

State	State Requirements	Courses offered by ACEP Chapters
Alabama	12 hours every year; all must be Category 1. Extra CME may be carried over for 1 year. <i>Alabama HB 176 (SB 77)</i> allows the Board to order a physician to complete up to 50 hours of CME related to controlled substances.	
Alaska	50 hours every 2 years; all must be Category 1, AMA-, AOA-, or APMA-approved education or the equivalent allowed by regulation. (Updated	
Arizona - Medical	40 hours every 2 years.	
Arizona - Osteopathic	20 hours every year; minimum of 12 Category 1-A. Not more than 8 of ACCME Category 1 each year. (Updated by ACEP 11/28/06)	
Arkansas	20 hours every year.	
California - Medical	Courses or programs related to one of the following: patient care, community health or public health, preventive medicine, quality assurance or improvement, risk management, health facility standards, the legal aspects of clinical medicine, bioethics, professional ethics, or improvement of the physician-patient relationship. In California, physicians are required to complete 25 hours of CME credit every year to maintain their licenses. 100 hours every 4 years; all must be Category 1. A one-time 12-hour course on pain management, treatment of terminally ill and dying patients. <i>California AB 1195</i> makes the subjects of cultural and linguistic competency care a mandatory part of the continuing education requirements that a physician and surgeon must complete. (Updated by chapter 11/13/06)	CAL/ACEP offers a Scientific Assembly and a Yosemite Course. CME credit is sometimes offered for the Legislative Conference. ACEP and CAL/ACEP cosponsor CME with a variety of organizations. Visit the CAL/ACEP Web site.
California - Osteopathic	150 hours within a 3-year period; minimum of 60 must be AOA Category 1-A or 1-B; a minimum of 90 can be Category 2. A one-time 12-hour course on pain management, treatment of terminally ill and dying patients. (Updated by ACEP 11/28/06)	
Colorado	None.	Colorado ACEP co-sponsors the "Rocky Mountain Trauma and Emergency Medicine Conference" yearly with Denver Health Medical Center. Ultrasound courses are
Connecticut	50 hours every 2 years, which must include 1 hour each of the following: infectious disease (including, but not limited to, AIDS/HIV); risk management; sexual assault; and domestic	Visit CCEP Web site.
Delaware	40 hours every 2 years; all must be Category 1.	
District of Columbia	None.	

Florida- Medical	36 hours of general; 1 hour of HIV/AIDS; 1 hour domestic violence or 1 hour end-of-life/palliative health care; 2 hours prevention of medical errors education; all must be Category 1 except for domestic violence and prevention of medical errors, which can be offered by any state or federal government agency or professional association, including any provider of Category I or II AMA continuing medical education. Those <i>Florida SB 100</i> deletes requirements for the Department of Health to administer an electronic continuing education tracking system for health care practitioners. The bill also provides for the discipline of licensees who fail to meet CME requirements three or more times	
Florida - Osteopathic	40 hours total every 2 years: 20 AOA Category 1-A; 13 AOA or AMA; 1 hour risk management (must be live/participatory); 1 hour HIV/AIDS; 1 hour domestic violence; 1 hour Florida laws/rules (must be live/participatory); 1 hour laws regarding use and abuse of controlled substances; 2 hours prevention of medical errors (must be live/participatory). Physicians may complete a 1-hour CME course on end-of-life and palliative health care in lieu of the required hours for HIV/AIDS or domestic	
Georgia	40 hours every 2 years; all must be Category 1. (Updated by ACEP 11/28/06).	GCEP puts on one CME activity each year usually containing between 10 and 13 Category 1 CME credits. It is a joint sponsorship from ACEP.
Guam	100 hours every 2 years; 50 must be Category 1. (Updated by ACEP 11/28/06)	
Hawaii	40 hours every 2 years; all must be Category 1. (Updated by ACEP 11/28/06).	
Idaho	40 hours every 2 years; all must be Category 1.	
Illinois	150 hours every 3 years; 60 must be Category 1. <i>Illinois SB 1431</i> Each licensee is responsible for maintaining records of completion of continuing education and shall be prepared to produce the records when requested. (Verified	Domestic Preparedness; LLSA Article Review Course 2004, 2005, 2006, and 2007; Advanced Pediatric Life Support/Pediatric Advanced Life Support; Downstate Emergency Medicine Conference; Medical
Indiana	None.	
Iowa	40 hours every 2 years; all must be Category 1, must include 2 hours training for identifying and reporting abuse. (Verified by chapter 11/14/06)	Iowa ACEP cosponsors multiple CME programs, including the "Emergency Medicine in Iowa" annual conference at the University of Iowa.
Kansas	50 hours every year; 20 must be Category 1; 30 must be Category 2. (Updated by ACEP	
Kentucky	60 hours every 3 years; 30 must be Category 1. A minimum of 2 hours must be acquired once every 10 years in HIV/AIDS education.	

Louisiana	20 hours every year; all must be Category 1. (Verified by chapter 11/14/06)	Visit Louisiana Chapter ACEP Web site.
Maine - Medical	100 hours every 2 years; 40 must be Category 1; 60 must be Category 2. (Updated by ACEP	None provided.
Maine - Osteopathic	100 hours every 2 years; 40 must be Category	None provided.
Maryland	50 hours every 2 years; all must be Category 1. (Verified by chapter 11/13/06)	Maryland ACEP has an annual educational conference for 7-8 hours CME.
Massachusetts	100 hours every 2 years; 40 must be Category 1; 10 must be in the area of risk management, of which 4 must be Category 1; 2 must be in the <i>Massachusetts SB 1290</i> requires the board of registration in medicine to promulgate rules and regulations requiring their holders applying for a renewal registration or license on or after January 1, 2005, to certify that said holder has taken two pharmacological courses or seminars or utilizes a computer order entry system in	
Michigan - Medical	150 hours every 3 years; 75 must be Category 1 and must include medical ethics. (Updated by ACEP 12/5/06)	MCEP provides the following educational offerings: Annual Midwest Winter Symposium, 14 hours CME & AOA CME; EM Ultrasound Course, 16.5 hours CME; LLSA Article Review Course, 6 hours CME/review; APLS Course, 17 hours CME; Annual Michigan Emergency Medicine Assembly, 14 hours; Michigan Emergency Medicine Residents' Assembly; Straight Talk Reimbursement Conference, 7 hours CME. Visit the MCEP Web site.
Michigan - Osteopathic	150 hours every 3 years; 60 must be in osteopathic activities in Category 1 or Category 3, as designated by the Michigan Board of Osteopathic Medicine and Surgery. (Updated	See above.
Minnesota	75 hours every 3 years; all must be Category 1.	
Mississippi	40 hours every 2 years, all must be Category 1.	
Missouri	25 hours every year; all must be AMA Category 1 or AOA Category 1-A or 2-A; or 40 hours is post-tested. (Updated by ACEP 11/28/06)	MoCEP works in collaboration with other health care professionals to put on a yearly program in August. It is the combined clinical conference, and there are up to 15 hours of CME available at this conference. Our chapter helps sponsor opportunities that, if taken advantage of, would account for 30 of the 50 hours every 2
Montana	None.	

Nebraska	50 hours every 2 years; all must be Category 1.	As a small chapter, we only hold two programs, 1 hour each, throughout the year. However, we do partner with our state medical society for other CME programs throughout the year. The amount we partner with varies each year--on average 5 each year.
Nevada - Medical	40 hours every 2 years; 18 hours must be Category 1; 20 must be in scope of practice of specialty; 2 must be in medical ethics. (Updated	
Nevada - Osteopathic	35 hours every year; 10 must be Category 1-A.	
New Hampshire	150 hours every 3 years; 60 must be Category 1. (Verified by chapter 11/13/06)	Two per year, 8 hours each, managing medical emergencies. Visit the NHACEP Web site.
New Jersey	<p>Beginning in 2003, physicians must complete 50 CME credits, all of which shall be in Category I or Category II, with at least 20 in Category I. For registration cycles beginning in 2005 and thereafter, physicians must complete 100 CME credits, all of which shall be in</p> <p>Deadlines for physicians with hospital privileges or with alternative privileges:</p> <p>General Anesthesia - By June 30, 2007, and during every consecutive 3-year period thereafter, a physician credentialed by a hospital or alternatively privileged by the Board pursuant to <i>N.J.A.C. 13:35-4A.12</i> to provide general anesthesia services must complete at least 60 Category I CME hours in anesthesia which either meet the criteria for credit towards</p> <p>Regional Anesthesia - By June 30, 2007, and during every consecutive 3-year period thereafter, a physician credentialed by a hospital or alternatively privileged by the Board pursuant to <i>N.J.A.C. 13:35-4A.12</i> to provide regional anesthesia must complete at least eight Category I CME hours in anesthesia exclusively or in anesthesia as it relates to the physician's field of practice, which either meet</p> <p>Conscious Sedation - By June 30, 2007, and during every consecutive 3-year period thereafter, a physician credentialed by a hospital or alternatively privileged by the Board pursuant to <i>N.J.A.C. 13:35-4A.12</i> to provide conscious sedation must complete at least eight Category I or II CME hours in anesthesia services, which may consist exclusively of conscious sedation, or may consist of anesthesia as related to the physician's field of practice, which either meet the criteria for credit</p>	
New Mexico - Medical	75 hours every 3 years; all must be Category 1.	
New Mexico - Osteopathic	75 hours every 3 years; all must be Category 1.	

New York	Must complete course work or training related to infection control and barrier precautions, including engineering and work practice controls, to prevent the transmission of HIV and HBV in the course of professional practice, at <i>New York AB 5150</i> requires physicians, chiropractors, dentists, registered nurses, podiatrists, optometrists, psychiatrists, psychologists, and dental hygienists to have completed 2 hours of coursework or training regarding identification and reporting of elderly <i>New York SB 2043</i> requires physicians renewing a license to submit proof that, within the 3-year period immediately preceding such renewal period, he or she has successfully completed a course or courses of CME in professional medical competency. Further, the <i>New York SB 3878</i> requires registered nurses, licensed practical nurses, physicians, physicians assistants, and specialist assistants to complete approved domestic violence	None provided.
North Carolina	150 hours every 3 years; 60 must be in educational provider-initiated CME. (Verified by chapter 11/13/06)	Summer CME meeting offers approximately 12 hours of CME. Visit NCCEP Web site.
North Dakota	60 hours every 3 years; all must be Category 1. (Updated by ACEP 11/28/06)	North Dakota has no special requirements.
Ohio	100 hours every 2 years; 40 must be Category	
Oklahoma - Medical	60 hours every 3 years; all must be Category 1.	
Oklahoma - Osteopathic	16 hours every year; all must be Category 1. One hour must be on prescribing controlled	
Oregon	None.	
Pennsylvania - Medical	100 hours every 2 years; 20 must be Category 1; 12 must be patient safety/risk management and may be Category 1 or 2. (Updated by ACEP 11/28/06)	Annual Scientific Assembly, Written Board Review Course, Oral Board Review Course (2 per year), Trauma Seminar, Reimbursement and Coding Seminar, EDIS Seminar, third-party sponsorship of an PA Division, American Trauma Society program.
Pennsylvania - Osteopathic	100 hours every 2 years; 20 must be Category 1-A; 12 must be Category 1 or 2 in the area of patient safety and risk management. (Updated	
Puerto Rico	60 hours every 3 years; 40 must be Category 1. (Verified by chapter 11/14/06)	Puerto Rico Chapter of ACEP organizes two Scientific Assemblies per year (16-24 hours of CME each), one in February and one in July.
Rhode Island	40 hours every 2 years; all must be Category 1. Must have HIV universal precautions/blood-borne pathogens; end-of-life education,	

South Carolina	40 hours every 2 years; all must be Category 1.	Oral board course twice a year (23 hours Category 1 CME), emergency ultrasound course - multiple courses (16 hours Category 1 CME), advanced ultrasound course (8 hours CME), LLSA course (10 hours CME - plus possible 5 hours post test CME)
South Dakota	None.	
Tennessee - Medical	40 hours every 2 years; all must be Category 1.	
Tennessee - Osteopathic	40 hours every 2 years; all must be Category 1.	
Texas	24 hours every year; 12 must be Category 1; 1 hour must involve medical ethics/professional responsibility. (Verified by chapter 11/14/06)	Visit TCEP Web site.
Utah - Medical	40 hours every 2 years; 20 must be Category 1.	
Utah - Osteopathic	40 hours every 2 years.	
Vermont - Medical	None.	VT ACEP offers no specific course but does sponsor a course every February that offers 15 CME per year.
Vermont - Osteopathic	30 hours every 2 years; 12 must be osteopathic medical education.	VT ACEP offers no specific course but does sponsor a course every February that offers 15 CME per year.
Virginia	60 hours every 2 years; 30 must be Category 1, 15 of which must be interactive; 30 may be Category 2. (Updated by ACEP 11/28/06)	Annual Scientific Assembly, approx 25-30 hours CME; spring reimbursement seminar, 6 hours CME; ACLS and PALS sponsorship, 32 hours CME; Statewide EMS Symposium sponsorship, approx 30 hours CME; misc other sponsorship,
Virgin Islands	40 hours per year, 25 must be Category 1; 25 hours must be in the specialty. (Updated by	
Washington - Medical	200 hours every 4 years; 80 must be Category 1; 80 may be Category 2; 80 may be Category 3; 80 may be Category 4; 80 may be Category Additional license requirements: HIV/AIDS training, successfully passed examination (FLEX, USMLE or National Board Examination) – scores verified from appropriate organization/agency, AMA Physician Profile, ECFMG Certificate, if international graduate,	
Washington - Osteopathic	150 hours every 3 years; 60 must be Category	
West Virginia - Medical	50 hours every 2 years; all must be Category 1. *There is a one-time requirement for 2 of the 50 hours to be end-of-life care education.	WV ACEP offers a total of 12 CME hours per year.
West Virginia - Osteopathic	32 hours every 2 years; 16 must be Category 1- *There is a one-time requirement for 2 of the 32 hours to be end-of-life care education. (Updated	WV ACEP offers a total of 12 CME hours per year.
Wisconsin	30 hours every 2 years; all must be Category 1. (Updated by ACEP 11/28/06)	

Wyoming	Beginning January 1, 2007: 60 hours every 3 years in any combination of Category I, AOA, Category II, PRA AMA, or current certificate equivalent from any specialty board approved by the ABMS, with exceptions as noted by the state board of medicine. (Updated by ACEP 11/17/06)	
---------	---	--