



The American Board of Anesthesiology

2016 ABA Report

Society of Academic Anesthesiology Associations

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Discussion Overview

- RTID Milestones Reporting Update
- Primary Certification Updates
- Subspecialty Certifications
- Program Directors' Meetings
- Combined Training Programs
- Alternate Entry Pathway (AEP)
- MOCA 2.0®



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RTID Reporting Update



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RTID Reporting Requirements

- Programs should complete the following activities every six months (**Jan. 31** and **July 31**):
 - Resident Enrollment Forms
 - Clinical competency assessments
 - Program Director Reference Forms
- Assess at end of training whether resident can **independently practice** in the specialty without accommodation or with reasonable accommodation



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Certificate of Clinical Competency (CCC) Report

- Core tool for evaluating residents' training and performance
- Required for each resident who has spent any portion of six-month reporting period in training
- Programs now only report milestones to ACGME
 - Will not report milestones to the ABA for this reporting period (July 1 – Dec. 31, 2016)



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Primary Certification



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Staged Examinations

- Staged examinations
 - Complement ACGME movement toward competency-based training and promotion
 - Encourages residents to engage in more sustained study over the course of residency training
- In 2017, we will launch the APPLIED Exam, the last exam in the staged exam series
- In 2018, we will add the Objective Structured Clinical Examination (OSCE) component to the APPLIED Exam

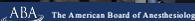



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2016 Part 2 Examinations

ABA Assessment Center

- More than 1,900 candidates participated in their Part 2 Examination in the ABA Assessment Center
- ABA Director David Warner, M.D., will share more information about the Part 2 and other exams during his presentation

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2017 Part 2 Examinations

- Nine administration weeks
 - Seven spring exam weeks (March to June)
 - Two fall exam weeks (September)
- Specific dates are posted at www.theABA.org




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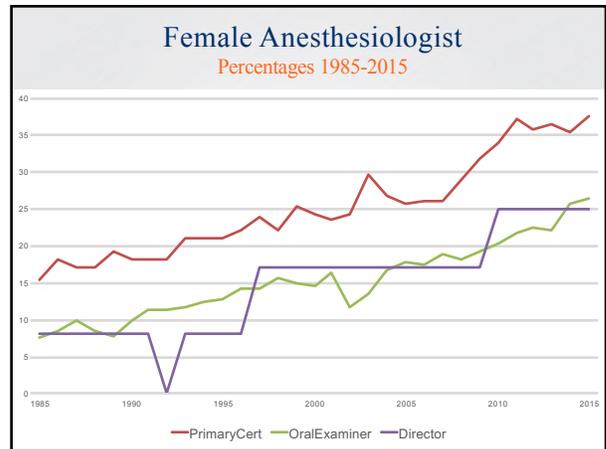
Examiner Recruitment

- The ABA had **250** active examiners at the start of 2015
- In preparation for the APPLIED Examination, the ABA recruited **118** more in 2015 and is pursuing another **78** this year

GOAL: 405 Examiners by 2019



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Subspecialty Certification

Subspecialty Certification

- The ABA currently offers subspecialty certification in:
 - Critical Care Medicine
 - Pain Medicine
 - Hospice & Palliative Medicine
 - Sleep Medicine
 - Pediatric Anesthesiology
- No more “grandfathering” criteria accepted
 - Must have completed an ACGME-accredited fellowship program

Subspecialty Exam Registration

- Physicians who wish to take subspecialty certification exams must:
 - Hold an unexpired license
 - Be certified by the ABA
- Fellows must take and pass the Part 2 Exam prior to registering for a subspecialty exam
 - They should register for a spring Part 2 Exam if they wish to take the subspecialty exam in the same year

Program Directors’ Meetings

Program Directors’ Meetings

- The ABA will host Program Directors’ meetings in 2017 to share updates on the APPLIED Exam launch with OSCEs in 2018
- Topics for discussion include:
 - Rationale for OSCEs
 - OSCE Content Outline and exam structure
 - Tour OSCE rooms
 - Pilot test of OSCE scenarios



Combined Training Programs

Combined Training Programs

- Collaborate with other boards to provide combined training in
 - Pediatrics
 - Internal Medicine
 - Emergency Medicine (NEW)
- Physicians can complete training requirements in both specialties in five years (instead of six)
- Graduates may qualify for dual certification



Combined Training Programs

- Programs must be approved by both boards
 - Pediatrics (7 programs)
 - Internal Medicine (5 programs)
 - Emergency Medicine (1 program)
- Residents complete 60 months of education
 - Emergency Medicine may have some 4-year programs (72 training months)
- Certifying exams can be taken once all training has been completed



Alternate Entry Pathway



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Alternate Entry Pathway (AEP)

- Purpose: To encourage **outstanding** internationally trained and certified anesthesiologists, who come to the United States, to become productive research members of U.S. academic anesthesiology programs




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AEP Statistics

- Anesthesiology departments may now enroll **as many as four** international medical graduates in the AEP program

| July 2007 – June 2016 | |
|--------------------------------|----|
| # of Programs Approved | 37 |
| # of Individuals Now Certified | 33 |



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MOCA 2.0®



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MOCA 2.0® Goal



To create a web-based, lifelong learning platform that promotes and supports personalized knowledge acquisition assessment and demonstration of proficiencies.

Evolution to MOCA 2.0® Background

- **2011:** Developed strategic plan
- **2012:** Hosted technology summit
- **2013:** Conceptualized MOCA 2.0 and MOCA Minute®
- **2014:** Facilitated collaborative concept development
- **2016:** Launched MOCA 2.0 and expanded MOCA Minute pilot

MOCA 2.0®: 2016

- MOCA Minute® pilot replaced once-every-10-years MOCA Exam
- More options for Part 4: Improvements in Medical Practice; Simulation no longer a requirement
- Nearly 21,000 program participants

MOCA 2.0®: 2017

- MOCA 2.0® launches for diplomates with subspecialty certifications on **Jan. 9**
- Diplomates with more than one certificate will:
 - Complete a **single set** of MOCA 2.0 requirements for all certificates
 - Answer just 30 MOCA Minute questions per quarter (120/year)
 - Pay \$210 for the first certificate, \$100 for each additional one

MOCA 2.0®: 2017

- Launching new features mid-2017, including:
 - **Personal Portfolio** to store ABA certification records, medical licenses and other documents
 - **Search and Explore** function in physician portal to easily find CMEs to fill knowledge gaps diplomates identify via MOCA Minute

Questions?

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