

Tips for Counting Clinical Hours for the PMHS Exam



Think about your day or week. For example, approximately **how many hours in your week relate to developmental, behavioral, or mental health tasks** in the care you provide?



These hours reflect your on-the-job learning and skills development.

Use the exam's [content outline](#) to see specific pediatric DBMH topics you may encounter **in everyday practice**.



Did you know that topics related to sleep, elimination, and developmental surveillance count? Check out our recorded [webinar](#) that walks you through this essential document.

Explore the list of **screening and assessment tools** noted on the [content outline](#). You can count activities that contribute to screening, assessment, and health promotion related to DBMH.



Don't forget to include relevant portions of periodic wellness visits when counting your DBMH hours.

What about **pharmacologic agents, therapies, and interventions** listed on the [content outline](#)?



Consider patient concerns you see as well as tasks—count those hours too.

Referring is relevant, too! If an assessment leads to a referral, that time still counts because you were able to determine a possible diagnosis for which specialized help is needed. You guided the patient and family through the next steps with an appropriate provider.



Eating disorders, bipolar, and schizophrenia are some examples of complex conditions that may need a referral. Remember the PMHS exam does not change your scope of practice.

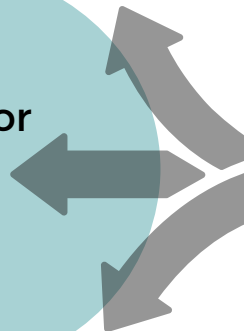
Also, remember to count future visits with those patients for follow-ups, sick visits, etc. How will their new treatment plan be impacted by the reason for their visit with you today? Will medications you prescribe risk interactions?

Did you **collaborate with a colleague** on a patient concern or research clinical resources or peer-reviewed literature?

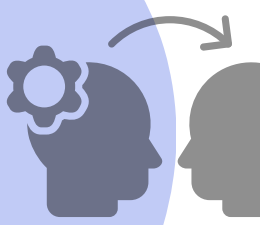


Hours you count should include activities beyond screening, like case-finding, diagnosis, and managing common DBMH conditions seen in primary care.

Successful exam candidates will have **practice hours across the spectrum of DBMH**. If you do not regularly see conditions or prescribe medications on the [content outline](#), what are opportunities in your practice or community to shadow a colleague on a limited basis? Those hours would also count.



A preceptor is not required, but you are welcome to seek one and count those hours. If you identify personal gaps in the exam content outline and know your strengths, consider trading preceptor time with colleagues in your practice or network. We are all in this together to support the emotional and cognitive well-being of children, teens, and young adults.



If you are precepted, those hours count too!