

## The Examination—A Year of Preparation

Every July approximately 10,000 physicians descend upon 26 sites in 22 cities across the United States to sit for their certification or recertification examination. July 9, 1999, will mark the 30th consecutive year that the American Board of Family Practice (ABFP) has administered examinations to family physicians.

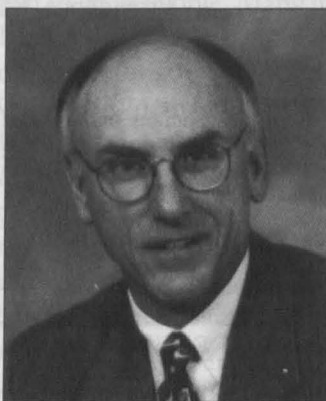
The ABFP, founded in 1969 by Nicholas J. Pisacano, MD, pioneered physician recertification. At its inception the ABFP was the first medical specialty board to institute mandatory recertification.

The recertification examination is the result of the Board's belief that, once certified, physicians should be required to keep their cognitive knowledge up-to-date.

As of 1998 all 24 member boards of the American Board of Medical Specialties (ABMS) have recertification programs in place or have announced plans to develop them.

### Teamwork Approach

Although it is the responsibility of the Board to set the examinations' policies, Terrence M. Leigh, EdD, Associate Executive Director, and his staff are responsible for processing and reviewing the applications, establishing the examination sites, and administering the examinations.



Terrence M. Leigh, EdD,  
Associate Executive Director,  
American Board of Family Practice

Dr. Leigh, who joined the ABFP in 1984, has seen the testing, procedures, and number of sites grow dramatically. In 1984, for example, there were 16 sites where the examinations were administered. Today, that number has increased to 26.

Dr. Leigh's staff consists of eight members who work year-round preparing for the administration of the examination. Two staff members concentrate full-time on the certification can-

didates, while two dedicate their time to recertification candidates. One staff member is responsible for records and recertification, and another is responsible for the Certificate of Added Qualifications (CAQ) for sports medicine and geriatrics. Two other staff members contribute time to the certification and recertification areas when needed.

### Qualifying a Test Site

The goal of Dr. Leigh's staff is to create a uniform environment at each test site. Each site is visited, and a three-dimensional drawing of the room is secured. This drawing is then entered into a computer, and a floor layout is produced to scale. A light meter is used to check the foot-candles of illumination at desktop level. Other conditions that are reviewed include the following: height and width of desks and chairs, conformity to regulations of the Americans with Disabilities Act, and activities scheduled in adjoining rooms. Adequate lodging must also be confirmed for the test candidates. Once these issues have been addressed, Dr. Leigh can determine how many candidates can be assigned to each test site. The number of candidates will then dictate the number of proctors and test administrators assigned to the site. The ratio used for candidates to proctors is 40 (or fewer) to 1.

Assigning every candidate to the site of first choice is a top priority for Dr. Leigh and his staff. Remarkably, they have maintained a 97 percent success rate for honoring candidates' requests. More than 99 percent of candidates are assigned to one of their three preferences.

### The Process Begins

On August 1 the staff begins preparing for the examinations to be administered the following July. Throughout the year they work on a number of parallel assignments and critical deadlines for certification and recertification candidates.

All assignments must be completed, and deadlines must be met using an organized approach and adhering to preset time frames. The assignments include mailing pre-applications, communicating with physicians and residency programs, reviewing and selecting test sites, reviewing appli-

cations, mailing deficiency notices, and making test center assignments.

### ***Parallel Assignments and Critical Deadlines***

On August 1 each physician who is eligible for recertification is sent a pre-application booklet inquiring whether he or she wishes to sit for the examination. Every year there are approximately 10,000 to 12,000 pre-applications mailed, with a response deadline of September 15. On October 1 the pre-applications are reviewed, and those indicating they want to take the examination are then mailed a formal application. The deadline for submission of the formal application is December 1.

On October 1 the staff contacts more than 500 family practice residency programs across the United States to determine the number of residents who will be eligible to make application for the certification examination. On December 1 the staff mails out approximately 3600 applications to these residency programs. The deadline for this application submission is February 1.

From October 1 through May 1 the staff is in frequent communication with their test proctoring teams. These teams, recruited and trained by the ABFP, are located throughout the United States, primarily at major universities.

Also from October through May, applications begin to arrive at the ABFP daily. The staff is responsible for reviewing each application and ensuring that it is complete. Any and all omissions in an application must be noted as a deficiency, and a follow-up request is sent to the candidate to complete.

On May 1 all certification and recertification candidates who have met the requirements of the application are sent their site assignments and admission tickets. This mailing informs the candidate of their testing site location, examination times, and their seat assignment.

On June 1 the staff begins to prepare to ship examination materials by checking and rechecking the physicians' names, testing sites, photographic identification cards, seat assignments, and examination assignments.

### ***Examination Day***

Registration begins promptly at 7:45 am. The morning and afternoon testing sessions begin at 8:30 am and 1:30 pm, respectively. Candidates are admitted to the examination only after they provide their admission ticket and a personal photo-

### **1998 by the Numbers**

Characteristic	Number
Staff	8
Examinees	10,122
Pre-applications and applications	21,184
Hotel rooms reserved	6,167
Examination books	30,650
Answer sheets	20,242
Examination proctors	461
Examination materials, tons	6.4
Meeting space, sq ft	305,000 (7 football fields)

graphic identification. The morning examination lasts 3 hours 45 minutes, and the afternoon session lasts 3 hours. During the morning session, all candidates take a similar examination. After a break for lunch, physicians return to begin the second phase of their test. Certification and recertification "B" candidates take a continuation of the morning examination. The recertification candidates who have completed the computerized office record review (CORR) receive custom test booklets that contain the three subject areas they chose from the seven offered. The subject areas include obstetrics, gynecology, surgery, internal medicine, geriatrics, pediatrics, and emergent/urgent care.

Upon completion of the examination, all testing materials are collected, checked, packed, and shipped overnight to the ABFP office in Lexington, Ky. Each test is checked against the test site examination roster and prepared for the scanning process and analysis.

### ***Certificate of Added Qualifications Examinations***

For the last 11 years, the ABFP has added the CAQ examinations for geriatric medicine (annually) and sports medicine (biannually). The Board administers the CAQ examinations in sports medicine, whereas the ABIM (American Board of Internal Medicine) administers the geriatric medicine examination.

### ***The Future of Examination Administration***

With the advancement of communication technology and personal computers, test administration will definitely change in the years to come. As this technology brings about changes in testing procedures, it will be the responsibility of Dr. Leigh and his staff to support it in the same detailed manner that they use today.