

Specialty Certification Standards During COVID-19 Pandemic Q&A

Webinar held on April 23, 2020

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GW – Dr. George Wendel

WL – Dr. Wilma Larsen

CA – Cariel Apodaca

GW: Good afternoon. My name is Dr. George Wendel. I'm the Executive Director at the American Board of Obstetrics and Gynecology and I'd like to welcome you to our afternoon session to talk about ABOG certification standards as they apply to residence and residency programs.

I want to take a brief moment to introduce Cariel Apodaca, who is our Manager of External Relations, who is also on the call, as well as Dr. Wilma Larsen, who is our Associate Executive Director for Examinations. I'd also like to acknowledge the hard work of Mary Johnson, the Manager of Examinations, and Rachel Crawford, one of our communications staff for putting this together.

We live in unprecedented times now and we are all dealing with competing goods about trying to have our personal lives, our professional lives, and taking care of our patients all within balance and this has exposed a lot of the challenges that we face, many of which change on a daily and weekly basis and I want to acknowledge the incredible work that Program Managers do in helping the program's faculty, colleagues, and residents and fellows through these challenging times.

It seems like a long time ago, but on 9/11 almost 20 years ago, I remember as a residency director seeing the world rocked by what was thought to be a terrorist attack that would change the world forever and alter everybody's training that occurred in many parts of the country and you all rose and helped people through those times and supported them and supported their programs and helped everybody finish their training on time and go ahead and get certified and become great docs.

I know that you'll do the same thing right now as you're helping your residents through these challenging times and you're really our voice of communication to them to translate our written policies and accommodations to them. We wanted to take time today to not present a lot of material, but to really address your concerns, your questions, and for you to let us know what did we get wrong, what's unclear, what have we left out, and what do we need to begin to do to help you prepare for the end of this academic year and for next academic year.

A lot of what we do changes on a daily basis. Everything we say seems like it's up to date based on the email we got yesterday informing us about certain things and so some of the things we'll say today may change in the future and we hope that we can give you today and an up-to-date picture of what are the accommodations we've been able to make and what do you think we need to make moving forward.

So with that, I think we'll go ahead and begin to answer questions. We will probably mute everybody's phone for this virtual meeting if you will and ask you to type your questions in the Q&A icon at the bottom of the screen, if you'll take your mouse down there and you should see a Q&A icon pop up and you can type your questions in there and we will take those questions as you pose them. We also received several questions that were sent to us before the meeting and we can begin with those while you're thinking about questions you'd like to pose to us.

The policy states that work at home days will count as clinical work. My 2020 and 2021 graduates are not all that concerned about their time at home. My 2022 and 2023 graduates are more concerned that this will not carry forward until they are registering for their board

exam. They're looking for assurance that this policy will carry forward until all affected residents have completed their Qualifying Exam.

GW: That's a great question, and we want to apologize that we have been focusing on the most immediate crises right now and we felt that those immediate crises were the current grads and so our policies talk about how they would apply to the 2021 graduates. I can assure you that whatever accommodation we make for the current PGY4s will also apply to every other resident in your program when they come up for graduation.

It's hard to know how that will affect their final training and how to put that in a document only for them for several years from now, but we will look to changing our communication to them to let them know that they can be reassured that they will get every accommodation that was afforded to this year's grads.

What will the guidelines be for collection of cases for the CE case list for current senior residents who will take the CE in 2021 or later? We were only able to find guidelines for 2021 CE takers. Specifically speaking, a current senior resident has been unable to collect enough GYN cases in her senior year due to COVID redeployment, will be entering an MFM fellowship during which she will be unable to collect supplemental GYN cases to achieve the required number for her list. She is concerned she will not be able to collect the required number of cases if they must be from her senior year of residency.

WL: So for anyone who is entering a fellowship that needs cases, and this really isn't COVID-19 related, this has always been our policy, if someone needs help with a case list because they can't provide it in in from their senior resident cases or from their current practice, they just need to contact us and ABOG does, in rare circumstances, supply case lists to those candidates who need one in one area. So, for your fellow who is going to enter the MFM fellowship, if she needed a GYN case list because she wasn't able to collect them in her senior year of residency due to COVID-19, then certainly we'd be happy to help her with that.

That's a that's a really important question that I'm sure is on a lot of people's minds as they are dealing with the virus, and we certainly appreciate you bringing that forward so people would understand that there is definitely help with that issue through ABOG.

She just needs to, she or anyone else would just need to contact the Exam Department at exams@abog.org.

GW: That situation is not uncommon for other subspecialties and other situations, so there are a variety of ways we can assist people who are unable to meet those case requirements, and certainly for the next exam, we will have a large amount of flexibility and adaptability in helping people.

Our goal is not that people are not able to take the test because they can't meet those kind of requirements due to the COVID-19 epidemic, and so we'll work with people as best we can to help them meet those needs.

Are there plans to postpone the certifying oral board examination? It seems like it may be safest to do so.

WL: I think that's an issue that's probably on a lot of people's minds as they are getting ready to finish their case collection for the CE and either have applied or may be planning to apply in the near future. At the current time, we are still planning to give the CE in November and December 2020 and in January 2021.

I think all of us realized that the current COVID-19 situation is very fluid. We are all hoping that everybody's going to be able to go back to work soon and that things will become a little bit more normal, but we also all realize that there are a lot of predictions that things may get worse again in the fall.

So, as Dr. Wendel said, our information is only as good as today because as the situation changes, we indeed may have to change things. But, our current plan is to proceed forward with the Certifying Exam this fall and winter as scheduled.

GW: I would just add we have had adequate capacity to offer the examination to all the candidates who will be interested or able to take that examination this year. We're certainly understanding that there may be situations personally and professionally that preclude moving forward with your certification, and we will make exceptions and extend the limit for eligibility for certification for people if they're not interested in taking the exam or unable to take the examination this fall and this winter. Our goal is not to penalize people in any way, shape, or form because of these things that are out of their control.

I would urge us to think carefully about how we talk about the exam to the candidates. Many of them are right now more vulnerable than they've ever been, and perhaps they may be thinking their cup is half-empty rather than half-full as far as their knowledge and abilities, and I would remind them that they're bright people, they've worked hard, they know their patients, they take good care of their patients, and that the passing rates on these exams are above 90% and that the likelihood is vast that they're going to pass those examinations if they take them this year.

Having said that, there are certainly reasons that any person would say I'm not ready to take the exam. I don't want to risk it, and I don't want to take the exam this year. We will do everything we can to get them scheduled for a future examination to allow them to continue to move forward.

Our goal is to help everybody in every way possible. There's nothing more important to us than then our candidates who want to be certified. They become our diplomates for the rest of their life, and the way we treat them during this process is going to leave an indelible memory on them, that we were with them during this crisis and did everything we could to help them. That's our goal and that's our pledge.

I'm sure the timing and written boards will be addressed, so can we discuss the Qualifying Exam?

WL: Our goal would be to have everyone who wants to take the Qualifying Exam in 2020 be able to do so. That being said, as I'm sure you all are aware, Pearson VUE has been closed. They are going to open up again on the 1st of May, but they will be opening up at 50% capacity, and that is likely to remain indefinitely through 2020.

As such, we're working to get a plan in place to allow the candidates who want to take the exam to take it. We've looked at every option that's out there that we can come up with, and our goal would be to put the candidates first, but to still maintain the integrity of the exam. As I'm sure you're aware, there are certain options that simply wouldn't allow us to do that, but even though we can't announce the specific details of what we're going to be putting in place, I hope that we'll be able to announce that within the next week or so, and rest assured that we're doing everything we can to try to allow every candidate to take the exam.

Those candidates that either aren't able to or choose not to in 2020, exactly the same as those who choose not to take the Certifying Exam this year, their eligibility will be extended by a year. We don't want to penalize anyone for things that are beyond their control as Dr. Wendel said.

GW: We appreciate that question particularly because it's the end of April, and we're talking about an exam that's at the end of June. In an ideal situation, we would be able to give an answer that would have been out earlier and more definitive about what are the options that we have.

The reality of the situation we're in is that the tests that we administer and put together are the easy part of the Qualifying Exam. The hard part that's out of our control is how our partners can deliver those exams in testing centers throughout the country. And to the extent that that's an issue that's out of our control and is changing based on local disease activity, it's hard to give people much concrete information, and I can assure you that we meet literally every day talking

about what are the options, where are we in getting a commitment from our testing centers for alternate dates, and we literally got an email from them five minutes before the call with some information about test accessibility and availability and it's a challenge.

There are a host of organizations that have spring exams and we're not unique. We're not even big in the exam world as far as testing goes, so we're working as hard as we can to make something available and get it out to the candidates that are wanting to take it as quickly as we can so they can make informed decisions about when they want to take that examination.

We'll be the first to apologize. This is not how we like to do business: communicating on a rolling basis, with such short notice. We're trying as best we can and as soon as we get information, we're converting it into decisions, and then can begin to implement it.

So as Dr. Larsen said, I hope there's information within the next few days or week that we can give some concrete information, but I think it's fair to say there will be an alternative to the tests at the end of June. We don't have the ability to control when that will be at this point.

That sound fair, Wilma?

WL: Yeah, that's unfortunately very fair.

Do the candidates know they can request to delay taking this year's Qualifying Exam?

GW: Yes, I believe it's in our one of our original policies that came out, and it was embedded within the questions and answers in the original policy that came out on March 13th. We are planning to take much of the information we hear from you on this call and reach out to the Junior Fellows, utilizing some of the ACOG connections, to have a direct communication with people.

We'll also be preparing written information that will come from the Examination Department about what those alternate pathways are to begin the Qualifying Exam. We've had so many different messages from our exam partner about things that are evolving on a weekly basis,

that we want to get the message right and get it out so that people can make decisions based on that and not have to worry that will change in a week or two, so it's a really important concept about when are we going to let them know and what are we going to tell them, and at this point I think all we can say is we're going to promise to get it out as soon as we can.

We hope that there won't be any financial penalty to people who want to put things off. We want to be as accountable and transparent as we can as this is going on.

My class was curious as to whether the 2019 ASCCP or 2012 guidelines over cervical cancer screening and management algorithms will be tested.

WL: Thanks for asking that question, and the answer is yes. Basically, when we put together the exam, we look at every question to make sure that the answers to the questions are correct, we administer the exam, and then following the exam, we look at how the questions perform, and if any of them perform in a manner that's unexpected, we go back and look again to make sure that we haven't missed something. Some questions were written based on the 2012 guidelines, but we make sure that those questions are still correct based on 2019.

We definitely test the latest information and that would mean the 2019 guidelines would certainly be tested, but again we have a very rigorous process to make sure that the information we're testing is correct and the answers that we've keyed are correct as well.

GW: Both the materials should be up-to-date and the answer should be up-to-date I think is that the message to reply back. We have ways to assess the performance of the questions that would indicate that perhaps there are two correct answers: an old guideline and a new guideline. If it appears that those questions don't meet performance standards that are standard for any examination that we give, we scrutinize those and make a decision to not count the question or to do something else.

I read on your website that you will be extending the deadline for our PGY3 residents to get certified in FLS. What is the new deadline, and what exactly do they need to do to be granted an extension?

GW: We did put out some information about the current graduates and the FLS standard and that same information will apply to other residents in the program. We do have a policy that's coming out on that. We didn't put it out because we were waiting on the FLS testing centers to begin to make an announcement about when they might open again because they all shut down across the country and we're hoping they begin to reopen, probably in a staggered fashion, in a safe fashion as our testing partners have done.

But, the standard really applies as something you have to have before you finish your residency training, and as such, Dr. Larsen and her team have delinked completion of that standard with the application process.

WL: Thank you for asking that question because unfortunately there seems to still be some confusion about it. As Dr. Wendel said, completing FLS is not tied in any way to applying for the Qualifying Exam, so the applications for 2021 will open up in mid-September, and we encourage people to apply right away. But, they do not need to wait until they've taken FLS, they do not need to hold on their application process.

The stated deadline for FLS is 18 December, which is the end of the application period for the Qualifying Exam. However, we're not planning to prevent anyone from taking the Qualifying Exam if they're not able to complete FLS due to COVID-19 and so if we have people who are unable to get their FLS completed, we will be in personal contact with those residents.

There isn't a way to apply for an extension. That isn't actually part of our process, but we follow very closely who has done FLS, who's completed it, who's applied for it, and we have close contact with the residents to make sure that they understand that we want to help them to get that finished.

Obviously, the situation with the testing centers right now is very fluid, just like the Pearson VUE testing centers that put on the Qualifying Exam, and so we're going to work with people to make sure that nobody is prevented from taking the Qualifying Exam because COVID has prevented them from getting FLS completed.

The DIO in the institution are thinking about pushing back the start date from July 1st to an undetermined, at this point, date, either in July or August 1st. How does that affect registering our residents and even the fellows?

GW: It's a great question and I think one that is going to be increasingly faced by an increasing number of programs. You're free to start your training on any date that you want right now. We just need to know a start date and an end date in the general sense so that we can ascertain that the trainee has met the standard that we have to apply to allow them to be eligible for certification.

Again, we're in unprecedented times and delays in starting dates due to COVID-19 are going to be something that we will make accommodations for, and we would ask you to just contact us on an individual basis if your program is going to start late due to COVID-19 issues. If there are trainees that are starting late because of other issues, please also let us know and we can talk to you about what are the implications of those kind of things.

But we would want to make sure that you can start the program on a date that's safe for your trainees and safe for your faculty and doesn't cause problems for patient care, so we'll be as flexible as we can in trying to help you work through those kinds of decisions.

GW: I would just have a question to you all: are there things that we left out of our policies that will help you addressing the issues of your current residents in training as we prepare to talk to

the the trainees in the next week or so, are there things that you're hearing that we could address that would help us give them a better message about issues?

I know certification is probably not the highest thing on anybody's list of priorities right now, but if there are things that we can do to reassure people, it would really help us make sure we get the right message across.

I think the other message we want to make sure you all know is you can call us at any time, either about residency training or fellowship training. The Exam Department has support staff that take calls five days a week. We take calls about the fellowships five days a week, too. You can reach us at our main phone number or at either of the email addresses, and we'd be happy to help address individual issues.

It is important to reiterate that we don't really speak about administration of residency programs and fellowship programs. There may be ACGME policies and statements that supersedes some of the things that we've said about being able to make decisions and change schedules that may require you to contact them or let them know about certain changes, and I would urge you to be familiar, I know as you are with those communications that are coming out from the ACGME.

It's also important that you know that we speak with them on almost a weekly basis about emerging topics that are interdigitate between certification and accreditation so that each organization knows that the other may be making decisions or changing policies that could affect the trainees for us or for the programs from their perspective if we make changes. So we do communicate with them on a regular basis, and so if things seem like they're across purpose please let us know and we'll try and clarify that for you on an individual basis or whenever you call.

CA: I actually just received a message from our exams team asking in answer to the question on how candidates can delay taking the exam, I believe Dr. Larson you mentioned they just need to

email exams@abog.org if they have questions regarding extending their deadline or anything like that.

And, just a reminder that we are recommending right now that candidates wait to withdraw from the Qualifying Exam so they don't lose our seat with Pearson VUE. They can withdraw up to a week beforehand if needed.

Should we be contacting SAGES to extend testing tokens for FLS or are they doing that automatically?

WL: SAGES has a form on their website, so whoever needs to extend a token just needs to go to the FLS website and there's an FLS extension request form, a voucher extension request form, that they have to fill out and send in. All requests for extensions are being approved right now, so it's not a matter of them not getting approval, it's just a matter of them filling out the form. It's not being done automatically to answer your question.

I see this is being recorded. If someone was not able to attend, where can they view this session?

GW: We're going to be posting this on the website. I don't know that we have figured out where it will reside, but we will be posting it on the website and you'll be able to view it. We had a similar Q&A session with the fellowship Program Managers and Program Directors, and it's a single group several weeks ago and recorded that, and that will also be available on our website.

CA: We will distribute the link directly to all Program Managers once that's up also.

GW: I just want to reiterate that we have every confidence that people are going to be finishing their training programs with the knowledge, skills, and abilities to go out and practice independently and to then go and seek the voluntary certification that we offer.

There have been other times in training where there's been interruptions and challenges. I don't believe that there have been any in recent years that equal this, and so we're anxious to do what we can to help people move forward with their careers, establish their practices, get their certification, move on with their professional and personal lives, and be reminded by the old Albert Einstein quote that there's only one pathway to human greatness, and it's through the school of hard knocks.

This group probably has been through the school of hard knocks over these four months that are going to end this academic year more than any other group. They've given up doing OB GYN to help out in a public health emergency. They've put things aside and put their own health at risk and I think we owe them a great debt of gratitude, as well as their colleagues on the faculty, and as well as you all managing the programs for helping everybody through this.

CA: Real quick in follow up, Dr. Wendel, this webinar link will be on our COVID-19 Updates page. On abog.org, we have a specific COVID-19 updates page. This will be added by our communications team to that website.

If the residents delay the QE, will they have to repay the fee?

WL: Absolutely not. If they delay the fee, they'll have the option of either rolling the fee over to next year, or if they prefer a refund, if they delay the exam they have the option of rolling the fee over to the next year, or we'll be happy to give them a refund, either one. They just have to let us know when they communicate with us: again, exams@abog.org.

If they communicate with us over that email, they just have to let us know which they would prefer. But, they won't lose their fee.

Just to confirm, anytime that a resident took off due to COVID-19-related illness will not be held against their time taken away from the program.

GW: That's absolutely right and that will be one of the things that we want to communicate to the Program Directors, as well as directly to the trainees.

There is a very important issue with fellowship training because there are requirements that stipulate that fellows must have a month of this or a minimum of a month of that or a minimum of a year of this. We will not count any of the time taken out of training due to COVID-related illness, care for others, providing care for non-OB GYN patients during intervals to be held against any of their other leave that they would be otherwise entitled to during trainings.

It's an important concept, and thanks for asking. This will not count against your other time for leave that would be due to other issues like illness, child rearing, what we call maternity/paternity leave, whatever you want to call it, we would count this separately. We're making considerable accommodations for this so people can do what they're supposed to do wherever they live for their family, their colleagues, or the patients in the city they live.

I hope that answers that question and I would advise as Program Managers, you all are at the front end of some of these decisions. Please know that if there are questions or disagreements about these with individuals in the program, please ask them to contact us and we can hope that we can clarify things on a phone call for people so that folks can move forward with the proper information. I hope that helps.

Will the program's pass rate be affected if our residents make the decision to delay taking the exam in 2020?

GW: That's a good question. I don't think we've thought of that. The pass rate will be reflective of who took it, and that's all. I think it's important to remember that the ACGME uses this for program accreditation, and they are more interested in trends over time than a single year's pass rate.

I do know they had some comments about how they're going to be making accreditation decisions going forward. I don't know exactly how they're going to use that information, but I would think that it would probably be fair to say that there may be attention to this and that attention may have some degree of qualification because of this particular year.

I can't say it's their decision about how they interpret those pass rates, but again, with the pass rates being so high, I would think that it's probably in a situation where you want to make sure that people don't delay an exam because they're worried about what it might do to their program pass rate.

What's most important in this whole situation is that people do what's best for them in their personal situation, in their careers. I think that's probably how I would answer it.

WL: Also, on that last question Dr. Jaspan happens to be on the call as well, and he just clarified that the that ACGME looks that first time taker pass rate over three years, so it's a three year total, it's not an individual year and it's just how many- if one of your residents doesn't take it, you just have one for your first-time takers than you would.

GW: In essence, they're just deferring that person taking the exam from one year to another, and again I would hope that the decision on taking an exam is based on what's best for the individual, and less of a concern about what it might do to a program. But, having said that, I know there's considerable concern among the seniors about whether it's smart to take the exam and in their best interest to take it in June of this year or postpone it to perhaps a later date in this calendar year or postpone it to 2021.

I can just share my personal experience as a residency director for a few years at Parkland Hospital. You never have more time to prepare for this exam or you're never better prepared for it than you are around the time of your graduation.

It may not seem like it, but in the past, our experience was that those that delay the exam thinking they'd have more time and ability to go to review courses and things like that to prepare usually didn't have that situation work out as they had hoped it would. Practices get busy, there's personal issues, there's family life, and it ends up being that you hope that you have more time to prepare, but often times you really don't, or it may be less under your control about how much time you have the study.

I think one of the things that you may be able to do is help people make their informed decision that it has to be different for everybody, but please try to remind them that the pass rate is above 90% on this examination and it may be best to just give it a shot this time around because there's a 90% chance that you're going to pass.

If the resident feels they're ready to take the exam, could they take it earlier since the testing site will be at 50%?

GW: That's a great question and that's actually the subject of the email that came five minutes before the call did. The information that we have is that these testing centers will be opening in a staggered fashion in following the local guidelines about social distancing and essential businesses being open so that nobody's health or infection risk is elevated by going into a testing center.

There are considerable number of things that need to be done to make a testing center safe so that our folks feel like they could come in and take it. The concern we have is that the thought about 50% of the people being able to take it doesn't mean that it's 50% of people that we have who are scheduled for the exam, it means that the centers will open at 50% capacity.

That doesn't mean that we will be able to even get the seats that we hope based on what we have in our current scheduling with those centers, so our hope is that those that do want to

take the exam will be in situations where they will be within the 50% of the candidates for all the exams at the center would allow to take the exam during that day.

Part of the reason we haven't rolled out our communication yet is the vagueness of what that actually means to an individual, rather than to the testing center, and I hope that hasn't been as vague as I know it was when I'm listening to myself talk, but we hope that people are actually going to be able to take the test that want to on that date.

There may be accommodations on the time of day that they can take it. Dr. Larson's been on top of this, and I don't know if you can tell them anymore, Wilma.

WL: I would just say that we are doing everything we can to try to assure that people that want to take the exam can. We won't be offering the test earlier than the current scheduled date, so the direct answer for that great question is no, they can't go in and take it tomorrow because they feel ready.

However, our goal would be to make sure that as many as want to can and Dr. Wendel is exactly right. Unfortunately, we're not getting enough information right now from our testing center partners to be able to put out a communication that will be helpful to the residents.

Please be assured that as soon as we possibly can, we will be putting out a communication with a plan to allow as many people as possible that want to take it this year, to take it this year, and those that don't want to take it this year, to delay until next year without penalty.

GW: Pretty much the dates they've been, in a general sense, in the conversations that the accommodations to offer an alternate date are going to be later in the year rather than earlier in the year due to the fact that there still may be cities where everybody wants to take the test and the centers just are still closed.

Our nightmare would be that somebody would spend a lot of money to fly to another city to have to take the examination through no fault of their own, and so the company has been

looking at later dates in the year rather than earlier dates in the year so that it's safer for us to have people plan around an alternate date that is likely to be available rather than one that still may be subject to phased rollouts in that city that may preclude anybody from taking it or just a small percentage.

I know that's a vague answer, but as we said before the availability the testing is pretty much out of our control at this point, and we really are reacting to emails that are coming through corporate decisions that are being made this week as the company is beginning to open their testing facilities in a staged fashion.

GW: Again, thank you for your attention and participating in this. If there are any questions you have that we didn't address or you prefer to address in private, please know that our staff are working remotely, but able to answer calls at any time, Monday through Friday, 8:00 to 5:00 Central Time, and we'd be happy to help walk you through these situations. Please advise your residents that they can call us, too. We're going to be trying to get a better avenue for direct communication to them.

Before we close, we just want to thank you again for everything you do every day for the trainees. Again, having both of us been Program Directors, your roles are essential, and nothing happens without you helping facilitate it from the top down and from the bottom up. Please know that we appreciate everything you do and we hope to be able to communicate with you all on an ongoing basis.

Otherwise, thank you all for your participation. Thanks to our team for putting this together and we hope you all are safe and well over the next few months and look forward to seeing you hopefully at the CREOG retreat this summer. Take care.