### IMPORTANT DATES & DEADLINES

#### Written Qualifying Examination (WQE)

<table>
<thead>
<tr>
<th>Date</th>
<th>Registration Deadline</th>
<th>Fee</th>
<th>Location</th>
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<tbody>
<tr>
<td>March 24, 2016</td>
<td>August 1, 2015</td>
<td>$1650</td>
<td>Nationally distributed</td>
</tr>
<tr>
<td></td>
<td>Late Deadline: December 1, 2015</td>
<td>$1950</td>
<td>Prometric Centers</td>
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<td>March 28, 2017</td>
<td>August 1, 2016</td>
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<td>Late Deadline: December 1, 2016</td>
<td>$1950</td>
<td>Prometric Centers</td>
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#### Oral Examination

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<th>Registration Deadline</th>
<th>Fee</th>
<th>Location</th>
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<tr>
<td>Spring 2016June 3-5</td>
<td>February 15, 2016</td>
<td>$1650</td>
<td>The Westin St. Francis</td>
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<td>San Francisco, CA</td>
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<tr>
<td>Fall 2016Nov. 4-6</td>
<td>July 15, 2016</td>
<td>$1650</td>
<td>Palace Hotel</td>
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<tr>
<td>Spring 2017June 9-12</td>
<td>July 15, 2017</td>
<td>TBD</td>
<td>Swissotel</td>
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<tr>
<td>Fall 2017Oct. 20-22</td>
<td>February 15, 2017</td>
<td>TBD</td>
<td>Swissotel</td>
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<td>Chicago, IL</td>
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BACKGROUND

Mission Statement

The mission of the American Board of Ophthalmology is to serve the public by improving the quality of ophthalmic practice through a process of certification and Maintenance of Certification that fosters excellence and encourages continual learning.

Purpose

The intent of the certification process of the ABO is to provide assurance to the public and to the medical profession that a certified physician has successfully completed an accredited course of education in ophthalmology and an evaluation including written and oral examinations. The evaluation is designed to assess the knowledge, experience and skills requisite to the delivery of high standards of patient care in ophthalmology.

Governing Rules and Regulations

The ABO’s Rules and Regulations, which are subject to change from time to time without notice, contain specific provisions concerning eligibility for the examinations administered by the ABO; an admission appeals process, which is available under certain circumstances; the application process; the examination processes (initial and Maintenance of Certification); a description of the circumstances under which candidates will be required to reactivate an existing application, submit a new application, or repeat an examination; a list of occurrences that could lead the ABO to revoke a certificate previously issued by it to a diplomate or to place the diplomate on probation; and other matters relating to the ABO’s examination and certification/maintenance of certification processes.

Many, but not all, of those provisions are summarized or described in this brochure. In the event of any inconsistency between the ABO’s Rules and Regulations and this brochure, or any omission from this brochure of any provision of the Rules and Regulations, the Rules and Regulations shall govern.

Copies of the Rules and Regulations are available on the ABO website under "Governance."
2016 Board Leadership

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Paul P. Lee, M.D., J.D., Vice-Chair, Ann Arbor, MI
Jane A. Bailey, M.D., Omaha, NE
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Julia L. Stevens, M.D., Lexington, KY

Public Directors
Matthew E. Fitzgerald, Dr.P.H., Easton, MD
Christine W. McEntee, Washington, D.C.
Scott Wallace, MBA, J.D., Hanover, NH

Board Administrator

Beth Ann Comber
American Board of Medical Specialties

The American Board of Ophthalmology is a founding member of the American Board of Medical Specialties (ABMS). ABMS was established in 1933 to serve in an advisory capacity to the American Specialty Boards and to cooperate with organizations that seek its advice concerning the certification of medical specialists.

The American Board of Ophthalmology is officially recognized by the ABMS and contributes an annual fee in addition to a per capita fee for each new diplomate certified, as do all other medical specialty Boards, to the American Board of Medical Specialties in support of the activities of ABMS.

The American Board of Ophthalmology provides an annual listing of newly certified diplomates for inclusion in the Official ABMS Directory of Board Certified Medical Specialists, published by Elsevier Inc. in cooperation with ABMS. This listing is cost free.

All ABMS Member Boards are listed below:

- American Board of Allergy & Immunology
- American Board of Anesthesiology
- American Board of Colon & Rectal Surgery
- American Board of Dermatology
- American Board of Emergency Medicine
- American Board of Family Medicine
- American Board of Internal Medicine
- American Board of Medical Genetics
- American Board of Neurological Surgery
- American Board of Nuclear Medicine
- American Board of Obstetrics & Gynecology
- American Board of Ophthalmology
- American Board of Orthopaedic Surgery
- American Board of Otolaryngology
- American Board of Pathology
- American Board of Pediatrics
- American Board of Physical Medicine & Rehabilitation
- American Board of Plastic Surgery
- American Board of Preventive Medicine
- American Board of Psychiatry & Neurology
- American Board of Radiology
- American Board of Surgery
- American Board of Thoracic Surgery
- American Board of Urology
BOARD CERTIFICATION

A candidate who successfully passes both the Written Qualifying and Oral Examinations within the required time limitations as described in this brochure, as determined by the ABO in its sole discretion, shall be entitled to receive a certificate without further consideration of his/her qualifications by the ABO.

Physicians who have earned a certificate are referred to as DIPLOMATES of the American Board of Ophthalmology.

Duration of Certification

Certificates issued in 1992 and thereafter are valid for a period of ten (10) years and expire December 31 of the tenth year. Thereafter, a diplomate is required to satisfactorily participate in the Maintenance of Certification process in order to extend the validity of his/her certificate. Diplomates who hold a non time-limited certificate are also encouraged to participate in the Maintenance of Certification process.

Maintenance of Certification

The intent of the Maintenance of Certification (MOC) process of the ABO is to provide assurance to the public and to the medical profession that certified physicians continue educational activities, keep current in information and skills, and practice in a contemporary and safe manner. The evaluation is designed to assess the knowledge, experience and skills requisite to the delivery of high standards of patient care in ophthalmology.

Recognition

The American Medical Association (AMA) allows for the completion of the board certification or Maintenance of Certification process to be claimed as CME credit as part of its Physician Recognition Award (PRA) program. Please contact the AMA for more information.
BOARD CERTIFICATION REQUIREMENTS

The ABO’s requirements, as published in this brochure, provide the requirements for certification, and any potential candidate should be able to determine his/her status after studying these requirements.

Individual officers or Directors of the ABO cannot and will not make such determinations. All evaluations of an applicant’s status will be made by the Committee on Admissions in accordance with the Rules and Regulations of the ABO, after submission of an application for examination and payment of the registration fee, which must accompany the application.

It is the responsibility of the candidate to seek information concerning the current requirements for certification as an ophthalmologist. The ABO does not assume responsibility for notifying a candidate of changing requirements or the impending loss of his/her eligibility to take an examination. Current requirements are posted on the ABO website, www.abop.org.

Educational Requirements

- **Medical school:** All applicants must have graduated from an allopathic or osteopathic medical school. Applicants who are graduates of International Medical Schools are also required to have a certificate from the Educational Commission for Foreign Medical Graduates (ECFMG).

- **One (1) year of internship with direct patient care:** All applicants, both graduates of allopathic and osteopathic medical schools, entering ophthalmology training programs must complete a post-graduate clinical year (PGY-1) in a program in the United States accredited by the Accreditation Council for Graduate Medical Education (ACGME) or a program in Canada approved by the appropriate accrediting body in Canada. The PGY-1 year must include direct patient care experience in fields such as emergency medicine, family medicine, internal medicine, neurology, obstetrics and gynecology, pediatrics, surgery, or a transitional year. As a minimum, six months of this year must consist of a broad experience in direct patient care. It is a requirement of the ABO that the Program Chair ascertain that an individual has completed an accredited PGY-1 in the United States or in Canada prior to the start of the ophthalmology residency.

- **Three to four years in a residency program:** In addition to a PGY-1, all applicants must satisfactorily complete an entire formal graduated residency training program in ophthalmology of at least 36 months duration (PGY-4 or higher) in either the United States accredited by the Accreditation Council for Graduate Medical Education, or at least 48 months duration (PGY-5 or higher) in Canada accredited by the Royal College of Physicians and Surgeons of Canada. No other training, including any form of fellowship, is acceptable.
• **Interim Evaluation form for transferring residents:** When a resident's training has been gained in more than one residency program, an interim evaluation must be completed by the first program. The interim evaluation form is available on the ABO website: [http://abop.org/media/7685/interimevaluation.pdf](http://abop.org/media/7685/interimevaluation.pdf). The first program may not be able to verify all competencies. It is the responsibility of the second program to obtain the interim evaluation from the first program. The second program, in its Satisfactory Completion document, must evaluate all competencies, taking into account any deficiencies noted in the interim evaluation by the preceding program(s).

• **Satisfactory completion of residency training documentation:** Upon application for Board Certification, the Board verifies satisfactory completion of all training requirements. Only those applicants who have completed their PGY-1 and entire ophthalmology training program, PGY-4 (for US Programs) or PGY-5 (for Canadian Programs) or higher, by November 1 are eligible to apply for the Board's Written Qualifying Examination given in the spring of the following year.

• **Verification of training form:** The Chair's verification form(s) cannot be submitted to the ABO until the applicant has completed the entire residency training program. Programs have until August 1 (or later for residents that graduate by November 1) of every year to submit this documentation. If a program is disapproved or withdrawn during the course of a resident's training, he/she must complete the remaining required number of months of training in another accredited program.

• **Board eligibility:** ABO policy requires successful completion of Board Certification requirements within seven (7) years of residency graduation. This policy impacts all candidates for Board Certification as follows:
  
  o All candidates for Board Certification who complete residency training in 2012 and beyond must successfully complete the written and oral examinations within seven years of finishing residency.

  o All candidates who completed residency prior to 2012 must successfully complete the written and oral examinations within seven years of the 2012 implementation of this policy (by December 31, 2018).
Licensure Requirements

• **Graduates of United States and Canadian Medical Schools:** As of the date of application and at all times throughout certification, the candidate must hold a valid and unrestricted license(s) to practice medicine in the United States, its territories or Canadian province in which the candidate’s practice of medicine is regularly conducted and in each other place in which the person practices or has practiced medicine and has an unexpired license. **A candidate must notify the ABO of any action taken by a State Medical Licensing Board within sixty (60) days of such action. The definitions of restricted licensure and the exceptions to these definitions are described in the ABO’s Rules and Regulations.**

Accordingly, the ABO has the authority and shall undertake proceedings, consistent with due process, to deny a candidate entrance to the examination process if he/she does not maintain a valid and unrestricted medical license. Once revoked, the candidate status of the physician shall be reinstated only after the restriction on the license has been removed or expires and then only on such terms as the ABO deems appropriate, considering, among other things, the period of time the physician has not been able to engage in the unrestricted practice of medicine. Such candidate shall be disqualified from obtaining certification until such restriction has been removed or expires.

• **Individuals in the Military:** Individuals in the military will meet the valid and unrestricted licensing condition if they are on full-time active duty as a physician at a military installation in any branch of the United States Armed Services and submit a valid and unrestricted military medical license. Accompanying this military license must be a signed document from the individual’s commanding officer stating that he/she solely provides medical care and treatment on the military installation to members of the United States Armed Services and their dependents. Information concerning the ABO’s Rules and Regulations with respect to definitions of an invalid or restricted license is available on the ABO website.

• **International Medical Graduates:** A candidate may have graduated from a medical school of a country other than the United States or Canada. Graduates of international medical schools must have a valid and unrestricted license to practice medicine (as defined above and in the Rules and Regulations of the ABO) and a certificate from the Educational Commission for Foreign Medical Graduates (ECFMG).
ACCESSING BOARD CERTIFICATION ACTIVITIES

Candidates will apply for board certification (Written and Oral examinations) via the ABO website. The application shall be considered complete only when all supporting data required by the application, including the satisfactory completion of residency verification form and a copy of the candidate’s current registration to practice medicine, are also filed with the Executive Director.

The ABO website serves as the main point of contact for all ABO activities and allows users to:

- Apply, register, and pay for the Written Qualifying and Oral examinations;
- Update contact information; and
- Receive email confirmations of registration and payment, as well as important information updates.

Website Login Information

To access the interactive features of the ABO website, candidates must log in using an ABO-designated username and password. In March, ABO website login information will be sent to every first-time eligible resident through the candidate’s residency program. Upon receipt of this information, candidates are encouraged to log into the website and immediately change their password to something memorable and secure. Please contact the ABO if you do not receive login information.

Email

The ABO uses email to communicate in a timely and efficient manner with candidates for board certification. However, because email systems are different, communication via email can be interrupted by security settings and spam-blocking features. The cause of blocked mail can be dependent on the organization, internet service provider (ISP), email program, security programs, and spam-blocking tools. The ABO encourages all users to place the ABO on a “safe sender” list in order to enable receipt of ABO email correspondence. Please consult your ISP or email service provider for information on how to whitelist an email address.
EXAMINATION

EXAMINATION FORMAT

The Written Qualifying Examination (WQE), which consists of 250 multiple-choice questions, is the first step in the board certification process. The WQE is a computer-based exam administered on one day at nationally distributed test centers in the spring of each year. The purpose of the WQE is to evaluate the breadth and depth of the basic science and clinical knowledge of candidates who have completed an accredited program of education in ophthalmology.

The examination tests the following abilities:

- Recall of Information
- Understanding and Application of Basic Knowledge
- Relation of Pathogenesis to Disease Process
- Evaluation of Clinical Data
- Utilization of Diagnostic and Therapeutic Procedures
- Anticipation and Recognition of Complications
- Ethics of Ophthalmic Practice

Topics covered include:

- Cataract and Anterior Segment
- Cornea and External Disease
- Glaucoma
- Neuro-Ophthalmology and Orbit
- Oculoplastics and Orbit
- Ophthalmic Pathology and Oncology
- Pediatric Ophthalmology and Strabismus
- Refractive Management and Optics
- Retina and Vitreous
- Uveitis

The WQE does not contain questions about General Medicine or Fundamentals and Principles of Ophthalmology.
Application for Certification

Candidates apply for board certification (written and oral examinations) via the ABO website. If a candidate wishes to be considered for a WQE to be conducted in a particular year, his/her online application and all supporting data must be submitted between March and August 1 (except for the Chair’s verification form, which must be postmarked on or before August 1) of the calendar year immediately preceding the calendar year in which the WQE is to be conducted.

- All applications for the March 29, 2016 WQE must be submitted online via the ABO website by August 1, 2015.
- All applications for the March 28, 2017 WQE must be submitted online via the ABO website by August 1, 2016.

If a candidate pays a late fee, the deadline for submitting the completed application may be extended until December 1.

No other exceptions to, or extensions of, these requirements will be made for any reason. The dates of future examinations can be found on the ABO website.

Application Pledge and Agreement

The online application contains a pledge that explains the prohibitions regarding improper conduct before, during and after examinations. Candidates must certify that the information they provide in their application is true and accurate.

The candidate in question shall be given written notice of the charges and an opportunity to respond in accordance with the procedures set forth in the Rules and Regulations of the ABO if:

1. any misrepresentation is discovered in the application, in any other information submitted to the ABO or in the identity of a person applying to take or taking the examinations,
2. any financial or other benefit is offered by a candidate to any director, officer, employee, proctor, or other agent or representative of the ABO in order to obtain a right, privilege or benefit not usually granted by the ABO to similarly situated candidates, or
3. any irregular behavior before, during or after an examination (including, but not limited to copying questions or answers, sharing information, using notes, or otherwise giving or receiving aid) is discovered by observation, statistical analysis, or otherwise.
If the ABO determines that a violation has occurred, the ABO may permanently bar the person(s) involved in the violation from all future examinations, invalidate the results of prior examinations taken by the person(s), withhold or revoke the certificate of the person(s), or take other appropriate action. If sanctions are imposed pursuant to the Rules and Regulations of the ABO, the ABO may notify legitimately interested third parties of its action and may post a summary of the action and the name of the candidate in its newsletter and/or on its website.

When the ABO has reasonable grounds to believe that irregular behavior may have compromised the integrity of an examination, the ABO will make every effort to withhold the scores of only those candidates directly implicated in the irregularity. Nevertheless, in some instances the evidence of irregularity, though sufficiently strong to cast doubt on the validity of scores, may not enable the ABO to identify the specific candidates involved in the irregularity. In such circumstances the ABO may withhold the scores of candidates not directly implicated in the irregularity and, if necessary, may require those candidates to take an additional examination at a later date to ensure the validity of all scores.

The examination materials (questions and visuals) asked in the Written Qualifying and Oral examinations are copyrighted as the sole property of the ABO and must not be removed by the candidate from the test area or reproduced in any way. Any reproduction, in whole or in part, of the Written or Oral Examination materials is a federal offense and also may subject the candidate to the sanctions listed above. No notes, textbooks, other reference materials, scratch paper, recording or electronic transmitting devices may be taken into either the Written or the Oral examinations. Any attempt to recreate any portion of the examination from memory or otherwise is strictly prohibited.

**Fees**

- Application and registration: **$1650**
- Late application and registration (after August 1 to December 1): **$1950**
- Repeat registration fee: **$1650**
- Late repeat registration fee (after August 1 to December 1): **$1950**

The ABO accepts only Visa and MasterCard as payment for all ABO fees. No application will be considered to be complete until the fee and all required supporting data, including a copy of a candidate’s current license to practice medicine, have been received by the Executive Director.
**Prometric Test Centers**

Prometric is the provider for the ABO’s computer-based testing services. These test centers provide the resources necessary for secure administration of the WQE. The availability of nationally-distributed centers should enable candidates to take the WQE in a location close to their home or practice. For more information about Prometric, visit [www.prometric.com/ABO](http://www.prometric.com/ABO).

**Scheduling a Test Appointment**

In January, candidates registered for the WQE will receive an email about how to schedule exams at Prometric Center locations by internet or phone, a process that typically takes five minutes or less. Candidates receive immediate e-mail confirmation of their appointment.

Because personalized information necessary to schedule a test appointment is sent via email, it is important that you add the ABO to your email provider’s safe senders list. The earlier you schedule your appointment, the more likely you are to receive your preferred test location.
ORAL EXAMINATION

Candidates who successfully complete the WQE, and continue to meet all requirements for certification, will be sent specific instructions for registering for the Oral Examination. The Oral Examination is designed to simulate how candidates “care for” patients in a clinical setting. Candidates are assessed with regard to their ability to incorporate the cognitive knowledge demonstrated in the written examination with judgment on caring for a patient.

Schedule

The ABO holds two Oral Examinations each year for candidates who have passed the WQE in the spring. These candidates are assigned either to a group taking the Oral Examination in the fall of that year, or to a group taking the Oral Examination in the spring of the following year.

- Candidates who pass the 2015 WQE will be assigned to either the Fall 2015 Oral Exam or the Spring 2016 Oral Exam.
- Candidates who pass the 2016 WQE will be assigned to either the Fall 2016 Oral Exam or the Spring 2017 Oral Exam.

The ABO reserves the right to limit the number of candidates admitted to any scheduled examination and to designate the candidates to be examined. Information about the examination procedures and scheduling is sent to all candidates after they have registered for the Oral Examination.

Format

The Oral Examination covers the information described in the following paragraphs. During the examination, a candidate is presented with a series of Patient Management Problems (PMPs), each of which represents a patient or clinical situation, and is asked to identify how he/she would care for that patient.

The PMPs will be presented on tablets for photographic or video patient simulations. The Examiner will control the presentation of materials, so no additional training is necessary for candidates. Please watch the Oral Examination simulation video on the ABO website to view an illustration of a typical examination encounter.
The six major topic areas are:

1. Anterior Segment of the Eye
2. External Eye and Adnexa
3. Neuro-Ophthalmology and Orbit
4. Optics, Visual Physiology and Correction of Refractive Errors
5. Pediatric Ophthalmology and Strabismus;
6. Posterior Segment of the Eye

The Examiner assesses a candidate’s ability to demonstrate patient care skills in the following areas:

- **Data Acquisition:** Recognition by the candidate of depicted abnormalities and diseases that affect the eye, ocular adnexa and the visual pathways. Candidates will be asked for historical information and examination data that might be obtained on a patient with a particular condition depicted or described.

- **Diagnosis:** The ability of candidates to synthesize historical and physical evaluation information, along with appropriate laboratory data to arrive at correct diagnoses and differential diagnoses.

- **Management:** Candidates will be expected to provide a reasonable and appropriate plan for medical and/or surgical management of patients with the conditions depicted or described and be able to discuss the prognosis and/or therapeutic complications for the particular condition.

In addition to medical knowledge, the Oral Examination focuses on the competencies of professionalism, patient care and procedural skills, practice-based learning, interpersonal and communication skills, and systems-based practice.
Scope

The examination includes clinical scenarios affecting the eye and its surrounding structures.

• Candidates are expected to use their knowledge of the essentials of visual physiology including visual acuity, light and dark adaptation, accommodation, and color vision and the operation of standard optical instruments in the management of clinical problems. In the management of simulated patients, candidates should be able to demonstrate their understanding of the various forms of ametropia; principles and techniques of refraction, principles of lens design; and methods of correction of ametropia including spectacles, contact lenses, intraocular lenses and refractive surgery. Candidates should also be familiar with the methods for prescribing protective lenses, absorptive lenses, and aids for low vision.

• Candidates are expected to apply their understanding of anatomy, embryology, physiology and pathology of the structures comprising the eye, ocular adnexa, and oculomotor and visual pathways to the management of simulated patients with a variety of diseases affecting the eye and ocular adnexa. In Patient Management Problems (PMPs), (data acquisition, formulation of a focused differential diagnosis and the development of a management plan), candidates should demonstrate the ability to use their knowledge of the conditions and associated systemic diseases affecting these structures in patients of all ages.

• Candidates should demonstrate how their understanding of the principles and techniques of various diagnostic procedures (including but not limited to visual field testing, visually evoked potential testing, ultrasonography, OCT, conventional X-ray imaging, CT scanning, and magnetic resonance imaging) contributes to the management of clinical problems. Candidates are expected to be familiar with the utility of methods of examination for detection and assessment of ophthalmic disorders.

• Candidates are expected to be able to formulate a reasonable and focused differential diagnosis for ocular conditions. Candidates should also be able to describe and discuss how they would treat patients with diseases and abnormalities, including indications for and complications of surgery, medical management and prognosis.

• Candidates are expected to demonstrate judgment pertaining to other aspects of patient care including: communication (with patients and their families, other physicians and health care workers), ethics / professionalism (such as informed consent, commercial relationships, delegation of authority, communications to the public, surrogates/autonomy issues, unnecessary surgery); cost-effective care, medical error/patient safety; patient regulatory rules; and interaction with other disciplines (such as primary care physicians, pathologists) in discerning appropriate patient care.
Fee

2016 Registration fee: **$1650**
There is no late filing period for Oral Examination candidates.

Candidates who are eligible for an upcoming Oral Examination will be mailed instructions for registering via the ABO website. The ABO accepts Visa and MasterCard as payment for all ABO fees.

Scoring

The grading process of the Oral Examination is an overall pass/fail grade. The ABO requires that each candidate be examined in six subsections of the Oral examination. A percent correct is calculated for each subsection and these six scores are averaged to arrive at a total score. Failure to achieve the necessary overall passing score requires that an individual repeat the entire six subsections of the Oral Examination.

Additional information on grading is specified in the "Rules for Grading" which are sent to all candidates at the time of their Oral Examination registration.
**TIMEFRAME RULES FOR WQE AND ORAL EXAMINATION**

Initial applicants (applying for the WQE for the first time) and previously approved candidates (time-lapsed and/or unsuccessful applicants) may register for the WQE during the registration period by submitting an application and current registration fee and agreeing to the ABO’s terms and conditions.

Once an application and any required supporting data is reviewed and approved by the Admissions Committee, all applicants are so informed and registered for the following year’s WQE. The WQE registration period is held annually between March and August 1 of the year preceding the WQE.

**Candidate Cancellation Policy**

Should a candidate find it necessary to postpone the WQE, for any reason, one half of the registration fee will apply toward the cost of rescheduling for the following year’s WQE, provided the full registration fee was paid for the canceled exam. There is a late filing period of August 2 through December 1 with an additional $300 late filing fee. The late fee does not apply toward a rescheduling fee.

Should a candidate find it necessary to postpone an Oral Examination, for any reason, one half of the registration fee will apply toward the cost of rescheduling for the Oral Examination, provided the full registration fee was paid for the canceled exam.

**Failure to Complete the Written Examination**

A candidate shall be required to reactivate his/her application for approval, and submit an additional application fee under the following circumstances that relate to the Written Qualifying Examination:

- If a candidate fails to take the Written Qualifying Examination within twenty-four (24) months after notice has been sent to him/her that his/her application has been accepted;
- If a candidate does not repeat the Written Qualifying Examination within twenty-four (24) months after failing;
- If a candidate receives two consecutive failures on a Written Qualifying Examination on the same application.
Failure to Complete the Oral Examination

A candidate shall be required to reactivate his/her application for approval, submit an additional application fee, and pass another Written Qualifying Examination before being admitted to the Oral Examination under the following circumstances:

• If a candidate does not take and pass the Oral Examination within the four (4) consecutive administrations assigned to them following successful completion of the Written Examination;

• If a candidate is unable to pass the Oral Examination within three attempts during this period.
BOARD POLICIES

Applicant Disclosure Policy

At the time a person submits an application to the ABO and at all times thereafter, the person shall have a continuing obligation to disclose promptly to the ABO the existence or occurrence of any circumstances causing the person to fail to satisfy the foregoing condition of eligibility to apply for and take any examination administered by the ABO.

A person submitting an application to the ABO shall inform the ABO on said application, in a written submission accompanying the person’s application, or in a written submission to the ABO, before taking any examination administered by the ABO, as the case may be, if the person’s license to practice medicine in the United States, its territories, or Canadian province has previously been surrendered or not renewed upon its expiration or if the person’s practice of medicine or license to practice medicine in the United States, its territories, or Canadian province has previously been revoked, restricted, conditioned, suspended, limited, qualified, or subject to the terms of probation.

Special Accommodations Policy

The American Board of Ophthalmology (ABO) supports the principles of and complies with its obligations under Title III of the Americans with Disabilities Act (ADA), as amended, and the implementing regulations of the U.S. Department of Justice, including those at 28 CFR §36.309, to ensure non-discrimination in ABO examinations. Under these requirements the ABO must offer its examinations in a place and manner accessible to persons with disabilities and to make reasonable accommodations in examination procedures for persons with disabilities. Candidates with disabilities may request modifications in the administration of the examination, appropriate auxiliary aids, alternative accessible arrangements or other reasonable accommodations. The ABO will provide these accommodations unless they would place undue burden on the ABO or fundamentally alter the measurement of the knowledge and skills the examination is intended to assess. The official accommodation request form and full ADA policy, including deadlines and requirements for submission of documentation, can be found on the ABO website: http://abop.org/about/governance-policies/ada-policy/.

Fee Policy

Online applications for the WQE and registration for the Oral examination shall be accompanied by the application fee then in effect. The ABO accepts Visa and Mastercard as payment for all ABO fees. The fees for examinations shall be established annually by the Board of Directors on the basis of the actual and anticipated costs of the ABO in the examination of candidates and
the administration of its business. The Directors of the ABO serve without compensation except for reimbursement of expenses.

**Refund Policy**

When a candidate registers for an examination, significant costs are incurred by the ABO. Therefore, to keep costs down for all candidates, fees for examinations are non-refundable, regardless of the reason. However, in case of cancellation, 50 percent of the examination fee will be applied to the subsequent examination, if taken within the time limit. In addition, all application fees include a $300 non-refundable administrative fee.

**Examination Cancellation Policy**

If the ABO is unable to administer or complete the administration of a Written or Oral examination at the scheduled date, time, and location due to circumstances beyond the ABO’s control, the examination may be canceled in the sole discretion of the ABO, and if the examination is cancelled, the ABO is not responsible for any expense an affected candidate may have incurred in connection with the cancelled examination or for any expense the candidate may incur in connection with any substitute examination.

**Examination Results**

Within 6-8 weeks after completion of the Written and Oral examinations, the candidate shall be notified by mail by the Executive Director as to the results thereof. The decision of the ABO as to these results shall be final and conclusive. Grades are not subject to appeal. Because such is the case, individual Directors of the ABO or Examiners should not be contacted about specific examination results. To preserve confidentiality, results of an examination will not be given by telephone, fax, or email.

**Disciplinary Sanctions**

The ABO shall have the authority to impose disciplinary sanctions upon a candidate or a diplomate for any of the following reasons:

- Violation of Rules and Regulations of the ABO relating to the Written Qualifying and Oral Examinations and/or the terms and conditions set forth in the Application and Agreement to take the examinations;

- Substantial misstatement or omission of a material fact to the ABO in an application or in any other information submitted to the ABO;
• Presenting or distributing, or aiding or assisting another person(s) to present or distribute, a forged document or other written instrument purporting to have been issued by or under the authority of the ABO to evidence that a candidate, diplomate, or any other person(s) is currently or was previously certified by the ABO, when that is not the case, or claiming orally or in writing, or assisting another person(s) to claim, that a candidate, diplomate, or any other person(s) is currently or was previously certified by the ABO, when that is not the case;

• Any license of the person to practice medicine is not, or ceases to be, a valid and unrestricted license to practice medicine within the meaning set forth in the Rules and Regulations of the ABO;

• Issuance of a certificate contrary to or in violation of the Rules and Regulations of the ABO;

• Ineligibility of the person to whom the certificate was issued to receive the certificate;

• Engaging in any conduct that materially disrupts any examination or that could reasonably be interpreted as threatening or abusive toward any examinee, proctor or staff.

Statements of “Eligibility”

The ABO does not issue public statements of “eligibility” for its examinations. The ABO only indicates whether a physician is or is not certified or recertified and the corresponding year(s) of certification. Inquiries to the ABO by outside agencies regarding the certification status of any physician who has either not completed the certification process or whose certificate has lapsed for any reason will be answered by stating that said physician is not board certified.