



November, 2018



The Value of ABFAS Certification

The American Board of Foot and Ankle Surgery (ABFAS) is the only foot and ankle surgery certification board recognized by the Council on Podiatric Medical Education (CPME) through the Joint Committee on the Recognition of Specialty Boards (JCRSB). ABFAS has more than 7500 Board Certified members. The American Podiatric Medical Association (APMA) delegated responsibility to recognize certifying boards in podiatry to the Council.

Increasingly, more and more hospitals, credentialing bodies, and insurance companies require physicians to have specialty board certification. And many large medical hospitals require certification to become a shareholder.

Personal credibility also plays a factor in ABFAS Certification. In a recent survey, patients rated board certification the most important criteria in choosing a foot and ankle surgeon.

Finally, once a candidate becomes ABFAS board certified, they become eligible to join the American College of Foot and Ankle Surgeons (ACFAS).



The Evolution of a Didactic Exam Question

Registration for Part I Foot Didactic and Part I RRA Didactic exams is open through February 26, 2019. ABFAS uses multiple-choice items (or test questions) for all of its didactic examinations. Each examination has its own item pool and ABFAS needs thousands of items for the examinations. The ABFAS Cognitive Examinations Committee (CEC), composed of ABFAS diplomates who are trained and assessed in examination item development, develops all didactic examination items.

Drafting the Item

Item writers individually draft items in specific subject categories to ensure that the examinations have balanced content. Additionally, item writers must keep in mind the measurement objective of the exam. The objectives of the In-training Examination and Part I exam items are to assess didactic clinical knowledge and treatment skills acquired during an approved podiatric surgical residency. The recertification exam items are designed to demonstrate the physician has the fundamental diagnostic skills, medical knowledge, and clinical judgment to provide quality care.

Edit and Review Cycle

A professional medical editor reviews and edits all draft items. The editor focuses on grammar, syntax, medical terminology, spelling, and item format.

After medical editing is complete, the CEC meets in person to review, edit, and approve items. The first phase of this cycle consists of two rounds of review and editing where small groups review, discuss, and edit items. This is the first stage during which an item may be rejected by the Committee. A few rejected items may be salvaged with re-writes during future item development cycles. Fortunately, the majority of items make it through the initial review phase without being rejected. However, some of those surviving items may have been significantly edited. When editing, the review groups are careful not to change the item so much that the original measurement objective of the item is lost. They also document a rationale for making changes to help the original author and staff understand why changes were required.

The remaining viable items then go through a third review round with groups composed of at least five item writers. The groups individually assess the overall quality of the item by considering its relevancy to the subject category, accuracy of the medical terminology, and the quality of any associated images. Each member of the group then votes on the overall quality and the key (or correct answer). Whenever there is significant disagreement the group pauses for discussion and to reach consensus. Finally, they formally decide whether the item should continue with the development process or be rejected.

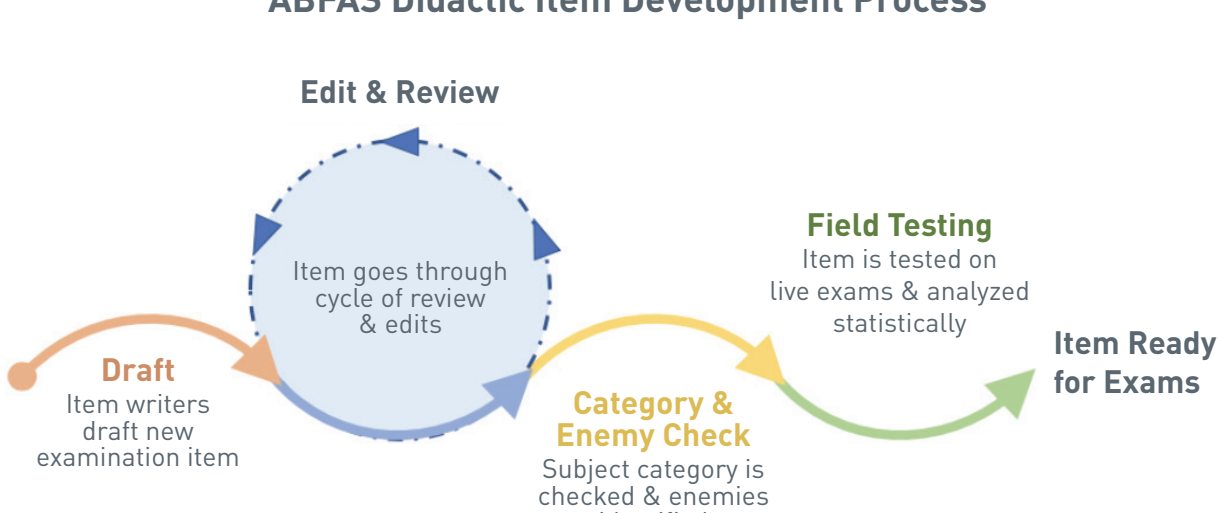
Category and Enemy Check

A specialized committee reviews the items to ensure each is categorized into the correct subject area. The items are then checked against others in the item pool to determine if they could possibly provide information that might help answer other items. If so, the items are related to each other as "enemies" and will not appear on the same examination together.

Field Testing

The new items are now ready for field testing where they appear on live examinations but are not scored. If items perform well statistically, then they are included on the next examination as a scored item.

ABFAS Didactic Item Development Process



ABFAS 2019 Conference List

Florida Podiatric Medical Association Science & Management Symposium

January 9-13, 2019
Disney's Coronado Springs Resort
Lake Buena Vista, Florida

New York State Podiatric Medical Association/ Foundation for Podiatric Medicine

January 18-20, 2019
New York Marriott Marquis
New York, New York

American College of Foot and Ankle Surgeons (ACFAS) Scientific Conference

February 14-17, 2019
Ernest N. Morial Convention Center
New Orleans, LA

Midwest Podiatry Conference

April 10-13, 2019
Hyatt Regency Chicago
Chicago, IL

The Western Foot and Ankle Conference

June 20-23, 2019
Disneyland Hotel and Convention Center
Anaheim, CA

APMA- The National

July 11-14, 2019
Salt Palace Convention Center
Salt Lake City, UT

And join us for our annual meeting:
American Board of Foot and Ankle Surgery (ABFAS) Annual Meeting

February 14, 2019 at 12:00pm
Ernest N. Morial Convention Center
New Orleans, LA



#footfirst

ABFAS and its DPMs are #footfirst! ABFAS is looking for photos of residents studying, performing cases, interacting with feet, performing on feet, or even just hanging out with other residents. Send your best photos to footfirst@abfas.org so we can share them on social media, in our magazines, and online. We will select a monthly winner with the best photo who will receive a great ABFAS prize and recognition on our Facebook page. Don't forget to share your photos using #footfirstABFAS

Since 1975, ABFAS' mission is to protect and improve the health and welfare of the public by the advancement of the art and science of foot and ankle surgery.

ABFAS.org

