ACP MKSAP Pass Guarantee Request Form

ACP MKSAP is designed with our learners' needs in mind – and top among these needs is engaging our subscribers in lifelong learning, including preparation for exam day. If, however, you do not pass your ABIM Certification Examination or Recertification Examination after you have prepared for your test with MKSAP's focused syllabus and rigorously developed multiple-choice questions, we will offer you a 1-year free extension of your ACP MKSAP subscription.

To qualify for this guarantee, you must have answered at least 1,200* self-assessment questions over the course of your subscription or consecutively renewed subscription and submitted for CME but still do not pass your ABIM exam. CME submission is required for all learners, including residents, to verify completion and meet guarantee eligibility requirements. IMPORTANT: The date of CME submission for all 1200 self-assessment questions must be prior to your ABIM examination date, and your notification of failure must be submitted no later than 1 year following your ABIM exam.

*A combination of 1,200 multiple-choice questions, excluding flashcards and CORE questions, must be completed and submitted for CME or CME and MOC to qualify for a 1-year free ACP MKSAP subscription. No exceptions.

If you don't pass the ABIM exam and meet these requirements, send us a copy of your notification of failure from the ABIM within 1 year of taking your exam along with this form to receive a 1-year free ACP MKSAP subscription extension to the following e-mail address:

MKSAP Pass Guarantee
American College of Physicians
attn: Kim Kerns
kkerns@acponline.org

Subscriber name	
Subscriber ACP number	
Subscriber e-mail address	
Subscriber mailing address	
Date of ACP MKSAP purchase	
Date of final completion of 1,200 MKSAP self-assessment questions	
Date of notification of failure from the ABIM	
Date of ABIM exam	
I confirm that I am the purchaser of my ACP MKSAP subscription and have met all the qualifications for the MKSAP Pass Guarantee. (type your name in the box on the right)	