



May, 2019

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Passed the Part I Exams? What's Next?

If you have passed both the Part I Didactic and CBPS exams, you must complete these steps in order for you to be deemed Board Qualified:

• Submit your Residency Completion Certificates and current state medical license as soon as possible and no later than August 31 of the year following the last Part I exam passed. Until ABFAS receives the required documentation, your ABFAS status is Board Qualified – Incomplete. This indicates candidates have taken and passed the Part I examinations but have not submitted the necessary documentation to become board qualified.

Please scan and email these documents to certifications@abfas.org or fax to (415) 553-7801.

If documentation is not received by August 31 of the year following the last Part I exam passed, ABFAS will change your status to Board Qualified – Non-Compliant.

- Once you have achieved Board Qualified Active or Board Qualified Incomplete status, you need to signify agreement with ABFAS' Advertising Agreement. The Advertising Policy and agreement forms are available on your ABFAS profile page.
- Please review all personal contact information on your profile page. This includes name, current email, address and phone information. Many candidates have residency contact information, including residency email addresses listed on their profile. Please update your current contact information so that you can continue to receive communication from ABFAS.

Finally, passed exam scores are valid for 7 years and candidates have 7 years after becoming Board Qualified to pursue board certification. You will not be considered Board Qualified in RRA (even if both RRA exams are passed) until you have passed both Part I Foot Didactic and Foot CBPS examinations.

If you have any questions about achieving Board Qualification, please review the ABFAS Board **Qualification Document.**



PLS Logging

PLS logging can begin right after you have finished residency, regardless of whether you are board gualified, and should continue until you have achieved board certification. Only log cases that list you as "surgeon of record". PLS logging is the initial step to preparing for the ABFAS Case Review.

It is very important that you log your cases with the correct procedure codes. Mislogging is one of the major reasons why candidates fail case review. Pay close attention to ensure each case is logged accurately.

Below is a list of common logging errors that can result in candidates failing case review:

1) Do not log a lisfranc fracture ORIF or arthrodesis as a rearfoot procedure. Log a lisfranc fracture ORIF as 4.13 (Open management of tarsometatarsal fracture/dislocation). Log a lisfranc joint arthrodesis as 4.15 (tarsometatarsal fusion). Please note for PLS logging purposes: "Midfoot" joint(s) refers to any joint proximal to, and not including, tarsometatarsal/lisfranc joint.

2) Log a Lapidus bunionectomy as a first ray procedure and as 2.1.6 (bunionectomy with first metatarsocuneiform fusion) or 2.2.5 (joint salvage with first metatarsocuneiform fusion) or 2.3.3 (metatarsocuneiform fusion, other than for hallux valgus or hallux limitus).

3) Log a Haglund's deformity where the posterior heel exostosis is shaved (without detaching and reattaching a major portion of the Achilles tendon) as 4.1 (partial ostectomy). Such cases are never used for case review. If pulled for case review, and the case is logged incorrectly, a failing score will occur.

4) Plastic surgery does not include simple wound debridement and synthetic/biological graft application. A synthetic/biological graft application and/or simple double elliptical lesion excision does not meet the criteria for case review. If this case is submitted for case review, it will result in a failing score.

5) Log a Kidner procedure either as 5.1.6 (ligament or tendon augmentation/supplementation/restoration) or 3.1 (excision of ossicle). Log removal of any ossicle such as os peroneum, os navicularis. ostrigonum as 3.1. Do not take the risk and log incorrectly as a simple ossicle removal with/without tendon debridement will not qualify the procedure for case review and will result in a failing score.

6) Logging cheilectomy with distal metatarsal osteotomy on the same metatarsal will result with a low or failing score for that case.

7) Open management of fracture for metatarsophalangeal joint (MTPJ) dislocation cases must include internal or external fixation.



In-training Examination Prep

ABFAS will hold the 2019 In-training Examinations (ITE) in September. The ITE assesses the podiatric resident's current level of knowledge, while providing an educational experience to the resident on how to best prepare for ABFAS' board certification exams. The exam is broken up into two parts – the Didactic exam and the Computer-based Patient Simulation or CBPS exam.

There are a variety of ITE preparation materials accessible through ABFAS.org. ABFAS developed the In-training Examination Guide for Residency Directors as a resource for residency directors, however, residents will also benefit from reading it. The guide explains the ITE structure, exam preparation, scoring, registration, scheduling, and what to expect on exam day. You can find the ITE Examination Guide here.

Additionally, there is an online study guide to help you prepare for the didactic section of the ITE. This guide will walk you through all the parts of the didactic exam such as subject areas, scoring, results, and adaptive testing. Included in the Study Guide are Foot Didactic and RRA Didactic practice exams.

There are also resources to prepare you for the CBPS exam.

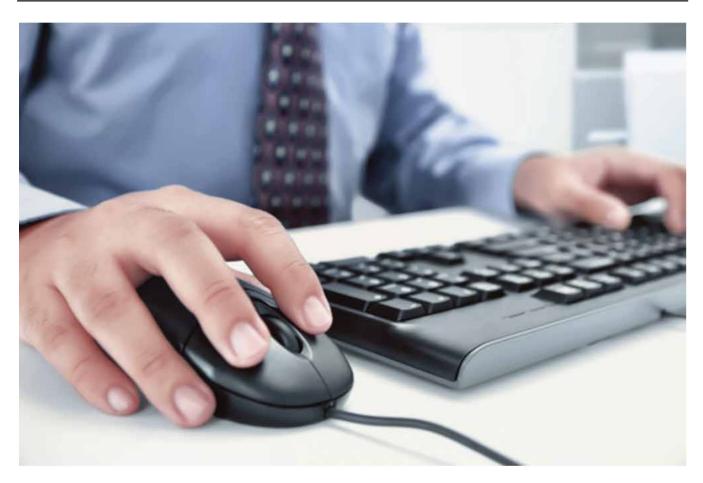
You can find exam instructions on how best to practice the CBPS exam here.

ABFAS has developed a video with tips on navigating the CBPS exam, answers to common questions, and how to approach the exam. Be sure to watch this video, "Navigating the CBPS" Exam" before exam day.

Finally, after you have become familiar with those materials, you can take the CBPS Practice Exam, which can be found here.

All of these materials will help candidates prepare for a successful In-training examination.

Reminder of dates: Registration Opens for Institutions to Enroll Candidates: July 1, 2019 Registration Closes for Institutions to Enroll Candidates: August 30, 2019 Exam Period: September 16 – 21, 2019



ABFAS Board Certification Examinations Schedule

Fall Exams

Part I Foot Surgery Didactic Part I Foot Surgery CBPS Part I RRA Surgery Didactic Part I RRA Surgery CBPS

Part I Examinations Important Dates:

August 15, 2019 – Registration Opens **October 4, 2019** – Registration Closes October 11, 2019 – Last Day to Withdraw w/o Penalty October 18, 2019 – Exam Date

Join us!

ABFAS will be attending more conferences in 2019 than ever before. If you are attending, we welcome you to stop by our booth. Join us at the following conferences:

The Western Foot and Ankle Conference

June 20-22, 2019 Disneyland Hotel and Convention Center Anaheim, California

American Podiatric Medical Association – The National

July 11-13, 2019 Salt Palace Convention Center Salt Lake City, Utah

7th Annual ASPS Surgical Conference

August 2-3, 2019 Swissotel Chicago, Illinois



#footfirst

Nathanael Smith, DPM PGY3 and Audris Tien, DPM PGY2 from Chino Valley Medical Center in Chino, CA, after finishing a total ankle replacement.

ABFAS and its DPMs are #footfirst! ABFAS is looking for photos of residents studying, performing cases, interacting with feet, performing on feet, or even just hanging out with other residents. Send your best photos to footfirst@abfas.org so we can share them on social media, in our magazines, and online. We will select a monthly winner with the best photo who will receive a great ABFAS prize and recognition on our Facebook page. Don't forget to share your photos using #footfirstABFAS

Safe Sender

ABFAS would like all communication to find it to your inbox. Please add info@abfas.org, updates@abfas.org, and scheduling@abfas.org to your safe sender list to assure that all of our emails arrive in your "new emails" inbox and not in "spam."

Since 1975, ABFAS' mission is to protect and improve the health and welfare of the public by the advancement of the art and science of foot and ankle surgery.

ABFAS.org



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