

Booklet of Information Vascular Surgery

2025-2026





The Booklet of Information – Vascular Surgery is published by American Board of Surgery (ABS) to outline the requirements for certification in vascular surgery. Applicants are expected to be familiar with this information and bear ultimate responsibility for ensuring their training meets ABS requirements, as well as for acting in accordance with the ABS policies governing each stage of the certification process.

This edition of the booklet supersedes all previous publications concerning the policies, procedures, and requirements for examination and certification in vascular surgery. The ABS, however, reserves the right to make changes to its fees, policies, procedures, and requirements at any time. Applicants are encouraged to visit www.absurgery.org for the most recent updates.

Admission to the certification process is governed by the policies and requirements in effect at the time an application is submitted and is at the discretion of the ABS and the Vascular Surgery Board of the ABS (VSB-ABS).

TABLE OF CONTENTS

Our Mission	4
Our Purpose	4
The History of the VSB-ABS	5
REQUIREMENTS FOR CERTIFICATION	6
The Certification Process	6
Defining the Specialty of Vascular Surgery	6
Scope of Vascular Surgery	6
General Certification Requirements	7
Undergraduate Medical Education	8
General Graduate Surgical Education Requirements	8
Training Requirements	9
Approved Training Pathways	9
Operative Experience Requirements	10
Limit on Number of Programs	10
Entrustable Professional Activities (EPAs)	10
Medical License Requirement	11
Requirements for International Training	11
ABS Vascular Surgery Leave Policy	12
General Requirements	12

Additional Leave Options	12
Code of Ethics and Professionalism	12
Reporting Requirements	13
Ethical Behavior as It Relates to the ABS Examinations	13
Reconsideration and Appeals	13
Additional Considerations	13
Full-Time Research	13
Military Service	14
Osteopathic Trainees	14
EXAMINATIONS IN VASCULAR SURGERY	15
Exam Admissibility: Seven-Year Limit	15
The In-Training Examination (VSITE)	15
The Qualifying Examination (QE)	16
General Information	16
QE Application Process	16
Taking the QE After PGY-4 or as a First-Year Fellow	16
Examination Accommodations	17
Time Limitations	17
The Certifying Examination (CE)	17
General Information	17
Special Circumstances	18
ISSUANCE OF CERTIFICATES AND CONTINUOUS CERTIFICATION	19
Reporting of Status	19
Continuous Certification	19
Revocation of Certificate	20
RESOURCES	21
About the VSB-ABS	22
VSB-ABS Directors	22
2024-2025 VSB-ABS Directors	22
ABS Executive Staff	22

INTRODUCTION

Our Mission

The American Board of Surgery serves patients, society, and the specialty of surgery by providing leadership in surgical education and practice. The ABS ensures excellence through:

- Building a diverse, equitable, and inclusive culture
- · Rigorous evaluation and assessment
- Promoting the highest standards for professionalism, lifelong learning, and the continuous certification of surgeons in practice

Our Purpose

The American Board of Surgery is a private, nonprofit, autonomous organization formed to:

- Conduct examinations of acceptable candidates who seek certification or continuous certification by the board.
- Issue certificates to all candidates meeting the board's requirements and satisfactorily completing its prescribed examinations.
- Improve and broaden the opportunities for graduate education and training of surgeons.

The ABS considers certification to be voluntary and limits its responsibilities to fulfilling the purposes stated above. Its principal objective is to pass judgment on the education, training, and knowledge of broadly qualified and responsible surgeons and not to designate who shall or shall not perform surgical operations.

The History of the VSB-ABS

The movement for certification in vascular surgery began in the 1970s under the leadership of Dr. Edwin J. Wylie.

A committee on vascular surgery was formed by the American Board of Surgery to investigate the issue, which met several times with representatives of the Society for Vascular Surgery and the International Society for Cardiovascular Surgery. In 1981, the ABS requested and received approval from the American Board of Medical Specialties (ABMS) to offer a certificate in vascular surgery.

The ABS offered a Certificate of Special Qualifications in vascular surgery as of 1982 and a Certificate of Added Qualifications beginning in 1988. The Special Qualifications (practice) pathway was closed to new applicants in 1989, as the ABMS typically allows practice pathways to be open for only five years. Both certificates were issued through 1998 when the designations of Added Qualifications and Special Qualifications were dropped, and all certificates were designated as Certified in Vascular Surgery.

The Vascular Surgery Board of the ABS was established in June 1998 with the support of the leading vascular surgery societies. Vascular surgery became a primary specialty of the ABS in July 2006; since that date, certification in general surgery is no longer a prerequisite for certification in vascular surgery.

The VSB-ABS defines and oversees all requirements related to vascular surgery certification, while the ABS defines and oversees all processes related to certification in any ABS specialty area including but not limited to application processing and examination administration.

REQUIREMENTS FOR CERTIFICATION

A primary certificate in vascular surgery took effect July 1, 2006, giving vascular surgery a board certification pathway independent of general surgery. Its significance as a standard of skill and knowledge in vascular surgery and regarding credentialing for vascular surgery procedures remains the same.

Admission to the certification process is governed by the requirements and policies in effect at the time of application. All requirements are subject to change.

The Certification Process

The ABS certification is based upon a process of education, evaluation, and examination.

Required Education/Training:

- All training completed following medical school must be accredited by the Accreditation Council for Graduate Medical Education (ACGME) in the U.S., or by the Royal College of Physicians and Surgeons of Canada (RCPSC).
- The ABS requires the attestation of the vascular surgery program director that an
 applicant has completed an appropriate educational experience and attained a
 sufficiently high level of knowledge, clinical judgment, and technical skills, as well
 as ethical standing, to be admitted to the certification process.

Examination Application:

 Individuals who believe they meet the ABS's educational, ethical, and experience requirements may begin the certification process by applying for admission to the Vascular Surgery Qualifying Examination (QE).

Qualifying Examination (QE):

 Successful completion of the QE, or written exam, is the first step in the initial certification process for vascular surgery.

Certifying Examination (CE):

- Following successful completion of the QE, the second and final step in the initial certification process for vascular surgery, is the CE, or oral exam.
- Successfully passing the CE deems the candidate certified in vascular surgery*, and they then become a diplomate of the ABS.
- * Possession of a certificate is not meant to imply that a diplomate is competent in the performance of the full range of complex procedures that encompass vascular surgery. It is not the intent nor the role of the ABS nor the VSB-ABS to designate who shall or shall not perform surgical procedures or any category thereof. Credentialing decisions are best made by locally constituted bodies and should be based on an applicant's extent of training, depth of experience, patient outcomes relative to peers, and certification status.

Defining the Specialty of Vascular Surgery

Scope of Vascular Surgery

Vascular surgery encompasses the diagnosis and comprehensive, longitudinal management of disorders of the arterial, venous, and lymphatic systems, exclusive of the

intracranial and coronary arteries. Diplomates certified in vascular surgery should have significant experience with all aspects of treating patients with all types of vascular disease, including diagnosis, medical treatment, and reconstructive vascular surgical and endovascular techniques.

In addition, diplomates certified in vascular surgery should:

- Possess advanced knowledge and skills to provide comprehensive care to patients with vascular disease
- Understand the needs of these patients
- Teach this information to others
- Provide leadership within their organizations
- · Conduct or participate in research in vascular disorders
- Demonstrate self-assessment of their outcomes

The vascular surgeon must have advanced knowledge and experience with the management of vascular problems, including:

- All elements of clinical evaluation, including non-invasive testing such as
 plethysmography, duplex ultra-sonography, magnetic resonance imaging, CT
 scans, angiography, and other diagnostic tests utilized in the diagnosis of
 vascular disease
- Comprehensive management of vascular disease to include screening and surveillance, medical management, drug therapy, risk factor management, and wound management including amputations, as well as other adjunctive procedures
- Indications and techniques relating to the open and endovascular treatment of
 vascular disorders, to include the entire spectrum of interventions used to treat
 vascular disorders, including such disorders as occlusive, aneurysmal and
 inflammatory disease, trauma, and neurovascular compressive syndromes
 involving the arteries and veins of the body (excluding the intracranial and
 coronary arteries). These include the aorta and its branches, as well as the
 arteries of the neck, pelvis, and upper and lower extremities, and the venous
 system
- The critical care of the vascular surgery patient

General Certification Requirements

Applicants for certification in vascular surgery must meet these general requirements:

- Meet the required education/training as defined above in <u>The Certification</u> <u>Process</u> section.
- Have an ethical, professional, and moral status acceptable to the ABS.
- Be actively engaged in the practice of vascular surgery as indicated by holding
 admitting privileges to a surgical service in an accredited health care organization,
 or be currently engaged in pursuing additional graduate education in a component
 of vascular surgery or other recognized surgical specialty. An exception to this
 requirement is active military duty.

- Hold a currently registered full and unrestricted license to practice medicine in the United States or Canada when registering for the CE. A full and unrestricted medical license is not required to take the QE. Temporary, limited, educational or institutional medical licenses will not be accepted for the CE, even if the candidate is currently pursuing additional training. See our full <u>Medical License</u> <u>Requirement</u> policy for more information.
- Hold Registered Physician in Vascular Interpretation® (RPVI®) certification
 which is required to register for the VSCE (beginning in 2026 and beyond). See
 the <u>Alliance for Physician Certification</u> & <u>Advancement website</u> for additional
 details or to register for the Physician's Vascular Interpretation exam.

An applicant must immediately inform the ABS of any conditions or restrictions in force on any active medical license they hold in any state or province. When there is a restriction or condition in force on any of the applicant's medical licenses, the Education and Training Committee of the ABS will determine whether the applicant satisfies the above licensure requirement.

Undergraduate Medical Education

Applicants must have graduated from an accredited school of allopathic or osteopathic medicine in the United States or Canada.

Graduates of schools of medicine in countries other than the United States or Canada must present evidence of certification by the Educational Commission for Foreign Medical Graduates (ECFMG®).

See section on Foreign Graduate Education Credit for more information.

General Graduate Surgical Education Requirements

The purpose of graduate education in vascular surgery is to provide the opportunity to acquire a broad understanding of human biology as it relates to vascular disorders, and the technical knowledge and skills appropriate to be applied by a specialist in vascular surgery. This goal can best be attained by means of a progressively graded curriculum of study and clinical experience under the guidance and supervision of senior vascular surgeons, which provides progression through increasing levels of responsibility for patient care up to the final one of complete management. Major operative experience and independent decision-making at the final stage of the program are essential components of surgical education. The ABS will not accept into the process of certification anyone who has not had such an experience in the specialty of vascular surgery, regardless of the number of years spent in educational programs.

The graduate educational requirements included in this booklet are the minimum requirements of the ABS and should not be interpreted to be restrictive in nature. The total time required for the educational process should be sufficient to provide adequate clinical experience for the development of sound surgical judgment and adequate technical skills. These requirements do not preclude additional educational experience, and program directors are encouraged to retain trainees in a program as long as is required to achieve the necessary level of performance.

The integration of basic sciences with clinical experience is considered to be superior to formal courses in such subjects. Accordingly, while recognizing the value of formal

courses in the study of vascular surgery and the basic sciences, the ABS will not accept such courses in lieu of any part of the required clinical years of surgical education.

At its discretion, the ABS may require that a member of the ABS, VSB-ABS, or a designated diplomate observe and report upon the clinical performance of an applicant before establishing admissibility to examination, or before awarding or renewing certification.

See also Leave Policy.

Training Requirements

To be accepted into the certification process, applicants must have satisfactorily completed the following:

- Approved vascular surgery training pathways
 All phases of progressive graduate education in vascular surgery in a program in vascular surgery accredited by the ACGME or RCPSC. For more information review the section regarding residents in osteopathic training programs.
- Training time
 No fewer than 48 weeks of full-time clinical activity in each year of the vascular surgery training program, regardless of the amount of operative experience obtained.

 The remaining four weeks of the year are considered non-clinical time that may be used for any purpose.
- Increasing levels of responsibility throughout training Including serving as surgeon chief for a 12-month period. The term "surgeon chief" indicates that a trainee has assumed ultimate responsibility for patient care under the supervision of the teaching staff and is the most senior resident/trainee involved with the direct care of the patient.
- Advanced Cardiovascular Life Support and Advanced Trauma Life Support®
 Certification
 Candidates must provide documentation of current or past certification in <u>Advanced Cardiovascular Life Support</u> (ACLS), and <u>Advanced Trauma Life Support</u> (ATLS®).
 Applicants are not required to be currently certified in these programs; however,

documentation of prior successful certification must be provided with the application.

- Registered Physician in Vascular Interpretation® Certification
 Candidates must provide documentation of current or past RPVI® certification when registering for the CE.
- Medical License
 A full and unrestricted license is not required to apply for the QE, however, a full and unrestricted state medical license is required for a candidate to register for the CE.

Approved Training Pathways

An individual may complete any of these three pathways toward board certification in vascular surgery. New vascular surgery programs approved by the ACGME are listed on the <u>ACGME</u> and <u>SVS</u> websites. Please also see our <u>Osteopathic Trainees Policy</u>.

With the primary certificate, an individual may complete any of these three pathways toward board certification in vascular surgery.

- Independent (5+2) Pathway: Traditional pathway of a five-year general surgery residency program accredited by the ACGME or RCPSC followed by two years in an accredited vascular surgery training program, leading to certification in both disciplines.
- ESP (4+2) Pathway: An early specialization program (ESP) accredited by the ACGME of four years of general surgery followed by two years of vascular surgery training at the same institution, leading to certification in both disciplines.
- Integrated (0+5) Pathway: A program accredited by the ACGME of five years of training in vascular surgery integrated with core surgical training at the same institution, leading to certification only in vascular surgery.

There are slight variations between pathways in terms of what is required from applicants to vascular surgery initial certification examinations. Please note that for the first two pathways (Independent Pathway and ESP Pathway), an approved GSQE application is required to apply to the Vascular Surgery QE examination. For more information visit the training pathways section of our website.

Operative Experience Requirements

The following operative requirements are currently in effect:

- At least 250 major vascular reconstructions
- At least 40 cases in surgical critical care, with at least one in each of the seven categories: ventilatory management; bleeding (non-trauma); hemodynamic instability; organ dysfunction/failure; dysrhythmias; invasive line management and monitoring; and parenteral/enteral nutrition

While the ABS requires broad experience in all essential areas of vascular surgery, it does not require a specific number of procedures within each content area.

Limit on Number of Programs

Candidates for certification in vascular surgery must have completed their vascular surgery training at no more than two programs. For integrated programs, the final two years of vascular surgery training at the same institution. For independent programs, the final 18 months must be completed at the same institution. Individuals in independent programs must also have completed their general surgery residency at no more than three programs.

Entrustable Professional Activities (EPAs)

Entrustable Professional Activities (EPAs) were developed to provide the opportunity for frequent, time-efficient, feedback-oriented and workplace-based assessments during daily clinical workflow. They are an important clinical assessment component of competency-based resident education, offer the opportunity to operationalize competency evaluation and related entrustment decisions during regular patient care, and address some of the challenges educators and trainees face in bridging core competency theory into clinical practice and performance assessment.

All applicants to the 2029 QE will be required to turn in a composite profile across all EPAs when they apply for the exam.

See our website for complete information about EPAS for vascular surgery.

Medical License Requirement

A full and unrestricted license to practice medicine in the U.S. or Canada is not required to apply to the QE. Effective as of the 2025-2026 academic year and thereafter, a full and unrestricted state medical license will be required for a candidate to register for the CE. Temporary, limited, educational, or institutional licenses will not be accepted, even if a candidate is currently in a fellowship.

For more information see our policy on <u>Medical License Requirements</u>.

Requirements for International Training

In most cases, surgeons who have completed some or all of their surgical training outside of the U.S. and wish to become certified by the ABS must first enroll and complete training in an accredited U.S. or Canadian residency program accredited by the ACGME or RCPSC, respectively.

There are some situations in which the ABS will accept surgical training that was completed outside of the U.S. or Canada:

• Credit for Foreign Graduate Education

The ABS does not grant credit directly to residents for surgical education completed outside the U.S. or Canada. The ABS will consider granting partial credit for foreign graduate medical education to a resident in a U.S. vascular surgery residency program, but only upon request of the program director. Preliminary evaluations will not be provided before enrollment in a residency program, either to a resident or program director. Credit for foreign training is not available to residents in independent (two-year) vascular surgery programs.

Residents will be required to take the Vascular Surgery In-Training Exam (VSITE) and/or ABS In-Training Exam (ABSITE®) before credit may be requested.

See the <u>Vascular Surgery Credit for Foreign Graduate Medical Education Policy</u> for complete details, including all required documentation. Requests for more than one year of credit must be submitted by March 15 with all required documentation.

International Rotations

The ABS will accept in certain circumstances rotations completed outside the U.S. or Canada toward its integrated and independent vascular surgery training requirements. No such rotations will be permitted in the first year (PGY-1) of vascular surgery residency training. For the ABS to consider international rotations in the PGY-5 chief year, the program must include documentation of ACGME approval of chief rotations in the PGY-4 year.

See <u>International Rotations</u> for further details regarding rotation criteria and information to be included in the request for credit.

ABS Vascular Surgery Leave Policy

General Requirements

In general, the ABS requires 48 weeks of full-time clinical activity in each year of training, regardless of the amount of operative experience obtained. The remaining four weeks of the year are considered non-clinical time that may be used for any purpose.

Trainees may take documented leave, as allowed by their program, to:

- Care for a new child, whether for birth, adoption, or placement of a child in foster care
- Care for a seriously ill family member (spouse, child, or parent)
- Bereave the loss of a family member (spouse, child, or parent)
- · Recover from the resident's own serious illness

The ABS will accept:

- For integrated programs (0+5), a total of 140 weeks in the first three years and 92 weeks in the last two years
- For independent programs (5+2), a total of 92 weeks in the two years of vascular surgery training

Additional Leave Options

- Averaging
- · Extending Chief Year
- Six-Year option
- Other arrangements

For more information and details for all of the above leave options, as well as consideration for workplace support for pregnant surgeons, please visit the <u>Leave Policy</u> page on our website.

Code of Ethics and Professionalism

Certification by the ABS carries an obligation for the highest standard of ethical behavior and professionalism. The ABS maintains that all patients are entitled to quality vascular surgical care delivered in a professional and ethical manner.

The ABS Code of Ethics and Professionalism requires that all ABS-certified surgeons and those seeking certification by the organization adhere to the following at all times:

- Treat patients in a safe and fair manner without bias to race, ethnicity, gender, gender identity, gender expression, age, sexual orientation, disability, national origin, or religion
- Demonstrate compassion, integrity, and respect for patients and their families, as well as all other members of the health care team in all types of interactions
- · Respect patient privacy and autonomy
- Be accountable to their patients, families, and all members of the health care team

- Refrain from conduct that the ABS determines, in its sole judgment, to be inconsistent with the ethical and professional standards of a surgeon
- Provide the highest level of evidence-based medical care, within their scope of practice, in accordance with the accepted standards of our profession

Candidates for certification should review the <u>ABS Code of Ethics and Professionalism</u> in full.

Reporting Requirements

ABS diplomates and surgeons who are engaged in the ABS initial certification process are required to report any of the listed actions to the ABS within three months of said action. A comprehensive list of reportable actions is available on the ABS website under Reporting Requirements.

Surgeons engaged in the ABS initial certification process who fail to report on the examination application or during the certification process may be subject to expulsion from said process pending further review. All reports must be made by the candidate via the reporting tool within their ABS portal.

Ethical Behavior as It Relates to the ABS Examinations

Unethical behavior is specifically defined by the ABS to include lying, cheating, disclosing examination content, or in any other way failing to abide by examination policies as stipulated by the ABS. Individuals exhibiting such behaviors may: have their examination scores canceled; be permanently barred from taking ABS examinations; be permanently barred from the ABS certification process; be reported to state medical boards; and/or legally prosecuted under state or federal law, including theft, fraud, and copyright statutes. All such determinations shall be at the sole discretion of the ABS.

See also Revocation of Certificate section.

Reconsideration and Appeals

The ABS has full authority to deny or grant an applicant or candidate the privilege of examination based on the facts in the case.

Applicant and candidate requests for reconsideration must be made in writing to the ABS office within 30 days of receipt of notice of the action in question.

See Reconsideration and Appeals for full policy.

Additional Considerations

Full-Time Research

For individuals in integrated programs, no more than six months of residency may be devoted to research. For individuals in independent programs, no more than 10% of the total required vascular surgical experience may be devoted to research. Any research time beyond 10% requires prior ABS approval.

Commented [CM1]: Barb, we wanted to confirm this with you. Aly was not familiar with this policy and was unaware as to whether it lived on our website somewhere.

Military Service

Credit will not be granted toward the requirements of the ABS for service in the U.S. Armed Forces, the U.S. Public Health Service, the National Institutes of Health, or other governmental agencies unless the service was as a duly appointed resident in an accredited program in vascular surgery. For more information, visit our full policy on *Military Service*.

Osteopathic Trainees

As part of the transition to a single U.S. graduate medical education (GME) accreditation system, the ACGME created "Osteopathic

Recognition" to formally acknowledge ACGME-accredited residency or fellowship programs that integrate formal education in Osteopathic Principles and Practice in their curriculum, consistent with the Osteopathic Recognition Requirements.

This training model now allows all U.S. medical school graduates to complete their residency and/or fellowship education in ACGME-accredited programs and demonstrate achievement of common Milestones and competencies. As such, osteopathic surgeons who began their vascular surgery residency training after June 2020 must have graduated from an ACGME-accredited program to be eligible to enter the ABS vascular surgery initial certification process.

For complete details see our Osteopathic Trainees policy.

Commented [CM2]: Reminder for Corrin & Aly to revisit this section after Dr. Buyske has weighed in on the osteopathic policy edits.

EXAMINATIONS IN VASCULAR SURGERY

Vascular surgery examinations are developed by exam consultant committees consisting of experienced ABS volunteers. All are required to hold current certificates and participate in the ABS Continuous Certification Program. Consultants do not receive any remuneration for their services. All ABS examinations are protected under federal copyright law.

Exam Admissibility: Seven-Year Limit

- Applicants for certification in surgery will have no more than seven academic
 years to achieve certification (i.e., pass both the QE and CE). The seven-year
 period starts immediately upon the completion of residency. If individuals delay
 applying for certification or fail to take an examination in a given year, they will
 lose exam opportunities. Individuals are encouraged to begin the certification
 process immediately after residency so they will have the full number of exam
 opportunities available to them.
- If applicants are unable to become certified within seven years of completing residency, they are no longer eligible for certification and must pursue a readmissibility pathway to re-enter the certification process. For more information, please see Regaining Admissibility to General Surgery Examinations.
- An individual will be considered admissible to the QE only when all requirements
 of the ABS currently in force at the time of application have been satisfactorily
 fulfilled, including acceptable operative experience and the attestation of the
 program director regarding the applicant's surgical skills, ethics and
 professionalism
 - Up to four opportunities in four consecutive years will be given to pass the QE providing the individual applies for certification immediately after training
- An individual will be considered admissible to the QE only when all requirements
 of the ABS currently in force at the time of application have been satisfactorily
 fulfilled, including acceptable operative experience and the attestation of the
 program director regarding the applicant's surgical skills, ethics, and
 professionalism
 - Up to three opportunities in three consecutive years will be given to pass the CE, immediately following successful completion of the QE

For the complete Exam Admissibility Policy, visit our website.

The In-Training Examination (VSITE)

The ABS offers vascular surgery training programs an annual opportunity to take the VSITE, a multiple-choice examination designed to measure trainee's progress through their knowledge of applied science and the management of clinical problems related to vascular surgery. The VSITE consists of approximately 250 multiple-choice questions and is administered in two 2.5-hour blocks as a single examination to all residency levels in a secure online format.

The VSITE is solely meant to be used by program directors as a formative evaluation instrument in assessing trainee's progress, and results of the examination are only

released to program directors. The ABS will not release score reports to examinees. The examination is not available on an individual basis and *is not required* as part of the certification process.

The VSITE includes content on both core surgery and vascular surgery, and all examinees are required to take all content.

The ABS reserves the right to withhold participation by an institution where in prior years there were suspicions of improper use, unacceptable test administration, or irregular behavior by residents taking the examination. For more information visit the <u>VSITE section</u> of our In-Training Examinations page.

The Qualifying Examination (QE)

General Information

The QE is a six-hour, computer-based examination offered once per year. The examination consists of approximately 250 multiple-choice questions designed to assess an applicant's knowledge of core surgery and vascular surgery.

Results are posted on the ABS website approximately four to six weeks after the exam. Examinees' results are also reported to the director of the program in which they completed their final year of training.

QE Application Process

Individuals who believe that they meet the requirements for certification in vascular surgery may apply to the ABS for admission to the certification process.

<u>Application instructions</u> and the online application process are available online. The individual who served as the applicant's program director during training must attest that all information supplied by the applicant is accurate.

An application will not be approved unless:

- Documentation of current or past certification in ACLS and ATLS is provided
- An approved application to the General Surgery Qualifying Exam is on file (for applicants who completed an independent or ESP program)
- Documentation of satisfactory completion for all years in each program is provided (for applicants who trained in more than one program)
- A copy of their ECFMG certificate is provided (for international medical graduates)

The acceptability of an applicant does not depend solely upon completion of an approved program of education, but also upon information received by the ABS regarding professional maturity, surgical judgment, technical capabilities, and ethical standing.

For more information, visit the <u>Vascular Surgery QE application section on our website</u>.

Taking the QE After PGY-4 or as a First-Year Fellow

As of 2025, PGY-4 applicants and first-year fellows, upon program director's recommendation, may apply for and take the QE without meeting the required ABS case numbers. A case log meeting ABS case numbers is required and must be submitted in June of their chief year.

- Exam Opportunities and Status
 Taking the exam after PGY-4 or after the first year in fellowship will count toward
 the four opportunities in four years that are granted to successfully complete the
 QE. However, the overall seven-year limit to achieve certification will not go into
 effect until completion of training.
- Eligibility Requirements
 To be eligible, the trainee must meet all ABS training and application requirements
 at the time of application to the QE, except for the required case numbers as
 noted. Program directors and program administrators must request access to the
 online application process for any eligible trainees by contacting the exam
 manager.
- Additional Information After Final Year of Training
 Upon completion of training, these individuals will be required to submit
 information regarding their PGY-5 year or second year of fellowship. The program
 director will also need to attest to this information and to the satisfactory
 completion of the entire vascular surgery training experience. They will not have
 any official status with the ABS and will not be admissible to the CE until the ABS
 has verified the satisfactory completion of vascular surgery training.

Visit our website for more information on <u>PGY-4 Applicants and First-Year Fellows</u>.

Examination Accommodations

In support of candidates with disabilities or learning differences, or those who are pregnant and lactating mothers and/or have other medical conditions, the ABS will work with Pearson VUE to try to accommodate requests for accommodations. Pearson VUE has specific designated centers that are able to offer such accommodations, and these locations fill up on a first-come, first-served basis. ABS has no control over these accommodations.

Please see our $\underline{\textit{Examination Accommodations policy}}$ for full details and to access the request form.

Time Limitations

If an individual has not actively pursued admissibility or readmissibility to the vascular surgery certification process within 10 years after completion of training, they will be required to re-enter formal residency training for PGY-4 and PGY-5 level training in a program accredited by the ACGME or RCPSC to regain admissibility.

The Certifying Examination (CE)

General Information

The CE is an oral examination consisting of three 30-minute sessions conducted by teams of two examiners that evaluate a candidate's clinical skills in organizing the diagnostic evaluation and management of common problems in vascular surgery. It is the final step toward certification in vascular surgery.

The CE is designed to assess a candidate's surgical judgment, clinical reasoning skills, and problem-solving ability. Technical details of operations may also be evaluated, as well as issues related to a candidate's ethical and humanistic qualities.

- The Curriculum
 The content of the CE is generally, though not exclusively, aligned with the SCORE® Curriculum Outline for Vascular Surgery.
- How it's Administered
 The CE is administered virtually over three days in the spring. The exams are
 conducted by examiners who are experienced ABS diplomates. All examiners are
 active in the practice of vascular surgery, are currently certified by the ABS, and
 participate in the ABS Continuous Certification Program. The ABS makes every
 effort to avoid conflicts of interest between candidates and their examiners.
- Exam Results
 Exam results are posted on the ABS website within 10 days after the final day of the exam. Examinees' results are also reported to the director of the program in which they completed their final year of residency.

If successful on this examination, the candidate is deemed certified in vascular surgery by the ABS.

Special Circumstances

Exam Irregularities and Unethical Behavior
 Examination irregularities, i.e., cheating in any form, or any other unethical
 behavior by an applicant, examinee, or diplomate may result in the barring of the
 individual from examination on a temporary or permanent basis, the denial or
 revocation of a certificate, and/or other appropriate actions, up to and including
 legal prosecution. Determination of sanctions for irregular or unethical behavior
 will be at the sole discretion of the ABS. See the section on Ethics and Professionalism for more information.

ISSUANCE OF CERTIFICATES AND CONTINUOUS CERTIFICATION

A candidate who has met all requirements and successfully completed the QE and CE will be deemed certified in vascular surgery and issued a certificate, signed by ABS and VSB-ABS officers, attesting to these qualifications.

Diplomates must participate in the ABS Continuous Certification Program to maintain their certification. The ABS reserves the right to change the requirements of Continuous Certification at any time.

Reporting of Status

The ABS considers the personal information and examination record of an applicant or diplomate to be private and confidential. When an inquiry is received regarding an individual's status with the ABS, a general statement is provided indicating the person's current situation as pertains to ABS certification, along with their certification history. Please note that any certificate obtained after September 2018 does not include an expiration date, reflecting the ongoing nature of Continuous Certification.

A surgeon's status may be verified at any time through <u>Check a Certification</u> on our website.

The ABS reports all individuals as having one of two statuses: Certified or Not Certified. In addition, an individual may be described as:

- In The Examination Process
- Clinically Inactive
- Retired
- Suspended
- Revoked
- On Probation

Please refer to the $\underline{\textit{Public Reporting of Status}}$ policy on the ABS website for greater detail on status descriptions.

Individuals may describe themselves as certified by the ABS or as an ABS diplomate only when they hold a current and active ABS certificate. Those whose certificates have expired will be considered Not Certified.

Continuous Certification

Continuous Certification is a program of ongoing professional development created by the ABS in conjunction with the ABMS and its other 23 member boards. It is intended to document to the public and the health care community the commitment of diplomates to lifelong learning and quality patient care.

The requirements of the ABS Continuous Certification Program are:

 Professional Responsibility – A full and unrestricted medical license, hospital/surgical center privileges (if clinically active), participation in a practice improvement activity, and attestation to the ABS Code of Ethics and Professionalism **Commented [CM3]:** Jess, we wanted to confirm this detail with you

Commented [CM4R3]: Jess confirmed. Resolving comment.

Education and Assessment – Category-1 CME and self-assessment activities
relevant to the surgeon's practice, and successful completion of an exam/assessment
in the specialty

There is also an annual fee due upon registration for the first assessment, two years after initial certification. See our <u>Annual Fee</u> policy for more information. Surgeons certified by the ABS are required to participate in Continuous Certification to maintain all ABS certificates they hold. Please refer to <u>Continuous Certification</u> on our website for more details.

Revocation of Certificate

Certification by the American Board of Surgery may be subject to sanction such as revocation or suspension at any time that the Diplomates and Surgeons in Practice Committee of the ABS shall determine, in their sole judgment, that the diplomate holding the certification was in some respect not properly qualified to receive it or is no longer properly qualified to retain it.

The ABS may consider sanctions for just and sufficient reason, including, but not limited to, any of the following:

- The diplomate did not possess the necessary qualifications nor meet the
 requirements to receive certification at the time it was issued; falsified any part of
 the application or other required documentation; participated in any form of
 examination irregularities; or made any material misstatement or omission to the
 ABS, whether or not the ABS knew of such deficiencies at the time.
- The diplomate engaged in the unauthorized disclosure, publication, reproduction, or transmission of ABS examination content, or had knowledge of such activity and failed to report it to the ABS.
- The diplomate misrepresented their status with regard to board certification, including any misstatement of fact about being board certified in any specialty or subspecialty.
- The diplomate engaged in conduct resulting in a revocation, suspension, qualification, or other limitation of their license to practice medicine in any jurisdiction and/or failed to inform the ABS of the license restriction.
- The diplomate engaged in conduct resulting in the expulsion, suspension, disqualification, or other limitation from membership in a local, regional, national, or other organization of their professional peers.
- The diplomate engaged in conduct resulting in revocation, suspension, or other limitation on their privileges to practice surgery in a health care organization.
- The diplomate failed to respond to inquiries from the ABS regarding their credentials, or to participate in investigations conducted by the board.
- The diplomate failed to provide an acceptable level of care or demonstrate sufficient competence and technical proficiency in the treatment of patients.
- The diplomate failed to maintain ethical, professional, and/or moral standards acceptable to the ABS.

For more information and details, visit the *Revocation of Certificate* page on our website.

RESOURCES

The ABS website, <u>www.absurgery.org</u>, is updated regularly and offers many resources for individuals interested in ABS certification. Potential applicants are encouraged to familiarize themselves with the website. Applicants should use the website to submit an application, check the application's status, update personal information, register for an examination, and view recent exam history.

In addition, the following policies are posted on the website. They are reviewed regularly and supersede any previous versions.

- Credit for Foreign Graduate Medical Education
- Early Specialization Program
- Code of Ethics and Professionalism
- Examination Admissibility
- Examination of Persons with Disabilities
- Examination Accommodations (Lactating Mothers & Other Medical Conditions)
- Leave Policy
- Military Activation
- Osteopathic Trainees Policy
- Privacy Policy
- Public Reporting of Status
- Reconsideration and Appeals
- Regaining Admissibility to Vascular Surgery Examinations
- Representation of Certification Status
- Revocation of Certificate
- Substance Abuse

ABOUT THE VSB-ABS

VSB-ABS Directors

The VSB-ABS consists of directors appointed from the leading vascular surgery societies in the United States, including ABS council members previously elected from within the specialty. Directors are elected by the VSB-ABS for one six-year term.

2024-2025 VSB-ABS Directors

Kellie R. Brown, M.D. - Chair

Malachi G. Sheahan III, M.D. - Vice Chair

Christopher J. Abularrage, M.D.

Bernadette Aulivola, M.D.

Rabih A. Chaer, M.D.

Yana Etkin, M.D.

Jeffrey Jim, M.D.

Jason T. Lee, M.D.

Raghu L. Motaganahalli, M.D.

David A. Rigberg, M.D.

Elsie Ross, M.D., M.S.

Andres Schanzer, M.D.

Brigitte K. Smith, M.D.

ABS Executive Staff

President & Chief Executive Officer - Jo Buyske, M.D.

Vice President - Karen Brasel, M.D., M.P.H.

Chief of Staff & Chief Administrative Officer - Jessica A. Schreader

Chief Operating & Assessment Officer – Andrew Jones, Ph.D.

General Counsel & Chief Diversity, Equity and Inclusion Officer - Adanwimo Okafor, Esq.

Editor-in-Chief, SCORE® - Amit R. T. Joshi, M.D.