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Regaining Admissibility
to the
American Board of Colon and Rectal Surgery (ABCRS)
Certification Process

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INTRODUCTION

Individuals who seek certification by the American Board of Colon and Rectal Surgery and have lost their admissibility may request readmission to the Board's certification process. The following pathways have been established to allow such individuals to regain admissibility. These pathways apply to candidates who:

(1)   Failed to pass either the written (part I) or oral (part II) examination on three occasions.

(2)   Exhausted their seven-year time limit in which to successfully complete both the written and oral examinations.

I.   STANDARD PATHWAY

The "standard pathway" requires a formal full time four month training period in an ACGME approved colon and rectal surgery residency program. Each request for readmission will be considered on an individual basis. The guidelines below govern the retraining process:

a.   All applicants requesting additional training must hold a valid, registered, full and unrestricted license to practice medicine in a state, territory or possession of the United States or in a Canadian province. They must continue to be licensed throughout the certification process. Applicants must hold a current certificate from the American Board of Surgery.

b.   The additional training period is four months in duration and must be conducted in a full-time ACGME approved colon and rectal surgery residency program. All such training must be approved (in advance) by the Board. A list of programs can be found on our website at www.abcrs.org/residencyprograms.htm. It is the responsibility of the applicant to contact Program Directors to determine their willingness to participate.

c.   The Program Director will serve as the preceptor and will assign duties and responsibilities to the Trainee with assistance from the faculty.

d.   The curriculum must be comprehensive but should place special emphasis on any specific areas of weakness identified in the Trainee's prior examinations. The program will emphasize patient management and clinical problem solving skills. The use of patient care algorithms is recommended to demonstrate appropriate data collection with logical application toward diagnosis and therapy in a systematic manner.

e.   The program will require the Trainee to actively participate in daily patient rounds and new patient evaluations in the office and hospital settings.

f. The Trainee's attendance will be mandatory at departmental teaching conferences such as: (1) Tumor Boards, (2) Morbidity/Mortality Conferences, (3) Preoperative Conferences, (4) Pathology Conferences, etc. The Trainee should be actively involved in the conferences. The Program Director should assign primary responsibility for appropriate teaching and presentations by the Trainee.

g. Operative experience is not necessary but is permitted if the Preceptor feels it is appropriate for teaching and does not draw away the experience of the accredited residents.

h. The trainee should keep up-to-date with current colon and rectal literature and complete the latest ASCRS CARSEP program. The Trainee should be quizzed for cognitive content at regular intervals, but preferably, at the end of the second, third, and fourth months. These efforts should be monitored and critiqued by the Program Director.

i. The Trainee will be evaluated by the Program Director at regular intervals. An evaluation form must be submitted to the Board at the end of the second month, and at the completion of the training period.

j. Following successful completion of training, physicians must apply for readmission to the certification process within one year. They must take the examination within two years following approval of their application for readmission. A fully completed Application for Examination and required fee must be submitted by July 15 of each year. A timetable listing subsequent examination dates is available at: www.abcrs.org/certification/important dates.htm.

k. The Standards & Credentials Committee of the Board will review all applications in the fall of the application year. Following the review process, applicants will be informed of their acceptance/rejection for examination. Regardless of their previous failure domain (Part I or Part II), readmitted physicians will be required to take and pass both the Written (Part I) and the Oral (Part II) Examinations to achieve certification by the American Board of Colon and Rectal Surgery.

l. Once an applicant is accepted for examination, all the Board's established rules and regulations governing its examination process must be observed. This information is contained in the Board's General Information Booklet published on the ABCRS website, Diseases of the Colon and Rectum, and the Journal of the American Medical Association.

m. Candidates will have seven years to complete the examination process following completion of their retraining and official approval for examination. If they fail to pass the written or oral portion of the examination within three attempts during that time interval, they will not be eligible for additional retraining or reentry into the ABCRS certification process.

II. ALTERNATE PATHWAY

The "Alternate pathway" is intended to allow the applicant to acquire and demonstrate adequate knowledge at a pace determined by the applicant. It encourages pursuit of Board certification with less adverse impact on the surgeon's practice and does not require a formal retraining period. To begin the alternate pathway, an applicant must observe the following guidelines:

a. Complete an (on-line) application for re-admissibility.

b. Present proof of a valid, registered, full and unrestricted license to practice medicine in a state, territory or possession of the United States or in a Canadian province, and continue to be licensed throughout the certification process.

c. Hold a current certificate from the American Board of Surgery.

d. Document 100 hours of CME activity within the last 24 months, of which 60 hours must be Category I.

e. Provide verification of completion of the most recent version of the American Society of Colon and Rectal Surgeons Education Program (CARSEP). This program may be used to satisfy the requirement for 50 hours of Category 1 CME.

f. Provide a reference letter from the Chief of Surgery or Chair of the hospital credentials committee where the majority of the applicants' work is done.

g. Provide an operative case log for the most recent 12 month period.

h. The Alternate Pathway Re-admission fee is $2,000 and includes the application and re-admission examination fee. The fee is payable by check to the American Board of Colon and Rectal Surgery and must be submitted by July 15 of each year.

i. Following approval of the above requirements by the Board's Standards & Credentials Committee, the applicant will be required to complete the Colon and Rectal Surgery In-Training Examination (CARSITE) with a minimum score of 70%. The CARSITE is sponsored by the Association of Program Directors for Colon and Rectal Surgery. It consists of approximately 150 multiple-choice questions and is a computer-based test given using a web service.

   (1) This examination is offered annually (in November), and candidates will have to make arrangements to take the exam through a proctored and secure computer site. The Board's staff will provide candidates with the exact dates and will assist them with details prior to the examination

   (2) If the initial attempt at passing the re-admission examination is unsuccessful, the applicant may retake the examination the following year. The re-exam fee will be $600.

   (3) Upon successful completion of the Re-Admission Examination, the applicant will be admitted to the Board's certification process and will be eligible to take the written (part I) examination at the next prescribed time interval. A timetable listing subsequent examination dates is available on: www.abcrs.org/certification/important_dates.htm.. Applicants will have a total of seven years to successfully complete the written and oral examinations.