Exam Rescore Request Form

We employ extensive and rigorous quality control procedures to ensure the accuracy of exam results for all examinees. Although the possibility of an exam being incorrectly scored is extremely remote, we recognize that examinees may wish to have their exam rescored. In such cases, the physician can make a request for the rescore service.

Examinees who wish to request a rescore service must send the request in writing — detailing the specific reason why a scoring error is suspected. Requests must be postmarked within six weeks of the official release of the exam results and must be accompanied by a $250 check made payable to the American Board of Anesthesiology. We will verify the physician’s response to each question, compare those responses to the answer key and recalculate the scaled score.

We will communicate results of the rescore to you within six weeks of receiving the request. Requests and the $250 fee should be sent to:

Rescore Request
The American Board of Anesthesiology
4208 Six Forks Rd, Suite 1500
Raleigh, NC 27609-5756

ABAID#: ___________________ Examinee’s Name: __________________________________________

Exam to be rescored: ___________________ Today’s Date: ___________________

Mailing Address: ________________________________________________________________

Email: ________________________________________________________________

Please place an “X” beside the method by which you would like to receive your results:

[ ] Email [ ] United States Postal Mail

Please indicate why you would like your exam rescored:

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