



American Board of Surgery Update

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ASSOCIATION OF RESIDENCY COORDINATORS IN
SURGERY

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Topics

- ABSITE
- QE/CE
- ENTRY OF OSTEOPATHIC TRAINEES
- PRIOR ABS APPROVAL
- PROGRAM OPTIONS ON ABS WEBSITE

ABSITE

- Minimal technical issues reported with 2016 exam
- 2017 ABSITE – Friday, January 27 to Tuesday, January 31
- Fee remains \$70 per exam
- ABS ID Number: assigned to every resident listed on 2015-2016 roster
 - Help with reporting of results to correct program
 - Future direct correspondence with residents

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
- Identifies irregular behavior where likelihood of a match occurring randomly is at least less than *one in a million*

ABSITE – Exam Irregularities

- Examinee matches have been identified within programs and between programs
 - A shared history: even if matches are from different programs
- ABS is aware that:
 - ABSITE questions (old/current) are in circulation
 - More than “looking” at another’s exam
 - Direct or electronic communication
 - Use of smart phone or other electronic devices
 - Instances when proctor may leave the room

Exam Irregularities

- When an irregularity or a security violation occurs:
 - Program director notified of individuals involved and asked to investigate the circumstances
 - Department chair and DIO also notified
 - Exam on the first day of exam window for the next three years
 - Any subsequent offense may result with exam taken at Pearson VUE or similar facility at a much higher per exam fee
 - Any disciplinary consequences will be at program director's discretion

ABSITE Results

- ABSITE continues to be a formative evaluation tool to assess residents' progress
 - **Only** parent program will receive the results
 - Available on website **for a limited time**
 - Results are pdf files that can be saved to your records
 - Transcripts are not available to residents, any potential fellowship programs, RRC, or any third party
 - Encourage your residents to save their reports to their personal files

ABSITE – NEW FOR 2017

- Advanced registration of examinees will include:
 - 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
- Registration form: pre-filled with some data from roster

New for 2017 - continued

- **Plan ahead** for any examinee “guest” such as: faculty member, program director, or an individual hoping to obtain a residency position
- Former residents should *not* be permitted to take exam without first checking with the ABS
- May be unable to accommodate last minute changes

Admissibility to QE and CE

- Admissibility – total of 7 years
 - QE – 4 opportunities in 4 years
 - CE – 3 opportunities in 3 years
- Times 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 of all rotations and all non-clinical time
- Include ACGME – Resident Operative Experience by Role
 - 150 chief cases and 750 cases for the 5 years
 - 25 TA and 25 surgical critical care patient management cases
 - Transplant: cases or rotations

QE Applications - continued

- ACLS, ATLS and FLS certification
 - Certification does not need to be current/active
 - **Do not** accept ATLS History Report
 - **Do not** accept CME certificate for the activity
- 6 operative and 6 clinical assessments
 - Assessment forms are not submitted with application
- ECFMG certificate for international medical graduates only

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

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 leave
- With medical leave, may take an additional two weeks off
- First three years = 142 weeks
- Last two years = 94 weeks

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
- 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

Future Requirements

- 250 Cases by End of PGY-2
 - Residents who began residency in July 2014
 - Operative procedures performed as surgeon or first assistant
 - 200 must be defined categories, endoscopies, or operative exposures (e-codes)
 - Completed over two consecutive years ending with PGY-2
 - RRC-Surgery will track and provide yearly reports to the ABS

Future Requirements

- Flexible Endoscopy Curriculum (FEC)
 - Graduates of 2017-2018 will be required to have completed the ***entire*** FEC curriculum
 - Curriculum contains several “levels” that must be attained
 - Final level includes successful completion of the *Fundamentals of Endoscopic Surgery™* (FES)
 - For *2016 only*, SAGES is offering free retakes on FES exam
 - FES didactic materials free of charge – www.fesdidactic.org
 - FES testing information – www.fesprogram.org

QE After PGY-4

- **All** requirements must be met at time of application
 - 750 total cases, including 150 chief cases
 - 25 TA cases
 - 25 surgical critical care patient management cases
 - ACLS, ATLS, and FLS certification
 - 6 operative and 6 clinical resident assessments
- With prior RRC-S approval, up to 6 months of chief rotations may be completed in PGY-4

QE After PGY-4 - continued

- Upon completion of residency, all PGY-4 applicants will be required to submit:
- List of all 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

- Taking the exam after PGY-4 will count towards the four exam opportunities in four years
- 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

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
- Flexible Rotations
- Six-Year Option
- Extended Medical Leave (time exceeding the 46 wk/yr policy)
- Credit for Foreign Training and J-1 Visa
- Completion of PGY-3 year
- **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 (0+5 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
 - Meet all requirements in effect at time of application

Entry of Osteo Trainees – continued

- Vascular Surgery (independent 5+2 program)
 - Meet all requirements for ACGME-accredited general surgery
 - Have an approved general surgery QE application
- Certification in other ABS specialties: Pediatric Surgery, Surgical Critical Care, Complex General Surgical Oncology
 - Must be first **certified** in general surgery prior to obtaining subspecialty certification and as such,
 - Meet all requirements for ACGME-accredited general surgery

Program Area on ABS Website

The screenshot shows the top navigation bar of the American Board of Surgery website. The main header is dark blue with the ABS logo and the text 'THE AMERICAN BOARD OF SURGERY'. To the right are links for 'LOG-IN', 'NEWS', 'ABOUT', and 'CONTACT', along with a search icon. Below the header is a large banner image with the text 'Training & Certification' in purple. Underneath the banner are three colored buttons: a purple button labeled 'TRAINING & CERTIFICATION', an orange button labeled 'Maintenance of Certification', and a green button labeled 'For the Public'. A red arrow points from the left towards the purple button. Below the buttons is a sidebar with a list of links under the heading 'Becoming ABS certified'. The link '» For Residency & Fellowship Programs' is circled in red. To the right of the sidebar is the main content area, which includes a section titled 'About Certification' and 'Certifications Offered'. The 'Certifications Offered' section lists several specialties: General Surgery, Pediatric Surgery, Complex General Surgical Oncology, Hospice and Palliative Medicine, Vascular Surgery, Surgical Critical Care, and Hand Surgery. Below this is a paragraph explaining that some specialties require two exams (qualifying and certifying), while others only require a certifying exam. The text also mentions 'in-training' examinations for surgical training programs. At the bottom of the main content area is a section titled 'Becoming Certified' which states that ABS certification is based on education, evaluation, and examination, and that individuals who meet the requirements may begin the board certification process by applying for admission to the required examinations.

Options

The screenshot shows the website for The American Board of Surgery. The header includes the logo and text 'THE AMERICAN BOARD OF SURGERY' on the left, and navigation links 'LOG-IN', 'NEWS', 'ABOUT', 'CONTACT', and a search icon on the right. The main heading is 'Training & Certification'. Below this are three colored buttons: 'TRAINING & CERTIFICATION' (purple), 'Maintenance of Certification' (orange), and 'For the Public' (green). The 'TRAINING & CERTIFICATION' button is selected. The page content is divided into two columns. The left column, titled 'Area for programs', contains a list of links: '» About Certification', '» FOR RESIDENCY & FELLOWSHIP PROGRAMS', 'Program Pass Rates', 'Update Program Contact Information', 'Trainee Rosters', '2016 In-Training Exams', '» General Surgery', '» Vascular Surgery', and '» Pediatric Surgery'. The 'Update Program Contact Information' link is circled in red. The right column, titled 'Training Programs Area', contains a sub-heading 'Training Programs Area', a paragraph stating 'This section is for the use of training programs. For a list of accredited U.S. training programs, please see www.acgme.org.', a sub-heading 'Program News', and a list of news items: 'ABS Presentations', 'Leave Policy Requests', 'Flexible Endoscopy Curriculum', and 'Duty Hours Study'. Below the news items is a sub-heading 'Key ABS Links' with a list of links: 'Dates & Fees', 'ABSITE', and 'General Surgery Training Requirements'.

Programs Can

- View Program Pass Rates
 - Most recent 5-year pass rate of first-time examinees on QE and CE for all ACGME-accredited programs
- Update program contact information
- Update Trainee Roster
- Place ABSITE order, view its status, and access results
 - PDF files that are posted for a **limited time**

Programs Cannot

- Access QE and CE results for former residents
 - **Only** accessible by using resident's personal log-in
- Access Reports of Candidate Performance
 - Five-Year Summary Report – emailed July/August
 - Annual Report – emailed about a month or so after QE
 - Email includes a pdf file of the reports that can be saved to your records

QUESTIONS???

THANK YOU!