



# THE AMERICAN BOARD OF SURGERY

## PEDIATRIC SURGERY EXAM BLUEPRINT FOR THE CONTINUOUS CERTIFICATION (CC) READMISSIBILITY EXAMINATION

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The Pediatric Surgery Board (PSB) of the American Board of Surgery (ABS) recently reviewed and revised the exam blueprint used for the Pediatric Surgery Continuous Certification (CC) Readmissibility Examination, so that the exam better reflect the training and practice of pediatric surgery-trained fellows. The evidence-based revision process involved updating and reorganizing the content tested on the exam, specifying the dimensions of care tested on the exam (e.g., disease understanding, preoperative care, perioperative care), and determining weights that dictate how these content categories and dimensions of care are represented on the exam. As part of the review, multiple stakeholders were consulted (e.g., PSB Directors, pediatric surgery program directors, current diplomates), and feedback from these groups was used to inform the content and weights.

### **Content Distribution**

Tables 1 and 2 include the major content categories and dimensions of patient care in the blueprint. Weights are also provided for each. Concretely, the weights indicate the approximate percentage of questions to be included on the Pediatric Surgery CC Readmissibility Examination; actual percentages may vary slightly from year to year.

### *Content Categories*

Table 1 includes the major content categories for the exam.

### *Dimensions of Patient Care*

Table 2 includes dimensions of care that will be tested on the exam. Exam questions will address *both* a section 1 topic *and* a dimension of care (e.g., intraoperative management of a specific condition). The weights included here represent targets for the percentage of questions that will be devoted to each dimension of care. Additionally, exam content may also address prenatal populations or ambulatory settings; these will also be represented on the exam according to the weights listed.



**TABLE 1 – CONTENT CATEGORIES**

<b>Content Category</b>	<b>Weight</b>
<b>1. General Pediatric Surgery</b>	<b>55.0%</b>
1. Skin and Soft Tissue	--
2. Head and Neck	--
3. Thoracic/Airway	--
4. Abdomen	--
5. Genitourinary	--
6. Endocrine	--
7. Vascular	--
8. Health Equity/Disparities	--
<b>2. Critical Care</b>	<b>13.0%</b>
1. Fluid and Electrolytes	--
2. Respiratory	--
3. Cardiovascular	--
4. Renal	--
5. Gastrointestinal/Nutrition	--
6. Hematology	--
7. Neurology	--
8. Anesthesia	--
<b>3. Trauma</b>	<b>13.0%</b>
1. Primary and Secondary Survey (ATLS)	--
2. Burns	--
3. Cranial	--
4. Facial	--
5. Spine	--
6. Abdominal	--
7. Pelvic	--
8. Genitourinary	--
9. Thoracic	--
10. Gynecologic	--
11. Vascular	--
12. Non-accidental	--
13. Musculoskeletal	--
14. PTSD & Suicide	--



**TABLE 1 – CONTENT CATEGORIES (CONT'D)**

<b>Content Category</b>	<b>Weight</b>
<b>4. Oncology</b>	<b>13.0%</b>
1. Renal	--
2. Neuroblastoma	--
3. Liver Tumors	--
4. Rhabdomyosarcoma	--
5. Teratomas and Germ Cell Tumors	--
6. Sarcomas	--
7. Thoracopulmonary	--
8. Gastrointestinal	--
9. Breast	--
10. Skin	--
11. Pancreas	--
12. Adrenal	--
13. Chemotherapeutic agents	--
<b>5. General Pediatrics</b>	<b>6.0%</b>
1. Neonatology	--
2. Respiratory	--
3. Hematology	--
4. Immunology	--
5. Infectious Disease	--
6. Neurosurgery	--
7. Wound management	--



**TABLE 2 – DIMENSIONS OF CARE**

<b>Dimensions of Care</b>	<b>Weight</b>
<b>1. Disease Understanding</b>	<b>20.0%</b>
1. Epidemiology	--
2. Pathophysiology/Basic Science	--
3. Risk Assessment/Prognosis	--
<b>2. Preoperative Care</b>	<b>38.0%</b>
1. Diagnosis and Work-up	--
2. Indications for Surgery	--
3. Preoperative Care/Medical Care	--
<b>3. Perioperative Care</b>	<b>30.0%</b>
1. Intraoperative Management (Technical)	--
2. Postoperative Care/Complications	--
<b>4. Follow-up &amp; Outcomes</b>	<b>12.0%</b>
1. Follow-up and Surveillance	--
2. Outcomes (short-term, long-term)	--
<b>Additional Flags*</b>	
1. Prenatal	<b>5.0%</b>
2. Ambulatory	<b>8.0%</b>

\*Flags (i.e., Prenatal and Ambulatory) may be used in combination with Dimensions of Care; thus, these weights are in addition to those of the Dimensions of Care