



ABA Update

**SAAAPM 2024 Annual Meeting
AACPD; AAPAE**

John Fiadjoe, M.D., ABA Secretary

Mohammed Minhaj, M.D., MBA, ABA Director

Ann Harman, PhD, Chief Assessment Officer



Our Mission

To advance the highest standards of the practice of anesthesiology



Our Vision

To transform certification to shape the future of anesthesiology



Our Director Values



Serve the Specialty



Listen and Engage



Lead the Way to Elevate Standards

Our Board of Directors



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VIVEK MOITRA, M.D.

Thank You

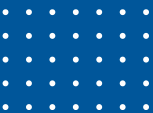


BASIC Exam Policy Update

- BASIC Exam is a qualifying exam for initial ABA certification and candidates must pass the exam for entry into the exam system
- **Previous Stipulation - If a candidate fails the BASIC Exam a second or subsequent time, it lead to an automatic “unsatisfactory” on CCC reports**
- However, effective Jan. 1, 2025, the ABA will not address how the programs utilize a resident’s performance on the BASIC Exam
- **If a candidate fails the BASIC Exam a second or subsequent time, it will no longer lead to an automatic “unsatisfactory” on CCC reports**
- Each residency program establishes its program’s graduation requirements. With this policy update, individual programs remain free to set specific requirements for their residents at the program’s discretion
- We will continue to inform programs of the performance of their residents on the BASIC Exam

New Policy!

**Effective:
Jan. 1, 2025**



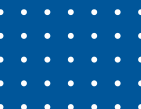
BASIC Exam Policy Update Cont.

- Each residency program will continue to complete and submit to the ABA CCC reports for residents who choose to take the BASIC Exam and pursue ABA certification
- This ABA policy update is effective for all candidates who choose to pursue ABA certification
- Applies only to those currently active in residency as of Jan. 1, 2025, and future residents
- The ABA believes the BASIC Exam continues to provide an independent evaluation to assess foundational knowledge of residents and to demonstrate their ability to meet a high standard



Absence from Training Policy Form Update

- Absence from Training Policy states that, “*The request must include: (1) the reason for the absence training request (serious medical illness, military family leave, parental or family leave covered under the Family and Medical Leave Act would be reasons acceptable to the ABA)*”
- We have updated the ATP form to remove “*Unexpected Family Death*” to align with FMLA policy



Reduced PD Paperwork Residents' and Fellows' Training Away Requests

- We are removing the requirement that program directors inform the ABA about residents' and fellows' training away of four weeks or less for:
 - Established international rotations
 - ASA advocacy rotations or Texas advocacy rotations
 - If all Clinical Competence Committee (CCC) reports are satisfactory
 - Training away does not occur during the CA-1 year or first month of a fellowship
 - Previously approved training away rotations and newly requested rotations combined do not exceed one-month cumulative
- Full language and policy will be available in the 2025 Policy Book

New Policy!

Effective:
Jan. 1, 2025

RTID Updates

SOE & OSCE Expanded Pass/Fail Report – Now Available

Report includes:

- Names of candidates
- If they are a first-time taker
- Pass/fail for both SOE and OSCE
- Candidates can opt out
- Data Stored for 7years



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2023 Annual Report- ADVANCED Exam Results Exam Results of Residency Graduates

10/25/2023

Program ID	Grad Class Year	Result	Name	First Attempt
	2023	Pass		Yes
	2023	Pass		Yes
	2023	Fail		Yes
	2023	Pass		Yes
	2023	Pass		Yes
	2023	Pass		Yes

2025-2026 In-Training Examination (ITE) Key Dates

Exam Name	Code	Exam Date(s)	Registration Window	Late Registration Window	
2025	ITE-Anesthesiology	ITE-A	Feb. 6-10	Nov. 1-30, 2024	Dec. 1-13, 2024
	ITE-Pediatric Anesthesiology	ITE-Peds	Feb. 20-22	Dec. 2-19, 2024	-
	ITE-Critical Care Medicine	ITE-CCM	March 13-15	Jan. 20-Feb. 21, 2025	-
	ITE-Pain Medicine	ITE-PM	March 20-22	Jan. 20-Feb. 21, 2025	-
2026	ITE-Anesthesiology	ITE-A	Feb. 5-9	-	-
	ITE-Pediatric Anesthesiology	ITE-Peds	Feb. 19-21	-	-
	ITE-Critical Care Medicine	ITE-CCM	March 12-14	-	-
	ITE-Pain Medicine	ITE-PM	March 19-21	-	-

2025 Upcoming Program Director Meeting

- We held the previous Program Director Meeting in February 2023

Coming Soon!

February 2025 Dates
Virtual and in-person
options!



Alternate Entry Pathway Updates



AEP-Fellowship

Provides a subspecialty certification pathway for outstanding internationally trained medical graduates



Fast Track Pathway for AEP

Participants who score 46 or above on ITE



AEP Program Expansion

Increased maximum AEP slots per program to eight



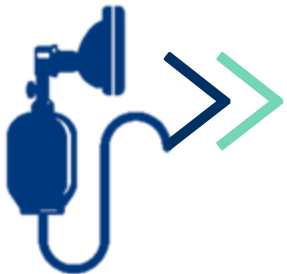
AEP Exceptional Clinician Pathway *effective Jan. 1, 2025*

Documented achievement in clinical excellence, rather than the potential for future success

Our Strategic Plan

OCTOBER 19, 2024

ABA Announces New 2025–2030 Strategic Plan



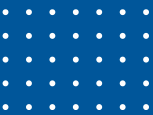
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Read Our Strategic Plan

We encourage you to view the entire plan on our website here:

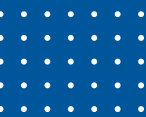
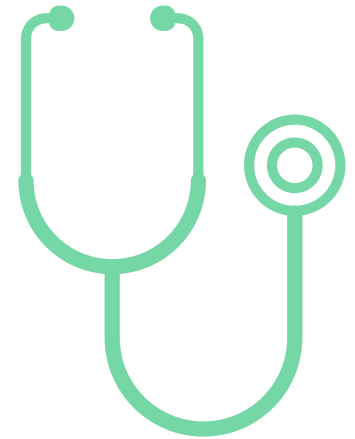


Pilot: Formative Assessment Tool for Residents



Exploring a Formative Assessment Tool for Residents

- ABA is in the early stages of developing a new formative assessment tool that will provide supplemental knowledge to residents and offer insight and feedback on their medical knowledge acquisition throughout residency training
- This tool is meant to spark conversation and learning and it is not a question bank
- While inspired in part by the success of ABA's MOCA Minute, this new tool will be different in types of questions, volume, frequency and time to complete will be unique
- Hosted focus groups to explore this concept with both residents and program directors



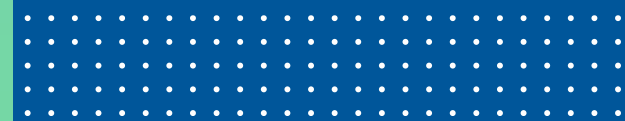
Assessment Tool for Residents: Pilot Phase

- Pilot will begin in November with a select group of residents
- Participating residents will be asked to provide feedback on the pilot process itself, to help refine the structure of the program
- The pilot is the first step in an evolving, long-term project



Format for Pilot:

- Prompts will include a combination of multiple-choice, alternate question types and will cover BASIC and ADVANCED Exam topics
- Residents will receive a total of 36 questions by email (six each week)
- Each item will be available for two weeks for residents to answer



Assessments Update

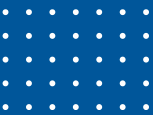
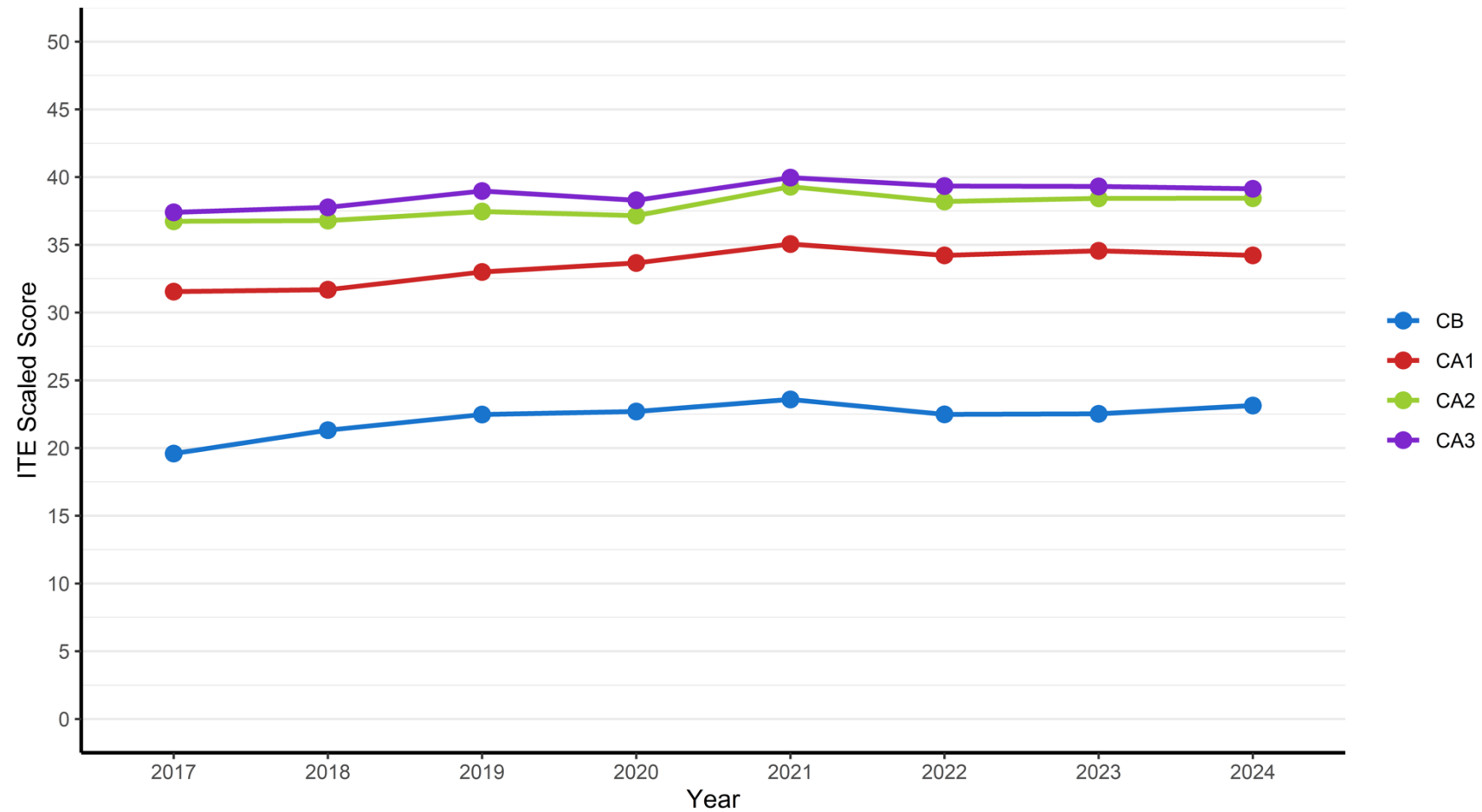
Three-Option Multiple Choice Question (MCQ)

- A study conducted by the ABA concluded that there were minimal changes in physician performance and psychometric properties when changing MCQs from 4- to 3-option
 - In 2020, we piloted the 3-option MCQs for subspecialty in training examinations (ITE-CCM and ITE-PA)
 - The 3-option MCQs were transformed from their 4-option counterparts (administered in 2019) by removing the least effective distractor
- 3-option MCQs have the added benefit of efficiency in item development and administration

We successfully transitioned:

- Critical Care Medicine and Pediatric Anesthesiology Exams in 2020
- Pain Medicine Exam in 2022
- ITE-Anes, BASIC and ADVANCED Exams in 2023

ITE Performance By Training Level & Exam Year



June 2024 BASIC Exam Results

- Standard since June 2023: 67.5% (Scale Score = 184)
- Key validation eliminated two items from Form A and three items from Form B
- Reliability: 0.81 (Form A) & 0.83 (Form B)
- Pass rate breakdown:

First time-takers' pass rate: **90.4%**

Second time-takers' pass rate: **71.4%**

Third time-takers' pass rate: **73.3%**

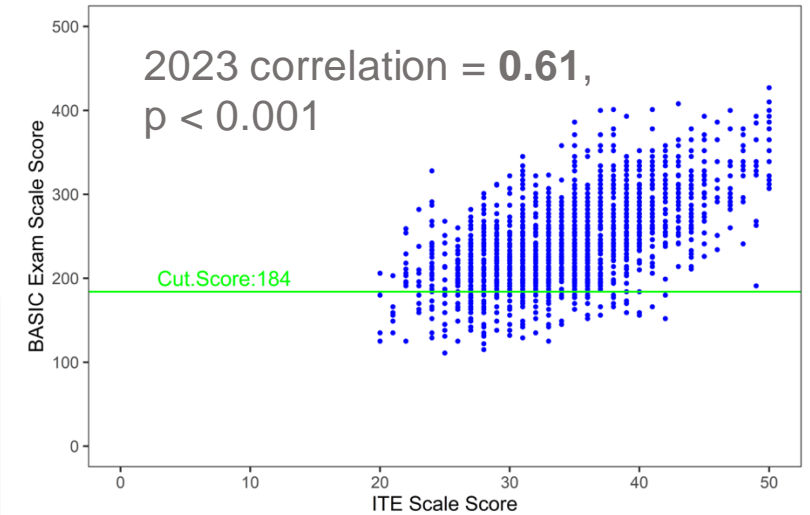
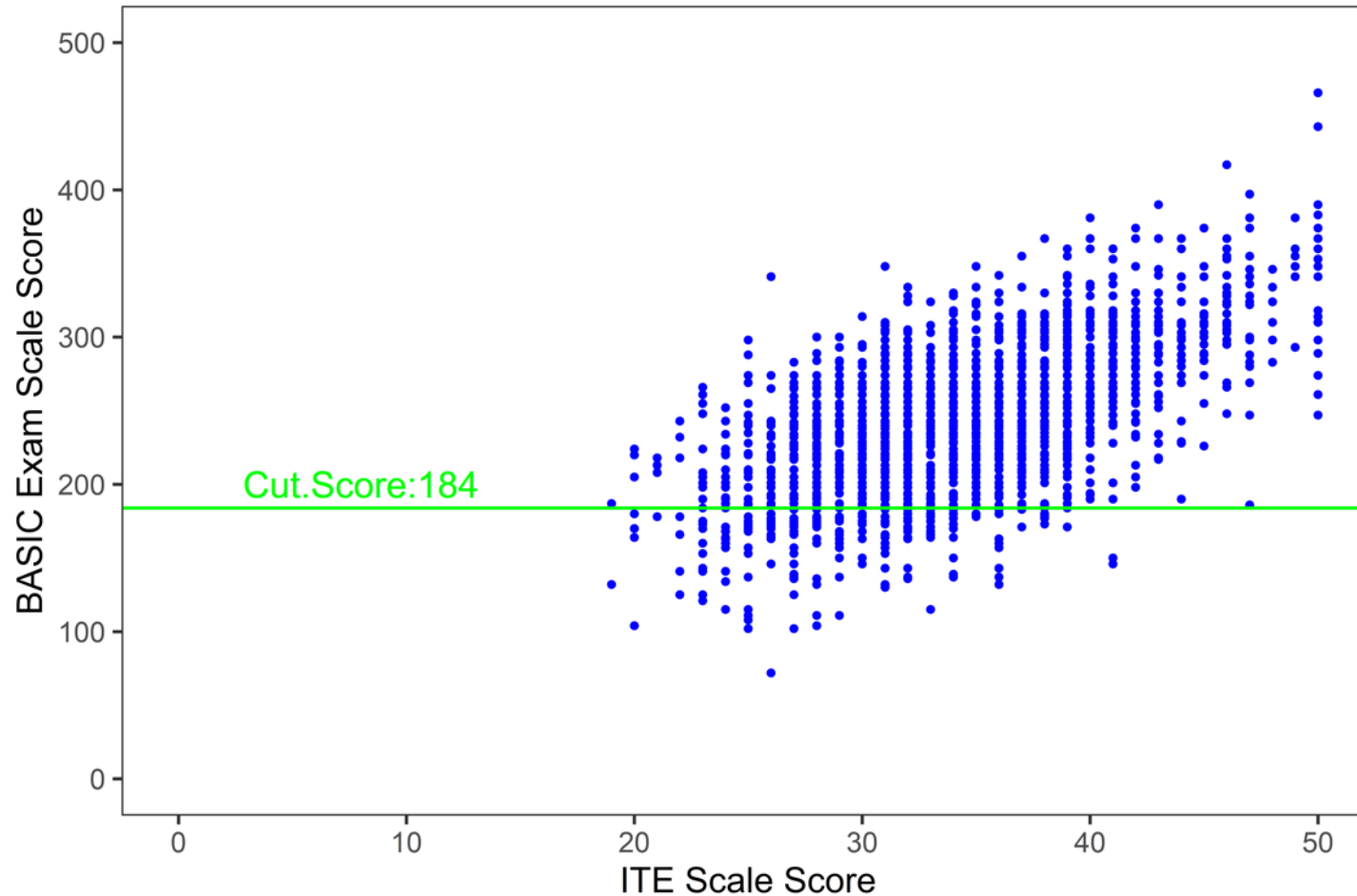
Fifth time-takers' pass rate: **0.0%**

2,042
residents examined

90.1%
of residents
passed

Relation of Scores

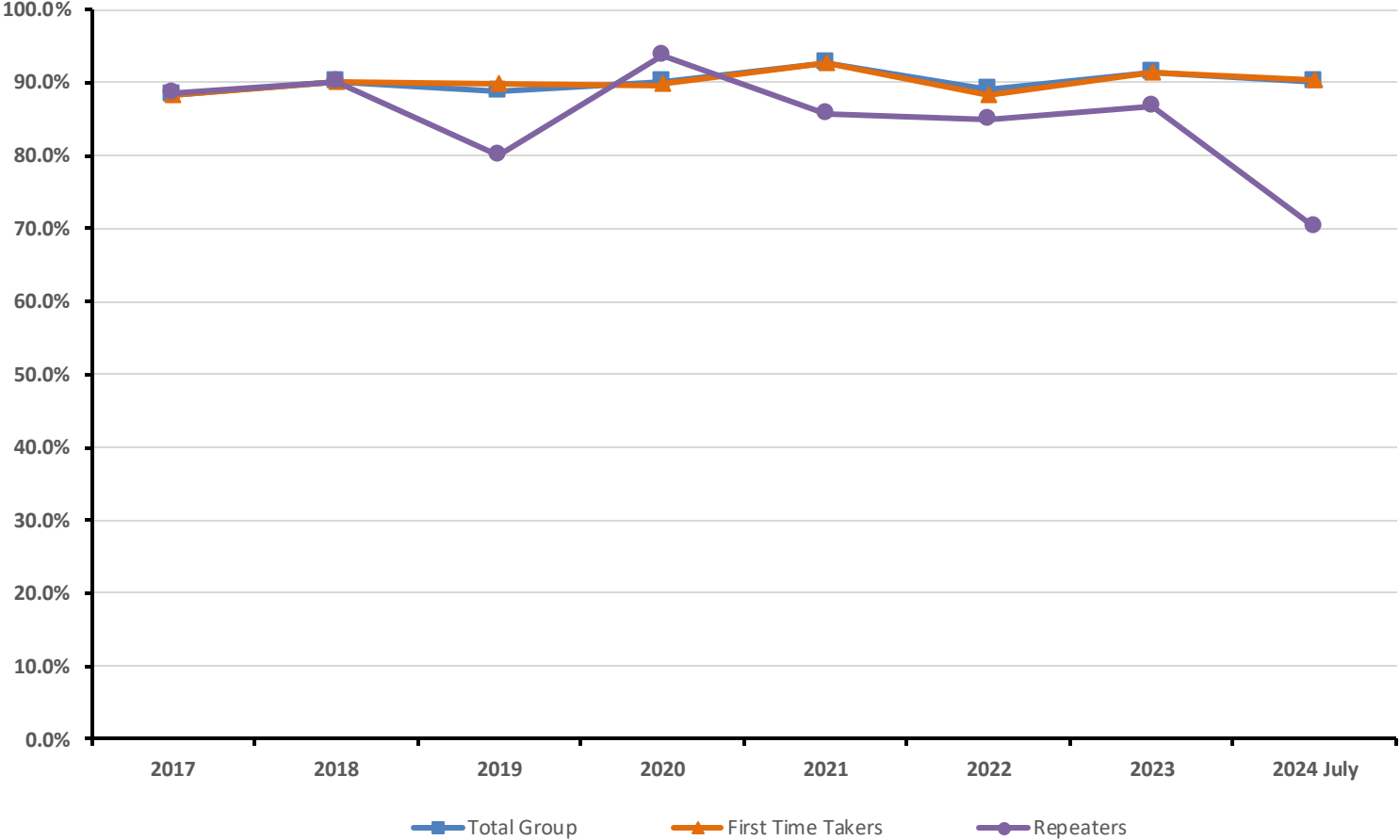
2024 ITE to 2024 June BASIC Exam



The correlation between the 2024 ITE scale scores and 2024 June BASIC Exam scale scores is **0.60**, $p < 0.001$

BASIC Exam

Success Rates (through June 2024)



2024 July ADVANCED Exam Results

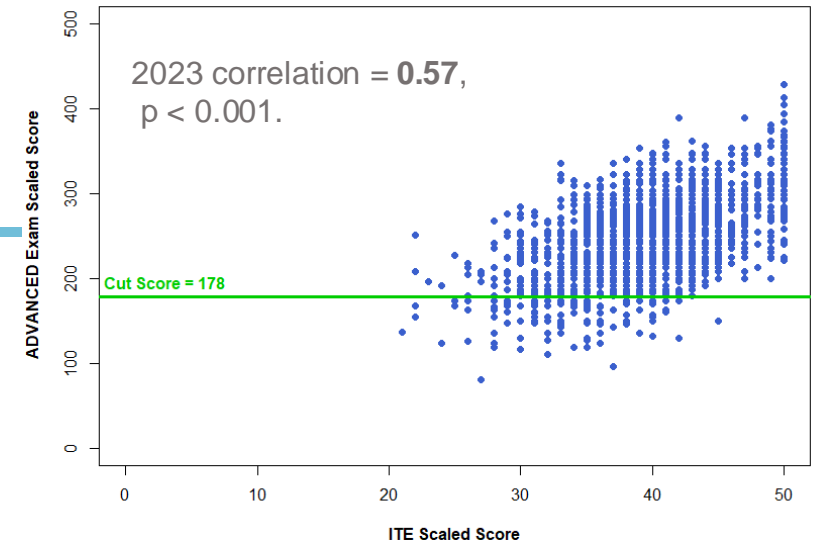
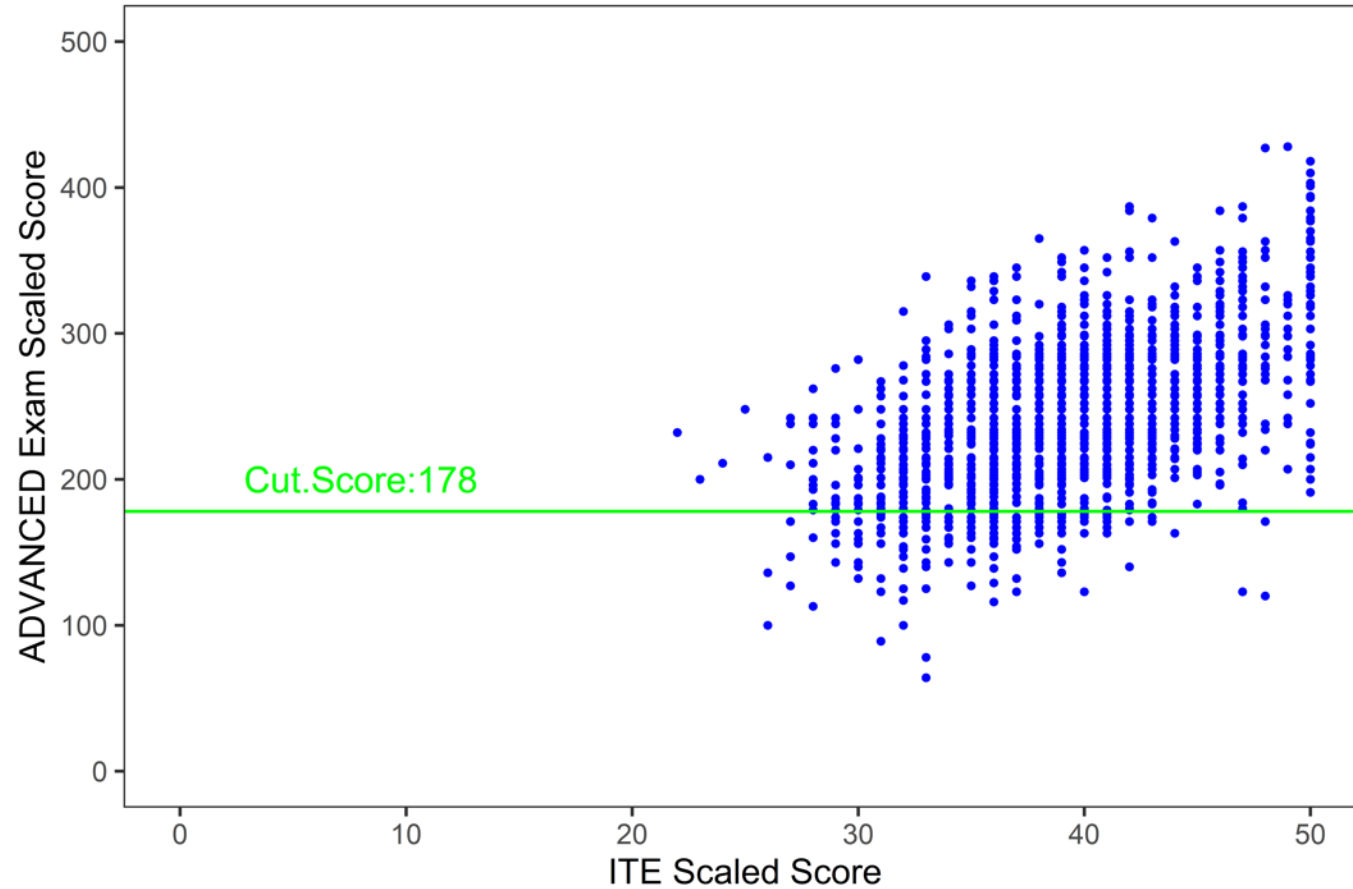
- Standard since July 2023: 66.0% (Scale Score = 178)
- Candidates were assigned to examine Friday or Saturday
- Key validation eliminated five items in Form A and five items in Form B
- Reliability: 0.75 (Form A) & 0.77 (Form B)

1,921
candidates
examined

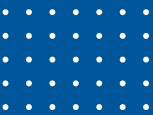
89.2%
of candidates
passed

Relation of Scores

2024 ITE Through July 2024 ADVANCED Exam



The correlation between 2024 ITE scaled scores and 2024 July ADVANCED Exam scaled Scores is 0.53, $p < 0.001$

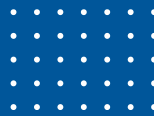
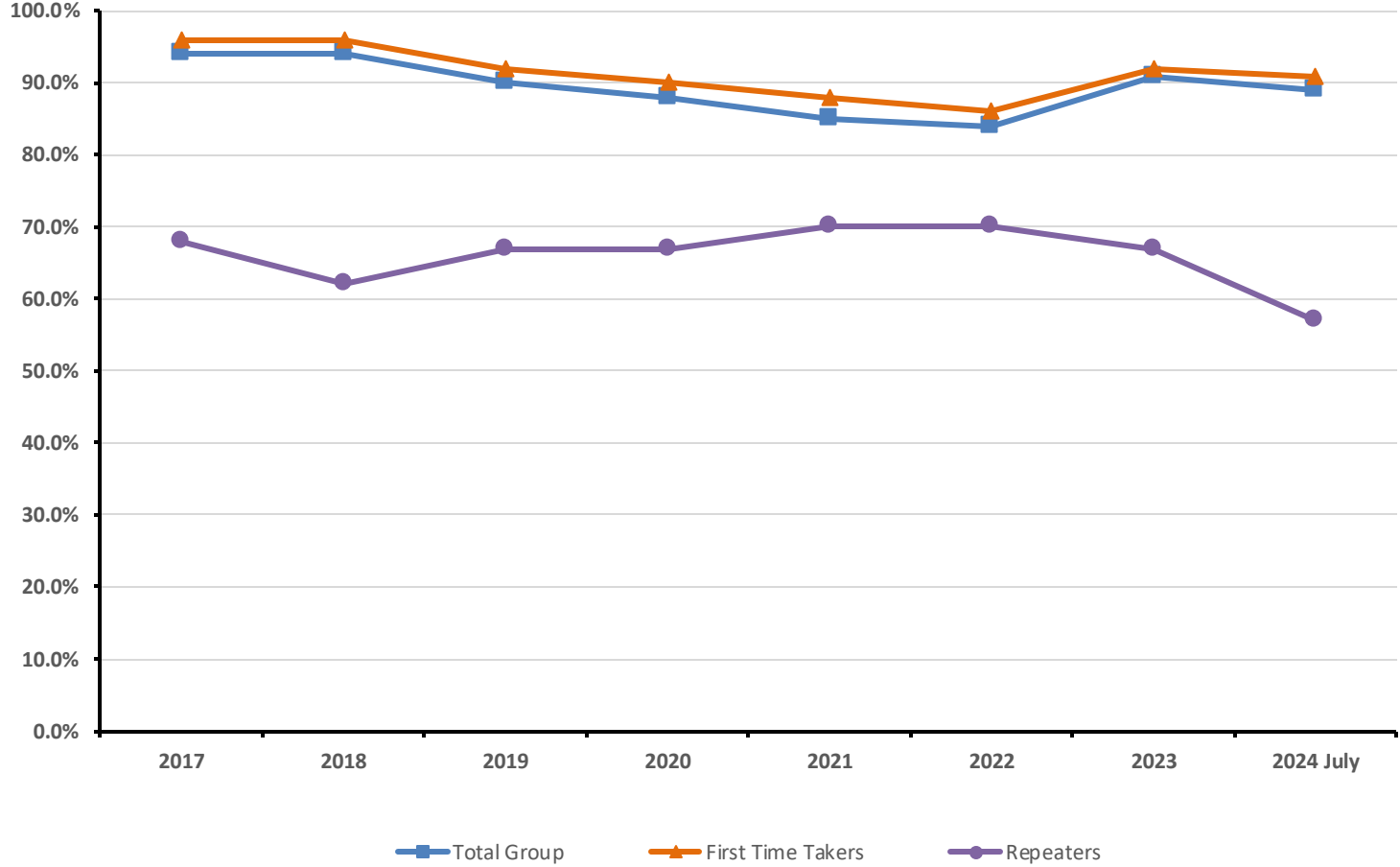


Relation of Scores

2024 ITE Through July 2024 ADVANCED Exam

2024 ITE Scaled Score	2024 ITE Percentile Rank in CA-3	N	July 2024 ADVANCED Scaled Score Mean (S.D.)	ADVANCED Pass Rate
≤ 25	≤1	4	223(21)	100%
26-30	1-4	65	190(39)	65%
31-35	6-21	305	214(44)	80%
36-40	27-58	690	236(41)	91%
41-45	65-86	482	259(41)	98%
≥ 46	≥90	217	295(55)	99%

ADVANCED Exam Success Rates (through July 2024)



APPLIED Exam



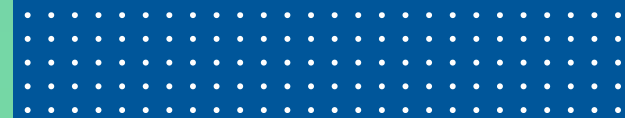
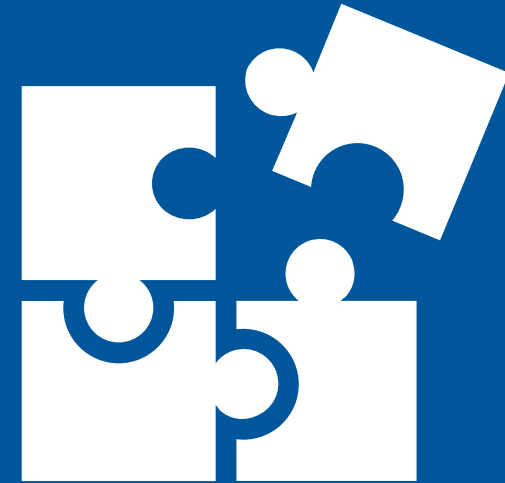
OSCE Structure

- Seven station circuit
 - Five communication & professionalism skills
 - Two technical skills
- Each station: 8 minutes long; 4 minutes between stations to review next scenario
- Candidates interact with either a standardized patient/clinician actor or directly with an examiner



DEI OSCE Topics

- The OSCE Committee added diversity dimensions to future scenarios
- The committee developed four related cases that include elements related to diversity, equity and inclusion:
 - Ethical issues
 - Communication with other professionals
 - Periprocedural complications
 - Treatment option and informed consent case
- Interpretation of Monitors and Echocardiograms scenarios now include patient demographic information when relevant to several scenarios



APPLIED EXAM: OSCE Updates

1

Application of Ultrasonography (Point-of-Care Ultrasound)

- Heart (2022)
- Lung (2024)
- Abdomen (2025)

2

Interpretation of Echocardiogram & Surface Ultrasound of Lung

- Interpretation of Abdominal ultrasound images will include (2026):
 - Right Upper Quadrant
 - Left Upper Quadrant
 - Pelvis
 - Gastric

3

Interpretation of Monitors

- Qualitative and quantitative neuromuscular blockade – value (2026)
- Fetal heart rate monitor – waveform and value (2026)

2024 APPLIED Exam Results (Weeks 1-6)



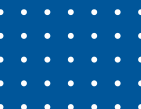
398 examiners delivered exam



2,331 candidates completed exam



1,767 achieved certification

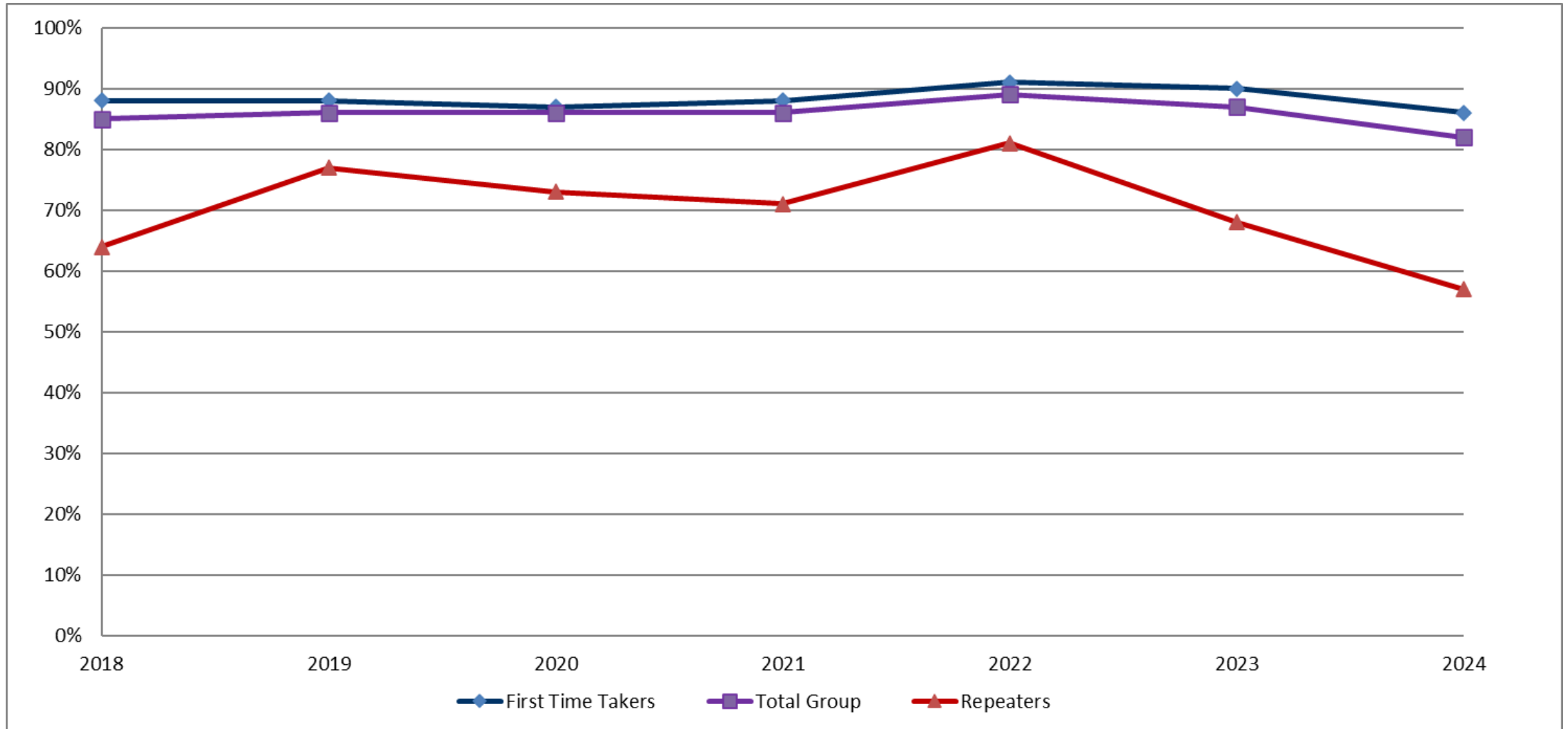


Subspecialty Exam Eligibility

- New policy provides fellows an opportunity to take both the APPLIED and subspecialty exam within the same year regardless of the date of their APPLIED Exam
- Previously the ABA would prioritize fellows during the APPLIED Exam registration to ensure they are certified before taking their subspecialty exam
- Beginning with fellows enrolled in an ACGME program as of July 1, 2024, fellows will be able to:
 - Register for the APPLIED Exam
 - Register for their subspecialty exam
 - If their subspecialty exam takes place before their APPLIED Exam date they can bank their subspecialty scores until they pass the APPLIED Exam or until the candidate's duration expires

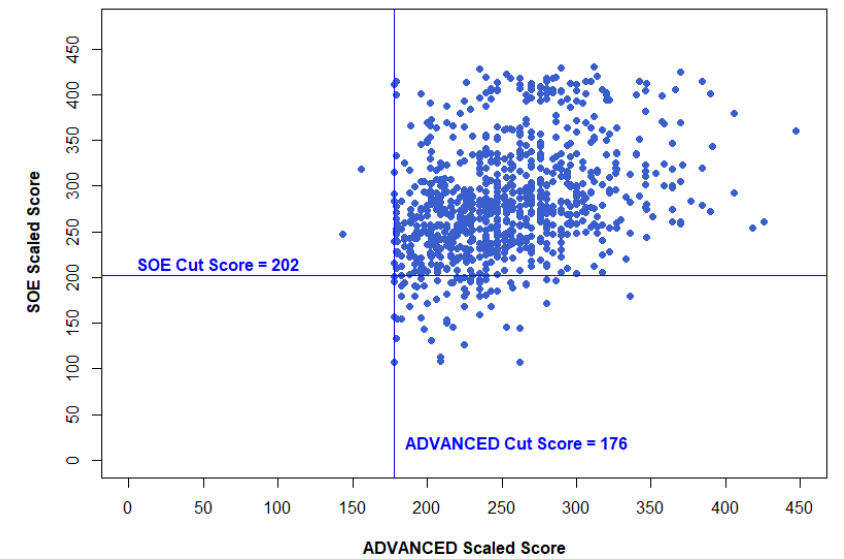
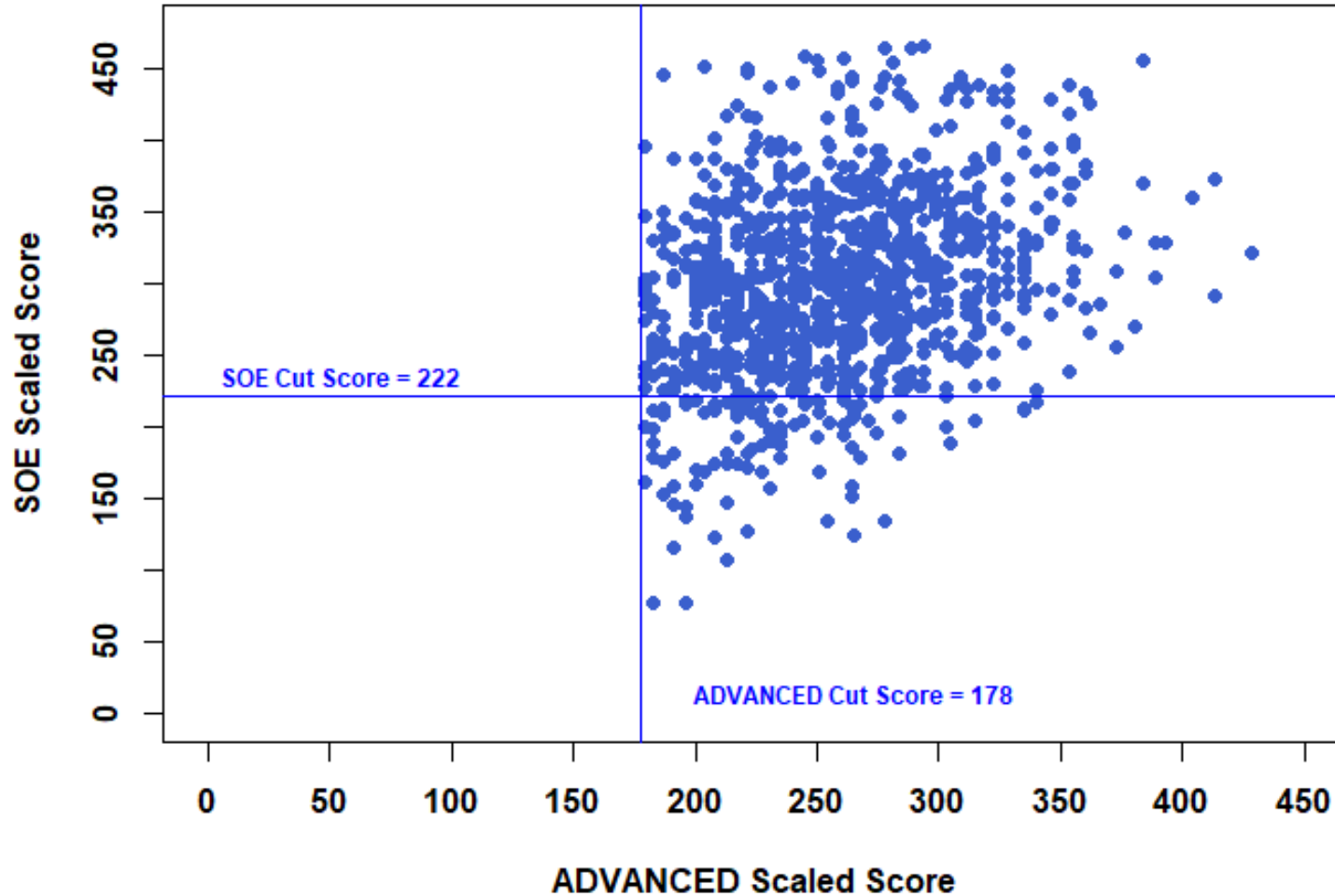
New Policy!
Now Effective

Standardized Oral Exam Success Rates



Relation of Scores

Spring 2024 SOE to First Attempt on July 2023
ADVANCED Exam



Spring 2023 SOE and first attempt
on July 2022 ADVANCED
correlation = 0.36, $p < 0.001$

The correlation
between the Spring
2024 SOE scaled
scores and first
attempt on the July
2023 ADVANCED
Exam scaled scores
is 0.29, $p < 0.001$

2024 OSCE & SOE Results (Weeks 1-6)

- 2,051 candidates took both SOE and OSCE this year

	OSCE: Fail	OSCE: Pass	Total
SOE: Fail	118 (5.8%)	208 (10.1%)	326 (15.9%)
SOE: Pass	147 (7.2%)	1,578 (76.9%)	1,725 (84.1%)
Total	265 (13.0%)	1,786 (87.0%)	2,051 (100%)

2,174

candidates took OSCE component

87.3%

of candidates passed OSCE component

2,210

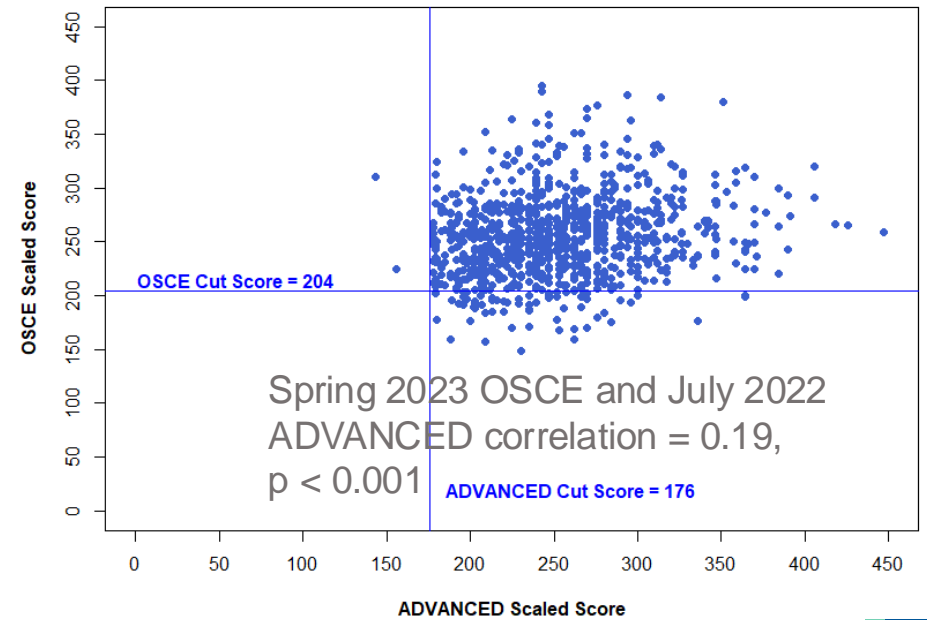
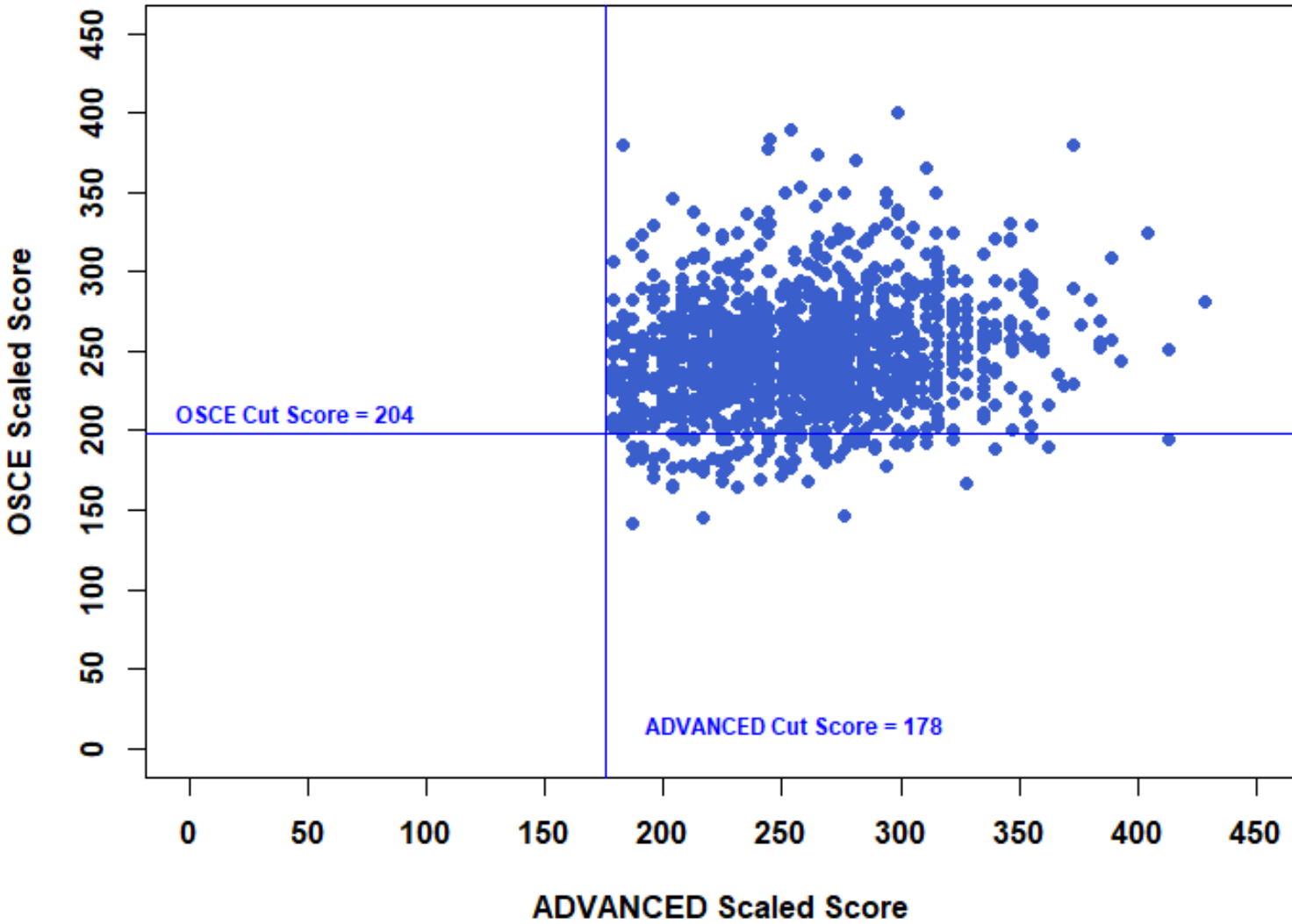
candidates took SOE component

82.9%

of candidates passed SOE component

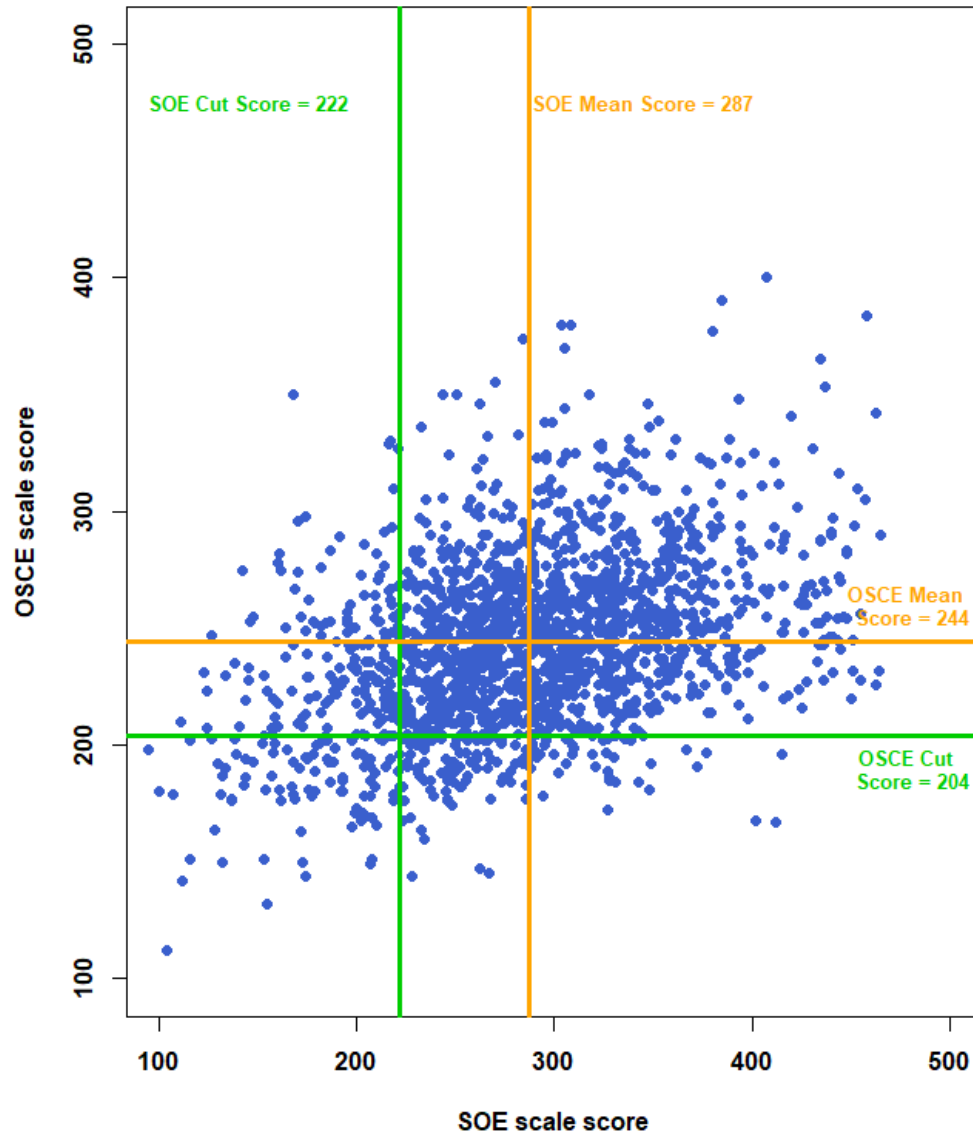
Relation of Scores

Spring 2024 OSCE to First Attempt on July 2023 ADVANCED Exam

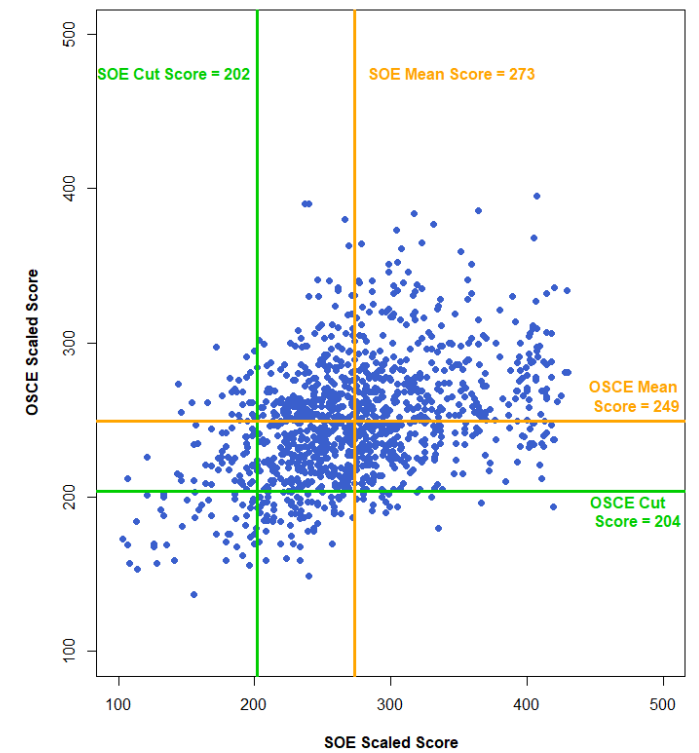


The correlation between the spring 2024 OSCE scaled scores and first attempt on July 2023 ADVANCED Exam scaled scores is 0.17, $p < 0.001$

Relation of Scores Between the OSCE and SOE Components



The correlation between the spring 2024 OSCE scaled scores and spring 2024 SOE scaled scores is 0.41, $p < 0.001$

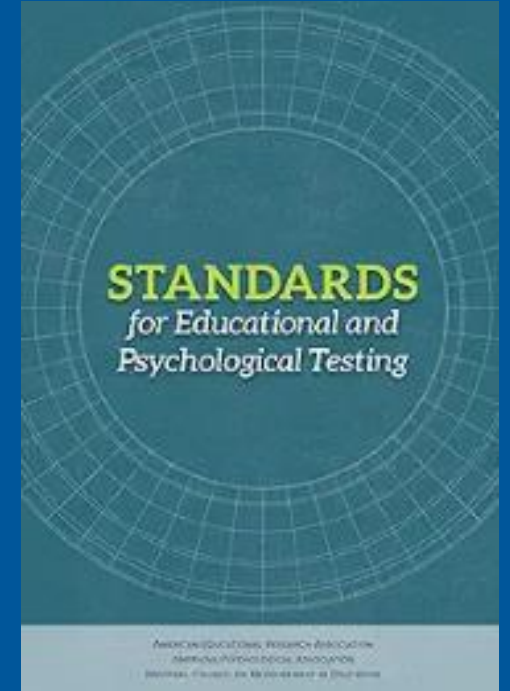


Spring 2023 OSCE and spring 2023 SOE correlation = 0.41, $p < 0.001$

Exam Creation & Scoring

Overview of the Process

- The ABA endeavors to administer exams that meet the highest standards for reliability, validity and fairness
- We adhere to the ***Standards for Educational and Psychological Testing*** established by the American Educational Research Association and the American Psychological Association
- We do this in two ways:
 - Through the processes we use to develop our exams
 - Through the post-administration analyses we conduct to assure the quality of our exams and the scores that they produce

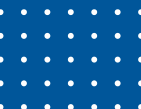


Content Outline & Blueprint

- The ABA's content outlines identify the knowledge, skills and competencies that a diplomate of the ABA is expected to know and be able to do
- Exam blueprints define the relative balance of content on each exam form
- ABA content outlines and blueprints are developed subject matter experts and regularly reviewed for continued currency and relevancy and are updated as needed
- Exam committee members are responsible for reviewing content outlines and blueprints and recommending changes to the ABA's Assessments Committee and Board of Directors (BOD)
- All ABA content outlines and blueprints are posted on the ABA's public website

Exam Committees & Questions Authors

- Exam Committee Members and Question Authors support the development of all ABA exams
- Committee Members review and approve all new items written by the questions authors and work with staff to create, review and approve each exam form before it is administered
- All new Question Authors attend an Item Writing Workshop to learn how to write questions for ABA exams
- New items, once reviewed and approved will go into the ABA's item bank for use on future exam forms



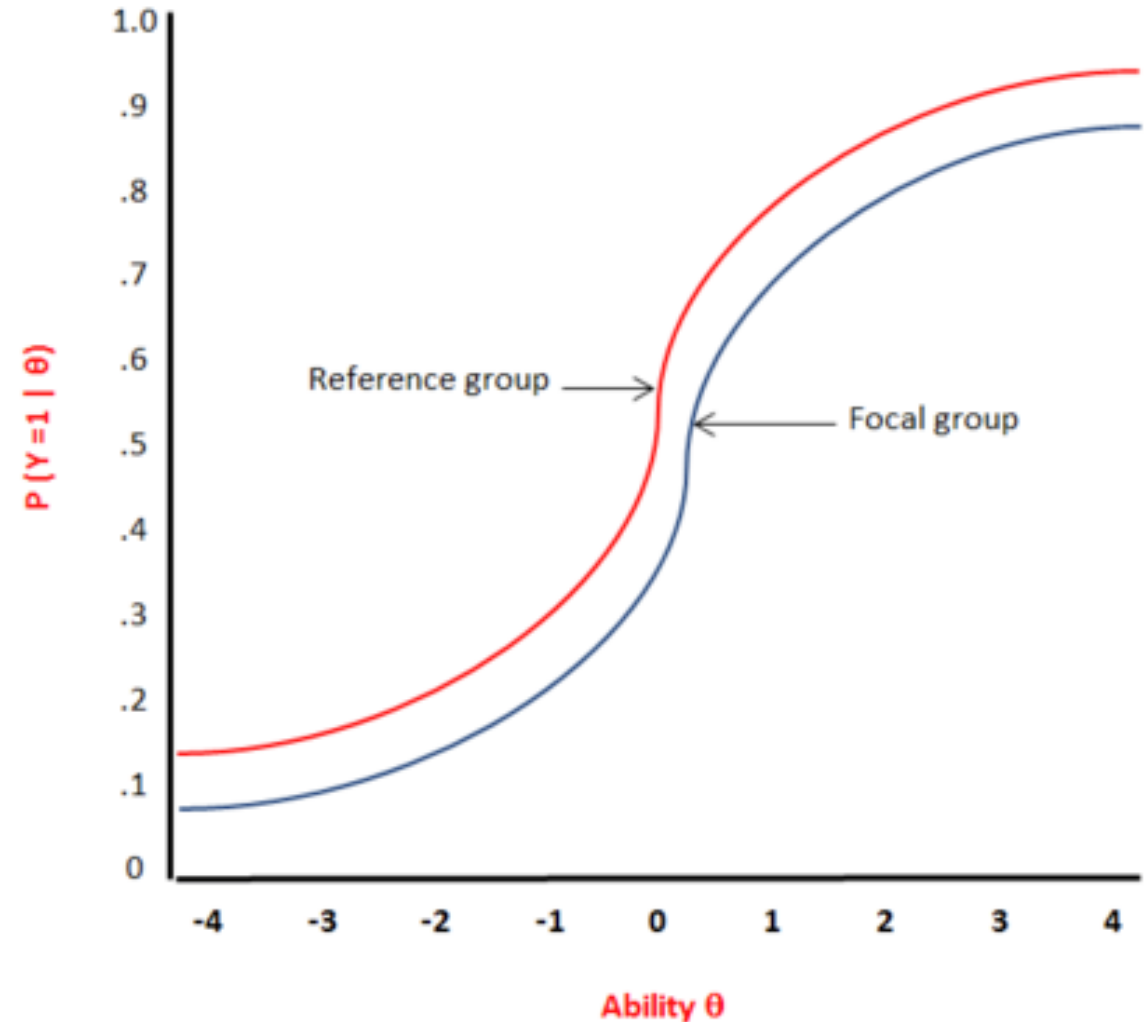
Post-Administration Quality Assurance

- Preliminary Item Analysis (PIA) evaluates each item to see if it is “behaving” as we would expect item that aren’t are flagged for further review by exam committee members
- Exam committees conduct a Key Validation process to review PIA with staff psychometricians prior to finalizing scoring

Item	Question ID	Choice	Percent [%]	r pb	Mean
1	2435	A *	82.9	0.257 **	142.34
		B	12.1	-0.187 **	133.78
		C	1.9	-0.122 **	128.67
		D	3.1	-0.111 **	132.14
		X	0.0	0.000	0.00
		A *	82.9	rc = 0.231 **	142.34

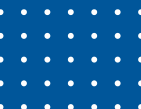
Post-Administration Quality Assurance

- Differential Item Functioning (DIF) Analysis identifies items that are performing differently for two groups of candidates
- Compares members of a focal group (i.e., females) to a reference group (i.e., males) to see whether group members of equal ability have different probabilities of answering the question correctly



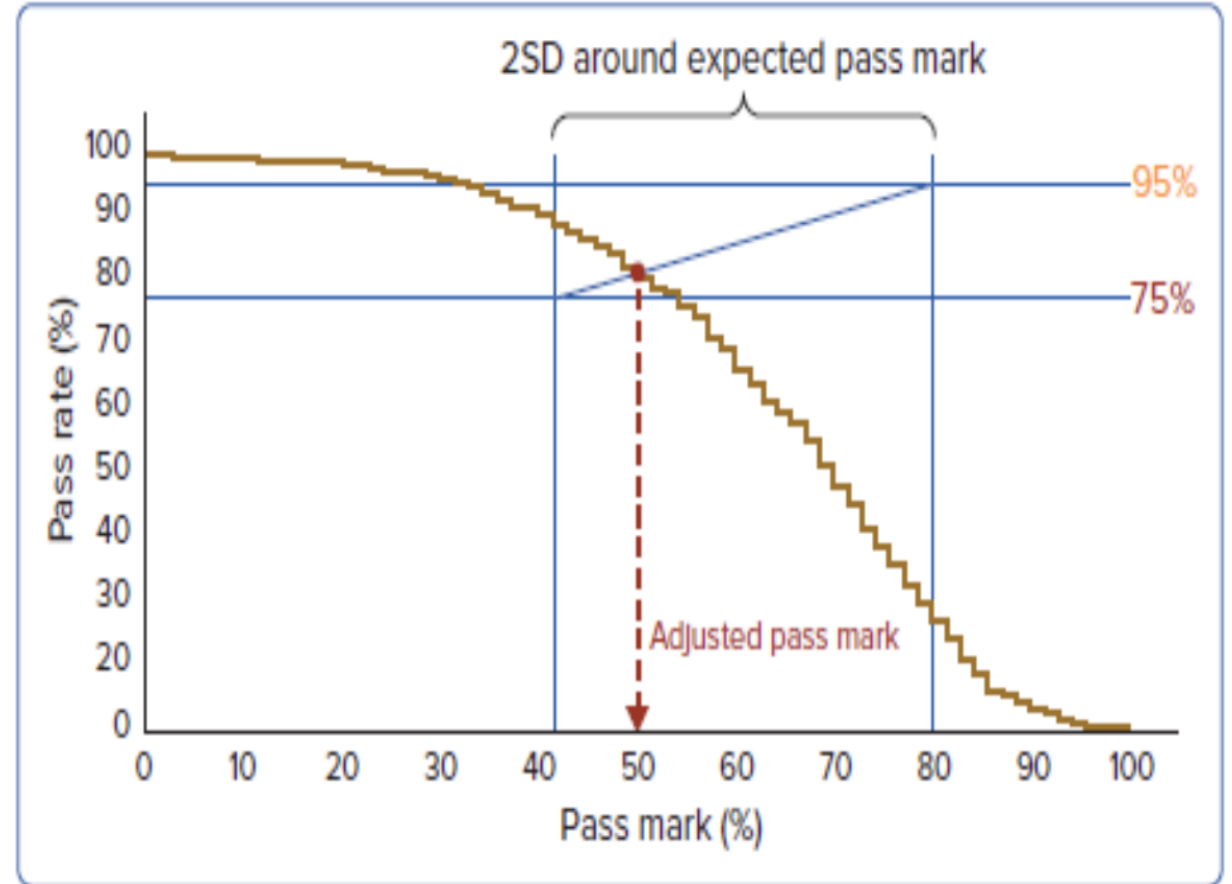
Standard-Setting Study

- All exam performance standards are reviewed and reset ~ every 5 years
- Independent panels of 12 SMEs are recruited for standard-setting studies
- The ABA uses the Hofstee Method, which is a “compromise” standard-setting method; it incorporates both norm- and criterion-referenced judgments
- Standard-setting panels recommend a standard to the ABA Assessments Committee for consideration and, if warranted, adjustment
- The BOD must approve all standards



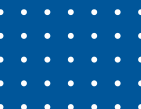
Standard-Setting

- Panelists provide independent judgments of the min. and max. acceptable pass **rate** (norm-referenced) and the min. and max. acceptable passing **score** (criterion-referenced)
- Panelists' independent judgment are averaged, and impact of their combined standard is shown to them



Equating

- The ABA uses common items across exam forms to equate scores across those forms
- This ensures fairness and comparability across different exam forms by adjusting for any potential differences in difficulty across different forms
- Common items (also known as anchor or linking items) are a set of identical questions included in all exam forms
- These items also allow ABA psychometricians to statistically link the different forms and adjust for any differences in difficulty



Questions?



We Are Here To Help.



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