



The

VASCULAR
SURGERY
BOARD

of the AMERICAN BOARD
of SURGERY

**BOOKLET OF
INFORMATION**

Vascular Surgery

2010 – 2011



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OF
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Vascular Surgery



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The
Vascular Surgery Board
of the
American Board of Surgery

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The Booklet of Information – Vascular Surgery is published by the Vascular Surgery Board of the American Board of Surgery (VSB-ABS) to outline the requirements for certification in vascular surgery. Applicants are expected to be familiar with these requirements and bear ultimate responsibility for ensuring that their training complies with VSB-ABS requirements, as well as for acting in accordance with VSB-ABS policies governing each stage of the certification process.

This edition of the booklet supersedes all previous publications concerning policies, procedures and requirements for examination and certification in vascular surgery. The VSB-ABS reserves the right to make changes in its policies, procedures and requirements at any time. Admission to the certification process is governed by the policies and requirements in effect at the time an application is submitted and is at the discretion of the VSB-ABS.

For the most recent updates, applicants should visit www.absurgery.org.

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I. INTRODUCTION

A. History

The movement for certification in vascular surgery began in the 1970s under the leadership of Dr. Edwin J. Wylie. A *Committee on Vascular Surgery* was formed by the American Board of Surgery to investigate the issue, which met several times with representatives of the Society for Vascular Surgery (SVS) and the International Society for Cardiovascular Surgery. In 1981, the ABS requested and received approval from the American Board of Medical Specialties (ABMS) to offer a certificate in vascular surgery.

The ABS offered a Certificate of Special Qualifications in vascular surgery as of 1982 and a Certificate of Added Qualifications in 1988. The Special Qualifications (practice) pathway was closed to new applicants in 1989 as the ABMS typically allows practice pathways to be open for only five years. Both certificates were issued through 1998 when the designations of “Added” and “Special” Qualifications were dropped and all certificates were designated as “Certification in Vascular Surgery.”

The Vascular Surgery Board of the ABS was established in June 1998 with the support of the leading vascular surgery societies. Vascular surgery became a primary specialty of the ABS in July 2006; as of that date, certification in general surgery was no longer a prerequisite for certification in vascular surgery.

B. About the VSB-ABS

The VSB-ABS defines all requirements and processes pertaining to vascular surgery certification. It consists of members appointed from the leading vascular surgery societies in the United States, including ABS directors previously elected from within the specialty. Members are elected by the VSB-ABS for one six-year term and are nominated by the following organizations:

Association of Program Directors in
Vascular Surgery

Peripheral Vascular Surgery Society

Society for Clinical Vascular Surgery

Society for Vascular Surgery

2010-2011 VSB-ABS

Joseph L. Mills, M.D., *Chair*

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Samuel R. Money, M.D.

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Robert S. Rhodes, M.D., *Associate Executive Director for Vascular Surgery (ex officio)*

R. James Valentine, M.D.

C. Vascular Surgery Defined

Vascular surgery encompasses the diagnosis and management of disorders of the arterial, venous and lymphatic systems, exclusive of the intracranial vessels and the heart. In addition to experience with dissection and control of blood vessels expected of general surgery trainees, diplomates in vascular surgery, by virtue of additional training, should have significant experience with all aspects of treating patients with all types of vascular disease, including diagnosis, medical treatment, and reconstructive vascular surgical and endovascular techniques. Specialists in vascular surgery should possess the advanced knowledge and skills to provide comprehensive care to patients with vascular disease, understand the needs of these patients, teach this information to others, provide leadership within their organizations, conduct or participate in research in vascular disorders, and demonstrate self-assessment of their outcomes.

The vascular surgeon must have advanced knowledge and experience with the management of vascular problems including:

1. All elements of clinical evaluation; noninvasive testing including plethysmography, duplex ultrasonography, magnetic resonance imaging, CT scans, angiography, and other diagnostic tests utilized in the diagnosis of vascular disease.

2. Comprehensive management of vascular disease to include drug therapy and risk factor management.
3. Indications and techniques relating to open operative treatment of vascular disorders to include the entire spectrum of interventions used to treat vascular disorders including occlusive, aneurysmal and inflammatory disease involving the arteries and veins of the body except the intracranial vessels and vessels intrinsic to the heart. This includes intrathoracic aortic arch branches as well as the entire descending thoracic and abdominal aorta, the venous system of the chest and abdomen, the visceral and renal arteries, and the arteries and veins of the pelvis and upper and lower extremities.
4. Indications and techniques relating to endovascular interventions, including balloon angioplasty and/or stenting of all vessels (excluding the intracranial and coronary arteries), aortic and peripheral artery endovascular stent graft placement, thrombolysis and other adjuncts for vascular reconstructions.
5. The perioperative critical care of the vascular surgery patient.

D. The Certification Process

The VSB-ABS considers certification to be based upon a process of education, evaluation and examination. The VSB-ABS requires the attestation of the vascular surgery program director that an applicant has completed an appropriate educational experience and attained a sufficiently high level of knowledge, clinical judgment and technical skills, as well as ethical standing, to be admitted to the certification process.

Individuals who believe they meet the VSB-ABS' educational, ethical and experience requirements may begin the certification process by applying for admission to the Vascular Surgery Qualifying Examination. The application is reviewed and, if approved, the applicant is granted admission to the examination. Applicants who are not eligible for or do not wish to pursue certification in general surgery are also required to pass the Surgical Principles Examination (SPE),

an examination on relevant core surgical principles and physiology, before being admitted to the vascular surgery certification process.

Upon successful completion of the Vascular Surgery Qualifying Examination, the applicant is considered a “candidate” for certification and granted the opportunity to take the Vascular Surgery Certifying Examination. If the candidate is also successful at this examination, the candidate is deemed certified in vascular surgery.

It is not the intent or the role of the VSB-ABS to designate who shall or shall not perform surgical procedures or any category thereof. It is the view of the VSB-ABS that credentialing decisions are best made by locally constituted bodies based on an assessment of an applicant’s extent of training, depth of experience, patient outcomes relative to peers, and certification status.

II. REQUIREMENTS FOR CERTIFICATION

A. General Requirements

Applicants for certification in vascular surgery must meet these general requirements:

- Be currently certified in general surgery by the American Board of Surgery, if general surgery training was completed prior to July 1, 2006.
- Have demonstrated to the satisfaction of the program director of an accredited graduate medical educational program in vascular surgery that they have attained the level of qualifications required by the VSB-ABS. All phases of the graduate educational process must be completed in a manner satisfactory to the VSB-ABS.
- Have an ethical, professional and moral status acceptable to the VSB-ABS.
- Be actively engaged in the practice of vascular surgery as indicated by holding admitting privileges to a vascular surgery service in an accredited health care organization, or be currently engaged in pursuing additional graduate education in another recognized surgical specialty. An exception to this requirement is active military duty.

- Hold a currently registered full and unrestricted license to practice medicine in the United States or Canada.

An applicant must immediately inform the ABS office of any conditions or restrictions in force on any active medical license he or she holds in any state or province. When there is a restriction or condition in force on any of the applicant's medical licenses, the Credentials Committee of the ABS will determine whether the applicant satisfies the above licensure requirement.

B. Approved Training Pathways

Independent Pathways:

- **5+2 Pathway:** Traditional pathway of a five-year general surgery residency program accredited by the Accreditation Council for Graduate Medical Education (ACGME) or Royal College of Physicians and Surgeons of Canada (RCPSC) followed by two years in an accredited vascular surgery training program, leading to certification in both disciplines.
- **4+2 (ESP) Pathway:** An early specialization program (ESP) accredited by the ACGME of four years of general surgery followed by two years of vascular surgery training at the same institution, leading to certification in both disciplines.
- **3+3 Pathway:** A program accredited by the ACGME of three years of general surgery residency followed by three years of vascular surgery training at the same institution, leading to certification only in vascular surgery.

Integrated Pathway (0+5):

A program accredited by the ACGME of five years of training in vascular surgery integrated with core surgical training at the same institution, leading to certification only in vascular surgery.

A list of programs accredited by the ACGME may be found at www.acgme.org.

C. Undergraduate Medical Education

Applicants must have graduated from an accredited school of allopathic or osteopathic medicine in the United States or Canada.

Graduates of schools of medicine from countries other than the United States or Canada must present evidence of certification by the Educational Commission for Foreign Medical Graduates (ECFMG).

D. Graduate Surgical Education

1. General Information

The purpose of graduate education in vascular surgery is to provide the opportunity to acquire a broad understanding of human biology as it relates to vascular disorders, and the technical knowledge and skills appropriate to be applied by a specialist in vascular surgery. This goal can best be attained by means of a progressively graded curriculum of study and clinical experience under the guidance and supervision of senior vascular surgeons, which provides progression through succeeding stages of responsibility for patient care up to the final one of complete management. Major operative experience and independent decision-making at the final stage of the program are essential components of surgical education. The VSB-ABS will not accept into the process of certification anyone who has not had such an experience in the specialty of vascular surgery, regardless of the number of years spent in educational programs.

The time required for the total educational process should be sufficient to provide adequate clinical experience for the development of sound surgical judgment and adequate technical skill. These requirements do not preclude additional desirable educational experience, and program directors are encouraged to retain residents in a program as long as is required to achieve the necessary level of qualifications.

The integration of basic sciences with clinical experience is considered to be superior to formal courses in such subjects. Accordingly, while recognizing the value of formal courses in the study of surgery and the basic sciences at approved graduate schools of medicine, the VSB-ABS will not accept such courses in lieu of any part of the required clinical years of surgical education.

The VSB-ABS may at its discretion require that a member of the VSB-ABS or a designated diplo-mate observe and report upon the clinical performance of an applicant before establishing admissibility to examination, or before awarding or renewing certification.

2. Specific Requirements

To be accepted into the certification process, applicants must meet the following requirements for graduate surgical education:

- Have satisfactorily completed all phases of progressive graduate education in vascular surgery in a program in vascular surgery accredited by the ACGME or RCPSC. See Section II-B for the types of approved training pathways.
- Have obtained, during the course of vascular surgery training, progressively increasing levels of responsibility.
- Have acted in the capacity of chief resident in vascular surgery for a 12-month period. The term “chief resident” indicates that a resident has assumed ultimate responsibility for patient care under the supervision of the teaching staff and is the most senior resident/trainee involved with the direct care of the patient.
- Have obtained no fewer than 48 weeks of full-time surgical experience in each residency year. For documented medical problems or maternity leave, the VSB-ABS will accept 46 weeks of surgical training in **one** of the last two years of all approved training pathways. For the 3+3 or integrated 0+5 pathway, the VSB-ABS will also accept 46 weeks of training in **one** of the first three years. Unused vacation or leave time cannot be applied to reduce the amount of full-time surgical experience required per year without written permission from the ABS. Such requests may only be made by the program director.
- Except for applicants who complete the 5+2 pathway, all training by the applicant must be performed at the same institution. Applicants from 5+2 programs must complete their vascular surgery training at no more than two programs and the final 18 months at the same institution.

E. Operative Experience

All applicants for certification must participate in **at least 250 major vascular reconstructions**. This experience should be relevant to the definition of vascular surgery set forth in section I-C.

While the VSB-ABS requires broad experience in all essential areas of vascular surgery, it does not require a specific number of procedures within each content area in vascular surgery. Operative experience in excess of 1500 cases for trainees in integrated (0+5) programs and in excess of 900 vascular surgical procedures for other training pathways must be justified by the program director.

Applicants must submit a report that tabulates their operative experience during residency. Applicants must also indicate their level of responsibility (e.g., surgeon chief year, surgeon junior years, teaching assistant, first assistant) as applicable for the procedures listed.

Applicants may claim credit as “surgeon chief year” or “surgeon junior years” only when they have actively participated in making or confirming the diagnosis, selecting the appropriate operative plan, and administering preoperative and postoperative care. Additionally, they must have personally performed either the entire operative procedure or the critical parts thereof and participated in postoperative follow-up. All of the above must be accomplished under appropriate supervision.

When previous personal operative experience justifies a teaching role, residents may act as teaching assistants and list such cases during the fourth and fifth year only. Applicants may claim credit as teaching assistant only when they have been present and scrubbed and acted as assistant to guide a more junior trainee through the procedure. Applicants may not claim credit both as surgeon (surgeon chief or surgeon junior) **and** teaching assistant.

F. Additional Requirements

Applicants who complete the 5+2 or 4+2 independent pathways:

- Individuals who wish to become certified in both general surgery and vascular surgery must first apply for and successfully complete the General Surgery Qualifying Examination (QE) before applying for vascular surgery certification. Full certification in general surgery is not required to begin the vascular surgery certification process.

- Individuals who opt not to apply for general surgery certification must successfully complete the Surgical Principles Examination before being admitted to the vascular surgery certification process. However, by applying for and taking the SPE in lieu of the General Surgery QE, these individuals become ineligible for general surgery certification.
- Regardless of which exam is taken (SPE or General Surgery QE), individuals enrolled in 5+2 or 4+2 programs will not be admissible to these examinations until they satisfactorily complete a general surgery residency.
- Individuals must apply for either the General Surgery QE or SPE within three academic years after completion of general surgery training.

Applicants who complete the 0+5 integrated pathway:

- Must successfully complete the Surgical Principles Examination before being admitted to the vascular surgery certification process.
- Residents in 0+5 programs may apply for and take the SPE once they have satisfactorily completed two or more years of vascular surgery residency, but must apply no later than three academic years after completion of residency.

Switching from General Surgery QE to SPE

Applicants to the SPE and General Surgery QE receive five opportunities within a five-year period to pass the examination once their application is approved. If an applicant decides not to take the exam in a given year, it is a lost opportunity as the five-year limit is absolute.

If an individual with an approved application for the General Surgery QE wishes to take the SPE instead and solely pursue vascular surgery certification, any previous General Surgery QE opportunities will count against the five SPE opportunities. By switching to the SPE, these individuals relinquish their admissibility to the general surgery certification process and will not be permitted to reenter the process if they subsequently change their mind. They also lose any standing they had previously established with the ABS in respect to certification in surgery.

G. RPVI Credential Required as of 2014

Applicants to the 2014 Vascular Surgery Qualifying Examination and thereafter will be required to possess the Registered Physician Vascular Interpretation (RPVI®) credential offered by the American Registry for Diagnostic Medical Sonography (ARDMS). This credential is obtained by successfully completing ARDMS' Physicians Vascular Interpretation Examination, which evaluates knowledge and skills commonly used in a vascular laboratory setting. More information is available at www.ardms.org/RPVI. Applicants will be required to provide documentation with their application showing they have obtained the RPVI credential.

H. Ethics and Professionalism

The VSB-ABS believes that certification carries an obligation for ethical behavior and professionalism in all conduct. The exhibition of unethical behavior or a lack of professionalism by an applicant or diplomate may therefore prevent certification of the applicant or may result in suspension or revocation of certification. All such determinations shall be at the sole discretion of the VSB-ABS and the Credentials Committee of the ABS, as defined in the ABS Revocation Policy.

Unethical and unprofessional behavior is denoted by any dishonest behavior, including cheating; lying; falsifying information; misrepresenting one's educational background, certification status and/or professional experience; and failure to report misconduct. The VSB-ABS has a "zero tolerance" policy toward these behaviors, and individuals caught exhibiting such behaviors may be permanently barred from certification, reported to state medical boards and/or legally prosecuted.

(See also III-E-2. Examination Irregularities.)

I. Additional Considerations

1. Military Service

Credit will not be granted toward the requirements of the VSB-ABS for service in the U.S. Armed Forces, the U.S. Public Health Service, the National Institutes of Health or other government agencies unless the service was as a duly appointed resident in an accredited program in surgery.

2. Foreign Graduate Education

No credit will be granted to an applicant for vascular surgical education outside the U.S. and Canada.

Applicants from vascular surgery programs accredited by the RCPSC must have completed all of the requirements in the Canadian program or in combination with an accredited U.S. program. Applicants from Canadian programs must comply with VSB-ABS requirements for certification.

3. Reconsideration and Appeals

The VSB-ABS may deny or grant an applicant or candidate the privilege of examination whenever the facts in the case are deemed to so warrant.

Applicants and candidates may request reconsideration and appeal as outlined in the ABS' published policy. A copy of the *Reconsideration and Appeals* policy is available from the ABS office or www.absurgery.org. A request for reconsideration, which is the first step, must be made in writing to the ABS office within 90 days of receipt of notice of the action in question.

III. EXAMINATIONS IN VASCULAR SURGERY

A. Vascular Surgery In-Training Examination

The VSB-ABS offers annually to program directors the Vascular Surgery In-Training Examination (VSITE), a five-hour multiple-choice examination designed to measure the progress attained by residents in their knowledge of vascular surgery. The VSITE is solely meant to be used by program directors as an evaluation instrument in assessing residents' progress and results of the examination are released to program directors only. Score reports will not be released to residents. The VSITE is not available to residents on an individual basis and is not required by the VSB-ABS for certification.

The VSB-ABS reserves the right to withhold participation by an institution where in prior years there were suspicions of improper use, unacceptable test administration, or irregular behavior by residents taking the examination.

B. Surgical Principles Examination

1. General Information

The SPE is a three-hour computer-based examination offered annually by the VSB-ABS. The examination consists of multiple-choice questions designed to assess core surgical knowledge relevant to vascular surgery. The content of the SPE principally focuses on surgical anatomy, physiology, perioperative care, and critical care common to all surgical patients. It also covers the diagnosis, evaluation, and management of surgical disorders relevant to the vascular surgery patient. The SPE is only a prerequisite for vascular surgery certification; admission to and successful completion of the SPE does not establish any type of standing with the ABS.

Examination results are mailed and posted on the website approximately four weeks after the examination. Examinees' results are also reported to the director of their training program.

2. Application Process

Individuals who wish to pursue certification solely in vascular surgery may apply to take the SPE. If approved, they will be admitted to the SPE process. Information on application requirements and the online application process is available from www.absurgery.org.

The program director during the time of the applicant's residency must certify that all information supplied by the applicant is accurate. For individuals who completed a five-year general surgery program prior to entering vascular surgery training, the general surgery program director must sign the application. For individuals who are enrolled in or completed an integrated (0+5) vascular surgery program, the vascular surgery program director must sign the application.

Note that the acceptability of an applicant does not depend solely upon completion of the required training, but also upon information received by the VSB-ABS regarding professional maturity, surgical judgment, technical capabilities and ethical standing.

3. Opportunities and Readmissibility

Once an application is approved, the applicant has a maximum of **five opportunities within five years** to pass the examination. If an applicant

decides not to take the exam in a given year, it is a lost opportunity as **the five-year limit is absolute**. During the five-year period, examinees who postponed or were unsuccessful on an examination attempt will be contacted regarding the next exam; a new application is not necessary.

Individuals who exceed the above restrictions lose their admissibility to this examination and may regain admissibility by submitting a readmissibility application that includes evidence of continuing medical education activity, completion of the American College of Surgeons' Surgical Education and Self-Assessment Program (SESAP), reference letters and an operative experience report. Upon approval of the application, the applicant must then take and pass two secure examinations: one derived from the ABS In-Training Examination (ABSITE) and another derived from the two latest versions of SESAP. Refer to *Regaining Admissibility to Vascular Surgery Examinations* at www.absurgery.org for details.

4. Time Limitations

If an individual has not actively pursued admissibility or readmissibility to the certification process within 10 years after completion of a vascular surgery training program, he or she will be required to reenter formal training in a vascular surgery program accredited by the ACGME or RCPSG to regain admissibility to the certification process.

C. Vascular Surgery Qualifying Examination

1. General Information

The Vascular Surgery Qualifying Examination is a six-hour computer-based examination offered annually by the VSB-ABS. The examination consists of multiple-choice questions designed to assess the applicant's cognitive knowledge of vascular surgery. Information regarding examination dates and fees, as well as an examination content outline, is available at www.absurgery.org.

Examination results are mailed and posted on the website approximately four weeks after the examination. Examinees' results are also reported to the director of their training program.

2. Application Process

Individuals who believe that they meet the requirements for certification in vascular surgery may apply for the Vascular Surgery Qualifying Examination and have their applications evaluated. If approved, they will be admitted to the examination process. Information on application requirements and the online application process is available from www.absurgery.org.

The program director during the time of the applicant's residency or fellowship must certify that all application and operative experience information supplied by the applicant is accurate.

Note that the acceptability of an applicant does not depend solely upon completion of an approved program of education but also upon information received by the VSB-ABS regarding professional maturity, surgical judgment, technical capabilities and ethical standing.

3. Opportunities and Readmissibility

Once an application is approved, the applicant has a maximum of **five opportunities within five years** to pass the examination. If an applicant decides not to take the exam in a given year, it is a lost opportunity as the **five-year limit is absolute**. During the five-year period, examinees who postponed or were unsuccessful on an examination attempt will be contacted regarding the next exam; a new application is not necessary.

Applicants who exceed the above restrictions lose admissibility to this examination and may regain admissibility by submitting a readmissibility application that includes evidence of continuing medical education activity, completion of the SVS' Vascular Education and Self-Assessment Program (VESAP), reference letters and an operative experience report. Upon approval of the application, the applicant must then take and pass two secure examinations: one derived from the VSITE and another derived from VESAP. Refer to *Regaining Admissibility to Vascular Surgery Examinations* at www.absurgery.org for details.

D. Vascular Surgery Certifying Examination

Candidates who successfully complete the Vascular Surgery Qualifying Examination are

admissible to the Vascular Surgery Certifying Examination, which evaluates a candidate's clinical qualifications to become certified by the VSB-ABS as a specialist in vascular surgery.

1. General Information

The Vascular Surgery Certifying Examination is an oral examination consisting of three 30-minute sessions conducted by teams of two examiners that evaluates a candidate's clinical skills in organizing the diagnostic evaluation and management of common problems in vascular surgery. The focus of the examination is on the logical application of surgical knowledge to clinical problems; evaluation of surgical judgment; management of complex surgical situations and complications; and assessment of technical knowledge. The examination is held annually in a major U.S. city.

The examinations are conducted by members of the VSB-ABS and other nationally recognized experts in vascular surgery. All are currently certified in vascular surgery and active in its practice. The ABS makes every effort to avoid any conflicts of interest between candidates and examiners. Examination results are mailed and posted at www.absurgery.org the day after the final day of examination. Examinees' results are also reported to the director of their training program.

If successful on this examination, the candidate is deemed certified in vascular surgery by the VSB-ABS.

2. Opportunities and Readmissibility

Candidates are offered **five opportunities within a five-year period** to pass the Vascular Surgery Certifying Examination. **Both of these limits are absolute**; exceptions will only be made for active duty military service outside the United States. The five-year period begins upon successful completion of the Vascular Surgery Qualifying Examination.

Applicants who exceed the above restrictions lose admissibility to this examination and may regain admissibility by submitting a readmissibility application that includes evidence of continuing medical education activity, completion of VESAP, reference letters and an operative experience report. Upon approval of the application, the

applicant must then take and pass the Vascular Surgery Qualifying Examination. Refer to *Regaining Admissibility to Vascular Surgery Examinations* at www.absurgery.org for details.

E. Special Circumstances

1. Persons with Disabilities

The VSB-ABS complies with the Americans with Disabilities Act by making a reasonable effort to provide modifications in its examination process to examination applicants with documented disabilities. These modifications are appropriate for such disabilities but do not alter the measurement of the skills or knowledge that the examination process is intended to test. The ABS has adopted a specific policy and procedure regarding examination of such applicants, which is available from the ABS office or www.absurgery.org. Any disability which an applicant believes requires modification of the administration of an examination must be identified and documented by the applicant in accordance with this policy. All materials submitted to the ABS documenting such a disability must be received by the published application deadline for the examination in question. No requests for test accommodations after this date will be accepted.

2. Examination Irregularities and Unethical Behavior

Examination irregularities, e.g., cheating in any form or other unethical behavior, by an applicant or diplomate may result in the barring of the individual from examination on a temporary or permanent basis, the denial or revocation of a certificate, and/or other appropriate actions, up to and including legal prosecution. Determination of sanctions for irregular or unethical behavior will be at the sole discretion of the VSB-ABS, in concert with ABS principles.

The VSB-ABS considers unethical behavior to include the disclosure, publication, reproduction or transmission of examinations, in whole or in part, in any form or by any means, verbal or written, electronic or mechanical, for any purposes. This also extends to sharing examination information or discussing an examination while still in progress. Unethical behavior also includes the

possession, reproduction or disclosure of materials or information, including examination questions or answers or specific information regarding the content of the examination, before, during or after the examination. This definition specifically includes the recall and reconstruction of examination questions by any means and such efforts may violate federal copyright law. All ABS examinations are copyrighted and protected by law; the ABS will prosecute copyright violations to the full extent provided by law and seek monetary damages for any loss of examination materials.

(See www.absurgery.org for the complete Ethics and Professionalism policy.)

3. Substance Abuse

Applicants with a history of substance abuse will not be admitted to any examination unless they present evidence satisfactory to the VSB-ABS that they have successfully completed the program of treatment prescribed for their condition. The VSB-ABS additionally must be satisfied that they are currently free of substance abuse.

IV. ISSUANCE OF CERTIFICATES

A candidate who has met all requirements and successfully completed the Vascular Surgery Qualifying and Certifying Examinations will be deemed certified in vascular surgery and issued a certificate, signed by ABS and VSB-ABS officers, attesting to these qualifications.

It is the current policy of the VSB-ABS that all certificates are valid only for a period of ten years, from the date of issuance through June 30 of the year of expiration. Diplomates who certify or recertify after July 1, 2005 must participate in Maintenance of Certification (MOC) to maintain their certificate (*see section IV-B*). The VSB-ABS reserves the right to change the duration of its certificates or the requirements for Maintenance of Certification at any time.

A. Reporting of Status

The VSB-ABS considers the personal information and examination record of an applicant or diplomate to be private and confidential. When an inquiry is received regarding an individual's status

with the ABS, a general statement is provided indicating the person's current situation as pertains to ABS certification, along with his or her certification history.

An individual will be reported as having one of three statuses: *Certified*, *Not Certified* or *In the Examination Process*. In certain cases, one of the following descriptions may also be reported: *Clinically Inactive*, *Suspended* or *Revoked*. Please refer to the *Reporting of Status* policy at www.absurgery.org for definitions of the above terms. An individual's status may be verified online at www.absurgery.org.

The VSB-ABS does not use or condone terms such as "board eligible" or "board qualified" and will only indicate whether or not individuals are admissible to examinations (*In the Examination Process*). Additionally, individuals may only describe themselves as certified in vascular surgery when they hold a **current** certificate. See *Representation of Certification Status* at www.absurgery.org for more information.

The ABS supplies biographical and demographic data on diplomates to the American Board of Medical Specialties for its *Directory of Certified Medical Specialists*, which is available in print and at www.abms.org. Upon certification, diplomates will be contacted by the ABMS and asked to specify which information they would like to appear in the directory. Diplomates will have their listings retained in the directory only if they maintain their certification according to the VSB-ABS' MOC requirements.

B. Maintenance of Certification

Maintenance of Certification is a program of continuous professional development created by the ABS and VSB-ABS, in conjunction with the ABMS and its 23 other member boards. MOC, which replaces previous recertification requirements, is intended to document to the public and the health care community the ongoing commitment of diplomates to lifelong learning and quality patient care.

MOC consists of four parts to be fulfilled over the 10-year certification period: (1) professional standing; (2) commitment to lifelong learning and periodic self-assessment; (3) cognitive expertise; and (4) evaluation of performance in practice.

Please refer to www.absurgery.org for current requirements.

The VSB-ABS considers MOC to be voluntary in the same manner as original certification. Surgeons who recertify prior to the expiration date of their certificate will receive a new certificate with an expiration date extending from the expiration date of the previous certificate, not the date of recertification.

To assure receipt of materials pertaining to MOC, diplomates are strongly encouraged to notify the ABS promptly of any changes of address.

C. Sanction of Certificate

Certification in vascular surgery may be subject to sanction such as revocation or suspension at any time that the VSB-ABS, in concert with the ABS, shall determine that the diplomate holding the certification was in some respect not properly qualified to receive it or is no longer properly qualified to retain it.

The VSB-ABS may consider sanction for just and sufficient reason, including, but not limited to, any of the following:

- The diplomate did not possess the necessary qualifications nor meet the requirements to receive certification at the time it was issued; falsified any part of the application or other required documentation; participated in any form of examination irregularities; or made any material misstatement or omission to the VSB-ABS, whether or not the VSB-ABS knew of such deficiencies at the time.
- The diplomate misrepresented his or her status with regard to board certification, including any misstatement of fact about being board certified in any specialty or subspecialty.
- The diplomate engaged in conduct resulting in a revocation, suspension, qualification, or any other restriction on his or her license to practice medicine in any jurisdiction and/or failed to inform the ABS of the license restriction.
- The diplomate engaged in conduct resulting in the expulsion, suspension, disqualification or other limitation from membership in a local, regional, national, or other organization of his or her professional peers.
- The diplomate engaged in conduct resulting in revocation, suspension or other limitation on his or her privileges to practice surgery in a health care organization.

- The diplomate failed to respond to inquiries from the ABS regarding his or her credentials or participate in investigations conducted by it.
- The diplomate failed to provide an acceptable level of care or demonstrate sufficient competence and technical proficiency in the treatment of patients.
- The diplomate failed to maintain ethical, professional and moral standards acceptable to the ABS.

The holder of a revoked or suspended certificate will be given written notice of the reasons for its sanction by express letter carrier (e.g., FedEx) to the last address that the holder has provided to the ABS. Sanction is final upon mailing of the notification.

Upon revocation of certification, the holder's name shall be removed from the list of certified surgeons and the holder is required to return the certificate to the ABS office.

Individuals may appeal the decision to revoke or suspend a certificate by complying with the *Reconsideration and Appeals* policy, available from the ABS office or www.absurgery.org. A request for reconsideration, the first step, must be made in writing to the ABS office within 90 days of receipt of notice from the ABS of the action in question. Should the circumstances that justified revocation of a certificate be corrected, the ABS may reinstate the certificate after appropriate review of the individual's licensure and performance, using the same standards as applied to applicants for certification, and following fulfillment by the individual of requirements for certification or recertification as previously determined by the ABS.

Requirements for certificate reinstatement will be determined by the ABS on a case-by-case basis in parallel with the type and severity of the original infraction, up to and including complete repetition of the initial certification process. Individuals who have had their certification revoked or suspended and then restored, regardless of their initial certification status or prior dates of certification, will be required to take and pass the next recertification examination in order to reinstate their certification. Upon passing the examination, they will be awarded a new, time-limited certificate and enrolled in MOC.

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