This Bulletin, revised as of January 12, 2024, represents the official statement of the 2024 requirements for Focused Practice Designation in Minimally Invasive Gynecologic Surgery (MIGS) for gynecologists.
GENDER LANGUAGE DISCLAIMER

The American Board of Obstetrics and Gynecology (ABOG) recognizes that patients have diverse gender identities and is striving to use gender-inclusive language in its publications, literature, and other printed and digital materials. In some instances, ABOG uses the word “woman” (and the pronouns “she” and “her”) to describe patients or individuals whose sex assigned at birth was female, whether they identify as female, male, or non-binary. As gender language continues to evolve in the scientific and medical communities, ABOG will periodically reassess this usage and will make appropriate adjustments as necessary. When describing or referencing study populations used in research, ABOG will use the gender terminology reported by the study investigators.

IMPORTANT INFORMATION FOR ALL CANDIDATES

1. The process for Focused Practice Designation in Minimally Invasive Gynecologic Surgery (MIGS) by the ABOG is voluntary. ABOG will not contact potential candidates. Each potential candidate for Focused Practice Designation in MIGS is responsible for completing the application online at www.abog.org, submitting all materials to ABOG at the time they are requested, and meeting all deadlines. ABOG will make the final decision concerning the applicant’s eligibility for admission to the examination.

2. It is the responsibility of each candidate to be aware of the current requirements for Focused Practice Designation in MIGS. ABOG does not assume responsibility for notifying a candidate of changing requirements for admissibility to any of its examinations or pending loss of eligibility. Candidates must meet the requirements published in the Focused Practice Designation in MIGS Bulletin for the year in which they are to take an examination.

3. Focused Practice Designation in MIGS is time-limited. Each Diplomate who achieves a Focused Practice Designation in MIGS must enter the Maintenance of Certification (MOC) process in the year following successful attainment of focused practice designation and must successfully complete all requirements to maintain focused practice designation. Physicians who hold non-time-limited certificates in the specialty Obstetrics and Gynecology must enter the MOC process to maintain focused practice designation.

4. Fees must be paid by credit card through the ABOG website.

5. Fees are payable in US Dollars.

6. Deadlines are based on receipt of the information in the ABOG office, not the date of shipping.

7. It is the candidate’s responsibility to meet all deadlines. ABOG is not responsible to notify a candidate of impending deadlines.
PREREQUISITES FOR ALL CANDIDATES

Applicants for the Focused Practice Designation in MIGS must have primary certification in Obstetrics and Gynecology from the ABOG and, if they hold a time-limited certificate, must be meeting the ABOG MOC program requirements.

A candidate is a physician who is applying for the examination for focused practice based on training, experience, and clinical practice.

Candidates must meet the requirement of a minimum of three (3) years of clinical practice with a focus in MIGS at the time of application for the MIGS exam. Completion of a two-year MIGS fellowship program may count towards the minimum three-year requirement of focused practice.

Candidates must have completed a minimum of 20 AMA PRA Category 1 CME Credits™ in MIGS or in a gynecologic subspecialty (e.g., Female Pelvic Medicine and Reconstructive Surgery (FPMRS), Reproductive Endocrinology and Infertility (REI), and Gynecologic Oncology (GO)) in the last three (3) years. CME earned by completing the annual ABOG MOC Part II Gynecology, FPMRS, REI and GO article-based assessments will count towards the MIGS CME requirement.

Candidates must submit a 12-month case log documenting a minimum of 100 minimally invasive gynecological surgical procedures in patients with benign and complex gynecologic conditions (see Appendix A). The minimum of 100 surgical procedures cannot all be in the same category. Additionally, the cases must be ones in which the candidate was the primary surgeon and cannot include cases performed during fellowship.

Candidates must pass a secure, computer-based examination of focused knowledge, judgment, and skills in MIGS.
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WRITTEN EXAMINATION

Application Process

Applications will be available online in the physician portal at www.abog.org by January 31, 2024.

The final day applications will be accepted for the 2024 examination is April 30, 2024.

The fee must be paid by credit card through the ABOG website (www.abog.org) as part of the application process. If an applicant is found to be ineligible to sit for the test, a portion of the fee will be refunded.

The applicant must update their profile within the ABOG portal and provide valid contact information as part of the application process. It is the candidate’s responsibility to notify ABOG of any change regarding contact information.

Once the online application, 12-month case log, and application fee payment have been submitted, the candidate’s application will be considered in accordance with the requirements in effect for that year. The candidate will be notified of admissibility to the computer-based examination. An ABOG subcommittee will make the final decision as to the eligibility of an applicant after the review of the candidate’s application and qualifications.

The candidate should contact Pearson VUE to register for the examination at least two business days after the candidate has received the email notification of acceptance as a candidate. Candidates may choose online exam administration (from home or office) or take it at a Pearson VUE test center. Instructions for contacting Pearson VUE will be included in the acceptance email. Reservations at Pearson VUE in individual cities are limited, and are assigned on a “first come, first served” basis.

Candidate Requirements

Each of the following is a requirement for a candidate to be eligible to apply and to sit for the MIGS Focused Practice Designation examination. The candidate must meet all the requirements in effect during the year for which admission to the computer-based examination is requested.

Training and Practice Requirement

Candidates must have completed a minimum of three (3) years of clinical practice with a focus in MIGS. Completion of a two-year MIGS fellowship program may count towards the minimum three-year requirement of focused practice (each year of fellowship counts as one year of clinical practice up to two years).
MIGS CME Requirement

Candidates must have completed a minimum of 20 AMA PRA Category 1 CME Credits™ in MIGS or in a gynecologic subspecialty (e.g., FPMRS, REI, and GO) in the last three years. CME earned by completing the annual ABOG MOC Part II Gynecology, FPMRS, REI, or GO article-based assessments will count towards the MIGS CME requirement.

ABOG Specialty Certification

The candidate must hold current, active ABOG certification in Obstetrics and Gynecology to be eligible to apply and to sit for the MIGS examination.

Maintenance of Certification (MOC)

All candidates with a time-limited certificate in the specialty Obstetrics and Gynecology must be meeting the ABOG MOC program requirements at the time the MIGS Focused Practice written exam application is submitted, and at the time of the actual written examination. Each Diplomate who achieves a Focused Practice Designation in MIGS must enter the Maintenance of Certification (MOC) program in the year following successful attainment of Focused Practice Designation in MIGS and must successfully complete all requirements to maintain a Focused Practice Designation in MIGS.

Note: Candidates with non-time-limited certification in the specialty Obstetrics and Gynecology who pass the written examination for Focused Practice in MIGS will be issued a time-limited Focused Practice Designation in MIGS and will be required to enter the MOC program and fulfill all the yearly MOC requirements for Focused Practice Designation in MIGS.

Medical License

Candidates must have an active, full, and unrestricted license to practice medicine in any and all of the states or territories of the United States, District of Columbia, or Province of Canada in which the candidate holds a current medical license. Each license must not be restricted, suspended, on probation, revoked, surrendered, nor include conditions on the practice of medicine.

Moral and Ethical Behavior

The ABOG requires evidence of a candidate’s professionalism and professional standing. This will include verification of their professional reputation, moral and ethical character, and in-hospital practice privileges from administrative officials of organizations and institutions that know the candidate and their practice. Candidates must have demonstrated good moral and ethical behavior in the practice of medicine and interaction with peers and other medical personnel. A felony conviction, even if
unrelated to the practice of medicine, will be considered evidence of failure to meet this standard.

**Unrestricted Hospital Privileges**

Candidates must have unrestricted hospital (or surgical center) privileges for a Focused Practice Designation in MIGS. If the candidate is under investigation or on probation, the application will not be approved. The candidate must re-apply and pay a new application fee after the probation and/or restrictions have been resolved. However, resolution of these matters does not guarantee that the candidate’s application will be approved.

**Twelve-Month Case Log**

All candidates will be required to submit a 12-month case log documenting a practice that demonstrates sufficient depth and breadth of focused practice in MIGS. The case log must document evidence of focused practice by having a minimum of 100 total minimally invasive gynecologic procedures. They must have cases in more than one category of the case log meeting the minimum number of cases for those categories and the combined total must be 100 or more surgeries. Additionally, the cases must be ones in which the candidate was the primary surgeon and cannot include cases performed during fellowship. The case log must be completed at the time of application on the form(s) provided with the online applications (see Appendix A).

**Physicians in International Practice Settings**

If the candidate practices in a country other than the United States and its territories or Canada, a letter from the senior responsible medical officer in the hospital or clinical setting where the candidate practices must be submitted with the application. The letter must be submitted to ABOG and must attest that they have independent, unsupervised privileges in MIGS. In addition, it should attest that the Diplomate’s practice of medicine meets all the local standards and verifies that the candidate has unrestricted privileges in MIGS.

**Falsification of Information**

Falsification of any information or failure to disclose any adverse action on hospital privileges, medical license(s), or MOC application will result in a denial of a candidate’s eligibility to sit for the written examination for Focused Practice Designation in MIGS.

Physicians who have made major contributions to the field of MIGS but are no longer in full-time practice and cannot submit an adequate case log may request special consideration from ABOG. Such physicians should write a detailed letter of request to the ABOG Associate Executive Director for MOC. The letter must include a summary of
their contributions to the field and a copy of their CV. If the request is granted, that physician will be allowed to sit for the MIGS computer-based examination. However, once Focused Practice Designation in MIGS is attained, the physician must enroll in the MOC process.

Re-Application

A candidate who postpones or fails the written examination in MIGS must complete a new online application to be considered for the next scheduled written examination in MIGS and pay a new application fee.

Applicants Ruled Not Admissible

If a decision is made by ABOG that a candidate has not met the requirements for admission to the MIGS written examination, the candidate may appeal the decision in writing to the ABOG Associate Executive Director for MOC. Such appeals will be forwarded to the appropriate ABOG Review Committee for consideration. If a successful decision occurs after the date of the computer-based examination, the candidate will be scheduled for the next available MIGS computer-based examination, and no additional application fee will be required.

Content of the 2024 Written Examination

Examination content was determined by a blueprint (see below) developed by the Committee on Focused Practice Designation in MIGS. The questions will be in a multiple-choice, one best answer format.

Blueprint for the 2024 MIGS Focused Practice Designation Written Examination

**GENERAL PERIOPERATIVE MANAGEMENT**  20%

- Preoperative management
- Intraoperative management
- Postoperative management

**DIAGNOSIS AND MANAGEMENT OF POSTOPERATIVE COMPLICATIONS IDENTIFIED IN THE POSTOPERATIVE PERIOD**  5%

- Hemorrhage
- Gastrointestinal
- Genitourinary
- Wound infection
- Cardiopulmonary
- Neurologic
- Venous thromboembolism
PRINCIPLES OF EQUIPMENT, TISSUE EXTRACTION, AND ENERGY SOURCES  5%

EVALUATION, DIAGNOSIS AND MANAGEMENT OF GYNECOLOGIC CONDITIONS  20%

Bleeding
Pain

Acute
Chronic

Benign adnexal masses
Benign uterine conditions

SURGICAL PROCEDURES  40%

Hysteroscopic procedures  5%

Indications/contraindications
Procedures
Surgical technique
Fluid management
Complications
  Intraoperative
  Postoperative
Office-based procedures

Operative laparoscopy  15%

Indications/contraindications
Procedures
Surgical technique
Complications
  Intraoperative
  Postoperative

Hysterectomy 20%

Robotic
Indications/contraindications
Surgical technique
Complications
  Intraoperative
Postoperative

Total laparoscopic (TLH)
- Indications/contraindications
- Surgical technique
- Complications
  - Intraoperative
  - Postoperative

Laparoscopic-assisted vaginal (LAVH)
- Indications/contraindications
- Surgical technique
- Complications
  - Intraoperative
  - Postoperative

Vaginal (VH)
- Indications/contraindications
- Surgical technique
- Complications
  - Intraoperative
  - Postoperative

NEOPLASIA 5%
- Suspected
  - Ovarian/Uterine/Cervical
- Unsuspected
  - Ovarian/Uterine/Cervical

CROSS CONTENT 5%
- Anatomy
- Pathophysiology
- Ethics
- Interpersonal and communication skills
- Professionalism
- Practice-based learning and improvement
- Systems-based practice
ADMINISTRATION OF THE WRITTEN EXAMINATION

The MIGS Focused Practice Written Examination is scheduled to last approximately 2 hours and 30 minutes, consists of 100 questions, and is administered by Pearson VUE Testing Center. Candidates may choose to take the exam at a Pearson VUE test center or online (from home or office). Candidates who take the exam at a Pearson VUE test center and finish the exam before the full time has elapsed, may leave the Pearson VUE test center early, but if they do so, may not return. Candidates will receive a confirmation email after registering on the Pearson VUE Testing Center website regarding the location of their examination, as well as the time they must arrive.

(https://home.pearsonvue.com/).

Each candidate must present two (2) forms of identification to be admitted for the MIGS Examination at Pearson VUE Testing Center. One document must include both a photograph of the candidate and the candidate’s signature. The second document must include the candidate’s signature. If a candidate has had a name change between application and the day of the test, they must bring a copy of an official document that verifies the name change. Examples could include, but are not limited to, a marriage certificate, divorce decree, court ordered name change, etc.

Candidates choosing online exam administration will undergo a room inspection by the exam proctor. Candidates choosing the test center exam administration may not take electronic devices into the examination area and must also submit to a screening process that may include any or all of the following: fingerprinting, palm vein scanning, wanding or walkthrough scanning for metallic objects, or any other screening that may be in place at the Pearson VUE Testing Center. Please carefully review the Pearson VUE policy for the complete listing of personal items not allowed in the examination area. Personal items include scarves, hats, headbands wider than 2 inches, jewelry wider than a quarter inch, and other items. If you arrive with any of the items mentioned in the personal items policy, you may be asked to remove the item from your person before walking into the testing area, unless the item is being worn for religious beliefs/purposes. A candidate who refuses to submit to any screening procedure will not be allowed to take the examination, and no portion of the fee will be refunded.

Candidates are not allowed to possess or access recording devices, cellular phones, paging devices, other electronic communication and/or recording devices, and writing instruments at any time during the written examination or while taking a break. Candidates may not wear any device that can access the internet. These devices include Apple Watch, Fitbit, and similar devices. If such a device is discovered at any time during the examination, or if the candidate accesses any such device for any reason, the candidate will not receive a grade for any portion of the written examination, and all fees will be forfeited. The only exceptions are medically required devices such as an insulin pump.

There is no scheduled break during the examination. Candidates may take unscheduled breaks to use the restroom facilities. Unscheduled breaks should not exceed 10 minutes in length. During such breaks, a candidate may not talk with any individual or access any electronic device. Candidates are not allowed to leave the Pearson VUE
Testing Center for any reason before completing the test. If a candidate violates any of these regulations, the candidate will not receive a grade for any portion of the MIGS written examination, and all fees will be forfeited.

Special Accommodations
If a candidate requires special accommodations those requests must be received at the ABOG office no later April 30, 2024. It may not be possible to accommodate requests received after that date. (See Appendix B for information on candidates with a disability. See Appendix C for information on candidates who are lactating.)

TEST SECURITY
At the time of application for the written exam and again at the time the test is taken, each candidate will be required to agree to the following. No candidate will be allowed to sit for the written examination unless they agree to these terms:

1. I understand that all ABOG test materials are copyrighted and that it is illegal to disclose the content of the examination in whole or in part to any individual, organization, or business. Furthermore, I understand that if I provide the information to any such entity, I may be prosecuted under the US Copyright laws.

2. I understand that if I divulge the content of the written examination in whole or in part to any individual, organization or business, my test result if any, will be negated and I will not be allowed to re-apply for the written examination for a minimum of three years.

3. I understand that I may not record any portion of the written examination by any means in whole or in part, and a violation will be treated as outlined in numbers 1 and 2 above.

4. I understand that I may not memorize or attempt to memorize any portion of the written examination for the purpose of transmitting such material to any individual, organization, or business.

5. I agree that de-identified results of my examination may be used for research purposes by ABOG.
DATES, DEADLINES, RESULTS, AND FEES

<table>
<thead>
<tr>
<th>Applications available online</th>
<th>January 31, 2024</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last date applications</td>
<td>April 30, 2024</td>
</tr>
<tr>
<td>accepted</td>
<td></td>
</tr>
<tr>
<td>Test given at national</td>
<td>July 22, 2024</td>
</tr>
<tr>
<td>centers or online (from</td>
<td></td>
</tr>
<tr>
<td>home or office)</td>
<td></td>
</tr>
<tr>
<td>Exam results available in</td>
<td>No later than 2</td>
</tr>
<tr>
<td>ABOG portal</td>
<td>weeks after</td>
</tr>
<tr>
<td></td>
<td>examination date</td>
</tr>
</tbody>
</table>

The final deadline to complete the online application (including submission of the case-log form) and to pay the $200.00 application fee is April 30, 2024. No application will be accepted after this date.

If the candidate is unable to take the examination due to health, certain types of military mobilizations, natural disasters or other serious reasons please notify ABOG as soon as possible and the fee will be applied to the next available MIGS Focused Practice computer-based examination.

CASE LOG

A case log form must be completed as a part of the application process. The form must be completed and submitted online. An example of the form is shown in Appendix A.

The deadline for submission of all application materials, including the case log, is April 30, 2024.

The numbers reported in the case log must be from any consecutive 12-month period between January 1, 2021 and December 31, 2023.

Additionally, the cases must be ones in which the candidate was the primary surgeon and cannot include cases performed during fellowship.

LENGTH OF DESIGNATION

All specialty and subspecialty certificates issued by ABOG after 1986 are time limited. Similarly, Focused Practice Designation in MIGS issued by ABOG for candidates who successfully pass the MIGS written examination are time-limited and remains in effect only if the Diplomate participates in and successfully completes the MIGS Maintenance of Certification (MOC) process each year. Thus, the Focused Practice Designation in
MIGS for candidates who successfully pass the 2024 computer-based MIGS examination will expire on December 31, 2025 unless all of the 2025 MOC requirements have been completed successfully and on time. If a Diplomate's Focused Practice Designation in MIGS is allowed to lapse, it can only be re-established by passing a secure re-entry computer-based examination in MIGS.

ORAL EXAMINATION

There is no oral examination requirement for Focused Practice Designation in MIGS. Candidates are only required to take and pass the MIGS computer-based examination.

MAINTENANCE OF CERTIFICATION

To be eligible for renewal of the Focused Practice Designation in MIGS, Diplomates must hold a valid primary certificate in Obstetrics and Gynecology and complete the ABOG MOC program on an annual basis.

Diplomates who hold a time-limited certificate must meet MOC requirements annually for their specialty or subspecialty as well as complete additional article-based assessments focused in MIGS.

The MOC Part II Lifelong Learning and Self-Assessment requirement for specialists holding a MIGS Focused Practice Designation has three parts:

1. articles in general obstetrics, gynecology, office practice, and four subspecialties;
2. articles in minimally invasive gynecologic surgery; and
3. articles in health equity and patient safety and communication.

The MOC Part II Lifelong Learning and Self-Assessment requirement for subspecialists holding a MIGS Focused Practice Designation has four parts:

1. articles in general obstetrics, gynecology, office practice, and the other three subspecialties;
2. articles in minimally invasive gynecologic surgery;
3. articles in the Diplomate’s subspecialty; and
4. articles in health equity and patient safety and communication.

Likewise, a Diplomate who holds a non-time-limited certificate in Obstetrics and Gynecology or an ABOG subspecialty must participate in the MOC program annually in order to maintain their Focused Practice Designation in MIGS.
APPENDIX A: CANDIDATES 12-MONTH CASE LOG FOR FOCUSED PRACTICE DESIGNATION IN MIGS

Candidates must submit a 12-month case log documenting a practice that demonstrates sufficient depth and breadth of focused practice in MIGS. The case log must document evidence of focused practice by having a minimum of 100 minimally invasive gynecologic surgical procedures in patients with benign and complex gynecologic conditions in the 12-month collection period.

Candidates must have cases in more than one of the three categories on the case log meeting the minimum number of cases for those categories and the combined total number must be 100 surgical procedures or more. Additionally, the cases must be ones in which the candidate was the primary surgeon and cannot include cases performed during fellowship.

Case logs that do not meet the breadth and depth of surgical experience requirements for the Focused Practice Designation in MIGS will be reviewed by an ABOG Committee for application approval.

Candidates will be asked to submit the case log at the time of application. An example of the case log form is presented below.
## Case Log

<table>
<thead>
<tr>
<th>Categories and Types of Procedures</th>
<th>Number of Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Hysteroscopy</strong></td>
<td></td>
</tr>
<tr>
<td>a. Myomectomy</td>
<td></td>
</tr>
<tr>
<td>b. Septum/isthmocele resection</td>
<td></td>
</tr>
<tr>
<td>c. Endometrial resection</td>
<td></td>
</tr>
<tr>
<td>d. Office-Based</td>
<td></td>
</tr>
<tr>
<td><strong>Category 1 Subtotal (minimum of 10 procedures)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>2. Laparoscopy</strong></td>
<td></td>
</tr>
<tr>
<td>a. Myomectomy</td>
<td></td>
</tr>
<tr>
<td>b. Adnexal Surgery</td>
<td></td>
</tr>
<tr>
<td>c. Endometriosis Surgery (Stage III and IV)</td>
<td></td>
</tr>
<tr>
<td><strong>Category 2 Subtotal (minimum of 20 procedures)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>3. Minimally Invasive Hysterectomy</strong></td>
<td></td>
</tr>
<tr>
<td>a. Laparoscopic Hysterectomy +/- BSO</td>
<td></td>
</tr>
<tr>
<td>b. Robotic Hysterectomy +/- BSO</td>
<td></td>
</tr>
<tr>
<td>c. LAVH +/- BSO</td>
<td></td>
</tr>
<tr>
<td>d. Vaginal Hysterectomy +/- BSO</td>
<td></td>
</tr>
<tr>
<td><strong>Category 3 Subtotal (minimum of 20 procedures)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Combined Total Number of Procedures (must be at least 100)</strong></td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX B: CANDIDATE DISABILITY

The American Board of Obstetrics & Gynecology, Inc. (ABOG or Board) provides reasonable accommodations in accordance with The Americans with Disabilities Act (ADA) as amended by the ADA Amendments Act of 2013 (ADAAA) (collectively the ADA) and, therefore, will provide or allow the use of necessary auxiliary aids, services or testing conditions that do not fundamentally alter the measurement of the skills or knowledge the Board assessment program and examination is intended to test. Candidates must indicate through the examination application if special testing accommodations under the ADA are needed. Accommodations will only be considered with appropriate documentation. In order to implement this policy, notification of the need for special testing circumstances must be submitted in writing to the ABOG by a candidate by April 30, 2024. This deadline is necessary to allow the Board to request the required documentation, to review the records and to verify the disability, if necessary.

The ADA defines a person with a disability as someone with a physical or mental impairment that substantially limits one or more major life activities such as walking, standing, seeing, hearing, eating, sleeping, speaking, breathing, learning, reading, concentrating, thinking, communicating or working.

The purpose of accommodations is to provide equal access to ABOG examinations for all individuals. Accommodations offset the identified functional limitation so that the impact of impairment is minimized by means of an auxiliary aid or an adjustment to the testing procedure. Functional limitation refers to the aspects of a disability that interfere with an individual’s ability to function in some capacity on a regular and continuing basis.

The purpose of documentation is to validate that an applicant for test accommodations is a disabled individual as defined by the ADA and to provide guidance in determining effective accommodations. Comprehensive information by a qualified professional is necessary to allow the ABOG to understand the nature and extent of the applicant’s disability and the resulting functional impairment that limits access to its examinations. It is essential that an applicant’s documentation provide a clear explanation of the functional impairment and a rationale for the requested accommodation.

No candidate shall be offered an accommodation that would compromise the ABOG’s examination’s ability to test accurately the skills and knowledge it purports to measure, and no auxiliary aid or service will be provided which will fundamentally alter the examination or will result in an undue burden to ABOG.

ABOG shall not exclude any candidate from the MIGS Focused Practice Designation examination solely because of a disability if the ABOG is provided with notice of the disability in time to permit the ABOG to make such adjustments in the examination as are reasonably necessary to accommodate the disability. The candidate must provide sufficient documentation to permit the ABOG to verify the existence, nature, and extent of the disability by April 30, 2024. The documentation must specify the requirements or accommodations determined to be necessary to overcome or compensate for the disability. In addition, the candidate must supply any additional information the ABOG may subsequently request in a timely manner.
If any of the requirements cannot reasonably be provided, ABOG will notify the candidate and will indicate those alternative accommodations, which the ABOG determines to be appropriate in consideration of the disability claimed and documented, and the integrity of the examination. If the candidate fails to notify ABOG of a disability by April 30, 2024 and fails to achieve a passing grade, that candidate may not appeal the results of the examination but shall be entitled to sit for the next regularly scheduled written examination but must pay a new application and examination fee.

If a candidate claims that their examination results were adversely affected by illness, injury or other temporary physical impairment at the time of the examination, that candidate may not appeal the results of the examination. However, if the candidate provides sufficient evidence of such illness, injury or impairment, they shall be entitled to sit for the next regularly scheduled written examination but must pay a new application and examination fee.
APPENDIX C: LACTATION ACCOMMODATIONS

Candidates who are lactating may request a 30-minute break and extension of their examination if they notify the ABOG office no later than April 30, 2024, and schedule at a Pearson VUE Testing Center by the same date. Candidates should contact ABOG as soon as they know they will need lactation facilities. Most Pearson VUE Testing Centers have only one room that is available for breast pumping, so candidates are encouraged to make their reservations as soon as they receive approval for the test as these rooms will be assigned on a first come, first served basis. If a candidate requests extra time for lactation, they must schedule their testing site through the Pearson VUE accommodations department after contacting ABOG. If no seat is available at the closest center, and they have requested extra time, they will have to travel to an available location to sit for the examination. As Pearson VUE testing centers have limited lactation facilities, ABOG cannot guarantee that the candidate will be able to schedule at their preferred testing center.
APPENDIX D: ABOG COMMITTEE ON FOCUSED PRACTICE IN MINIMALLY INVASIVE GYNECOLOGIC SURGERY

Erika Banks, M.D., Chair                     Albert Einstein College of Medicine

Jubilee Brown, M.D.                            Levine Cancer Institute, Carolinas Health Care System

Rajiv Gala, M.D.                                Ochsner Health System

Isabel Green, M.D.                              Mayo Clinic, Rochester

Samantha Pfeifer, M.D.                        Weil Cornell Medicine

Sangeeta Senapati, M.D.                      NorthShore University Health System