

# Resident Newsletter

May 2013



## ABD, ABMS, RCPSC, ACGME, RRC, AMA, AAD . . . . .

*How are these various organizations involved in your training? The following is an overview of their distinct roles.*

### **Certifying organizations**

The American Board of Dermatology (ABD) certifies individuals who meet qualifications in dermatology, dermatopathology, and pediatric dermatology. Certification by the ABD is a process that effectively begins on day one of your residency. While many incorrectly equate certification solely with passing an examination, certification by ABD is the public's assurance that the individual has satisfactorily completed rigorous training in an accredited program as well as passed a comprehensive examination. Initial certification is the beginning of a career-spanning process of maintenance of certification to continue that assurance to the public.

The ABD is a Founding Member of the American Board of Medical Specialties (ABMS), an organization consisting of 24 Member Boards. The ABMS Member Boards certify the majority of medical specialists in the US. The ABMS reviews and approves Member Board maintenance of certification processes.

Physicians trained in approved Canadian programs may qualify for certification by the Royal College of Physicians and Surgeons of Canada (RCPSC) as well as the American Board of Dermatology. An ABD-certified Canadian dermatologist who maintains a license in the US or Canada may participate in the ABD maintenance of certification program. The RCPSC also offers a maintenance of certification program.

### **Accrediting organizations**

In order for you to qualify for Board certification in

dermatology, you must have been trained in a residency program accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the RCPSC. The ACGME, in concert with its Residency Review Committees (RRC), sets and maintains national standards of graduate medical training in the United States. In dermatology, it accredits 114 residency programs, 54 dermatopathology fellowships, and 54 procedural dermatology fellowships. The ABD is involved in the process through the contributions of members of its Board of Directors who serve on the RRC, along with appointees from the American Medical Association (AMA). Residency programs must be formally reviewed by the RRC at least every 5 years. A new Milestones Project will be launched in the near future which will provide greater depth of evaluation of resident progress during training. The Next Accreditation System (NAS) will also affect the process of program oversight, in part by increasing resident feedback.

### **Educational and advocacy organizations**

There are many dermatology specialty and subspecialty groups that function as educational and advocacy organizations and provide various other services to their members. The largest of these is the American Academy of Dermatology (AAD). These educational and advocacy organizations are independent of the ABD. They may perform very worthwhile services but their services are not required for successful completion of residency training.

### **VIRTUAL DERMATOPATHOLOGY**

Attaining a level of competence in evaluating dermatopathology specimens is an important skill that residents are expected to achieve during their training. The technical advance of virtual dermatopathology has allowed assessment of this skill in a more clinically relevant way than using a still digital image. Virtual dermatopathology technology is being used in the certifying examinations of the American Board of Pathology as well as the ABD to supplement testing with microscopes and glass slides. Resolution of difficulties with image loading time and

pixilation has resulted in a tool that is useful, efficient, and reliable in an examination setting.

You may have heard that the virtual pathology section of the 2012 administration of the certifying examination in Tampa was omitted. The delivery platform at the testing center in Tampa malfunctioned just prior to the examination. It is operational now and there will be 10 virtual dermatopathology questions that will be scored as part of the 2013 certifying examination.

# Getting Ready for the July 2013 Certifying Examination Tampa, Florida

The 2013 ABD certifying examination will be held July 15-18 and July 22-25 at the American Board of Pathology (ABP) testing center in Tampa, FL.

The ABP testing center is located in the same group of buildings as the Intercontinental Hotel (4860 W. Kennedy Blvd., Tampa, FL 33609; 800-235-4670 or 813-286-4050). Another hotel option (approximately 6-8 blocks away) is the Embassy Suites Tampa - Airport/Westshore (813-875-1555).

The Tampa International Airport is located approximately 3 miles (10-12 min.) from the ABP testing site. Taxi service is readily available and there is a complimentary airport shuttle to both hotels. When arriving at the Tampa airport, to call for the Intercontinental shuttle, dial 813-286-4400.

The American Board of Dermatology wants to reassure you that if weather causes a problem in Tampa, we will do our best to allow you to take the examination later in the month. We don't want to alarm you and we assume that everything will go as planned during the two weeks of test administration in July. However, we feel it's important to think ahead and make emergency contingency plans. In the event of an inclement weather threat, please check the ABD website ([www.abderm.org](http://www.abderm.org)) to learn of alternative arrangements. In general, if the airport is open and planes are flying, the testing center will be open.

To the right is information to help you get ready for the examination.

## Registration

Registration will begin at 7:15 am Eastern Time. The examination will begin at 7:30 am and end at approximately 4:50 pm. You will need to present a photo ID at registration.

Candidates are not permitted to bring any personal items in to the exam center. The only personal items permitted at the workstations are jackets or sweaters and eyeglasses. Luggage, purses, food, water, books, papers, pens, pencils, pagers, cell phones, calculators, personal organizers, and watches of any type are prohibited. A pen will be provided at each workstation. Secure space is available outside of the examination room for storage of personal items. The ABD reserves the right to examine all items brought into the examination room. There is a clock in the exam room and there will be a timer on the computer monitors.



ABD and ABP staff will be present throughout the examination and will function as proctors.

## Examination Content

*The ABD has prepared a content outline to help examinees understand the scope of information that may be covered in the certifying examination. The outline is available at [http://www.abderm.org/docs/pdf/content\\_outline.pdf](http://www.abderm.org/docs/pdf/content_outline.pdf).*

## Examination Schedule

### Section I

7:15 – 7:30 am	Candidate seating and instructions. Each candidate will be assigned to a carrel with a computer and a microscope (4x, 10x, and 40x objectives). There will be lens paper, a scratch sheet for notes and a pen at each carrel.
7:30 – 9:10 am	The first section of the certifying examination consists of 100 image and non-image questions in clinical, laboratory, and surgical dermatology displayed on the computer. Each question will be associated with 5 multiple-choice foils of the one-best answer type. Your answers will be submitted on the computer.  You will work at your own pace for this section. The proctor will notify you when 30, 60 and 90 minutes have elapsed. If you finish early, you may leave the room, except during the last 10 minutes.
9:10 – 9:20 am	Break

*continued...*

## Examination Schedule

### Section 2

9:20 – 9:30 am Check in and instructions.

9:30 – 11:02 am Examination in Dermatopathology  
The second section consists of 36 microscopic slides in dermatopathology with associated multiple-choice questions. Note that there are no 26-foil questions on the dermatopathology section.

The slides will be arranged in two cardboard slide trays, each containing 18 glass slides (1-18 and 19-36). You will have 45 minutes to examine each set of 18 slides. The proctor will inform you when there are two minutes left. At the end of 45 minutes you will exchange the tray you have completed with the second tray. You will not be allowed to review a slide tray that you have completed.

11:02 – 11:52 am Examination in Virtual Dermatopathology  
This portion of the examination consists of 10 digitalized images of whole mount microscopic slides. You will have 50 minutes to examine the images on the computer screen and match the diagnosis with associated multiple-choice 5-foil questions. This section will be graded and will contribute to your final examination score.

You may leave the room when you have completed the questions.

11:52 am – 1:00 pm Lunch

### Section 3

1:00 – 1:10 pm Check in and instructions.

1:10 – 2:50 pm The third section of the certifying examination consists of 100 image and non-image multiple-choice questions in clinical, laboratory, and surgical dermatology displayed on the computer, similar to Section 1 on the previous page.

If you finish early, you may leave the room, except during the last 10 minutes.

2:50 – 3:00 pm Break

### Section 4

3:00 – 3:10 pm Check in and instructions.

3:10 – 4:50 pm The fourth section of the certifying examination consists of 100 image and non-image multiple-choice questions in clinical, laboratory, and surgical dermatology displayed on the computer. See information for Sections 1 & 3.

You may leave the room when you have completed the examination and turned in your scratch sheet and pen.

4:50 pm Collect scratch sheets and dismiss.

*The results of the certifying examination will be placed in your Profile on the ABD website ([www.abderm.org](http://www.abderm.org)) 8-10 weeks after the examination. An email will notify you when the results are posted.*

# 2013 IN-TRAINING EXAMINATION (ITE)

## Examination scoring

Each examination given by the ABD is subject to intense scrutiny by our psychometrician (and is the major reason that examination results are not immediately available). Questions that perform poorly are flagged and reviewed by members of the examination committee. In some cases, a poorly-performing question may have been properly constructed and clinically relevant but the knowledge tested was not generally known by the examinees. In other cases, a poorly-performing question may be an indicator of a problem with the question, such as a distractor that is too close in meaning to the correct answer or is arguably also correct, or an image that does not appropriately portray the disorder.

Of the 250 questions on the 2013 examination, 12 were selected for review and 4 were deleted from scoring.

### Here is a discussion of a question from the 2013 ITE:

Which of the following surgical reconstruction methods for the wound shown is most likely to result in an aesthetic result with the lowest risk of sensory loss and dyesthesia?

- A. Bilateral advancement flap
- B. Full-thickness skin graft
- C. Horizontal linear repair
- D. Island pedicle flap
- E. Vertical linear repair



The correct answer is E - vertical linear repair. The question addresses two principles: a) The cosmetic result, and b) risk of sensory loss and dyesthesia due to nerve damage. All options listed are used to close a defect such as this on the forehead. More often a linear repair would be chosen if possible, but a flap or graft would be reasonable based on tissue laxity and other factors although skin graft mismatch could be aesthetically undesirable. However, the key to this question is “the lowest risk of sensory loss and dyesthesia”; assessing your knowledge of the anatomy of this anatomic site, which includes consideration of the supratrochlear, supraorbital, and lacrimal nerves which all could potentially be damaged. It is least likely to be damaged with a vertical linear repair as that would parallel the normal distribution of the nerves. Therefore the correct answer is E.

### PASS RATES FOR ABD CERTIFICATION EXAMINATION 2008 - 2012

	Number of Candidates	% Pass Rate
2008	413	91%
2009	421	91.4%
2010	412	91.9%
2011	419	89.7%
2012	457	94.7%

## American Board of Dermatology

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