

Transition to a Virtual Delivery for the 2021 Subspecialty Certifying Exam

Webinar held on February 5, 2021

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WL– Dr. Wilma Larsen

CA – Cariel Apodaca

GW – Dr. George Wendel

KD – Kirk Diepenbrock

CA: It is one. Are the panelists ready to get started?

Okay, great. I'd like to begin first by welcoming all of you, thanking you for very much for your time and joining us today. I will note this webinar is being recorded. I am Cariel Apodaca. I'm the Exam Manager here at ABOG, and with me today as panelists are Dr. George Wendel, Executive Director, Dr. Wilma Larsen, Associate Executive Director. Kirk Diepenbrock, our Chief Information Officer, and Amanda Novak, our Certification and Standard Manager. I'll begin by turning it over to Dr. Wendel.

GW: Well, good afternoon. I want to thank you for taking the time in your busy days to talk with us today so that we can begin to communicate with you about the Subspecialty Certifying Exams that are about to come up. First, I want to apologize for the continued disruption in your personal and professional lives that this is causing. We have been monitoring this situation for now almost a year, and as you know have had to delay some of the certification processes from last year, and again we're changing it again. We believe that this will be the final adjustment that we have to make for your certification exams this year, and we're looking forward to explaining to you how we're going to implement these and execute the exams so that they're very similar to the process you would have had if they were in person.

So, I do want to thank you for your continued interest in becoming certified by us, and we hope to deliver an exam that's worthy of your preparation and your training and your expertise. I want to thank our team for everything that's been going on. You may or may not know that we've been guided by a national expert committee about COVID and our assessments since last year. We meet on a monthly basis, and with their guidance, we continue to wait and watch and monitor, or we make decisions to change our assessment strategies. And guided by our Board of Directors, guided by our Division Chairs, who are also on the call today: Fidel Valea, Marlene Corton, Jeanne Sheffield, Michael Thomas, and Corey Schreiber, and the Divisions, we made a very difficult decision about the exams in April.

I hope you understand we're doing everything we can to help you get certified as soon as possible and making sure that your credential means exactly what it means for everybody else. We don't want to disrupt the process and have you feel like your credential and have other people think that your credential is not what theirs was, and so I'm really excited to turn things over to Dr. Wilma Larsen, who's going to update you on some of the technical aspects and scheduling aspects of the examination. And again, thank you for everything you're doing in these challenging times, and we look forward to seeing you soon.

WL: Thanks very much, George. I appreciate it. I would just like to echo Dr. Wendel's welcome today, as well as thanking you also for giving up your time today to hear a little bit more about what we're doing for the virtual examination. This is something that as you probably know, we've never done before, and I'm guessing that most of you haven't done this before either, but we're going to go through this together and we're all going to get through it. Our goal is to make sure that we would like all of our candidates to be able to technically take the examination in April, and so we're going to do everything we can to partner with you to make that happens. So I'm just going to go through a number of slides here that have information about the exams. As Cariel mentioned, this is being recorded, and the recording will be posted to our website, so if you want to go back and look at it later, you'll certainly have that opportunity. And at the end when I've finished my comments, you'll be given the opportunity to ask questions that you may have.

So, the exam schedule, we have a pilot, which is only MFM candidates and examiners, and those candidates know who they are. That's going to happen on the 13th of March, and that will allow us to test all the technical capabilities that we'll be putting in place for the larger group in April. MFM will give their April exam from the 12th to the 15th, REI will be the 12th to

the 14th, and FPMRS and GYN ONC will both be the 19th to the 21st. We had to split the weeks this year because of the number of candidates. As you know, we unfortunately were not able to give a Subspecialty Certifying Exam in 2020, and so we had to split the week so that we could book all of the candidates into this time frame.

The exam schedule for the pilot is listed here, and as you can see, we're starting a little bit later than people would normally report for registration, and that's because we're trying to make this possible for people across time zones. The first session of the, I'm sorry, for the registration, you'll actually receive an actual time, not just that's the window between nine and ten, but you will be contacted and told that your registration will start at a specific time during that window. The first session is going to begin at 10 a.m., and all the sessions will run for an hour, there will be a 10-minute break in between sessions that will allow you to use the restroom, those sorts of things, as our examiners, as well. The second session as you can see, will run from 11:10 to 12:10, and then the final session of the morning will be from 12:20 to 1:20.

For all of the April exam morning sessions, they will be exactly the same as what I just showed you for the pilot: three one-hour sessions with a ten minute break in between each session, with registration running from nine to ten a.m., and again, you will receive an email letting you know what time you should come into the registration. Now, the registration will be some of the processes that you normally would do during an in-person registration. You'll be identified, you'll need to have a government ID during that time, but we'll also be doing some security processes, looking at the area in which you're going to take the exam. That will all be accomplished during that period. And then the afternoon session, the registration will be from 1:30 to 2:30. Again, one-hour exam sessions, with 10-minute breaks in between sessions, and the final session of the day being from 4:50 to 5:50 p.m.

And as stated on the slides, all of the times that are listed here are Central Time.

The structure of the exam will be the same as it would be if you were being given the exam in person. The first session, or the first 30 minutes of the session, I'm sorry, will be your thesis defense. The second 30 minutes, case list, and that's of the first session. And then the second and the third sessions will be the same with the first 30 minutes being structured cases and the second 30 minutes being your case list.

There are some minimal technical requirements that we've sent out to you in a letter or email, but just to reiterate those, if you're using a Windows computer, you need to have Windows 10, and if you're using a Mac, you need to have OS 10.11 Mavericks or higher. Now, for audio and video, we would like you to have working speakers and a microphone, and that's obvious. We need to be able to hear you and you need to be able to hear your examiners, and then you can either use an integrated or an external webcam.

The internet connection required to take the exam needs to be 50 megabits per second, which is 5 megabytes or greater. You can test your connection where you think you are going to take the exam by being logged in to the internet wherever it is you're going to take the exam, and then log on to fast.com and it'll tell you exactly what your speed is. We listed the connection speed here in megabits first because when you go to fast.com, that's the units it's going to use, so we wanted to make sure that everyone knew what that was. And then your screen resolution needs to be at least 1024 x 768 or higher. Obviously, the higher the better, but it needs to be that as a minimum. Then we would we would recommend that you keep your computer plugged into a power source so there's no loss of power during your examination.

Now you will have to have a secure browser that's going to be downloaded from a website from our exam partner, which is ITS. You'll be sent an email and asked to click on a link that will download an icon to your desktop. Now, in order to do this, there are two things that are needed: you have to have WebView2 on your computer, and that's if you have a Windows computer, and WebView2 is a Microsoft product. It is on any operating system that has Microsoft Edge on it, and so many operating systems will already have the computer or the WebView2 on it and won't have to download anything. If you don't have it on your computer though, if you go to click on the link to get to the browser, it will want to download the WebView2, and you have to have admin rights to the computer in order to be able to do that. Now, I will tell you that for the candidates that are taking the exam in April, there may be a change. You may not have to have WebView2, and if that's the case, we will be informing you of that.

For Mac, if you have the Mac system that we've mentioned, you will have electron framework and a Chrome-based browser already on your system, and so you won't have to download anything additional to your computer. Now, just to be very clear, this what we're talking about here is not actually installing anything on your computer. There will be an icon that will download to your desktop, but that icon just allows you to click into the exam itself. It doesn't actually download anything. It does lock your computer to restrict access to other programs while you're taking the exam, and it's very similar to what you might be familiar with if you know anyone who's had to take exams from home during COVID. I have children in college and

in the spring and then again in the fall, all of their finals were remote and they had to do something very similar in order to take those exams. The software that we're using for this has been tested and it's safe. It doesn't open your system to any external entities except for ITS, which is the exam delivery partner as I mentioned, and as soon as the exam is over, you can simply delete the link from your desktop. You don't have to uninstall any programs because again, it doesn't actually install anything into your system.

Your personal information is not going to be transmitted, nor will it be requested, and as I mentioned that the software is from Microsoft and Internet Test Systems, which are very reputable organizations. All of the communication between systems is encrypted, and there won't be any open source or third-party software, so we feel comfortable that we're not putting our candidates at any sort of information security risk during the exam process.

Now I've mentioned what the basic requirements are technology-wise to take the exam, but there are also some technical ideals that we'd like to mention. So first, if you have an external monitor which has a larger screen that is connected to your computer, of course that will allow easier imaging, easier viewing of the images, which our exams have images and some of the exams have ultrasounds. A headset with a microphone may make it easier for you to hear the examiners and for them to hear you. An external high-definition camera is certainly something that you may consider using, and then the higher the screen resolution, the better, and so if you can get to 1920 x 1080, that would be the ideal.

There are some things that we would like you to do prior to the exam, and one is that we want to make sure that your system is going to have the best chance of working during the exam process. So, for the pilot candidates, we're going to ask you to make an appointment with our IT department in the week of 22 to 26 February, and you're going to receive an email to sign up for that appointment. For all of the rest of the candidates that will be taking the exam in April, you'll also receive an email asking you to schedule an appointment, but we don't have that time frame completely nailed down at this point, so we will definitely be contacting you with that. We are going to be posting an orientation video on your portal that we would like you to watch prior to your examination, and that will go through the examination process and all of the normal things that we generally would tell you about if you came in for your exam in person, and so it's a very similar process to what we do when candidates come in to take their exams in Dallas. That will be located in the media files that are on your portal, and you're going to receive an email once that video is available for you to watch, and it'll explain exactly how to get to the video, where to look on your portal, and then of course if you have any difficulty finding it, you can contact us here at ABOG: exams@abog.org, and we'd be happy to help you.

You also normally sign the Terms of Agreement at the time of registration when you come to take the exam, but in this case, because you're not going to be here in person, we're going to ask you to sign the Terms of Agreement on the ABOG portal. That will be present on the portal one week prior to the examination, and that is one thing that you must do in order to participate in the exam. You are likely familiar with this because this requirement is well outlined in our bulletins. One of the other things I would just like to mention that we're going to be doing virtually is when you watch the video, we'll go through what we call conflicts or people that examiners that might not be able to examine you without a positive or negative bias, and so we will ask you to confirm virtually that the examiners that are going to see you for your exam don't represent a conflict for you.

And then, after the exam is finished, you will receive a survey asking you to let us know what you thought of the process, and we really will ask that you consider completing the survey because this is something that we always want to learn from and improve upon going forward. As I mentioned, this is something that we've never done before, and so for us to provide the best experience possible to our candidates and our examiners, we're going to survey both parties to try to see what we can do better in the future.

Your results of the exam will be released four weeks after you take it, and you're going to receive an email the night before exam result release to let you know they're coming out so that would be no later than the Friday four weeks after you take your examination.

So, those are the slides that I have, but now we would be very happy to answer any questions any of you might have regarding the virtual exam process.

Does the system log out during a break?

WL: No, it does not. You'll be asked to keep your camera on and the connection open from the time that you register in the morning until your examination is completed or register in the afternoon until your examination is completed.

What would be the process if there is a dropped connection or technical issues during the test? Some of us live in areas prone to inclement weather.

WL: Kirk, did you want to address that or would you like me to talk about that?

KD: Well, I can talk about the technical process, but I assume the question is about the exam in general, are they, you know, after so many drops, or is the test over or something like that?

WL: Okay, so if that's the question and if it's not, just please clarify in the Q&A. If that's the question, our goal will be to get you to be able to take the exam, so if you do drop your connection, you're going to have a point of contact to call immediately once you've dropped. Additionally, your examiners are going to know that you've dropped, and they're going to contact our IT department, and there will also be a proctor in your room that will be virtually watching you take the examination, and that person will be aware so we're going to do everything that we can to troubleshoot to try to make sure that you can complete the exam process.

Will you address the new scoring system?

WL: Certainly, I can address the new scoring system. I'd be happy to. We will be grading the exam using what's called Multi-Facet Rasch Method, and that is a methodology of scoring that we piloted in 2019. The plan was to grade the exams in April of 2020 using that method if we had had those examinations. This is a scoring system where each of your examiners are going to score each of the parts of your exam, so the structured cases and the case list, individually, and so you'll receive multiple scores on each part, and the scores will be then adjusted based on the severity of the examiners that you saw during your exam, as well as the difficulty of the questions on your particular day. So, that part of the scoring system eliminates the chances that you have more trouble with your exam than someone else because your examiners happen to be harder or more severe than examiners the other candidates saw. Once that's accounted for, then there's an analytical process that goes on. The cut score is set and everyone that scores at or above the cut score passes the exam, to include a confidence interval, so it's a very analytical statistical process, which is why instead of getting the examination results very quickly, you have to wait four weeks, unlike what we used to have.

GW: I would just add that you may have heard about people passing and failing sections of the test. That was a prior scoring model, and that's not part of this new scoring rubric, so if you have heard of that, that is what we're moving from and we're moving to the new system.

This is a much more fair, almost egalitarian grading system, and we're really very happy to be moving from what we had to this.

Is it certain that it will take four weeks to get the results, or might it be sooner?

WL: It'll be no later than four weeks and that's why I said we'd be sending out an email to let you know that the results would be coming in that way. We're not going to hold on to them for four weeks if the analysis is finished. We'll release them sooner.

How can you assess the severity of examiners?

WL: So it's a statistical process. Essentially, what happens is your performance, your ability is analyzed using a logit scale. The examiners obviously see multiple candidates for multiple questions, and so we can look at how they grade people across the different days and the different questions, and so that allows our psychometricians, which are folks who are experts in assessment technology, to use some special software to do this. The specifics other than the fact that it's done on a logit scale and that way we can put both the item difficulty and examiner severity, as well as the candidate ability, all in the same scale. They would have to go into much greater detail than that. You will receive a score report however, after this examination, and the score report will have an explanation of the grading system, as well, so you may find that helpful if you're really interested in the technical aspects of the analysis.

Will everyone be starting with session one, i.e. with a thesis portion?

WL: No, some candidates will start with session one, a third of the candidates, the third we'll start with session two, and a third we'll start with session three.

GW: That was more representative of the concept of the breakdown of the three different sections.

Would it be possible to get a simulated experience with like hands-on in the system prior to the exam?

WL: There really isn't anything that you're going to have to do for the system. You're literally just going to click the button. It will take you to the exam site, and then everything will appear on your computer, so there is nothing that you actually have to do or perform during the test whatsoever. You simply have to look at your screen. Our examiners who are going to be administering the exam will be practicing within the system, but there isn't anything for the candidates to practice.

Will there be lactation accommodations?

WL: As you may or may not know, when you take the exam in Dallas, during the orientation period, we give physicians who are lactating an opportunity to use a pump, to go ahead and do that prior to starting the exam. The accommodation would be that we will schedule the lactating physicians for a later registration during that hour so that they can be ready to start the exam as close to the exam start time as possible. That is the accommodation. We have never had a candidate ask to pump during the exam itself. If that was something that a candidate felt they had to do, then we would obviously want that to be on the break, but that is not a normal part of the process.

Can you speak about the location where they need to take the exam?

WL: Sure. So, there is no specific location that we would dictate for you to take the exam. We would however recommend that you pick a location that's quiet, that has good internet access, that won't be competing with other people who are trying to watch a movie or download large amounts of data, and that obviously no one will disturb you during the exam process. You will not be able to use a virtual background during the exam, so you're going to want to think about

what's behind you, and the reason for that is security. We need to be able to see what is in your surroundings as you're taking the exam. If there's a place you can take it at work that meets those requirements, then that certainly would be ideal, but if there's not, then certainly a home office might be appropriate as well.

Are you being scored for professionalism?

WL: We have professionalism questions, as you're all aware. Professionalism is a core competency from ACGME, and we were part of developing things with ACGME, so we do have questions specifically on professionalism, but if you mean is the examiner going to downgrade you because of the environment that you're taking the exam in, the answer to that would be no. In fact, examiners are specifically counseled not to take that into account.

GW: Wilma, would you like to expand on that to talk about the unconscious bias training that's required? I think that really is an important aspect of perhaps what they're asking.

WL: Absolutely, thank you, George. So, one of the things that we're very committed to here at ABOG is to do everything we can to minimize the bias in our exams. Starting in 2018, we started with a study looking at unconscious bias. There's a professional product that we used that is actually quite good. We've had many, many requests to share with who produced the product because even though all of our examiners have had some form of unconscious bias training at their institutions, uniformly, the feedback that we've received is that this product is exceptional. We initially did a study looking at unconscious bias in in the oral exam, and thankfully didn't show us a difference, and then since then, we've been training all of our examiners on unconscious bias, and this really goes through many, many sources of unconscious bias. Then, in our orientation process, we also really tie it into the exam itself, so things that we do cover are things like how a candidate is dressed, their appearance, the way they speak, those sorts of things that really don't have anything to do with the candidate's innate abilities and performance, and so it's something we're very committed to and we continue to train on that on a yearly basis.

Are there any specific security requirements for the room where they take the exam?

WL: So your room will be inspected from the standpoint that when you register, the proctor will have you use your camera to show them the room so that they can see that there are no obvious security issues, such as a recording device or an audio device or something like that. As far as other security issues, that's really the main thing, except for locking down your computer so that you're not able to go to any type of website during the time you're taking the examination.

We all hope that this is successful. If the test cannot be administered this session, what is the plan for the 2020 candidates who would have had it cancelled three times?

WL: That's a very good question, and I'm not going to be able to give you a definite answer today. We have every expectation that we'll be able to administer the exam virtually, and if we are unable to do so, then we will certainly address that.

Will we have the ability to test our computer mic and earbuds to make sure the examiner can hear us clearly?

WL: Yes. So, first of all, we'll be doing a tech check with you, as I mentioned. Our IT people will be checking your system and your equipment, but then at the very beginning of the exam, the examiners will ask you to speak in your normal tone of voice and make sure that they can hear you. They'll speak to make sure you can hear them, and that actually will also happen during the registration process when the proctor is getting you checked in.

I see that there's a question, since I'm talking about the proctor, on elaborating on the proctor issue, and that is a process that boards who are giving virtual oral exams are using, and essentially what it allows is to have a person who is not part of the grading process observe the candidate to make sure there are no security concerns and also to be available if there might be a minor technical issues. They are not IT people per se, although they can get IT people into the process quickly, but their main purpose there is for security.

GW: I would just expand on that to say that the group we're using as our partner for this is called Internet Testing Services, I believe is their trade name, and they are the industry leader in virtual exams, and the only thing that has been a challenge for them in developing our platform

is that we have a unique case list that we use that examines your personal practice, and we have a thesis, and none of the other boards have those types of processes integrated in their testing like we do, and that would, if anything, was a delay in announcing the move to the virtual platform because they had to prove to themselves that they could deliver our exam to themselves before they presented it to us.

We have a very unique exam, and it may seem on one level very simple, but on another level, it's quite complex to do this electronically, and that sort of leads into the next question about case lists and maybe you'll talk about the thesis, too.

What do I need to print and bring? Can I print and bring my case list without any notes? Will I need to print and bring my case list as well?

WL: So as far as the thesis goes, the answer to the question is yes. We do need you to print and bring your thesis. When you register, the proctor will be looking to make sure you haven't taken any notes on it, as you might expect. We do that when we had paper case lists in person, sorry, paper thesis in-person. As far as the case list, no, we do not think you will need to print and bring a clean copy of your case list. We expect the case list to be delivered on the virtual platform, so the case that's being discussed will be displayed for you on your screen so you can see what case is being talked about.

GW: I might read into the question, but I wonder if the question was, "Should I have a backup in case there are issues with that part of the administration?" and it would be prudent to have a backup paper case list.

WL: I would say that the answer to that would be if we have any problems with displaying the case list, everyone will be notified and everyone will have paper case lists, but the answer would otherwise be no.

GW: But for an individual, if there's unique to them.

WL: Unfortunately, if there are technical difficulties, it will mean they won't be able to be on. If they're on, they'll be able to see the case list portion of it, so I wouldn't expect individuals to need to print their case list. It should be everybody will need their case list or no one will need their case list.

And of course, if we if we find that the case list portion of the software doesn't work for some reason, then we will revert to paper case lists, and we will notify everyone of that.

Will we be allowed to have items like water bottles, case list, Chapstick, pencil and paper to take notes with us on the day of the exam?

WL: Absolutely, water, Chapstick. I've just mentioned the thesis, which is a clean copy of your thesis. As far as paper to take notes, if you do have paper to take notes, you will have to have it positioned such that the examiners can see it. So, one of the things from the security standpoint is that you won't be able to have anything in your lap that you're looking at. You won't obviously be able to have any electronic devices in the room where you're taking the exam, such as your iPhone, just like always. Anything that can, except for insulin pumps, anything that can access the internet would be something we wouldn't want you to have.

You mentioned that having a bigger monitor may aid us. Is that something with which we should be concerned? Do we have access to an example of an ultrasound picture we'll see during the exam?

WL: Unfortunately, no I don't have access. I can't show you an ultrasound picture right now. That was not a question we anticipated, and my showing you an ultrasound picture wouldn't actually be that helpful because the ultrasounds are being delivered by ITS, and so it isn't a screen share process. You're going to be watching the ultrasound that is being run not on your computer, but actually run on your computer actually is a better way of saying it, and that's what the examiners will be seeing as well. Dr. Wendel mentioned how unique our exam is, and when we first started the process of looking at our ability to give virtual exams, the ultrasounds were one of the biggest concerns that we had because those are an integral part of the examination process for us, and we found that doing a screen share over Zoom, we simply could not get a high enough resolution for people to be able to read the ultrasounds, and so the manner in which they're being delivered is different than that, and it allows the absolute maximum resolution of the ultrasound quality, but my showing you an ultrasound wouldn't help because I don't have the ITS software, and you wouldn't be watching to get on the ITS software.

Could the sample pictures be shown at the trial appointment when we meet for the technology consultation with ABOG IT?

WL: We will not be able to show you any sample ultrasound pictures at that appointment either again because you know I mean these are just these are ultrasounds of things that you would expect to see ultrasounds of, but the key aspect of it is that you'll be watching it in a different way over a software platform. So again, our sharing something with you over Zoom won't replicate the process that you're going to have on your exam day.

GW: Wilma, I may be reading into that question, but if it were me asking that, my real question would be, I just want to make sure that what I think is the resolution on my computer is what it is so that I'll be able to see the ultrasounds and you know maybe it's color, maybe it's something else that somebody else has adjusted, and is there a way to make sure that that my image is going to look like what it's supposed to look like when I think I have the minimum requirements, and that may be an over simplification.

WL: Kirk,?

KD: Yes, thank you Dr. Larsen. Yes, that'll be one of the things that we have in our tech check. Just to be explicit, you know like Dr. Larsen said, we're going to have a 15-to-30-minute session with each participant in the pilot. We'll review how that went and whether we need shorter or longer for the for the next run, but we'll be checking that audio/video resolution all work, that double checking the versions of your browsers, making sure that there's maximum opportunity for success.

Are the examiners getting any special training to grade in a virtual environment? I'm assuming that none of them have done this before.

WL: That's true, none of them have done this before, and they are being given training on how to do that, yes.

Are there a certain percentage of people who will fail based on the CI and requiring that some people fail?

WL: No, there is no set failure rate for the examination, so the confidence interval actually allows people that are below the cut score to pass, not increasing the failure rate, and so the Confidence Interval is in the candidate's favor, as far as the number of candidates that will pass. And no, we do not have a set cut score, I mean sorry, a set failure rate or an expected failure rate.

Why were the general OB GYN boards Certifying Examinations transitioned to multiple choice examinations, whereas the Subspecialty Certifying Exams were made virtual?

WL: There are a couple of different reasons that we ended up going to a multiple-choice exam for the specialty. Our goal ever since this all started was to facilitate people being able to become certified in 2020 or the 2020 cycle if they wanted to, and so we did everything we could to try to make sure that that was a possibility. The specialty boards were starting of course in November, and we were not able to, or ITS was not able to get a product to us that would allow us to deliver the exams virtually in time for the specialty board. Additionally, even with two years' worth of candidates, the number of candidates for the subspecialty boards is significantly less, and so to be able to administer the specialty boards virtually, we needed to not only be able to have the technology, but to be able to scale it, and thankfully that was the decision that we made. It wasn't that we didn't want to do a virtual exam for the specialty. We do believe that in-person is best, and if we can't do in-person, virtual is going to be as close to in-person as we can be, but because we were not able to accomplish that in a timely enough fashion to give that group of candidates the opportunity to become certified, we made the decision to go to the Certifying Exam in the Pearson VUE centers on the computer-based examination.

Based on the pilot of the new exam scoring method, would pass fail rates have substantially changed compared to the old way?

CA: I think this is when we piloted the new scoring system, did candidates perform significantly different than they than they did under the old grading rubric.

WL: It's not significantly different, no. We actually did run those statistics and they were not significantly different from the old scoring.

GW: That was actually a fundamental part of our piloting this over the past several years was to be able to say that statistically it was valid to move to a new scoring system. And there's all kinds of statistical analyses on that one can do to be sure of that, and I can assure you that that was a fundamental value when we moved to the new system was to make sure it was just as valid, and actually, we think this is a fairer scoring system for the candidates and this is, I think, this is a paradigm changer for us as an organization and for all the other boards that use this now. This is the state of the art of current assessments, and that's what we're using and that's what your exams deserve.

What would the thesis session questions include? Statistics questions?

WL: The thesis, if you look in the very back of the bulletin under the thesis, there are a number of possible questions actually already listed there, but the questions will be on the different portions of your thesis as it's listed in the bulletin. There will likely be questions on statistics of your thesis, so the questions will be geared to your thesis. Now, there may be some other general statistical questions, but not structured case type statistical questions. It will be a discussion of all of the different aspects of your thesis to include the different you know hypothesis, methods, results, future studies, all the normal things that you would expect to discuss when you were talking about a medical study.

Why are you changing the scoring system, especially on a year when everything is already new?

WL: So, the decision to change the scoring system was not made in the recent past. That decision was made in June of 2019, and so had we given the exam in 2020, it would have been scored with the new system, and it will be scored with the new system this year.

GW: Yeah, we actually piloted this and ran things in parallel, so we're confident that the evidence is that this is appropriate thing to do and actually again, I know we're the assessment organization, but this is this is the contemporary goal that we should all be shooting for in assessment science.

The thesis portion entails 30 minutes for defense, but the other 30 minutes said case list. Which case list, or was it supposed to be standardized cases?

WL: No, it's case list. Each of the different subspecialties has three different case lists, and each of them has one of their case lists paired with the with the thesis. I'm not going to be able to tell you off the top of my head for each of the different subspecialties which one is paired with case list, however we can certainly, we always put questions that we've answered as part up on the on the website so that anybody that couldn't listen to this webinar or couldn't be part of the webinar, if they want to look at our answers to the questions, they'll be able to do that, and we will list that out on the website under the questions.

CA: I would also add to that they will have that specific information in the orientation, as well when you present that, so they'll see it before the exam.

Can you give an overview of how many examiners candidates see, if it's a different set for each section or they always have the same examiner and then if those examiners are remote as well or if they're at the ABOG office?

WL: Just like if you were taking the exam in-person, you'll have six examiners administer your exam; two examiners per session or section, and you will see two and then you'll see two more for the second hour and two more for the third hour. Those examiners will also be remote. We did not feel that it was safe to administer the exams in-person, and we didn't feel it was safe for our candidates, and we didn't feel it was safe for examiners or actually even for staff, and so with the current situation in the United States, we didn't feel that we could safely ask anybody to come to Dallas for a voluntary process.

When should we expect the email containing the link with the secure browser for both the March and the April sessions?

WL: About two weeks prior to the exam.

Do you currently have enough examiners signed up to administer the test with backup if there are illnesses or other circumstances that prevent them from being present?

WL: Yes, we always have extra examiners so that if someone becomes ill or has an issue, we can substitute someone else in, so yes, we do.

GW: I think part of it is given the number of candidates, we're expanding the number of days of exams, and so we did the calculations to be able to have a surplus and to anticipate potential absences due to possible continuing COVID and medical issues where people live and work.

Is there a dress code?

WL: We do have a dress code for our examiners. We have never had a dress code for our candidates. Most candidates will wear professional wear on the day of exams.

What did you mean earlier when you said a home office 'might be more appropriate?'"

WL: Any place that you choose to take the exam just needs to meet the things that we talked about: a quiet area where you won't be interrupted, that has a good internet connection, and that you know there's not a lot of extraneous noise where the examiners potentially wouldn't be able to hear you, or you wouldn't be able to hear them.

GW: The other issue perhaps is that you don't have an institutional firewall or institutional security issues that might preclude you using that particular computer, so if you're in a home office, there are some pluses in that regard.

Is it acceptable to have textbooks in the background if they're obviously closed? Are candidates allowed to have personal photos, exercise equipment, or anything that they can't have in their background that would make their room ineligible?

WL: No, there's no specific thing that we would say oh you absolutely can't have this in the background. We would ask that your background however be somewhat neat so that when we do our security screen, we're able to actually see what's behind you.

GW: I would also mention if you are in an office where your diploma is or are there any identifiers that might say what institution you are at, you might want to remove those. We do everything we can as you know to make sure that no one has subconscious bias about the candidates, and so that might be something too if you don't want to have a big emblem of the institution where you're working in the background.

In my home office, there are other desktops. They will be off. Is that okay?

WL: Yes.

What will be the circumstances in which the decision might be made to cancel the subspecialty exam again?

WL: The only circumstance that I can think of would be a massive technical failure where we the internet across the country is down or in a large part portion of the country and we're unable to administer it for something like that.

GW: I mean, no one can predict the future, and I don't know that we could make something up, but it would have to be a very serious issue. As with everything you do that you outsource to another partner, you know we're depending on ITS to deliver our examinations, so that's out of our control, but we feel confident that that they are the partner that we wanted to be with and the partner that most of the other ABMS boards have used for successful virtual oral exams, and they have been reliable throughout those exams.

When is the latest we will be notified of our exact date?

WL: Four weeks from the week of your exams.

What will be the outcome if there are technical difficulties?

WL: We will make every effort if there's a complete technical failure for an individual candidate. We're going to make every effort to reschedule them to allow them to test on a different day. There, unfortunately, could be a candidate who's scheduled on the last day on the afternoon and has a technical failure and can't get connected back to the exam, and they would have to wait until the following year. We are however, going to make every effort to allow everyone to go through the testing process.

Can you reiterate what happens if there's technical issues? You said someone would contact us, but we'll not have access to phones. Will you send an email?

WL: That's a really great question. If your technical system goes down, we will allow you. It's not like your phone isn't going to be somewhere close by, we will allow you to get your phone and call us. You will have a direct contact number because obviously we need to try to help you to get back onto the system, so you won't be allowed to access your phone as you're taking the exam, but if your internet went down and you couldn't get back in quickly, we would want you to call us so we could help you to get back in if at all possible.

What will the case list look when displayed on the screen?

WL: Unfortunately, I can't, just like I can't show you exactly how the ultrasounds will display on the screen, I can't show you exactly how the case list will display on the screen at this time. We don't have the screenshot of that yet for me to share it with you. It's not meant to be a secret, but as soon as we do have it, we will share it.

Will the software being used automatically pause notifications from other programs in addition to shutting down our ability to access these programs so that we don't have to worry about accidental alerts popping up?

KD: That is that is something that we do have ready as part of our test to do once we have that up, but with the locked browser, it's not just a browser. It kind of turns your machine into a terminal, so the expectation would be that any alarms, alerts, events, notifications do not show on your screen.

Will we see the examiner and the images at the same time while taking the exam or only for a brief moment?

WL: You'll see the examiner, but similar to when someone shares their screen on a Zoom meeting, the examiner's picture will be smaller and the exam itself will be larger.

Previous exams were graded out of 10 points and needed five points to pass. Is this the same for these exams?

WL: I'm sorry, that was not our former grading scale, and it is not the current grading scale either. I'm not sure where you had that information, but that's not true.

GW: If that was what you were told, that's not what our scoring system was and that's probably a good reason why we're moving to a different system.

What is the objective of the Certifying Exam?

WL: The objective is to determine if candidates have the knowledge, judgment, and skills to become certified.

For ultrasound images, if someone's using a double monitor to test, will those examinees automatically have an advantage of a full screen image to review as opposed to someone using a laptop with additional information displayed on their screen? If so, how would that difference be graded or addressed?

WL: That's a good question. The ultrasound image, however, will be displayed in as large of an area as possible, so it's not going to be a small square, if you will. It'll be a large image. That is why we said, however, that people may want to consider having a second monitor in order to put half the ideal situation, if you will, for the exam. It's not a requirement, however.

GW: We feel confident with the minimum requirements that the quality and size of the images should be reasonable to interpret the images. Otherwise, we would not be putting those on an exam, so that that's a great question.

There should not be technological advantages that someone has in technological situations that disadvantage others and that's a really good question and an important point that fairness is one of the challenges of having remote or virtual exams, when people bring their own computer rather than having everybody come in with the same computer screen. It's a lot more than just giving an in-person exam on Zoom.

CA: We are about out of time at this point. We do have some questions unanswered that we can follow up with after this webinar is over, but it's it is two o'clock. - We will answer all the questions that were submitted, and those answers will be on our website not tomorrow, but we'll get them up as quickly as we possibly can.

GW: I would say that perhaps we need to have another webinar, too. There's enough questions and enough ideas brought up that perhaps we should do this again. I see a quite a number of questions, so we'll try to answer everything we can. If we can get through it, we will. If you all think it would be beneficial to have another one of these as things progress, we can certainly do that. Our goal is to be transparent, our goal is to be accountable, and our goal is to help you get certified without any further delays, and we feel very committed to that and we want to make sure you know that through our actions and our words and so if more communication would be better, we're happy to do that.

CA: Okay, well thank you all for joining us. We can be back in touch about another webinar after review of the questions and answers.

Thank you very much everyone.