



American Board of Surgery Update

BARBARA JALBERT-GERKENS

ASSOCIATION OF RESIDENCY COORDINATORS IN SURGERY

SAN DIEGO – APRIL 18, 2017

Topics

- ABSITE
- QE/CE
- ENTRY OF OSTEOPATHIC TRAINEES
- PRIOR ABS APPROVAL
- ONLINE RESOURCES FOR PROGRAMS

ABSITE

- 2018 ABSITE – Friday, January 26 to Tuesday, January 30
- APDS survey to program directors about earlier ABSITE
 - October - ranked highest by survey respondents
 - Cited earlier results to assist in: rank order for the match; promotions and/or disciplinary actions
- Ongoing discussions regarding a potential earlier ABSITE

Earlier ABSITE? Impact

- Exam development for all other ABS exams
 - Development is one year in advance
- Psychometrics and results processing
 - Sept/Oct – qualifying and recertifying exams in vascular, pediatric surgery, surgical critical care, and complex general surgical oncology
- In one calendar year, **two** ABSITE exams would be administered: the traditional January exam with second exam in the fall
 - Allows an exam opportunity for resident cohort at each clinical level

Impact for Programs/ABS

- Pre-registration/ordering for ABSITE would be in June
 - Orientation for new residents
 - Graduation of chief residents
- Trainee rosters verification/update would be even earlier – during QE application season
- Exam would be near or during interview season

Pre-Registration

- Advanced registration of examinees included:
 - Name of **all** Examinees
 - Including PD, faculty, or “guest” examinee
 - Clinical Level
 - Name of host program if resident is taking exam elsewhere
 - Testing accommodations: time-and-a-half or double time
- Pre-registration significantly reduced post-exam results processing time
 - Results available approx. one month earlier than previous years

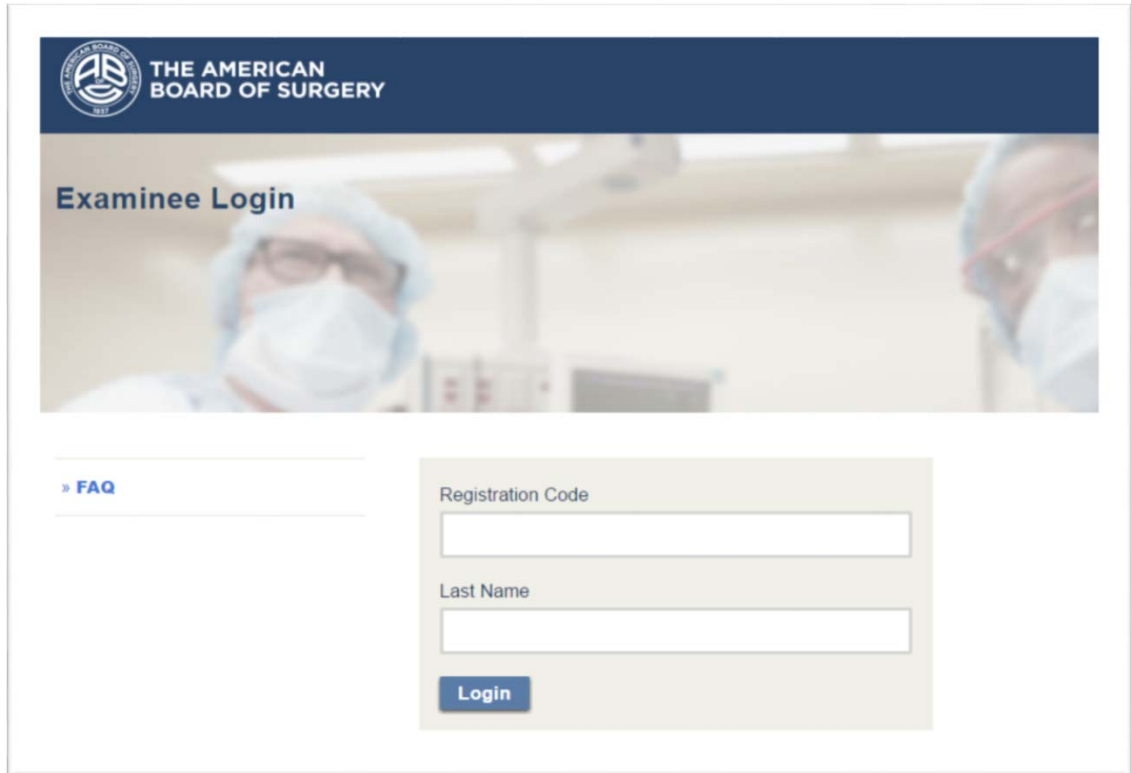
Pre-Registration – the learning curve

- “Yes” must be selected for each resident taking the exam
- Clinical level and examinee name on order form: used for results processing
 - Corrected reports will not be prepared for incorrect levels or names
- Changes/additions made to order after deadline resulted in a \$100 processing fee
- May be unable to accommodate last minute changes

Access to Exam

Registration Code provides the following:

- Exam Name
- Examinee Name and Clinical Level
- Testing Accommodations
- Parent Program – receive results
- Host program, if taking exam elsewhere
- Registration Codes are **not** transferable



The screenshot shows the login interface for the American Board of Surgery. At the top, there is a dark blue header with the American Board of Surgery logo and the text "THE AMERICAN BOARD OF SURGERY". Below the header is a large image of two surgeons in an operating room, with the text "Examinee Login" overlaid. To the left of the login form is a link labeled "» FAQ". The login form itself is a light beige box containing two input fields: "Registration Code" and "Last Name". Below these fields is a blue "Login" button.

2018 ABSITE

- Will begin ordering process earlier
- Double check order form information by *deadline date*
 - Name and clinical level
 - Can be reviewed online 24/7 on Status of Order page
- Ensure timely submission of payment and seating charts
 - Results will not be released until *full payment and seating charts are received*
- Reminder: ABS does not require the ABSITE; nor is it required to apply to QE

ABSITE – Data Forensics

- ABS engages Caveon Test Security to examine responses
- Every resident's answers is compared to every other resident's answers
 - Performance on new vs. used questions
 - Response time
 - Item visits
 - A shared history: even if matches are from different programs
- Identifies irregular behavior where likelihood of a match occurring randomly is at least less than *one in a million*

Exam Irregularities

- When an irregularity or a security violation occurs:
 - PD notified of individuals involved and asked to investigate
 - Department chair and DIO also notified
 - Exam: on first day of the window for the next three years
 - Entire program, including any visiting residents
 - Any subsequent offense may result in exam required to be taken at Pearson VUE or similar venue at a much higher per exam fee
 - Any disciplinary consequences at program director's discretion

ABSITE Results

- **Only** parent program will receive the results
 - ABS will not discuss ABSITE results with individual residents; will be referred back to program
 - Available on website **for a limited time**
 - Results: pdf files that can be saved to your records
 - ABS ***does not retain individual score reports***; only keep summary reports with all residents listed
 - Transcripts *are not available to residents or any third party*
 - Encourage your residents to save their reports to their personal files

Accommodations

- ABSITE
 - Program determines criteria and grants the accommodation
 - Time-and-a-half or double time
 - Does not guarantee accommodations on QE
- QE – due by April 14
 - Learning Disability – documentation/questionnaire (add'l exam time)
 - Per Policy: Examination of Persons with Disabilities
 - Comfort – breast pumping, diabetes testing, injury
 - Additional break time

Trainee Roster Updates

- Roster verification of previous year is now combined with updates for current academic year
- Verification includes FEC Curriculum Level completed thus far for each resident
- Trainee Roster information: pre-populates order form
 - Double check roster data
 - Incorrect roster data resulted programs being charged the \$100 processing fee for late changes to ABSITE orders

Roster Verification

Edit Entry

Last Name: Wentz
First Name: Carson
Middle Name:
SSN: 777665555
Type Of Position: Categorical
Training Type: 5yr training program
Anticipated Program Completion Year: 2016

Academic Year 2015-16 Verification
For those new to your program (2016-2017), skip this section and go to AY 2016-2017 Roster section below.
Satisfactorily Completed (2015-2016)
If 'No' is selected, provide explanation below

Clinical Training Level (2015-2016): Clinical Level 3
FEC Curriculum Level Completed to Date: Level 4

Academic Year 2016-17 Roster
Status for 2016-2017 Academic Year
If 'Off-Cycle' or 'Terminated' is selected, provide explanation below
Clinical Level 4

If Anticipated Completion year is same as current year, this resident will be *removed* from roster; even if next clinical level noted. **Must** be updated.

Most common reasons why:

- ❖ Not on order form
- ❖ No QE packet

Roster Verification for 2017

- As with ABSITE ordering, the request for verification will begin earlier
- Programs will continue to provide FEC level for each resident
- Updates to roster verification options
 - More options in the “Continuing to next academic year” field
 - A validation check of anticipated completion year field

2017 QE – July 20

- Encourage your residents: Apply and Register early!
- Check status online
- Exam centers have limited capacity; likely fill up well before exam, particularly in urban areas
 - Delays – travel to a more distant center – like Bangor, Maine

Admissibility to QE and CE

- Total of 7 years to achieve **certification** (passing both QE & CE)
 - QE – 4 opportunities in 4 years
 - CE – 3 opportunities in 3 years
 - not 7 years for the QE – *an incorrect assumption*
- Time begins ticking **immediately** upon completion of residency, **not** when application is approved
- Delay in applying or not taking exam in a given year: **will lose an exam opportunity**
- Year limit is absolute for both exams

QE Application

- **Must be signed** by program director
 - No signature stamps, scans, or faxes
- GME section: list all rotations and all non-clinical time
- 6 operative and 6 clinical assessments
 - Assessment forms are not submitted with application
- ECFMG certificate for international medical graduates only
- More than one program - documentation of satisfactory completion required

QE Applications - continued

- ACGME-Resident Operative Experience Report by Role
 - 150 chief cases
 - 750 total cases
 - 25 TA cases
 - 25 surgical critical care patient management cases
- Defined Category – ACGME requirement that must be met by completion of residency
 - Not to apply to QE

QE After PGY-4

- Must meet same application requirements as graduating chiefs
- With prior RRC-S approval, up to 6 months of chief rotations may be completed in PGY-4
- *PGY-4 applicants to the 2017 QE will **not** be required to meet the increased case numbers taking effect in 2017-2018, but **must** have FES certification by end of residency

QE After PGY-4 - continued

- Upon completion of residency, all PGY-4 applicants will be required to submit:
- List of PGY-5 rotations and non-clinical time
- Updated operative log
- Program director will be required to attest to the PGY-5 information ***and*** to the satisfactory completion of entire residency

Status of the PGY-4 Applicant

- Will not have any official ABS status until successful completion of residency and PD attestation is received
- **Only** once the above is received, applicant will then have
 - Ability to make exam site selection for CE
 - Ability to register for QE if unsuccessful on previous attempt
- Taking the exam after PGY-4 will count towards the four exam opportunities in four years

New Requirements – 2018 applicants

- 200 chief cases; 850 total cases
- 40 surgical critical care patient management cases
- FES certification
 - Current PGY 4 residents – should be scheduling exam now
 - Time lag between scheduling and taking the exam
 - Exam spots are finite in each region
 - Possibility of having to retake exam
 - May take several months get through entire process
- QE application *will not be approved without FES certification*

Non-Clinical Time

- Is **any** time away from clinical such as:
 - Vacation
 - Meetings, conferences, presentations
 - Interviews
 - Early departure for fellowship
 - None of the above counts toward the 48 weeks of full time clinical training

Training Time

- Require 48 weeks of full-time clinical activity each year
- For added flexibility, the 48 weeks may be averaged
- First three years = 144 weeks
- Last two years = 96 weeks

Medical Leave

- Documented medical conditions, including pregnancy and delivery, that directly affect the individual resident
 - No separate medical and maternity leave policies
 - No separate paternity or family leave
- With medical leave, may take an additional two weeks off
- First three years = 142 weeks
- Last two years = 94 weeks
- Still not enough time.....

Six-Year Option

- Complete 5 clinical years over 6 academic years
- Training must be completed in a single program and the program's discretion
- May take up to 12 months off, with prior ABS approval
- Used for any purpose, including but not limited to
 - Medical, maternity, family leave
 - Volunteerism
 - Educational opportunities

CE – Certifying Oral Exam

- **Must** have full and unrestricted medical license
 - Even if in fellowship; *limited licenses are not acceptable*
 - Begin process of obtaining license early
 - Majority of applicants underestimate time needed
- Registered only with possession of full and unrestricted medical license and payment of exam fee
 - Exam may fill prior to obtaining full and unrestricted medical license and/or paying the exam fee

Prior ABS Approval

- International Rotations
 - ABS requires a minimum 4-week rotation (RRC-S – 2 weeks)
- Flexible Rotations
- Six-Year Option
- Extended Medical Leave (if time exceeds the 46 wk/yr policy)
- Credit for Foreign Training and J-1 Visa
- **Anything out of the norm**

Prior ABS Approval – continued

- Requests must be a formal letter from program director (not from the resident)
- Must be mailed or faxed
 - Do not send email directly to executive director
- Failure to obtain prior ABS approval may result in a refusal to admit resident to the certification process
- Formal ABS approval letter must be included with application
 - Approval will be a formal letter (not an email)

Entry of Osteopathic Trainees

- Certification in General and Vascular Surgery (5-year programs only)
 - Complete a minimum of the last three years of residency training (PYG-3, -4, and -5) in an ACGME-accredited program
 - Academic year in which program obtains ACGME accreditation will count as one full year toward 3-year requirement
 - Effective date: the date program is granted accredited by the ACGME (not pre-accreditation)
 - Meet all requirements in effect at time of application

Entry of Osteo Trainees – continued

- Vascular Surgery (2-year fellowship programs)
 - Meet all requirements for ACGME-accredited general surgery
 - Have an approved general surgery QE application
- Certification in other ABS specialties: Pediatric Surgery, SCC, and CGSO
 - Must be first **certified** in general surgery prior to obtaining subspecialty certification and as such,
 - Meet all requirements for ACGME-accredited general surgery

Area for Programs

The screenshot shows the website for The American Board of Surgery. The header includes the logo and navigation links: LOG-IN, NEWS, ABOUT, CONTACT, and a search icon. The main banner features the text 'Training & Certification' with three buttons: 'TRAINING & CERTIFICATION' (purple), 'Maintenance of Certification' (orange), and 'For the Public' (green). A red arrow points to the purple button. Below the banner, the page is divided into two columns. The left column, titled 'Becoming ABS certified', contains a list of links: '» ABOUT CERTIFICATION', 'Dates & Fees', 'Taking a Computer Exam', 'International Training', '» For Residency & Fellowship Programs' (circled in red), '» General Surgery', '» Vascular Surgery', '» Pediatric Surgery', and '» Surgical Critical Care'. The right column, titled 'About Certification', contains the following text: 'Certifications Offered', 'The ABS offers board certification in the following specialties:', a list of specialties (General Surgery, Pediatric Surgery, Complex General Surgical Oncology, Hospice and Palliative Medicine, Vascular Surgery, Surgical Critical Care, Hand Surgery), a paragraph explaining exam requirements, a paragraph about 'in-training' exams, and a section titled 'Becoming Certified' with a brief description of the certification process.

Program Resources

- Nat'l Program Pass Rates
- Trainee Roster
- In-Training Exam
- Training Requirements
- ABS Policies
- And more

The screenshot displays the website for The American Board of Surgery. The navigation bar includes 'LOG-IN', 'NEWS', 'ABOUT', and 'CONTACT'. Below the navigation bar are three main sections: 'Training & Certification' (highlighted in purple), 'Maintenance of Certification' (highlighted in orange), and 'For the Public' (highlighted in green). The 'Training & Certification' section is further divided into 'Area for programs' and 'Training Programs Area'. The 'Area for programs' section includes links for 'Becoming Certified', 'For Residency & Fellowship Programs', 'Program Pass Rates' (circled in red), 'Update Program Contact Information', 'Trainee Rosters' (circled in red), '2017 In-Training Exams' (circled in red), 'General Surgery', 'Vascular Surgery', 'Pediatric Surgery', 'Surgical Critical Care', 'Surgical Oncology', 'Hand Surgery', 'Hospice & Palliative Medicine', and 'FAQs'. The 'Training Programs Area' section includes 'Program News' with links for 'J-1 Visas for Research Fellowships', 'Leave Policy', and 'Flexible Endoscopy Curriculum', and 'Key ABS Links' with links for 'Dates & Fees', 'ABSITE', 'General Surgery Training Requirements', 'General Surgery Qualifying Exam', 'General Surgery CE - What to Expect', 'General Surgery - Flexible Rotations', 'International Training & Visas', 'SCORE Curriculum Outline', and 'Vascular Surgery Training Pathways'. The 'Key ABS Policies' section includes links for 'Exam Admissibility Policy - General Surgery & Vascular Surgery', 'Examination of Persons with Disabilities', and 'General Surgery - Credit for Foreign Graduate Medical Education'. Red arrows point to 'Program Pass Rates', '2017 In-Training Exams', 'General Surgery Training Requirements', and 'Key ABS Policies'.

Online?

- Programs Cannot:
- Access QE and CE results for former residents
 - **Only** accessible by using resident's *personal* log-in
- Access Reports of Candidate Performance
 - Annual Report and Five-Year Summary Report – **emailed** to PD and coordinator in early fall
 - Links in email will deactivate after a period of time
 - **Save** the pdf reports to your program records

THANK YOU!

QUESTIONS??