American Board of Ophthalmology (ABO) Pilot Program for Internationally Trained Ophthalmologists to Pursue ABO Certification – Information Sheet

http://abop.org/board-certification/pilot-program-for-the-certification-of-internationally-trained-ophthalmologists - use this link to access the application and all other material necessary to apply for this pilot

Applications: Due November 3, 2014
The application is available on the ABO website: abop.org/ITOPilot. 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.

Requirements
Each applicant must meet the requirements and submit the documentation detailed below.

A. Professionalism:
Licensure: Applicants must hold a valid and unrestricted license(s) to practice medicine in the United States. A copy 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 Practice: Summary description of current ophthalmic practice, including the volume and disease categories of patients seen and surgical procedures performed.

C-2. Surgical Privileges: Documentation of surgical privileges and/or information on participation in Ongoing Professional Practice Evaluation (OPPE) and Focused Professional Practice Evaluation (FPPE), if applicable.
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C-3. Peer Letters of Recommendation: Provide three (3) letters of recommendation from physicians who are currently certified by a board affiliated with the American Board of Medical Specialties. At least two letters shall be from current ABO-certified ophthalmologists who can attest to your clinical skills, surgical ability, ethical practice, and dedication to patient safety and lifelong learning.

Each letter should be forwarded to the ABO directly from the physician who wrote the recommendation and be on the physician’s letterhead. The physician’s full contact information must be provided. A letter should be emailed to the following address ITOPilot@abop.org, and shall state in the subject line of the e-mail [ABO ITO Peer Letter: [INSERT YOUR NAME]].

The application also requires that you provide a personal statement of up to 500 words describing your interest in pursuing ABO Board Certification, attach your current CV and sign an attestation agreement.

All applications received by November 3 will be reviewed by the ABO Administrator for completeness. If an application is incomplete, you will be notified and provided a two-week period to submit the requested information. All complete applications will be reviewed for approval by the ABO Executive Director and a member of the ABO Admissions 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. Applicants who are not approved will be fully refunded.

All approved applications will be assigned a number and will be stored securely. The ABO Administrator will be the only individual aware of the names associated with the numbered files. Assuming there are more than twenty-five (25) complete applications, twenty-five (25) numbers will be drawn from a box containing all of the numbers of the applicants by an ABO staff member, in the presence of ABO legal counsel to ensure the integrity of the selection process. The applicants selected will be notified and provided with instructions for completing the additional requirements of application.

Those not selected will be notified and fully refunded.

Additional Requirements for Approved Applicants Selected to Participate in the Pilot Program
February - December 1, 2015 (or December 1, 2016 for the second year)
Approved applicants must complete the additional activities below, addressing the three remaining core competencies prior to December 1, 2015 or 2016 (as applicable).

D. Interpersonal and Communication Skills: Completion of the ABO’s Patient Experience of Care Survey. The ABO’s Patient Experience of Care Survey consists of 15 questions (5 demographic and 10 specifically designed to assess a physician’s communication style during the patient/doctor encounter.) Diplomates must submit 45 completed surveys.
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E. Practice-Based Learning and Improvement: Participation in the ABO’s Practice Improvement Module (PIM) Program is required. PIMs are self-directed online activities that require you to review at least 30 consecutive patient records associated with a diagnosis or diagnoses you see in your practice, measure your practice performance, develop a plan for improvement, and re-measure the result.

Completion of the first three phases of a PIM is required by December 1, 2015 (or December 1, 2016 for the second year). This means applicants will need to abstract at least 30 patient charts, review their performance data, and establish an improvement plan by December 1, 2015 (or December 1, 2016 for the second year), but can complete the chart re-abstraction and self-reflection phase after December 1, 2015 (or December 1, 2016 for the second year). The chart re-abstraction and self-reflection phase must be completed by June 1, 2016 (of June 1, 2017 for the second year).

F. Systems-Based Practice: Completion of ABO’s Patient Safety Module is required. The ABO Patient Safety Module focuses on the core topics of patient safety and provides examples and applicability to clinical ophthalmology. The Patient Safety Module is available on the ABO website.

All requirements must be complete 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.

Applicant Final Approval: December 2015/January 2016 (or December 2016/January 2017 for the second year)

Once approved, applicants become 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.

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