

ABOMS 625 North Michigan Avenue Chicago, IL 60611



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#### Mission

The mission of the American Board of Oral and Maxillofacial Surgery (ABOMS) is to assure the public of safe and optimal care through the development and maintenance of high standards of certification and recertification of Diplomates in the specialty.

#### **Objectives**

The objective of the ABOMS is to elevate the standards of oral and maxillofacial surgery through a certification and maintenance of certification process that fosters excellence and encourages learning, thus promoting the delivery of superior health care.

To meet this objective, the ABOMS will:

- Evaluate specialists who apply for initial certification and assure that they have the requisite training, education and experience
- Administer a certification process that assesses the knowledge, experience, and skills requisite to the provision of high quality patient care in oral and maxillofacial surgery
- Administer a maintenance of certification process that assures Diplomates are committed to lifelong learning, keep current in knowledge and skills, and practice in a safe and contemporary manner

#### Organization

The ABOMS is the certifying Board for the specialty of oral and maxillofacial surgery in the United States and is recognized and approved by the Council on Dental Education of the American Dental Association.

A committee was authorized at the 1945 annual meeting of the American Society of Oral Surgeons to establish an American Board of Oral Surgery, which would conduct examinations for the certification of specialists in oral surgery. In 1946, the American Board of Oral Surgery was incorporated under the laws of the State of Illinois. During the following year, the American Board of Oral Surgery was approved by the Council on Dental Education of the American Dental Association and was authorized to proceed with the certification of specialists in oral surgery. The American Board of Oral Surgery was renamed the American Board of Oral and Maxillofacial Surgery in 1978 to reflect the scope of the specialty. The name modification was incorporated under the laws of the State of Illinois.

The operation of ABOMS is entrusted to an eight-member Board of Directors. These Directors are Diplomates of the American Board of Oral and Maxillofacial Surgery and Fellows of the American Association of Oral and Maxillofacial Surgery and Fellows of the American Association of Oral and Maxillofacial Surgeons. One Director is elected each year to an eight-year term by the House of Delegates of the American Association of Oral and Maxillofacial Surgeons. An Examination Committee composed of Diplomates of ABOMS is appointed by the Board of Directors to prepare and conduct the annual certification examination. The Board of Directors and its Examination Committee serve without salary.

#### **Overview of CM Process**

The ABOMS certification process assures the public that certified oral and maxillofacial surgeons have successfully completed a rigorous peer evaluation process by requiring surgeons to present and maintain appropriate professional credentials, and demonstrate the requisite training, experience and knowledge. Certified oral and maxillofacial surgeons are expected to maintain current competence through ongoing professional education provided through national meetings, seminars, lectures, special courses, panels, symposia, and self-assessment tools. Many attributes are necessary to be a competent oral and maxillofacial surgeon, and a number of these factors cannot be quantified. Therefore, it is important to state that ABOMS Board Certification does not necessarily guarantee that an oral and maxillofacial surgeon is "competent." Recognizing this fact, and that certification is merely a "point in time" when the qualifications of an oral and maxillofacial surgeon are examined, in 1990, the ABOMS instituted a recertification process. Diplomates certified after this time were issued a "time-limited" certificate in effect for a ten-year period.

Since then, it has become even more critical that oral and maxillofacial surgeons maintain the requisite skills and knowledge to provide state-of-the-art patient care. To that end, in 2005, ABOMS instituted a comprehensive program to provide verification that Board certified oral and maxillofacial surgeons are engaged in a continuous process to maintain their skill and knowledge. This process moves the concept of recertification from an examination conducted every 8-10 years to an ongoing process of learning and assessment, known as Certification Maintenance (CM). The changes made by the ABOMS Directors represent a response to the quality-of-care movement and the related concerns of the public. Additionally, ABOMS acted to restructure OMS Board Certification in response to activities of other groups that set practice standards – American Board of Medical Specialties, Joint Commission on the Accreditation of Hospital Organizations, and the National Committee for Quality Assurance. The Board acknowledges that this is a dynamic process and anticipates modifications over time. The information included in this handbook represents ABOMS' current plan for the CM process. Only Diplomates with time-limited certificates are required to participate in the CM process although voluntary participation for all Diplomates is encouraged.

#### Structure of the CM Process

In order to maintain certification, Diplomates who hold time-limited certificates are required to participate in the ABOMS Certification Maintenance Process. Certification Maintenance (CM) runs in 10-year cycles. CM is an evolving process and the requirements outlined below may be modified as the needs of the specialty and the public change. Diplomates must continuously meet the CM requirements or they may jeopardize their certification.

The table below describes the components and requirements of CM.

| COMPONENT<br>(Required during Certificate)   | REQUIREMENT   |
|--|---|
| Professional Standing<br>(Each year of Certification during Annual<br>Registration: 1-10 for time limited<br>certificates) | Possession of a current unrestricted dental or medical license,<br>i.e. a license that has no limitations on the practice of oral and<br>maxillofacial surgery in that jurisdiction.<br>Maintain continuous hospital privileges that permits the OMS to<br>perform core procedures in oral and maxillofacial surgery. *   |
| Lifelong Learning<br>(Diplomates are eligible during time limited<br>certificate years 8, 9, and 10)                       | Optional completion of the web-based ABOMS self-assessment<br>tool, <b>COMSSAT</b> (Certification in Oral and Maxillofacial Surgery<br>Self-Assessment Tool). Diplomates will receive immediate<br>feedback on the COMSSAT, along with item references to assist<br>in the production of a study guide. Since the COMSSAT is a<br>self-assessment tool, there is no pass/fail point, nor is the score<br>recorded by ABOMS. |
|  | 90 hours ADA CERP continuing education credits. 30 of the 90 hours may be Category 2 as recognized by the AMA ACCME. All CE hours must be earned within 3 years prior to applying for the Recertification Examination. The Diplomate will attest to this at the time of his/her RE application.   |
| Cognitive Expertise<br>(Diplomates are eligible during time limited<br>certificate years 8, 9, and 10)                     | Successful completion of the ABOMS Recertification Examination  |
| Evaluation of Performance in Practice<br>(Diplomates are eligible during time limited<br>certificate years 8, 9, and 10)   | Office Anesthesia Evaluation <b>or</b><br>Alternative pathways are available for OMS' who are not clinically<br>active or do not participate in the Office Anesthesia Evaluation<br>program set forth by the AAOMS or jurisdictional licensing body.  |

\*The Board has determined that Diplomates with time limited certificates must maintain continuous hospital privileges that permit the OMS to perform core procedures in oral and maxillofacial surgery. A hospital is an institution primarily engaged in providing, by or under the supervision of physicians, in patient diagnostic and therapeutic services or rehabilitation services; and is accredited by the Joint Commission or approved by the Centers for Medicare & Medicaid Services. Privileges at an ambulatory surgery are acceptable if it is associated with a hospital where the Diplomate maintains surgical privileges.

## **Description of the CM Process**

#### **Professional Standing**

Each year, the Diplomate must provide evidence of professional standing by submitting his/her Annual Registration (AR). The Diplomate may jeopardize his/her certification if he/she does not successfully complete his/her AR. This credentialing process will indicate whether a Diplomate has an unrestricted dental and/or medical license and maintains continuous hospital privileges that permits the OMS to perform core procedures in oral and maxillofacial surgery (description of core hospital privileges can be found on the previous page).

#### Lifelong Learning

Eligible Diplomates have the opportunity to complete the ABOMS self-assessment tool, known as the COMSSAT. The COMSSAT is web based and delivered within a specified period of time. Registration for the COMSSAT opens on the ABOMS website at the same time as the RE application. Following registration for the COMSSAT, the Diplomate will receive an email detailing the three easy steps on how to complete the COMSSAT within the next 48 business hours. Diplomates will receive immediate feedback on the COMSSAT along with references to each of the questions asked.

All CM eligible Diplomates, are required to apply for the Recertification Examination in the last 3 years before their certification expires. At the time of the application, the Diplomate will attest to having 90 hours of ADA CERP continuing education credits within the last three years, 30 of the 90 hours may be Category 2 as recognized by the AMA ACCME. The Diplomate must have documentation for all CE hours but is not required to submit it to ABOMS unless he/she is included in the ABOMS audit or otherwise advised. (The ABOMS Recognized CE Providers can be found in the handouts section of this handbook).

#### **Evaluation of Performance in Practice**

While completing the RE application, the Diplomate must attest to having done an evaluation of performance in practice by completing an Office Anesthesia Evaluation (OAE) program within the timeframe set by AAOMS or jurisdictional licensing body. Alternative pathways are available for any Diplomate unable to participate in the specified OAE.

#### **Cognitive Expertise**

The Diplomate must successfully complete the RE by the 10th anniversary of the most recent certificate date, but no earlier than the 8th anniversary of that date. The Diplomate will have three consecutive opportunities to take and pass the RE.

Upon meeting each of these components in the CM process, a new certificate will be issued to the Diplomate once his/her current certificate expires. The new certificate will certify the Diplomate for ten years following the expiration of his/her current certificate.

#### Fees

The fees for examinations shall be established annually by the Board of Directors on the basis of the actual and anticipated costs incurred by ABOMS in the examination process of Candidates and Diplomates and in the administration of its business.

| Administrated Fee | COMSSAT       | RECERTIFICATION<br>EXAMINATION |
|-------------------|---------------|--------------------------------|
| \$275.00          | Complimentary | \$675.00                       |

#### Refunds

When a Diplomate registers for an examination, significant costs are incurred by ABOMS. Therefore, to keep costs down for all Diplomates, fees for the CM components are non-refundable.

#### **Receipts for Fees Paid**

Diplomates who submit materials online will receive e-mail confirmations including transaction numbers for any fees paid.

#### **Audit Process**

In order to ensure the ABOMS CM process is functioning effectively and that Diplomates are in compliance with the requirements, random audits will be conducted. Each year, the ABOMS Credentials Committee will conduct an audit of approximately 10% of the Diplomates whose current certificates expire that calendar year. Those that are randomly chosen to be audited will be informed at the beginning of the year of their current certificates expiration. Those Diplomates who are audited will submit documentation attested to during the time of their RE application, including 90 hours of CE, Office Anesthesia Evaluation or alternative pathway, and any other documentation deemed necessary by the Credentials Committee. Only those audited are required to send this additional documentation to the ABOMS administrative office. However, the Board reserves the right to audit the information provided by the Diplomate at any time during the CM process by requiring supporting documentation. The ABOMS staff will confirm that the Diplomate has satisfactorily completed the:

- 1. Annual Registration (Credentials and an unrestricted current medical or dental license to practice the specialty and current hospital privileges allowing patient admission and performance of core procedures in oral and maxillofacial surgery)
- 2. COMSSAT (Certification in Oral and Maxillofacial Surgery Self-assessment Tool)
- 3. Recertification Examination

The audit will be conducted in June and July each year. The Credentials Committee will report all Diplomates who have not met the requirements to the ABOMS Board of Directors. The Board will act on all Diplomates who are in noncompliance of the requirements.

## Timeline

| 2017 COMSSAT  |  |  |
|---------------|--|--|
| Dat           | e Activity                                 |  |
| March 7, 2017 | Registration opens on ABOMS & SMT websites |  |
| May 4, 2017   | Registration closes on ABOMS website       |  |
| May 11, 2017  | Exam closes on SMT website                 |  |

2017 COMEENT

#### 2017 Recertification Examination

| Date                              | Activity                       |
|-----------------------------------|--------------------------------|
| March 7, 2017                     | Applications process begins    |
| May 18, 2017                      | Applications due               |
| July 31, 2017 – September 4, 2017 | Schedule Exam with Pearson/MRA |
| September 23- September 30, 2017  | Examination                    |

#### Policy

#### Failure to Adhere to Timeframe

A Diplomate who fails to successfully complete the CM components within the specified timeframe may jeopardize his/her certification.

#### Failure to Successfully Complete CM Components

All CM components can be repeated as often as necessary during the designated years until the process is successfully completed.

#### **Diplomate Disclosure Obligations**

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

#### **Accommodation for Special Needs**

Diplomates who answer "Yes" to the disability/special needs question must submit supporting documentation. Please contact the ABOMS administrative office for accommodation details.

#### **Notifications**

The ABOMS will attempt to notify all Diplomates when it is appropriate to begin the CM process. However, it is the responsibility of the Diplomate to seek the information concerning the current requirements for CM. The ABOMS does not assume responsibility for notifying a Diplomate of changing requirements or the impending loss of his/her certification.

#### **Release of Examination Results**

The ABOMS will not release any examination result information by phone, fax, or e-mail. The ABOMS does not report pass/fail information to third parties. The ABOMS reserves the right to withhold examination results if any application materials are found to be deficient, expired or inaccurate. All result letters for a particular examination are mailed out in identical envelopes on the same day. The ABOMS is not responsible for delays because of outdated contact information on file or mail service.

## Communications

In order to receive all necessary communication, please keep the ABOMS administrative office informed of your current email and mailing address. You may update your contact information and access information about the CM process at **www.aboms.org.** 

The ABOMS uses email to communicate in a timely and efficient manner with Diplomates participating in the CM process. 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 ABOMS encourages all users to place the ABOMS on a "safe sender" list in order to enable receipt of ABOMS email correspondence. Due to the vast number of different email programs available, ABOMS does not have specific instructions for each; however, ABOMS does suggest the following two methods:

- 1. Contact the ISP and ask that the email from the ABOMS be accepted.
- 2. View options of the security settings and spam-blocking tools on your email program to determine if you can "whitelist" the ABOMS yourself. For example, the Microsoft Outlook will allow you to add a specific email address or a specific email domain (@aboms.org) to a Safe Sender's List. (To do this in Microsoft Outlook: highlight the email; click on Actions on toolbar; click on Junk Email; click on Add Sender to Safe Sender's List or Add Sender's Domain (@aboms.org) to Safe Sender's List).

All Diplomates holding time limited certificates must meet the current requirements as published by ABOMS. It is the responsibility of the Diplomate to seek information concerning the current requirements for CM. The ABOMS does not assume responsibility for notifying a Diplomate of changing requirements or the impending loss of his/her eligibility to take an examination. The CM process is subject to change, consistent with the principles of continuous improvement to both process and content matters. The ABOMS will publish all changes to the CM process in its bi-annual newsletter and on the website, **www.aboms.org.** 

## **Contact Information**

#### **ABOMS Administrative Mailing Address:**

American Board of Oral and Maxillofacial Surgery 625 N. Michigan Avenue, Suite 1820 Chicago, IL 60611

**Telephone:** 312-642-0070

**Fax:** 312-642-8584

**Direct Contact:** 

#### **Annual Registration**

Ms. Raquel N. Kalfus Program and Operations Assistant Extension \*122 <u>RKalfus@aboms.org</u>

## COMSSAT

Mr. Jordan Bradshaw Programs and Operations Assistant Extension \*127 jbradshaw@aboms.org

#### **Recertification Application & Examination**

Ms. Courtney C. Walsh Manager, Certification Services Extension \*120 <u>CWalsh@aboms.org</u>

#### **Certification Maintenance Audit**

Ms. Erin E. Killeen Vice President, Examination Services Extension \*126 <u>EEKilleen@aboms.org</u>



## **2017 Recertification Examination Blueprint**

| Ι. | Medical Assessment and Management 24 |
|----|--------------------------------------|
|    | of the Surgical Patient              |

- A. Cardiovascular
- B. Respiratory
- C. Musculosketal & Nervous System
- E. Endocrine, GI, GU, Metabolic

#### II. Anesthesia and Pain Control

- A. Local AnesthesiaB. Deep Sedation/
- General Anesthesia
- C. ACLS
- D. Perioperative Pain Control
- E. Pediatric Anesthesia/PALS

#### III. Dentoalveolar

19

17

26

- A. Erupted/Unerupted Teeth
- B. Dentoalveolar injuries
- C. Infections

#### IV. Trauma

- A. Evaluation of the Trauma Patient
- B. Mandibular Injuries
- C. Maxillary/Orbital/ZMC
- D. Soft Tissue Injuries
- E. NOE/Frontal/Nasal

#### V. Orthognathic/Cleft/OSA

- 18
- A. Mandibular Deformities/ Genioplasty
- B. Maxillary Deformities
- C. Alveolar Clefts
- D. Obstructive Sleep Apnea
- E. Cleft Lip/ Palate

#### VI. Cosmetic

#### 3

- A. Evaluation of cosmetic surgery patient
- B. Botox/ Fillers

#### VII. Temporomandibular Disorders/Facial 5

- A. Evaluation of TMD
- B. Non-surgical/minimally invasive
- C. Facial Pain

#### VIII. Pathology

- A. Benign Lesions of Hard Tissue
- B. Benign Lesions of Soft Tissue
- C. Salivary Gland Pathology
- D. Evaluation of Malignant Lesions

#### IX. Non-Implant Reconstruction

A. Nonvascularized Hard Tissue Grafts

#### X. Implants

- A. Biology and Treatment Planning
- B. Prosthetic Considerations
- C. Hard Tissue Adjunctive Measures
- D. Soft Tissue Adjunctive Measures
- E. Complications

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American Board of Oral and Maxillofacial Surgery

# **ABOMS Recognized Continuing Education Providers**

The ABOMS has identified providers of continuing education that meet the requirements set forth for the CM process. The ABOMS does not have an approval process for CE providers but is familiar with the groups identified below and acknowledges their expertise of offerings that support continued learning for oral and maxillofacial surgeons.

- ACLS/PALS/BLS/ATLS/NCLS regardless of the provider
- Courses approved by Academy of General Dentistry (AGD)
- Courses offered by American Association of Oral and Maxillofacial Surgeons (AAOMS) component societies (state or regional)
- Courses approved by the ADA (American Dental Association) Continuing Education Recognition Program (CERP)
- Courses sponsored by ADA CODA (Commission on Dental Accreditation) accredited dental schools
- Courses sponsored by ADA CODA accredited OMFS programs
- Courses approved by the AMA (American Medical Association) Accreditation Council for Continuing Medical Education (ACCME) {both single and dually degreed Diplomates may earn this credit}

## **Definition of Dental Continuing Education Categories**

#### Category 1

Category 1 activities are designated by an accredited provider before the Diplomate participates in them. Examples include attendance and presentations at a conference where the American Dental Association (ADA) Continuing Education Recognized Provider (CERP) Category 1 credit will be given. Diplomates may also earn Category 1 credit for publishing an article in a peer-reviewed journal and meritorious learning experiences that have been pre-approved for credit.

#### Category 2

Category 2 activities have not been designated by an accredited provider for Category 1 credit. Diplomates may claim Category 2 credits for worthwhile learning experiences that have improved the care they provide their patients.

The following activities may be reported for Category 2 credit:

- 1. Consultation with Peers and Health Care Experts
- 2. Teaching of Interns, Residents, Students or Other Health Care Professionals
- OMS Research Projects Including the use of texts, periodicals, audiovisuals from library or online
- 4. Self-Assessment Programs and Activities Including self-assessment examinations or courses
- Patient Care Review Activities Including utilization review, record audits or other types of performance improvement activities
- 6. Reading Authoritative, Peer-Reviewed Journal Articles
- 7. Attendance in Effective Educational Programs Relevant to OMS Practice and Not Accredited Category 1 Including lectures, seminars or conferences

- 8. Publishing Articles of Text Book Chapters
- 9. Other Significant Learning Experiences Individually approved by the ABOMS

It is further understood by the Board that there are times when participation in these activities cannot be documented and the Diplomate's self-designating and self-reporting is acceptable.

## **Definition of Medical Continuing Education Categories**

# Information for explaining Category 1 and Category 2 Medical Continuing Education Credit

ACTIVITY: An individual educational experience such as a lecture, clinic or home-study package.

**CONTINUING DENTAL EDUCATION:** Continuing dental education consists of educational activities designed to review existing concepts and techniques, to convey information beyond the basic dental education and to update knowledge on advances in scientific, clinical, and non-clinical practice related subject matter, including evidence-based dentistry. The objective is to improve the knowledge, skills and ability of the individual to provide the highest quality of service to the public and the profession. All continuing dental education should strengthen the habits of critical inquiry and balanced judgment that denote the truly professional and scientific person and should make it possible for new knowledge to be incorporated into the practice of dentistry as it becomes available. Continuing education programs are designed for part-time enrollment and are usually of short duration, although longer programs with structured, sequential curricula may also be included within this definition. In contrast to accredited advanced dental education programs, continuing dental education programs do not lead to eligibility for ethical announcements or certification in a specialty recognized by the American Dental Association. Continuing dental education should be a part of a lifelong continuum of learning. \**As adopted by the ADA House of Delegates, October 2006* 

**COURSE:** A type of continuing education activity; usually implies a planned and formally conducted learning experience.

## AMA direct credit for AMA PRA Category 1 Credit™

Physicians may claim *AMA PRA Category 1 Credit*<sup>™</sup> directly from the AMA for learning that occurs as a result of the activities below. One certificate will be provided for each type of activity claimed. Credit can only be awarded for activities taking place or **completed within the last six years**. Applicants should keep a copy of the application and supporting documentation submitted.

#### Teaching in a live CME activity

Credit may only be claimed for teaching at a live activity that is designated for *AMA PRA Category 1 Credit*<sup>™</sup>. You may only claim credit once for a repeated presentation, and cannot claim credit if you have already been awarded credit for the same presentation from the accredited provider of the activity. Supporting documentation requirements include a program or announcement indicating speakers, accredited providers, dates and locations of each activity included. The AMA will award two credits per hour of interaction.

## Poster presentation(s)

Credit may be claimed for preparing a poster presentation that is included in the published abstracts for the conference designated for AMA PRA Category 1 Credit<sup>™</sup>. Supporting documentation requirements include pages in the program showing the poster abstract, name of the presenter, and date of the activity. The AMA will award five credits per poster.

#### Published article(s)

Credit may be claimed for publishing, as a lead author, an article in a journal included in the MEDLINE bibliographic database. This does not include editing activities or contributions to the books. Supporting documentation requirements include a reprint or copy of each article's first page with a listing of authors and the publication date(s). The AMA will award ten credits per article.

## Medically related advanced degree

Obtaining a medically related degree, such as a Masters in Public Health (MPH), is eligible for *AMA PRA Category 1 Credit*<sup>™</sup>. This cannot be claimed if individual courses within the academic program were already certified for *AMA PRA Category 1 Credit*<sup>™</sup>. Supporting documentation requirements include a copy of the diploma or notification letter indicating the degree and date of completion. The AMA will award 25 credits.

## ABMS member board certification, re-certification and MOC

Credit may be claimed for ABMS certification, re-certification and MOC. Supporting documentation requirements include a copy of the certification or specialty board notification letter. The AMA will award 25 credits.