sulphur
Sulphuricum acidum
Symphytum officinale
Syphillinum
Tabacum
Taraxacum officinale
Tarentula cubensis

Tarentula hispanica
Tellurium
Terebinthinae oleum
Teucrium marum verum
Thea sinensis
Theridion curassavicum
Thlaspi bursa pastoris
Thuja occidentalis
Tuberculinum bovinum
kent
Urtica urens
Ustilago maydis
Valeriana officinalis
Veratrum album
Veratrum viride
Verbascum thapsiforme
Viburnum opulus
Viola odorata
Viola tricolor
Wyethia helenoides
Xanthoxylum fraxineum
Zincum metallicum

Recommended Resources for Particular Sections of Homeopathic Knowledge include the following:

Philosophy and Methodology

- Hahnemann: *Organon of Medicine*, 5th & 6th Editions
- Hahnemann: *Lesser Writings*
- Kent: *Lectures on Homeopathic Philosophy*
- George Vithoulkas: *The Science of Homeopathy*

Materia Medica

Allen, TF: *The Encyclopedia of Pure Materia Medica*

Boericke: *Materia Medica With Repertory*

Clarke, J.H.: *Dictionary of Practical Materia Medica*

Hahnemann, S.: *The Chronic Diseases*

Hahnemann, S.: *Materia Medica Pura*

Hering, C: *Guiding Symptoms*

Kent, J.T.: *Lectures on Homeopathic Materia Medica*

Morrison, R.: *Desktop Guide* (helpful for learning keynotes)

Nash, E.B.: *Leaders in Homeopathic Therapeutics*

Repertory

Kent, JT: *Repertory of the Homeopathic Materia Medica*

Schroyens, F: *Synthesis Repertory*

van Zandvoort, R: *Complete Repertory*