Program for Internationally Trained Ophthalmologists (ITO) to Qualify for Participation in ABO Certification – Policy

Revised: March 2018

http://abop.org/ito - use this link to access the application and all other material necessary for this program

Overview:

Certification by the American Board of Ophthalmology (ABO) provides assurance to the public and the medical profession that a physician has successfully completed an evaluation designed to assess the knowledge, experience, and skills required for the delivery of high standards of patient care in ophthalmology. The current eligibility criteria for entry into the ABO certification process include the requirement that the candidate completed residency training either in an Accreditation Council for Graduate Medical education (ACGME)-accredited training program in the United States or in a Royal College of Physicians and Surgeons (RCPSC)-accredited training program in Canada. The ABO recognizes, however, that many licensed, qualified ophthalmologists who practice in the United States were trained elsewhere. Therefore, in accordance with its mission, the ABO has approved a pathway for internationally-trained ophthalmologists (ITO) to obtain ABO Certification. The foundation of the Program for ITOs to Qualify for Participation in ABO Certification is a combination of verifiable information on the individual's training and practice as well as participation in self-assessment and practice performance assessments

Eligibility:

- Applicants must have a current valid and unrestricted license to practice in the United States for a minimum of five (5) consecutive years (since January 1, 2013).
- Applicants must have been practicing in the United States for a minimum of five (5) consecutive years (since January 1, 2013).
- Applicants are required to have a certificate from the Educational Commission for Foreign Medical Graduates (ECFMG).
- Applicants must be practicing ophthalmology and have surgical privileges.

Applicants will be responsible for providing all requested materials for documentation.

Cost:

The cost for participation in the ITO Program is \$1,000 PLUS the then-current cost of the Written Qualifying Examination and Oral Examination. The initial \$1,000 fee is nonrefundable and includes the review of the application and supporting documentation and the administration of the Patient Experience of Care (PEC) Survey, Improvement in Medical Practice Activity, and Patient Safety Activity.

Procedures and Timeline:

1. Application: March 26 - November 1, 2018

The application is designed to ensure that the applicant satisfies performance requirements outlined in the six core competencies developed by the Accreditation Council for Graduate Medical Education (ACGME) and American Board of Medical Specialties (ABMS):

- · Professionalism;
- Medical Knowledge;
- Patient Care and Procedural Skills;
- Interpersonal and Communication Skills;
- Practice-Based Learning and Improvement; and
- Systems-Based Practice.

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A. Professionalism

A. 1. Licensure: Applicants must hold a valid and unrestricted license(s) to practice medicine in the United States for a minimum of five (5) consecutive years (since January 1, 2013). Copies of all active licenses are required with application. Documentation of Board certification or equivalent in applicant's country of training (if applicable) must be submitted.

B. Medical Knowledge

- B. 1. Medical School: Documentation of completion of medical school and certification of medical school training from the Educational Commission for Foreign Medical Graduates (ECFMG). A copy of the ECFMG certificate must be included with the application.
- B. 2. Postgraduate Training: Documentation of completion of postgraduate training, including (translated to English if necessary):
 - Name, location and contact information for institution where the training was obtained;
 - Beginning and completion dates of training;
 - Complete program curriculum (rotation schedule) by year;
 - Detailed description of education activities, including didactic schedule;
 - Detailed description of types and number of each surgical procedure performed; and
 - Detailed description of evaluation process and approval for program completion.

C. Patient Care and Procedural Skills

- C. 1. Attestation of Ophthalmic Practice: Summary description of current ophthalmic practice, including the volume and disease categories of patients seen and surgical procedures performed. All applicants must have been practicing in the United States for a minimum of five (5) consecutive years (since January 1, 2013).
- C. 2. Surgical Privileges: Documentation of surgical privileges and/or information on participation in Ongoing Professional Practice Evaluation (OPPE) and/or Focused Professional Practice Evaluation (FPPE) if applicable.
- C. 3. Peer Letters of Recommendation: Three letters of recommendation from ABMS-certified physicians, at least 2 of whom are certified by the American Board of Ophthalmology.

All applications received by November 1 will be reviewed by the ABO Physician Services Coordinator for completeness. If an application is incomplete the applicant will be notified and provided a two-week period to submit the requested information. All complete applications will be reviewed by the ABO Credentials Committee. During this review, applicants may be asked to provide additional information. Approval or denial of an application by the ABO is final and not subject to appeal.

Approved applicants will be provided with an approval letter and instructions for completing the additional requirements (outlined below).

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2. Additional Requirements for Approved Applicants: February - December 1, 2019

Approved applicants must complete the additional activities below, addressing the three remaining core competencies by December 1, 2019.

D. Interpersonal and Communication Skills: Completion of the ABO's **Patient Experience of Care (PEC) Survey**. The PEC Survey consists of 15 questions (5 demographic and 10 specifically designed to assess a physician's communication style during the patient/physician encounter.)

E. Practice-Based Learning and Improvement: Participation in the ABO's **Improvement in Medical Practice Activity**. Participants can select a Diagnosis-Based Improvement in Medical Practice Activity (formerly known as Practice Improvement Modules or PIMs), discover Improvement Opportunities Using AAO IRIS® Registry Data, or create a customized, Self-Directed Improvement in Medical Practice Activity. This activity must be fully completed by December 1, 2018 to be eligible for the 2019 Written Qualifying Examination.

F. Systems-Based Practice: Completion of ABO's Patient Safety Activity.

The ABO Patient Safety Activity is designed to assess quality improvement knowledge, demonstrate valuable communication strategies, and promote team-based approaches to patient care. The educational activity covers topics such as the cause and incidence of medical errors, the Plan-Do-Study-Act improvement cycle, and the Situation, Background, Assessment, Recommendation Technique (SBAR). The activity was created by a committee of subject matter experts in ophthalmology, patient safety, and quality improvement, and was developed according to standards established by the American Board of Medical Specialties (ABMS).

All requirements must be completed by December 1 of the year immediately preceding the year the candidate wishes to sit for the WQE. Applicants will be notified of successful completion of each requirement.

3. Board Eligibility Final Approval: December 2019/January 2020

Once approved, applicants become board-eligible candidates for ABO Certification and are subject to the Rules and Regulations of the ABO, which include, but are not limited to, the process and timelines for ABO Certification and Maintenance of Certification (MOC), including eligibility requirements and re-entry processes. Applicants who successfully complete the application and additional requirements will be sent information to register for the Written Qualifying Examination.

Candidates who successfully complete the Written Qualifying Examination and the Oral Examination will become Diplomates of the American Board of Ophthalmology and will be subject to the Maintenance of Certification process. Diplomates who obtain ABO Certification via the ITO pathway will be publicly identified as ABO-certified in the same manner as all ABO diplomates.