

# 2024

## SUBSPECIALTY CONTINUING CERTIFICATION (DBA MAINTENANCE OF CERTIFICATION) BULLETIN

# ABOG

American Board of Obstetrics & Gynecology

First in Women's Health®



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This Bulletin, revised as of August 21, 2024, represents the official statement of requirements for the 2024 Subspecialty Continuing Certification (DBA Maintenance of Certification) program effective January 1, 2024 - December 31, 2024.

## 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 NOTICE OF MODIFICATIONS TO THE CONTINUING CERTIFICATION (MOC) PROGRAM

**Please read the modifications described below carefully, as your 2024 Continuing Certification (MOC) performance or participation may impact your 2025 program requirements.**

### Participation Requirements

- Diplomates who fail to apply or apply but fail to complete all 2024 MOC participation requirements by the completion deadline, **November 15, 2024, will not be given an extension** to complete program requirements in 2024.
  - These Diplomates must apply for 2025 MOC by the application deadline, August 1, 2025.
  - An additional administrative fee will be assessed at the time of their MOC application.
  - Additional article-based assessments and activities will be required in 2025 to maintain certification(s).
  - Diplomates who do not meet all 2025 requirements by November 15, 2025, must apply for the 2026 Re-Entry Exam by February 27, 2026, to regain certification(s).

## Performance Requirements

- Part II: Article-based Assessments
  - All Diplomates must achieve at least 80% correct (inclusive of two attempts) of all 2024 article-based assessment items by November 15, 2024.
- Part III: Performance Pathway
  - Year 5 Diplomates enrolled in Performance Pathway must achieve an aggregated average of at least 86% correct (based on first attempts) of all article-based assessment items from Years 1-5 by November 15, 2024.
  - This 86% benchmark allows Performance Pathway participants to opt out of the MOC Part III Exam in Year 6.
- MOC Part III Exam
  - Year 6 Diplomates required to take and pass the 2024 Part III exam must do so by November 15, 2024.
- Diplomates who fail to meet the 2024 MOC performance requirements by November 15, 2024 (failing Part II or Part III Exam by November 15, 2024), will be required to take and pass the MOC Re-Entry Exam in 2025.

## 2025 Re-Entry Exam

- Beginning with the 2025 MOC program, the Re-Entry Exam will be offered once on July 22, 2025. Administering this exam once per year will be the standard practice going forward.
- The deadline to apply for the 2025 Re-Entry Exam is February 28, 2025.
- Diplomates' certification statuses will not be impacted until the 2025 Re-Entry Exam results are posted at the end of October. Failure to pass this exam will result in loss of board certification. Exam failure will result in certification expiration date reflecting the actual date exam was taken (July 22, 2025).
- Diplomates who lose their certification status after failing the 2025 Re-Entry Exam may apply for the 2026 Re-Entry Exam by February 27, 2026, to regain certification.

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## KEY INFORMATION ABOUT TIME-LIMITED SUBSPECIALTY CERTIFICATION

1. Certification by ABOG and participation in the Maintenance of Certification (MOC) process is voluntary.
2. Physicians certified by ABOG in 1986 and thereafter hold time-limited certificates. MOC is a continuous process and certificates expire on a yearly basis. To maintain their status as Board-certified physicians, they must participate in the MOC process in the year that their certificate expires and successfully complete all requirements on an annual basis. For example, if a certificate is valid through December 31, 2024, that Diplomate must complete the 2024 MOC requirements.
3. Diplomates must apply to participate in the 2024 MOC process no later than October 15, 2024. All requirements for the MOC year must be successfully completed by November 15, 2024.
4. Diplomates who passed the Subspecialty Certifying Examination in April 2024 gain subspecialty certification that will expire on December 31, 2025. They will be dually-certified for the remainder of 2024 for both the specialty and new subspecialty and are not required to participate in 2024 MOC. Diplomates must apply and successfully complete all 2025 MOC requirements to maintain their certifications.
5. As changes are made to the process annually, it is a Diplomate's responsibility to be familiar with the information in each year's *MOC Subspecialty Bulletin*.
6. It is each Diplomate's responsibility to promptly inform ABOG within 60 days of any and all actions against a medical license, hospital or other privileges, and credentials, including having their practice monitored.
7. It is a Diplomate's responsibility to update their Profile on their ABOG portal or to notify ABOG immediately of any change in address, email address, or telephone numbers.
8. ABOG is under no obligation to notify a Diplomate of impending loss of certification, deadlines, or changes in their certification status. However, ABOG will attempt to email reminders to those who may be in jeopardy of losing certification using the email address provided at the time of their most recent MOC application. ABOG is not responsible for a Diplomate not receiving such emails due to change of email address, loss of the notice due to spam or other filters, or any other technical problem.
9. Each Diplomate enrolled in MOC has a dashboard in the ABOG portal showing their progress, which can be accessed at [www.abog.org](http://www.abog.org). Diplomates are encouraged to review their ABOG portal at least quarterly.

10. Diplomates access to all MOC requirements when the application process is completed, and Diplomates are approved to participate. The application process includes answering questions regarding Professionalism, Professional Conduct, Professional Standing and paying the appropriate fees. For Diplomates without hospital privileges, an attestation of professional standing must be completed by another ABOG Diplomate in good standing and uploaded to their ABOG portal, emailed, or faxed to ABOG once per 6-year MOC cycle (fax: 214-871-0602 email: [moc@abog.org](mailto:moc@abog.org)).
11. Diplomates in MOC Year 6 who are required to take the MOC Part III Exam must successfully pass the exam no later than November 15, 2024. Detailed information about the application process, fee, and exam content is presented in this bulletin in the section titled [MOC Part III, Assessment of Knowledge, Judgment & Skills. Appendix A](#) contains detailed information about the content and format of the exam.
12. Diplomates who retire from practice or temporarily are clinically inactive (e.g., not involved in the provision, supervision, or administration of patient care) may request to participate in MOC activities. Further information can be found in the [Diplomates in non-clinical positions](#) section of this bulletin.
13. Diplomates who were in the MOC process for the specialty Obstetrics and Gynecology before passing the subspecialty certifying examination will start a 6-year subspecialty MOC cycle the following January after passing the subspecialty certifying examination.

## THE MOC PROCESS: GENERAL INFORMATION

The ABOG MOC program is a continuing professional development process to ensure that ABOG-certified physicians maintain a high level of knowledge, judgment, and skills in Obstetrics, Gynecology, and Women's Health throughout their careers.

The goals of the MOC program are:

1. to promote professional standards,
2. to advance scientific knowledge by supporting lifelong learning, and
3. to foster improvements in Health and Health Care.

These goals are achieved through the 4-part MOC process. They include:

- I. Professionalism & Professional Standing
- II. Lifelong Learning & Self-assessment
- III. Assessment of Knowledge, Judgment & Skills
- IV. Practice Improvement

The MOC program is designed over a 6-year cycle. However, diplomates will complete requirements annually. After completion of one 6-year cycle, the process restarts the next year.

Some MOC requirements are still evolving. It is important that the Diplomate read the *Subspecialty MOC Bulletin* each year.

### MOC Application Requirements

Physicians must apply to participate in the MOC process each year. The application is available via the ABOG portal at [www.abog.org](http://www.abog.org).

Applications for the 2024 MOC process will be accepted starting in January 2024 and must be submitted with the correct fee no later than October 15, 2024. Failure to submit a completed application by this date will result in loss of certification.

Physicians who apply for the MOC process must attest that they agree to adhere to all ABOG Articles of Incorporation, Rules, Bulletins, Policies, Regulations, and other qualifications, as may be amended or supplemented.

Falsification of data submitted to ABOG or evidence of other egregious ethical, moral, or professional misbehavior may result in deferral of a physician's application to MOC



for at least 3 years. Such physicians will lose certification during this deferral period and must apply for the Re-Entry Process to reinstate board certification.

Each MOC applicant must meet all of the following requirements to participate in the MOC process:

1. Hold an active, unrestricted license to practice medicine in any and all states or territories of the United States, District of Columbia, or Province of Canada in which the physician holds a current medical license.
2. Hold unsupervised, unrestricted hospital privileges in each hospital in which patient care has been conducted since his/her last application.
3. Represent their Board certification and MOC status in a professional manner.

Each MOC applicant must attest online that since his/her last MOC Application there have been no:

- a. disciplinary or non-disciplinary actions taken by or agreements with a state medical board including, but not limited to reprimands, warnings, admonishments, restrictions, terms, limitations, conditions, suspensions, probations, surrenders, denials of renewal or revocations on any medical license held in any state or territory of the United States, District of Columbia, or a province of Canada;
- b. charges, pleas, convictions, indictments, or deferred dispositions for any misdemeanor or felony;
- c. controlled substance, drug, prescription drug, or alcohol-related offenses; or
- d. limitations, restrictions, suspensions, revocations, surrenders, resignations while under investigation, denials of renewal or loss of privileges or negative actions taken by a hospital, medical facility, or healthcare organization.

Each MOC applicant must also attest online that since his/her last MOC Application there has been no:

- a. disciplinary or non-disciplinary actions taken by or agreements with an institution or other government agency including, but not limited to, Medicare/Medicaid exclusion, DEA registration, federal healthcare program exclusion due to healthcare fraud, or controlled substance license violation;
- b. mental or physical conditions that impairs his/her judgment or that would otherwise adversely affect his/her ability to practice medicine in a competent, ethical, and professional manner;

- c. monitoring by a state medical licensing board mandated physician health program (PHP); and
- d. proctoring program mandated by a hospital other than a requirement to obtain new privileges

Applicants unable to attest to these statements online may not be approved to participate in the MOC process.

Applicants must submit a written explanation if they answer “YES” to any of the above professionalism, professional conduct, and professional standing questions.

Applicants must also submit a written explanation of any monitoring by a state medical licensing board mandated physician health program (PHP) since the last MOC application to ABOG. The physician must supply ABOG with a statement from the PHP Coordinator on his/her compliance with the monitoring program, if there are any restrictions to his/her practice, the date his/her program began, and the duration of his/her program. According to the Federation of State PHPs, any HIPAA or other required consent forms will be asked of the PHP Coordinator/monitoring program and not of ABOG. It is not necessary to have a HIPAA or other required release via ABOG.

ABOG will review the material to determine whether the physician will be allowed to participate in the MOC process. In most cases, ABOG will require the applicant to clear any and all restrictions and/or conditions on their medical license or practice of medicine before participation in the MOC process will be allowed.

### **Applicants Not Eligible to Participate in MOC**

Physicians who fail to meet the MOC requirements are ineligible to participate in the MOC process and will lose their ABOG certification upon expiration. To reinstate ABOG certification, they must apply to regain certification through the Re-Entry Process (See Expired Certificates). Documentation that the cause for the initial disapproval has been resolved, dismissed, or expired must be submitted with the application for re-entry.

A physician not admitted to the MOC process may appeal the decision by writing to the ABOG Executive Director within 90 days of notification of the action that is being appealed. The letter must set forth in detail the specific grounds on which the appeal is based. If it is determined by the Executive Director that the complaint is not an appealable issue, the appellant shall be notified by Certified Mail within 30 working days. If the Executive Director determines that the appeal does involve an appealable issue, the Appellant will be notified by Certified Mail within 30 working days. The process for consideration of the appeal is outlined in the ABOG Policy for Appeals.

If the physician's certification expires during the appeal process, that physician will hold an expired certificate and must pass the re-entry examination to reinstate certification. If the appeal is successful, Diplomate status will be reinstated, and the Diplomate must complete any incomplete yearly MOC requirements.

## **PART I: PROFESSIONALISM, PROFESSIONAL CONDUCT, AND PROFESSIONAL STANDING**

ABOG was founded to promote and maintain the highest standards of care in women's health. Board certification by ABOG denotes that Diplomates have demonstrated a commitment to patients' best interests, professional behavior, and adherence to certification requirements. Our accountability is both to our profession and to the communities we serve.

A physician's professionalism, professional conduct, and professional standing contribute to better patient care and improved medical practice by helping to assure the public that Diplomates exhibit professionalism in their medical practice. This includes:

1. acting in patients' best interests;
2. behaving professionally with patients, families, and colleagues across health professions;
3. taking appropriate care of themselves; and
4. representing their Board certification and MOC status in a professional manner.

Each physician must maintain a good moral and ethical character and an untarnished professional reputation. The method of demonstrating professionalism and professional standing is different for practice settings.

ABOG requires an active, unrestricted license in any and all states or territories of the United States, District of Columbia, or province of Canada in which a Diplomate is licensed as one measure of professionalism and professional standing. ABOG will query each state licensing board through the Federation of State Medical Boards (FSMB) for lists of physicians who hold active licenses. In addition, ABOG is informed through the American Board of Medical Specialties (ABMS) and other appropriate sources about any medical board actions that are taken against Diplomates' licenses to practice. Diplomates may still participate in MOC under an Administrative license depending on their specific state requirements and regulations. Review and approval from the ABOG Credentials Subcommittee is required to participate in MOC.

ABOG requires documented evidence concerning the applicant's professional standing, moral and ethical character, and hospital privileges (if applicable). This evidence may be collected by ABOG confidentially from administrative officers of organizations and hospitals where the physician is known and practices, from state and local medical boards, from medical societies, and from other appropriate sources of information.

ABOG may, at its discretion, allow a physician practicing medicine exclusively outside the United States, its territories, District of Columbia, or Canada to be certified or maintain certification without a full and unrestricted license in at least one jurisdiction in the United States, its territories, District of Columbia, or Canada if all of the following requirements are met:

- a. The physician has complied with all legal and regulatory requirements governing the practice of medicine in the country where the physician is practicing and has an unrestricted license to practice medicine in that country; and
- b. Any prior license to practice medicine in the United States, its territories, District of Columbia, or Canada has not been revoked or suspended, voluntarily surrendered, or allowed to expire to avoid disciplinary action(s).

If the applicant has had privileges restricted, suspended, placed on probation, surrendered or revoked, or has had any negative action taken by a hospital, medical facility, or healthcare organization, that physician will not be allowed to participate in the MOC process until all such restrictions are removed. Conditions placed on hospital privileges are considered to be restrictions of practice.

ABOG will review the material to determine whether the physician will be allowed to participate in the MOC process. In most cases, ABOG will require the applicant to clear any and all restrictions and/or conditions in the hospital practice before participation in the MOC process will be allowed.

If a physician has resigned from a hospital staff or other healthcare organization, including all membership organizations, while under investigation for ethical, moral, professional, or other alleged misbehavior or substandard patient care, a letter from that hospital or other organization stating that they are no longer pursuing the investigation of the physician must accompany the MOC application. The application will not be approved until and unless such documentation is received from the healthcare organization. If the information is not received by October 15, 2024, regardless of the reason for non-receipt, the physician will not participate in the MOC process and will lose Board certification on December 31, 2024.

Physicians with medical licenses on probation for a specified length of time may request or be assigned to participate in the MOC process in a probationary certification status if

the reason for probation is not associated with a criminal conviction, plea, or deferred disposition. The ABOG Credentials Subcommittee will review each request or situation. The decision of the committee is final and cannot be appealed. Physicians requiring more information about the probationary certification status should contact the ABOG MOC department.

It is each Diplomate's responsibility to promptly inform ABOG within 60 days of any and all actions against a medical license, hospital or other privileges, and credentials, including having their practice monitored.

### **Physicians with hospital staff membership**

If a physician has unsupervised hospital privileges, those privileges must be unrestricted in each hospital in which patient care has been conducted since his/her last MOC application. Physicians who must have their practice monitored in Focused Professional Practice Evaluation (FPPE) identified by Ongoing Professional Practice Evaluations (OPPE) processes will be reviewed by ABOG to determine if the required monitoring or proctoring represents restrictions to clinical practice. If requested by ABOG, the physician must sign a release-of-information form. This allows ABOG to make confidential inquiries to any hospital; other medical facility; other healthcare organization (including membership organizations); physicians, nurses, trainees; and patients, as needed, to document that the physician fulfills all moral and ethical requirements.

### **Clinically active physicians without medical staff membership**

In lieu of hospital privileges, an attestation form must be completed once per 6-year MOC cycle. The attestation form must be signed by another ABOG Diplomate in good standing and cannot be signed by a spouse or family member.

### **Clinically inactive physicians**

If a physician is not actively involved in the clinical practice of medicine but chooses to participate in the MOC process (e.g., Dean, hospital administrator, health plan administrator, researcher, or sabbatical), another ABOG Diplomate in good standing, excluding a spouse or other family member, must attest in a letter once per 6-year MOC cycle that the applicant is of good moral and ethical character and that the applicant has elected not to have a clinical practice. Such individuals will continue to be board-certified physicians, but their certification status will indicate that they are not in clinical practice. If the physician returns to clinical practice, s/he must submit written notification to ABOG.

## Physicians in international practice settings

Once per 6-year MOC cycle, physicians practicing in a country other than the United States and its territories, District of Columbia, or Canada must submit a letter with the application from a responsible senior official in the hospital or clinical setting where the applicant practices. The letter must attest that they have independent, unsupervised privileges for the practice of Obstetrics and Gynecology and that the physician's practice of medicine meets all local standards.

## PART II: LIFELONG LEARNING AND SELF-ASSESSMENT

The Lifelong Learning and Self-Assessment component of MOC is rooted in lifelong learning and contributes to better patient care by requiring ongoing participation in high-quality learning activities that assess current knowledge in Obstetrics and Gynecology and its subspecialties. MOC Part II consists of article-based assessments from peer-reviewed literature on clinically relevant patient-management information, best-practice guidelines, and important research and studies.

Annually, ABOG delivers approximately 90 article options to Diplomates' ABOG portal. These articles are usually released in January, May, and August (though some articles may appear at other times during the year). Over the MOC year, Diplomates must select 15 articles, read them, and answer the corresponding assessment questions.

Each article has eight corresponding assessment questions (for a required total of 120 questions from a Diplomate's 15 articles) and all of them must be answered. If a question is initially answered incorrectly, feedback will be given, and a Diplomate will have a second chance to answer the question. To successfully complete MOC, Diplomates must score 80% or higher (96 or more correct out of 120) on their assessment questions to maintain certification. Those who score under 80% will have to take and pass the MOC Re-Entry Exam the following year to regain their certification. Diplomates who score 86% or above, cumulatively, on their article-based assessments during their MOC cycle Years 1-5 are credited for the MOC Part III Exam, administered in Year 6. (For more information, see [MOC Performance Pathway](#) section).

All article-based assessments must be completed by November 15, 2024. Refer to [Appendix B](#) for an outline of annual requirements.

For **Subspecialist** Diplomates, the annual Part II reading assignments are:

- a. Read 10 articles (and answer corresponding questions) in the Diplomate's specific subspecialty article category.
- b. Read 1 article (and answer corresponding questions) in the health equity and patient safety category.
- c. Read 4 articles (and answer corresponding questions) in general obstetrics, gynecology, office practice, pediatric and adolescent gynecology, minimally invasive gynecologic surgery, the other five subspecialties, or any of the other available categories (for example, emerging topics). These can be chosen from any article category in any combination.

For Diplomates holding **two subspecialist certificates**, the annual Part II reading assignments are:

- a. Read 5 articles (and answer corresponding questions) in the Diplomate's first subspecialty article category.
- b. Read 5 articles (and answer corresponding questions) in the Diplomate's second subspecialty article category.
- c. Read 1 article (and answer corresponding questions) in the health equity and patient safety category.
- d. Read 4 articles (and answer corresponding questions) in general obstetrics, gynecology, office practice, pediatric and adolescent gynecology, minimally invasive gynecologic surgery, the other four subspecialties, or any of the other available categories (for example, emerging topics). These can be chosen from any article category in any combination.

Diplomates are responsible for obtaining copies of the articles, reading them, and answering the questions accompanying the articles. ABOG strives to provide open access to as many articles as possible. However, ABOG does not own the content and it is up to the discretion of the content owners or publishers to determine whether they offer their articles for free or charge an access fee. Diplomates who are interested in accessing fee-based articles for MOC are encouraged to contact their institutional or medical libraries.

### **Article Selection Limits to Meet MOC Requirements**

- 15 articles must be selected, and 8 corresponding questions answered per article to complete MOC Part II requirements. A Diplomate is limited to accessing the questions to the first 15 articles he or she selects.
- A Diplomate may read any additional MOC articles at his or her convenience. However, a Diplomate can only access questions for 15 articles.
- Once a Diplomate has submitted answers to each of the 8 questions for 15 articles, he or she will be unable to access additional questions unless additional CME credits are purchased.

### **Answer Submission Limits and Performance Feedback**

- Diplomates will receive immediate feedback after answers are submitted to article questions.
- After viewing any incorrect answers, Diplomates have one additional opportunity to correct and submit answers.



- Only the initial answers submitted will contribute to the Performance Pathway. The second (and final) submitted answers will be used to determine if Diplomates meet the annual MOC Part II requirement.

### User Authentication

- For enhanced security, user-authentication questions may appear randomly when submitting assessment question answers. Diplomates should be prepared to answer questions based on personal biodata.
- If an authentication question appears, a Diplomate will need to answer it correctly within 30 seconds before they can submit answers for that article.
- Failure to answer a user-authentication question correctly will prevent a Diplomate from submitting questions for that specific article.

### Extra CME Credits

At the time of MOC application (or after completion of the initial 15 article-based assessments and obtaining 25 *AMA PRA Category 1 Credits™*), Diplomates can purchase an additional 10 *AMA PRA Category 1 Credits™* for a \$60 fee. Diplomates who purchase extra CME credits will read 8 articles and answer 64 questions. These articles may be selected from any article category in any combination after completing the initial 15 article-based assessments.

At least 80% of the article-based assessment questions must be correct and be submitted by the November 15, 2024, deadline to receive additional CME credits. (See [MOC Deadlines & Fees](#).) Diplomates should be aware that completing the additional articles may entail additional fees to access some of the articles from the journals.

Answering extra CME article questions does not count toward the Performance Pathway eligibility threshold of 86% or the 80% threshold to meet the MOC Part II requirement.

### Ultrasound Credit Articles

Some of the available Part II articles have been approved by the American Institute of Ultrasound in Medicine (AIUM) for credit toward their continuing education requirements. These articles are denoted with an “Ultrasound” tag in the article list on a Diplomate’s ABOG portal. Diplomates who would like to receive ultrasound credit should contact AIUM ([membership@aium.org](mailto:membership@aium.org)) for more details.

## **PART III: ASSESSMENT OF KNOWLEDGE, JUDGMENT & SKILLS**

Assessment of Knowledge, Judgment and Skills builds upon and links to the continuous learning and self-assessment requirements of MOC Part II. These standards contribute to better patient care by incorporating an external objective assessment to provide assurance that there has been the necessary commitment to lifelong learning and to remain current in core content of Obstetrics and Gynecology and its subspecialties. The MOC Part III Assessment of Knowledge, Judgment and Skills is a secure, computer-based examination and is referred to as the MOC Part III Exam.

Diplomates must pass the MOC Part III Exam in Year 6 of each MOC cycle. The exam is administered by Pearson VUE Testing Center and will be available most days except Sundays and holidays.

### **MOC Performance Pathway**

Diplomates in MOC Year 6 who are eligible to participate in the MOC Performance Pathway must have a full Diplomate certification status; have answered at least 86% or more of the Part II article-based assessment questions correctly (on first submission responses) in MOC Years 1-5 of this MOC cycle; and have unrestricted licenses to practice. These Diplomates will be offered a choice to either receive credit for meeting the MOC Part III Exam requirement or to take the exam.

Year 6 Diplomates who are not eligible for the Performance Pathway must apply for the required MOC Part III Exam no later than October 15, 2024, and pass the examination no later than November 15, 2024.

Diplomates will be ineligible to participate in the MOC Performance Pathway if they have any of the following:

1. Probationary Diplomate certification status;
2. Current state board disciplinary actions on their medical license, such as revocations, suspensions, probations, denials of renewal, surrenders, restrictions, conditions; or
3. Felony criminal indictments, pleas, or convictions; or deferred dispositions.

### **Diplomates Taking the MOC Part III Exam**

When Diplomates in Year 6 apply for the MOC process, they will be notified if they are eligible to participate in the Performance Pathway. Those who do not qualify, or those who elect not to participate in the Performance Pathway, must pass the MOC Part III Exam by November 15, 2024. Those Diplomates must pay \$200 to cover the administrative cost of the MOC Part III Exam (in addition to paying the test center fee).

This cost is exclusive of the annual \$315 fee to participate in the subspecialty MOC process.

When a Diplomate's application has been approved, information will be sent by email explaining the process to schedule a test at a Pearson VUE test center. Reservations at each test center are scheduled on a first-come, first-served basis. Physicians are encouraged to schedule their MOC Part III Exam as soon as possible after receiving the notice of approval. A practice test is available on the ABOG portal. To access it, click on the Performance Pathway graphic.

The structure of the MOC Part III Exam can be found in [Appendix A](#). The ABOG Diplomate Disability policy is in [Appendix C](#). See [Appendix D](#) for information on Diplomates who are lactating.

If a Diplomate does not pass the MOC Part III Exam, it may be retaken up to 4 more times during the MOC year. The last day a repeat exam can be taken is November 15, 2024. The exam fee covers the costs of all repeat exams.

If a Diplomate fails to pass the MOC Part III Exam by November 15, 2024, his or her certificate will expire. Diplomates who wish to regain certification must apply through the [Re-Entry Process](#) to reinstate their Board certification(s).

In addition to passing the MOC Part III Exam, Diplomates in MOC Year 6 must also complete all annual MOC requirements.

## PART IV: PRACTICE IMPROVEMENT

Practice Improvement contributes to improved patient care through ongoing assessment and improvement in the quality of care in practices, hospitals, health systems, and/or community settings. This may include activities that result in improved patient or population health outcomes, improved access to health care, improved patient experience (including patient satisfaction), and increased value in the health care system.

Diplomates must choose one activity most relevant to their own practice and practice setting. Diplomates must participate in one of the available Improvement in Medical Practice activities annually in MOC Years 1-6. Options that are available include:

1. ABOG Practice Improvement Modules
2. ABOG-approved Quality Improvement (QI) Efforts
3. ABOG-approved Simulation Courses
4. ABMS MOC Portfolio Program
5. Quality Improvement (QI) Publications

### Practice Improvement Modules

ABOG Practice Improvement Modules can be accessed through the ABOG website. Diplomates may select a topic from a list of available modules appropriate to their practice.

Diplomates selecting a module for their MOC Part IV activity must read the module and answer the initial set of questions about patient charts or policy. Diplomates must also answer the follow-up set of questions available in their Physician Portal after 30 days.

There are two steps to complete a module:

- 1. Start:**  
Read the evidence-based module, review up to ten of the Diplomate's patient records, and answer pertinent questions. Some topics involve policy review instead of patient record review.
- 2. Complete:**  
Diplomates will receive an email from ABOG 30 days later to complete a set of reflection questions regarding the module.

## ABOG-approved Quality Improvement Efforts

The ABOG will consider structured QI projects in Obstetrics and Gynecology for MOC Part IV credit. These projects must demonstrate improvement in care and be based on accepted improvement science and methodology. Newly developed QI projects from organizations with a history of successful quality improvement projects are also eligible for approval.

### *Application Process for QI Efforts*

1. **Apply:**

Apply before October 15, 2024, to the MOC Department via the online application system. The application is accessed via the Part IV section of the ABOG portal. Application requirements are found below.

2. **Review Process:**

ABOG staff will review the application within two weeks. During the review period, applicants may be asked for clarification.

3. **Report Participants:**

The applicant will submit a list of participants by November 12, 2024, to ensure processing before the MOC deadline on November 15, 2024. Participants should be submitted within the online application system.

Quality Improvement efforts in Obstetrics and Gynecology that qualify for MOC Part IV credit must meet the following standards:

1. Have project leadership and management capable of ensuring adherence to the participation criteria. This means that the project must track who is participating, their dates of participation, and their role with respect to the definition of meaningful participation.
2. Address care the physician can influence in one or more of the 6 Institute of Medicine quality dimensions (safety, effectiveness, timeliness, equity, efficiency, and/or patient-centeredness).
3. Have a specific, measurable, specialty-relevant, and time-appropriate aim for improvement.
4. Use appropriate, relevant, and evidence-based performance measures that include measurement related to patient care at the appropriate unit of analysis (physician, clinic, care team, etc.).
5. Include appropriate interventions to be tested for improvement.

6. Include appropriate prospective and repetitive data collection and reporting of performance data to support effective assessment of the impact of the interventions over 2 or more improvement cycles.
7. Represent an attempt at translation or implementation of an improvement into routine care or the dissemination or spread of an existing improvement into practice.
8. Possess sufficient and appropriate resources to support the successful conclusion of the activity without introducing a conflict of interest.

To earn MOC Part IV credit for participating in approved QI efforts, physicians must:

1. Attest that they have meaningfully participated in the approved QI effort;
2. Have their attestation cosigned or reported to ABOG by the project leader; and
3. Reflect on the QI effort.

Physician participation in an approved QI effort is considered meaningful when:

1. The QI effort is intended to provide clear benefit to the physician's patients and is directly related to the physician's clinical practice of Obstetrics and Gynecology.
2. The physician is actively involved in the QI effort, including, at a minimum, working with care team members to plan and implement interventions, interpreting performance data to assess the impact of the interventions, and making appropriate course corrections in the improvement effort.
3. The physician can reflect on the activity, describing the change that was performed in their practice, and how it affected the way care is delivered.

Physicians can claim MOC Part IV credit each time they meet meaningful participation requirements as long as they are implementing new interventions.

### **ABOG-approved Simulation Courses**

ABOG recognizes simulation training as an innovative approach to assess a physician's technical, clinical, and teamwork skills in obstetrics, gynecology, and office practice. Diplomates may participate in CME that involves simulation activities provided that the CME is approved in advance by the MOC Department of ABOG. After reviewing the CME content and simulation activity, ABOG will approve CME that meets MOC standards (has relevant and meaningful simulation and self-assessment).

The simulation activity must provide advanced, hands-on, clinical education experiences for participants from a wide scope of practices. It may integrate task-trainers, low- and high-fidelity simulators, computer-based simulations, and actual medical devices to provide optimal learning opportunities. Simulations should be peer-to-peer experiences although training fellows and/or residents may be approved.

### *Application Process for Simulation Courses*

**1. Apply:**

Apply before October 15, 2024, to the MOC Department via the online application system. The application is accessed via the Part IV section of the ABOG portal. Application requirements are found below.

**2. Review Process:**

ABOG staff will review the application within two weeks. During the review period, applicants may be asked for clarification.

**3. Report Participants:**

The applicant will submit a list of participants by November 12, 2024, to ensure processing before the MOC deadline on November 15, 2024. Participants should be submitted within the online application system.

To ensure high-quality learning experiences that meet the simulation requirements of MOC, ABOG has established standards and will approve activities and CME courses that meet those standards. The following core curricular components for simulation courses must be present:

- A minimum of 4 (four) hours of total course instruction,
- Active participation in realistic simulation procedures or scenarios,
- Management of relevant patient-care scenarios with an emphasis on teamwork and communication, if appropriate,
- Assessment of technical skills, if appropriate,
- Feedback or post-scenario debriefing, if appropriate,
- One instructor must be an ABOG Diplomate in good standing,
- Possess sufficient and appropriate resources to support the successful conclusion of the activity without introducing a conflict of interest,
- The instructor-to-student ratio must be no greater than 1:5.

To receive MOC Part IV credit, the Diplomate must actively participate in the entire simulation course and complete a course evaluation. After the activity, the physician will receive email instructions to reflect on the simulation and to answer web-based questions about the impact on their practice.

ABOG MOC Part IV credit is independent of CME credit. Some activities and courses may provide CME credit. Diplomates should contact the site or sponsor for specific CME information about their courses.

### ABMS MOC Portfolio Program

Many physicians already participate in quality improvement (QI) efforts in their local practice. The American Board of Medical Specialties (ABMS) MOC Portfolio Program is an alternative pathway for healthcare organizations that support physician involvement in quality improvement and MOC to allow their physicians' quality improvement efforts to be approved for ABOG MOC Part IV credit.

Most Portfolio Program QI activities are sponsored by the institution or hospital Quality Improvement departments. QI projects may be multi-disciplinary or specialty-specific in Obstetrics and Gynecology. The projects must meet Portfolio Program standards and be approved by ABOG through the program. Diplomates who meaningfully participate in the QI efforts will meet Part IV requirements for the 2023 MOC year. An individual project participation and MOC credit may extend for up to 2 MOC years. Longitudinal projects may be renewed for longer QI activities.

To learn more about the ABMS Portfolio Program, visit: <https://www.abms.org/initiatives/abms-portfolio-program/>.

### Quality Improvement Publications, Presentations, and Posters

ABOG awards MOC Part IV credit for authorship or co-authorship of published articles relating to QI activities in healthcare. To be considered for MOC Part IV credit, articles must:

1. Be published in a peer-reviewed journal.
2. Adhere to [SQUIRE guidelines](#) for published QI articles.
3. Be published during the Diplomate's current MOC cycle.

ABOG also recognizes authorship and co-authorship of peer-reviewed oral presentations and posters presented at national scientific meetings that describe the implementation and outcomes of a QI project. The project's ultimate success will not affect the MOC Part IV credit, but it should address a recognized gap in care, be prospective, and involve more than one QI cycle. To be considered for MOC Part IV credit, abstracts or posters must include:

1. The specific aim of the QI project.



2. The process for improvement.
3. The progress toward or results of achieving the specific aim.
4. A discussion of whether the aim was achieved, factors that affected success, and next steps.

#### *Application Process for QI Publications, Presentations, and Posters*

1. **Apply:**  
Apply before October 15, 2024, to the MOC Department via the online application system. The application can be accessed via the MOC Part IV section of the ABOG portal. Applicant must include a copy of the publication, presentation or poster being submitted for consideration.
2. **Review Process:**  
ABOG staff will review the application within two weeks. During the review period, applicants may be asked for clarification.
3. **Credit for QI publications, posters, and presentations:**  
Applicants will receive credit upon approval; co-authors may also request credit by emailing [MOC@abog.org](mailto:MOC@abog.org). Co-authors do not need to submit an additional application.

#### *Clinical Research*

Clinical research is valuable but different from QI. Typically, the following will not earn MOC Part IV credit:

- Research publications, including comparative trials, before-and-after studies, and other studies intended to answer a clinical or scientific question.
- Descriptions of studies to assess whether an intervention is effective.
- Quality-measure development.
- Retrospective studies of administrative claims data.

## **DIPLOMATES IN NON-CLINICAL POSITIONS**

Diplomates in non-clinical positions, (e.g., Deans, administrators, researchers, individuals on sabbaticals, etc.) may request to maintain certification by completion of

MOC Parts I, II, III, and IV. ABOG must be notified of the Diplomate's status and approve any requests for exemption from Part IV requirements.

Diplomates with exemptions from Part IV requirements may be designated as ABOG-certified but currently not in the active practice of medicine. If the Diplomate returns to active clinical practice, ABOG may be petitioned to remove the designation.

Diplomates with exemptions from Part IV requirements are still required to complete all other MOC requirements by November 15, 2024.

## **DIPLOMATES WHO ARE TEMPORARILY CLINICALLY INACTIVE OR RETIRED FROM CLINICAL PRACTICE**

### **Diplomates with non-time-limited specialty certification**

A Diplomate with a non-time-limited specialty certificate who retires from active clinical practice must notify ABOG of this transition. The Diplomate will then be listed as an inactive Board-certified physician who will be designated as not required to meet MOC requirements.

An inactive, retired Diplomate may request to participate in MOC. Such physicians must pay the appropriate MOC fees and complete MOC Parts I, II, and III each year, as appropriate for a 6-year MOC cycle. Such diplomates will be designated as participating in MOC. In MOC Year 6, these diplomates will be required to pass the MOC Part III Examination if they are not eligible to participate in the MOC Performance Pathway.

Inactive, retired physicians who only wish to participate in MOC Part II to gain CME credit hours must contact ABOG for approval. Participation in Part II alone will not meet the criteria for designation as meeting MOC requirements.

### **Diplomates with time-limited specialty certification**

A Diplomate who is clinically inactive temporarily or takes leave from their practice for medical, family, or personal reasons may request to participate in MOC without hospital privileges or an outpatient practice. Such physicians must pay the appropriate MOC fees, request approval for an exemption from MOC Part IV, and complete MOC Parts I, II, and III each year. These diplomates must have an active unrestricted medical license to practice in at least one state. They will be designated as participating in MOC. Failure to complete the yearly MOC requirements during the temporary inactivity will result in expiration of certification. When these Diplomates re-enter clinical practice, they must notify ABOG, meet the MOC eligibility requirements, and resume participation in MOC Part IV.

A Diplomate with a time-limited specialty certificate who retires from clinical practice must notify ABOG of this transition. The Diplomate will then be listed as an inactive, retired physician. Such physicians will be designated as not required to participate in MOC. Failure to notify ABOG at retirement and/or failure to continue the MOC process will result in expiration of certification.

All inactive physicians who re-enter practice must notify ABOG of that transition. Inactive physicians with prior time-limited certification who have not participated in MOC will be required to regain certification through the Re-Entry Process. That physician will then be eligible to re-enter the process in MOC Year 1.

A retired Diplomate may participate in MOC. Such physicians must pay the appropriate MOC fees and complete MOC Parts I, II, and III each year as appropriate for a 6-year MOC cycle. These Diplomates must have an active, unrestricted medical license to practice in at least one state. Such Diplomates will be designated as meeting MOC requirements. In MOC Year 6, Diplomates in MOC will be required to pass the MOC Part III Exam or may be eligible to participate in the MOC Performance Pathway.

### **CME Only**

Inactive, retired physicians who wish to participate in Part II to gain CME credit hours must contact ABOG for approval. Participation in Part II alone will not meet the criteria for designation as meeting MOC requirements.

## MOC DATES, DEADLINES, AND FEES

### Dates and Deadlines

Application available	January 2024
Application deadline	October 15, 2024
MOC completion deadline	November 15, 2024

### Fees

The 2024 ABOG Subspecialty MOC fee is \$315.

### CME Options

Diplomates have **three CME options** to fulfill MOC requirements:

- Option 1\*:** If you are an ACOG member, you will earn 25 *AMA PRA Category 1 Credits*<sup>™</sup> from ACOG at no additional cost upon successful completion of all MOC Part II article-based assessment questions and up to 3 CME credits for completion of a MOC Part IV Practice Improvement module
- Option 2\*:** If you are not an ACOG member and desire CME, the \$390 payment for CMEs will be processed separately through the ACOG site as they are the CME provider. With this option, you will earn 25 *AMA PRA Category 1 Credits*<sup>™</sup> upon successful completion of all MOC Part II article-based assessment questions and up to 3 CME credits for completion of a Part IV Practice Improvement module.
- Option 3:** External CME Option - You must obtain 25 *AMA PRA Category 1 Credits*<sup>™</sup> in Obstetrics and Gynecology **on your own** in 2024 and submit proof of those credits to ABOG by November 15, 2024. You must also complete all MOC Part II article-based assessment questions and meet all requirements for the MOC year, but no CME credits from ACOG are earned for completion of MOC requirements.

\* This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of American College of Obstetricians and Gynecologists (ACOG) and the American Board of Obstetrics and Gynecology (ABOG). ACOG is accredited by the ACCME to provide continuing medical education for physicians.

## **Diplomates in Year 6 taking MOC Part III Exam**

The MOC Exam fee is \$200 and is in addition to the annual MOC fee of \$315 and the CME fees if non-ACOG Fellow desiring CME credit.

## **FAILURE TO COMPLETE MOC PROCESS AND LOSS OF BOARD CERTIFICATION**

A Diplomate with time-limited certification(s) who fails to apply for MOC or to successfully complete all of the requirements in any given MOC year will lose their Diplomate status. That is, they will no longer be Board-certified.

Diplomate status may be regained by completing the Re-Entry Process described below. However, during the interval between January 1 and the completion of the Re-Entry Process, the physician is not Board-certified and may not advertise or assert Diplomate status.

### **Re-Entry Process / Re-Establishment of Diplomate status**

A physician who loses Diplomate status by failure to complete the MOC process in any year must apply for, take, and pass a secure, computer-based Re-Entry Exam, unless their certificate has been expired for 6 years or more. The physician is also required to complete their MOC requirements the same year that certification is regained. There will be a combined fee for the re-entry process that includes the exam and MOC.

A physician holding a specialty certificate that has been expired for 6 years or more must complete the specialty written and oral examinations to re-establish their Diplomate status.

### **Expired Certificates**

The following section applies to previously certified physicians who have lost ABOG certification due to lack of participation in or failure to complete the MOC process. Such physicians are no longer Diplomates of ABOG and may not advertise or otherwise designate that they are ABOG certified. Any designation or advertisement of expired ABOG certification must accurately communicate the dates that the certification commenced and ended.

### **Certification Expired Fewer than 6 Years**

Physicians seeking to regain certification must pass a secure, computer-based Re-Entry Exam and then complete the MOC Year 1 requirements within the same year. Re-Entry Exams will be given January 2023 through June 30, 2023. All exams will be

administered by Pearson VUE Testing Center. Diplomates may take the Re-Entry Exam up to 3 times in a year to pass the exam. There is no additional charge for the additional exam retakes.

### ***Re-Entry Application Process***

Applications for the Re-Entry Exam will be available at [www.abog.org](http://www.abog.org) beginning in January 2024, but the physician must call the ABOG MOC Department at (214) 871-1619 for access to the online application. No application will be accepted after June 15, 2024. A non-refundable combined examination and MOC fee of \$815 must be paid at the time of application. No application will be processed without payment of the application fee and submission of all required documents.

### ***Testing Sites***

After his or her application has been approved and the appropriate fee has been paid, each applicant will be sent an email via the email address on file.

After the email is received, the candidate should contact Pearson VUE to schedule the exam. Candidates may choose remote online exam administration 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. Thus, there is no guarantee that a specific city site will be available. Applicants are encouraged to complete their application process as soon as possible.

### ***Re-Entry Certification Limits***

Candidates who successfully pass the Re-Entry Exam in 2024 will have their Diplomate status re-instated for the remainder of 2024 provided that the Diplomate enters the MOC process in 2024 and completes the requirements by November 15, 2024. Diplomate status will be renewed annually provided if MOC process is completed successfully each year.

### **Certification Expired for 6 Years or More**

Physicians holding a certificate expired for 6 years or more are not eligible to apply for the Re-Entry Exam. They may only re-establish Diplomate status by taking and passing the Specialty Qualifying and Specialty Certifying Examinations.

## MOC FOR PHYSICIANS WITH NON-TIME-LIMITED SPECIALTY ABOG CERTIFICATION

### General Information

Physicians who achieved specialty certification by ABOG prior to 1986 hold certificates that are non-time-limited. That is, their certificates do not expire. However, those physicians may elect to participate in some or all of the parts of the MOC process. Such participation does not change their certification status in any manner. The duration of their certification remains unlimited.

Diplomates holding non-time-limited specialty certificates who wish to participate in MOC must contact the ABOG MOC office for access. They may participate in MOC Parts I, II, III, and IV.

The Diplomate must submit the appropriate additional materials and pay the application fees. Please read the sections describing the application process in this *Bulletin* for those with time-limited certificates. The instructions for application and the fees are identical to those described for Diplomates with time-limited certification.

To be designated as participating in MOC, Diplomates must participate in all parts of MOC applicable to their practice. In most cases this will require participation in Parts I, II, III, and IV. In MOC Year 6, Diplomates in MOC will be required to pass the MOC Part III Exam. Diplomates with non-time-limited certification are eligible to participate in the MOC Performance Pathway.

Diplomates with non-time-limited certification who prefer to only participate in the MOC Part II Lifelong Learning and Self-Assessment to earn CME credit hours must contact ABOG for approval. Participation in Part II alone will not meet the criteria to be designated as meeting MOC requirements.

## APPENDIX A: MOC PART III ASSESSMENT OF KNOWLEDGE, JUDGMENT & SKILLS FOR DIPLOMATES WITH SUBSPECIALTY CERTIFICATION

### Examination Content and Grading

1. The subspecialty MOC Part III Exam is a secure, computer-based exam. It will be based on the subspecialty certification of the Diplomate. The examination will last 105 minutes and be administered by Pearson VUE Testing Center.
2. Each Diplomate will have the exam form based on their subspecialty.
  - Maternal-Fetal Medicine (50% MFM and 50% Obstetrics)
  - Gynecologic Oncology (50% Gyn Onc and 50% Gynecology)
  - Reproductive Endocrinology and Infertility (50% REI and 50% Office Practice)
  - Urogynecology and Reconstructive Pelvic Surgery (50% URPS and 50% Gynecology)
3. The questions will be multiple-choice, one-best-answer type and will be based on common clinical problems.
4. A Diplomate must answer a minimum of 75 of the 100 questions (75%) correctly to pass the MOC Part III Exam.
5. In most cases, Diplomates will receive their test result within 72 hours of completion of the exam.
6. ABOG cannot provide a copy of test questions that were answered incorrectly.
7. Each exam is graded independently of any prior exams. Answers or scores on prior exams cannot be applied to or graded as part of a repeat exam.

### MOC Part III Exam Blueprint

The Maternal-Fetal Medicine exam form is based on the blueprint for the:

- MFM Subspecialty Qualifying Examination which may be found by clicking [here](#) (refer to page 10 for the abbreviated version and Appendix E for a full list of topic areas).



- Obstetrical portion of the Specialty Qualifying Examination which may be found by clicking [here](#) (refer to page 13 for an abbreviated version and Appendix C for a full list of topic areas).

The Gynecologic Oncology exam form is based on the blueprint for the:

- Gynecologic Oncology Subspecialty Qualifying Examination which may be found by clicking [here](#) (refer to page 10 for the abbreviated version and in Appendix E for a full list of topic areas).
- Gynecology portion of the Specialty Qualifying Examination which may be found by clicking [here](#) (refer to page 12 for an abbreviated version and Appendix C for a full list of topic areas).

The Reproductive Endocrinology and Infertility exam form is based on the blueprint for the:

- REI Subspecialty Qualifying Examination which may be found by clicking [here](#) (refer to page 10 for the abbreviated version and in Appendix E for a full list of topic areas).
- Office Practice portion of the Specialty Qualifying Examination which may be found by clicking [here](#) (refer to page 12 for an abbreviated version and Appendix C for a full list of topic areas).

The Urogynecology and Reconstructive Pelvic Surgery exam form is based on the blueprint for the:

- URPS Subspecialty Qualifying Examination which may be found by clicking [here](#) (refer to page 10 for the abbreviated version and in Appendix E for a full list of topic areas).
- Gynecology portion of the Specialty Qualifying Examination which may be found by clicking [here](#) (refer to page 12 for an abbreviated version and Appendix C for a full list of topic areas).

## Fees

The fee for the secure, computer-based MOC exam is \$200. The fee must be paid at the time of MOC application.

If the exam is not passed, the physician may retake the exam up to 4 more times before November 15, 2024. There will be no additional charge each time the exam is taken in the same year.

## Practice Exam

Practice questions can be found in the ABOG portal. The questions are representative of the type of questions that will be asked on the actual exam but are not meant to be interpreted as the actual questions that will be on the exam.

## Study Materials

There is no sole source that will serve as the basis for all questions on the exam. Diplomates may want to be familiar with the material in the publications from the appropriate subspecialty societies and in current general textbooks in Obstetrics and Gynecology, Urogynecology and Reconstructive Pelvic Surgery, Gynecologic Oncology, Maternal-Fetal Medicine and Reproductive Endocrinology and Infertility.

## APPENDIX B: OUTLINE OF YEARLY SUBSPECIALTY MOC REQUIREMENTS

Single Subspecialty MOC Requirements				
Annual Application	Apply at <a href="http://www.abog.org">www.abog.org</a> and pay fees by <b>October 15, 2024</b> . Complete requirements by <b>November 15, 2024</b> .			
MOC Year	Part I: Professionalism & Professional Standing	Part II: Lifelong Learning & Self-Assessment	Part III: MOC Examination	Part IV: Practice Improvement
1-5	Update hospital privilege reappointment end date  Submit attestation form, if requested by ABOG	Read 10 Subspecialty, 4 Specialty, and 1 Health Equity and Patient Safety articles  Answer 120 questions	Not required	Complete one activity annually
6	Update hospital privilege reappointment end date  Submit attestation form, if requested by ABOG	Read 10 Subspecialty, 4 Specialty, and 1 Health Equity and Patient Safety articles  Answer 120 questions	If eligible for Performance Pathway, choose to participate and receive credit for the exam.  If ineligible for Performance Pathway or choose to take the exam, pass the computer-based exam.	Complete one activity annually

## Dual Subspecialty (Triple-Certified) MOC Requirements

Annual Application	Apply at <a href="http://www.abog.org">www.abog.org</a> and pay fees by <b>October 15, 2024</b> . Complete requirements by <b>November 15, 2024</b> .			
MOC Year	Part I: Professionalism & Professional Standing	Part II: Lifelong Learning & Assessment	Part III: MOC Examination	Part IV: Practice Improvement
1-5	<p>Update hospital privilege reappointment end date</p> <p>Submit attestation form, if requested by ABOG</p>	<p>Read 10 Subspecialty in either or both Subspecialties, 4 Specialty, and 1 Health Equity and Patient Safety articles</p> <p>Answer 120 questions</p>	Not required	Complete one activity annually
6	<p>Update hospital privilege reappointment end date</p> <p>Submit attestation form, if requested by ABOG</p>	<p>Read 10 Subspecialty in either or both Subspecialties, 4 Specialty, and 1 Health Equity and Patient Safety articles</p> <p>Answer 120 questions</p>	<p>If eligible for Performance Pathway, choose to participate and receive credit for the exam.</p> <p>If ineligible for Performance Pathway or choose to take the exam, pass the computer-based exam.</p>	Complete one activity annually

## APPENDIX C: DIPLOMATE 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. Diplomates must provide sufficient documentation to permit ABOG to verify the existence, nature, and extent of the disability no fewer than 90 days prior to the date of the MOC Part III Examination if special testing accommodations under the ADA are needed. Accommodations will only be considered with appropriate documentation. This deadline is necessary in order 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 provides a clear explanation of the functional impairment and a rationale for the requested accommodation.

No diplomate 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 diplomate from the MOC Part III 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 diplomate must provide sufficient documentation to permit the ABOG to verify the existence, nature, and extent of the disability no fewer than 90 days prior to the date of the examination. The documentation must specify the requirements or accommodations determined to be necessary to overcome or compensate for the disability. In addition, the diplomate 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 diplomate 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 diplomate fails to notify ABOG of a disability 90 days before the examination and fails to achieve a passing grade, that diplomate 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 diplomate claims that his/her examination results were adversely affected by illness, injury or other temporary physical impairment at the time of the examination, that diplomate may not appeal the results of the examination. However, if the diplomate provides sufficient evidence of such illness, injury or impairment, he/she shall be entitled to sit for the next regularly scheduled written examination but must pay a new application and examination fee.

## APPENDIX D: LACTATION

Diplomates who are lactating may request a 30-minute break and extension of their examination if they notify the ABOG office and schedule at a Pearson VUE Testing Center.

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 Diplomate will be able to schedule at their preferred testing center.