



American Board of Surgery Qualifying Examination Application

Association of Residency Coordinators in Surgery – April 12, 2007

Barbara Jalbert-Gerken

Key Points

- Highlight new features on the application
- Outline common errors found on application materials submitted to ABS
 - Resident and Program will receive e-mail from ABS regarding problems with application
 - Delay in the processing and approval of application
- Emphasize resources for programs on the ABS website and importance of roster maintenance

Status of Application Page

This page provides important information regarding an application from submission to approval. Each component of the application has a status and options.

General Surgery Qualifying Examination Status of Application

[Print](#)

Status of Application

This page reflects the current status of your application. Review carefully the [application requirements](#) before starting the application process.




- ➔ To **complete** the required online forms, click on "Edit Form."
- ➔ To **print** a completed online form for your records, click on "Download Printer-Friendly PDF."
- ➔ To **submit** a completed online form to the ABS, click on "Make Final and Lock Form." This will lock the form from any further changes.

Begin the application process by completing and submitting the online application form, then the online operative experience form if required. The **signature form must then be printed out in its entirety** and the **entire form** mailed to the ABS office with the required signatures.

Printing the online forms requires Adobe PDF Reader. If you do not have Adobe Reader on your computer, click on this link to download it for free: [Adobe Reader](#).

NOTE: Items submitted electronically are immediately marked "Received." Items mailed to the ABS office require 10-15 business days to be marked "Received" due to mailing and processing time. To confirm delivery to the ABS office, please track your package through your carrier.

Important Note from Examination Coordinator: *check your email.*

Status	Not Yet Received
Available Options	 Edit Form
	 Make Final and Lock Form
	 Download Printer-Friendly PDF

Important note to resident regarding problem with application

Click "Edit Form" to start application

Click "Make Final and Lock Form" prior to submission of Signature Form

Status of Application Page continued

2) Online Operative Experience Form (complete and submit electronically to ABS if required)

Status	Not Yet Received
Available Options	Edit Form Make Final and Lock Form Download Printer-Friendly PDF

3) Signature Form (print entire form and mail to ABS)

Status	Not Yet Received
Available Options	Download Printer-Friendly PDF

4) State Medical License

Status	Not Yet Received
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If submitting ACGME operative report, do **NOT** complete this form.

Download Printer-Friendly PDF of the Signature Form. This form, submitted in its entirety, must be signed by both resident and program director.

If submitting a full and unrestricted medical license, ABS receipt date will show here.

Status of Application Page continued

5) Application Fee

Status	Not Yet Received
Available Details	Total Amount of Fee \$300.0000
	Total Amount Paid \$ 0.00
	Remaining Balance \$300.0000
Available Options	A link for credit card payment will appear once your completed application form is "Made Final".

Application Approval

Status	Not Yet Approved
---------------	------------------

To pay application fee by credit card, online application must be "Made Final".

Once application is approved, date of ABS approval will be noted on this page.

Note: Each application component reports a "Status". The date in these fields will indicate one of the following: date of electronic submission ("Made Final"); date of receipt in ABS office; or date of approval.

After ABS Approval

- The ABS will mail and e-mail instructions of how to register for the exam and submit separate examination fee.
- New for the 2007 QE, resident can complete the exam registration and pay exam fee by credit card online. Click on “My Records”; then “Examination Results and Records”.
- Once registration processed by the ABS, exam authorization letter will be mailed.
- Schedule exam with Pearson as soon as exam authorization letter is received. Centers, particularly urban centers, fill up quickly!



THE AMERICAN BOARD OF SURGERY

1617 John F. Kennedy Boulevard, Suite 860 Philadelphia, Pennsylvania 19103-1847

General Surgery Qualifying Examination Application Form (DRAFT)

Personal Information

Candidate Identification Number 888884

Full Name Jalbert-Gerkens, Barbara L
As registered with the ABS

Last Name
ONLY if different from above.

First Name
ONLY if different from above.

Middle Name
ONLY if different from above.

Social Security Number 121678111
(U.S. or Canada, No dashes, i.e. 000000000)

Name as it should appear on certificate Barbara Linda Jalbert-Gerkens
Upon successful completion of Certifying Process

Mailing Address and Contact Information

Street Address 1 1617 JFK Blvd

Street Address 2 Suite 860

DRAFT
Note: Documented proof may be required for changes to SSN
Do Not Submit to ABS

Do not submit draft form. The application must be “Made Final” prior to printing the Signature Form for submission to the ABS – see Status of Application Page.

The “Full Name (*as registered with ABS*)” and “Social Security Number” fields reflects current information on your Resident Roster

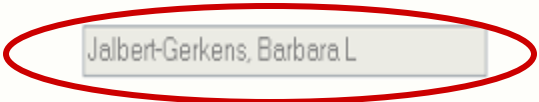
- For typos in applicant names, corrections may be made in the fields below “Full Name”. For name changes other than typos, documentation must accompany application.
- For typos or incorrect SSN, just type over incorrect number.
- *Note: Documented proof may be required for changes to SSN*
 - will appear on Signature Form in red. This alerts the ABS to a change in SSN.
- Any corrections to these fields will be made in the ABS database upon receipt of the Signature Form.

General Surgery Qualifying Examination Application Form (DRAFT) Instructions

Save and Exit Cancel

Personal Information


Candidate Identification Number

Full Name
As registered with the ABS


Last Name
ONLY if different from above.

First Name
ONLY if different from above.

Middle Name
ONLY if different from above.

Social Security Number *
(U.S. or Canada, No dashes, i.e. 000000000)


Name as it should appear on certificate *
Upon successful completion of Certifying Process



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1617 John F. Kennedy Boulevard, Suite 860 Philadelphia, Pennsylvania 19103-1847

General Surgery Qualifying Examination Application Form (FINAL)



Personal Information

Candidate Identification Number	888884
Full Name <i>As registered with the ABS</i>	Jalbert-Gerkens, Barbara L
Last Name <i>ONLY if different from above.</i>	
First Name <i>ONLY if different from above.</i>	
Middle Name <i>ONLY if different from above.</i>	
Social Security Number <i>(U.S. or Canada, No dashes, i.e. 000000000)</i>	121678111
Name as it should appear on certificate <i>Upon successful completion of Certifying Process</i>	Barbara Linda Jalbert-Gerkens

Note: Documented proof may be required for changes to SSN

Mailing Address and Contact Information

Online Application is "Final". Signature Form, signed by both resident and program director can now be submitted to the ABS.

Red notation indicates a change in Social Security Number.

Common Errors in the Graduate Medical Education Section

General Surgery Qualifying Examination Application Form (DRAFT)

[Instructions](#)

[Save and Exit](#) [Cancel](#)

Graduate Medical Education

THIS SECTION MUST BE FILLED OUT CORRECTLY FOR YOUR APPLICATION TO BE ACCEPTED. INCORRECT OR INCOMPLETE INFORMATION WILL DELAY YOUR APPLICATION'S APPROVAL.

Click on the Instructions link above for **specific instructions** on how to complete this section.

[Add New Record](#)

From	To	Weeks	Program Name	Name of Affiliated Institution	Clinical Level	Clinical Activity	
2002-07-01	2003-06-30	52.1	WA - Univ. of Washington [0768]		Residency - PGY 1	General Surgery	Edit
2003-07-01	2004-06-30	52.3	WA - Univ. of Washington [0768]		Residency - PGY 2	General Surgery	Edit
2004-07-01	2005-06-30	52.1	WA - Univ. of Washington [0768]		Residency - PGY 3	General Surgery	Edit
2005-07-01	2006-06-30	52.1	WA - Univ. of Washington [0768]		Residency - PGY 4	General Surgery	Edit
2006-07-01	2007-06-30	52.1	WA - Univ. of Washington [0768]		Residency - PGY 5 Chief	General Surgery	Edit

Search

Search the Website

Barbara L.
Jalbert-Gerkens

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[ECFMG Certification](#)

[Graduate Medical Education](#)

[Certification of Attainment of Clinical Skills](#)

[Completion](#)

↑ Incorrectly grouped as yearly total – EACH rotation must be listed

Instructions for Graduate Medical Education

IMPORTANT: Each rotation MUST be listed separately by Clinical Activity and NOT grouped together as a yearly total. Such applications will not be processed.

- Enter your entire training sequence in chronological order from the date you began graduate education in surgery until the date completed or expect to complete. There should be no gaps in the time sequence from the start of your residency to its completion. Time spent on vacation, research, fellowships, etc., must also be listed.
- Add a new record for each rotation by clicking on the "New Record" link. Note that the information entered on the previous record for Program Name, Affiliated Institution, and Clinical Level will be the default values for the next record. Likewise, the next record will reflect as its start date the previous record's end date (plus one day).
- If your training did not occur at the parent institution, type the name of the institution and location in the "Name of Affiliated Institution" field.
- For rotations that combine different types of training, select from the drop-down menu the predominant clinical activity that best describes the rotation.
- "General Surgery" should be selected as Clinical Activity **ONLY** if the type of training completed is not listed as a menu option.
- Only residency rotations from a program accredited by the ACGME or the Royal College of Physicians and Surgeons of Canada will be counted toward the required 54 months of clinical surgical experience.

EXAMPLE:

From	To	Weeks	Program Name	Name of Affiliated Institution	Clinical Level	Clinical Activity
2001-07-01	2001-09-30	13.1	NY - SUNY - Brooklyn [0500]	Mercy Hospital	Residency - PGY 2	Pediatric Surgery
2001-10-01	2001-11-30	8.7	NY - SUNY - Brooklyn [0500]		Residency - PGY 2	Thoracic Surgery
2001-12-01	2002-01-31	8.9	NY - SUNY - Brooklyn [0500]		Residency - PGY 2	General Surgery
2002-02-01	2002-03-31	8.4	NY - SUNY - Brooklyn [0500]	New York General Hospital	Residency - PGY 2	General Surgery
2002-04-01	2002-06-30	12.9	NY - SUNY - Brooklyn [0500]		Residency - PGY 2	Transplant

The Instruction Link provides a sample entry for the Graduate Medical Education as well as answers often-asked questions regarding the completion of this section.

Problems with Chief Year Entries

General Surgery Qualifying Examination Application Form (DRAFT)

[Save and Exit](#) [Cancel](#)

Graduate Medical Education

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Click on the Instructions link above for **specific instructions** on how to complete this section.

[Add New Record](#)

From	To	Weeks	Program Name	Name of Affiliated Institution	Clinical Level	Clinical Activity	
2006-07-01	2006-09-30	13.1	CA - San Joaquin General [1033]		Residency - PGY 5 Chief	ENT	Edit
2006-10-01	2007-02-28	21.6	CA - San Joaquin General [1033]		Residency - PGY 5 Chief	vascular Surgery	Edit
2007-03-01	2007-04-30	8.6	CA - San Joaquin General [1033]		Residency - PGY 5	General Surgery	Edit
2007-05-01	2007-06-30	8.7	CA - San Joaquin General [1033]		Residency - PGY 5 Chief	General Surgery	Edit

Instructions

Search

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Not an essential component

> 4 months

Chief rotation?

Problems with Chief Year Entries

continued

- Chief Year must be devoted to the Essential Content Areas of Surgery, as follows:
 - Alimentary Tract
 - Abdomen and its Content
 - Breast, Skin and Soft Tissue
 - Endocrine System
 - Head and Neck Surgery
 - Pediatric Surgery
 - Surgical Critical Care
 - Surgical Oncology
 - Trauma/Burns
 - Vascular Surgery
- ENT is **NOT** an Essential Content Area

Problems with Chief Year Entries continued

- Vascular Surgery rotation is 21.6 weeks or 5 months
 - During the Chief year, no more than four months may be devoted to any one essential component
- Rotation not listed as a Chief rotation
 - The ABS does not make any assumptions on what is considered a Chief rotation
- Booklet of Information-Surgery is a resource – see www.absurgery.org. Click on “Publications” tab in top banner.

Graduate Medical Education Program Summary by Year - appears only on printed Signature Form

Graduate Medical Education Program Summary by Year

Year	Program Name	Inclusive Dates	Clinical Weeks	Non-Clinical Weeks
1	CT - St. Mary's Hospital [1081]	2002-07-01 to 2003-06-30	52	0
2	CT - St. Mary's Hospital [1081]	2003-07-01 to 2004-06-30	52.1	0
3	FL - Univ. South Florida [4123]	2004-07-01 to 2005-06-30	52	0
4	MA - Boston University [0287]	2005-07-01 to 2006-06-30	52	0
5	MA - Boston University [0287]	2006-07-01 to 2007-06-30	52	0

Note: Training occurred in more than one program. Documentation of satisfactory completion from all previous programs must accompany the application.

Limitation on Number of Residency Programs

- For residents who will complete their chief resident year in 2007-2008 academic year, or thereafter, residency training must be completed in NO more than three programs.
- ABS will continue to require documentation of satisfactory completion from all previous programs.
- These are your current PGY 4 residents.

Operative Experience - Transplant

Resident must have EITHER a transplant rotation

2006-03-01	2006-05-31	13	MA - Boston University [0287]		Residency - PGY 4	Transplant
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or Operative Experience

ORGAN TRANSPLANT			
LIVER TRANSPLANT		3	
RENAL TRANSPLANT		11	
PANCREAS TRANSPLANT			1
RENAL-PANCREAS TRANSPLANT			
DONOR NEPHRECTOMY	1	4	
DONOR HEPATECTOMY		3	
EN BLOC ABD ORGAN RETRIEVAL			
OTHER MAJOR ORGAN TRANSPLANT - DEF CAT CREDIT			1
OTHER MAJOR ORGAN TRANSPLANT			
Total ORGAN TRANSPLANT	1	21	2

Transplant Experience

- If resident does not have rotation or operative experience, must send patient roster with application
- ABS requires pre-operative, operative and post-operative experience in transplant
- Objective is for resident to have direct patient care of transplant patients

Non-Operative Trauma and Surgical Critical Care

SC SJ TA FA

PATIENT CARE (NOT FOR MAJOR CREDIT)

NON-OPERATIVE TRAUMA

Total PATIENT CARE (NOT FOR MAJOR CREDIT)

SURGICAL CRITICAL CARE PATIENT MANAGEMENT

Ventilatory Management: >24hrs on ventilator

Bleeding: non-trauma patient > 3 units

Hemodynamic instability: req. inotrope/pressor

Organ dysfunction: renal, hepatic, cardiac

Dysrhythmias: requiring drug management

Invasive line, manage/monitor: Swan, Arterial, etc

Parenteral/enteral nutrition

Total SURGICAL CRITICAL CARE PATIENT MANAGEMENT

- These sections **cannot be left blank**. Resident and Program will be contacted.
- Residents will need to either enter data and resubmit the operative report or provide a detailed written explanation of experience in Non-Operative Trauma and/or Surgical Critical Care.

Minimum Number of Procedures

- 500 operative procedures in five years and 150 operative procedures in the chief resident year
- Approval of application will be held until 150 senior chief cases or 500 cases overall are met (resubmission of operative report is required)

	SC	SJ	TA	FA
Total Counts				
TOTAL MAJOR OPERATIONS	139	522	38	17
TOTAL ENDOSCOPY	1	51		
TOTAL MISCELLANEOUS	1	38	3	1
TOTAL ENDOVASCULAR DIAGNOSTIC				
TOTAL PATIENT CARE:NON-OPERATIVE TRAUMA	7	14		

Key Requirement Changes in Surgery Certification

Effective July 1, 2007

- 42 months to be spent in clinical rotations in the essential content areas of surgery (previous: 36)
- 750 operative cases required (previous: 500)
- Teaching assistant cases can be counted toward the total 750 cases but NOT the 150 chief cases
- Rotations in thoracic surgery and transplantation allowed in chief year. Operative experience should reflect appropriate resident involvement.

Information for Programs



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Certification Recertification/MOC **Training Programs** Public

General News and Information

- ABSITE Overview
- International Medical Graduates
- Early Specialization Program
- Residency Program Five-Year Pass Rates
- Update Program Contact Information
- 2006-2007 Resident Rosters
- 2007 ABSITE

Training Programs - General News and Information

This section is for the use of training programs. For a list of accredited U.S. training programs, please see www.acgme.org.

2007 ABSITE

Results of the [2007 ABSITE](#) have been posted for viewing by programs.

Five-Year Program Performance

Information regarding the [five-year pass rate](#) of first-time examinees for all ACGME-accredited surgery residency programs has been posted.

Search the Website

ABS University Medical Center

[Log Out](#)

The “Training Programs” tab provides general information as well the option to view Resident Roster, to access ASBITE results, etc.

Programs can also update their contact information from this page once logged in with ABS assigned username and password.

Update Program Contact Information

Certification Recertification/MOC **Training Programs** Public

General News and Information
Residency Program Five-Year Pass Rates
Update Program Contact Information
2006-2007 Resident Rosters
2007 ABSITE

Program Contact Information

Mailing Address and Contact Information

If there has been a change in program director, please note the name of the new director in the Comments section.

Program Director	<input type="text" value="Robert Rhodes, M.D."/>
Street Address 1 *	<input type="text" value="1617 JFK Blvd., Suite 850"/>
Street Address 2	<input type="text"/>
City or Town *	<input type="text" value="Philadelphia"/>
State, Province, or Territory * <i>(Postal abbreviation where applicable)</i>	<input type="text" value="PA"/> ▼
Postal Code * <i>(i.e. Zip Code)</i>	<input type="text" value="19103"/>
Daytime Phone Number *	<input type="text" value="2155684000"/>
Fax Number *	<input type="text" value="2155635718"/>
Email Address *	<input type="text" value="rrhodes@absurgery.org"/>

- Updates to Program contact information can be made online **ANYTIME** – not just when completing resident roster.
- Program director name cannot be changed.
- E-mail new director information to bjgerkens@absurgery.org.

Program Coordinator Information



THE AMERICAN BOARD OF SURGERY

1617 John F. Kennedy Boulevard, Suite 860 Philadelphia, Pennsylvania 19103-1847

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Program Contact Information

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Program Coordinators's Mailing Address and Contact Information

Program Coordinator *	<input type="text" value="Barbara Jalbert-Gerkens"/>
Daytime Phone Number *	<input type="text" value="215-568-4003"/>
Fax Number	<input type="text" value="215-563-5817"/>
Email Address *	<input type="text" value="bjgerkens@absurgery.org"/>

* - Required fields

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[Mailing Address and Contact Information](#)

[Program Coordinators's Mailing Address and Contact Information](#)

[Comments to ABS Examination Coordinators](#)

Program Coordinator information can be updated at anytime as well using the same feature on the website.

Coordinators are cc'd via e-mail on all correspondence mailed to program directors.

Update Program Contact Information – Comments to ABS

The screenshot shows the American Board of Surgery website interface. At the top, the logo and name 'THE AMERICAN BOARD OF SURGERY' are displayed, along with the address: '1617 John F. Kennedy Boulevard, Suite 860 Philadelphia, Pennsylvania 19103-1847'. Below this is a navigation menu with buttons for 'Home', 'My Records', 'News', 'About ABS', 'Publications', 'Links', 'Contact Us', and 'Site Map'. A secondary menu highlights 'Certification', 'Recertification/MOC', 'Training Programs', and 'Public'. The main content area is titled 'Program Contact Information' and includes buttons for 'Printer-Friendly Version', 'Save and Exit', and 'Cancel'. Below this is the section 'Comments to ABS Examination Coordinators' with a text input field for 'Comments' and a 'Previous Section' button. On the right side, there is a search bar, a search button, and a search result for 'ABS University Medical Center' with a 'Log Out' link. A 'Form Outline' section lists links for 'Mailing Address and Contact Information', 'Program Coordinators's Mailing Address and Contact Information', and 'Comments to ABS Examination Coordinators'.

When completing the resident roster, this comment section can be used to notify the ABS of the following:

- Change in program director
- Off-cycle residents who will not complete training in June

For changes that occur at other times during the year, e-mail bjgerkens@absurgery.org with the updates.

Resident Roster vs. ABSITE

- Misconception: Resident Roster = ABSITE examinees
- Resident Roster is a listing for each academic year of your categorical and non-designated preliminary residents.
- ABSITE ordering is totally separate from the roster. Examinee information derived from the answer sheets is not incorporated into the roster.

Resident Roster

- Clinical Residency Level and Completion Year are used to determine the graduating chiefs to receive the QE packets.
- Number of graduating chiefs must match number of RRC-approved slots. If program received temporary approval, provide documentation to ABS. The ABS is not always notified.
- Name and Social Security Number will be used to create ABS records for each graduating chief.

Resident Roster & Verification of Satisfactory Completion

- The ABS requires satisfactory completion of each year of training to be verified by the program.
- To avoid confusion and duplication, the request to update and verify will be completed at the same time – now in July.
- This July, we will request the verification of satisfactory completion of 2006-2007 academic year and the update of the 2007-2008 academic year.

Let us know!

- What other type of information would you as a program like to see on our website?
- E-mail suggestions to bjgerkens@absurgery.org.
- This presentation and the Timeline of ASB Communications is now be posted on the ABS website. Click on the “Training Programs” tab.

It is a pleasure to finally meet
all of you and
thank you for your efforts!

Questions?