ABOS Knowledge, Skills, and Behavior Program

ABOS KSB Program
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Mona Saniei, MPH, ABOS Graduate and Professional Education Specialist
ABOS KSB Program

• **Knowledge**
  – Measured by the Orthopaedic In-Training Examination.

• **Surgical Skills**
  – Measured by [O-P Surgical Skills Assessment](#).

• **Professional Behavior**
  – Measured by [ABOS Behavior Tool](#) (ABOSBT).
  • 2 Types: End-of-Rotation & 360
ABOS KSB Requirement

• Beginning academic year 2025/26: **July 1, 2025**
• Participation is required, not specific levels of achievement
• Resident must meet ABOS participation requirements
ABOS KSB Participation Requirements

ABOS KSB participation requirements that will be effective July 1, 2025, for those residents who wish to take the ABOS Part I Examination starting in 2026:

- Knowledge
  - 3 OITE examinations completed during PGY 1-5
- Surgical Skills
  - PGY 2-5
    - 80 completed assessments per year of residency education
  - PGY 1
    - 12 completed assessments
- Professional Behavior
  - PGY 2-5
    - 6 completed end-of-rotation professional behavior assessments per year
  - PGY 1
    - 3 completed end-of-rotation professional behavior assessments
ABOS Knowledge, Skills, and Behavior Program

• Surgical Education Shift
  – Time-Based ➔ Competency-Based
  • Goal: Time + Competency

• Deficiencies exists in:
  – Documentation
  – Measurement
  – Teaching

• ABOS Goal: provide assessment tools for the measurement of:
  – *Knowledge, Surgical Skills*, and *Professional Behavior*
How It Works - Surgical Skills

Surgical Skills

1. Resident Requests Assessment
2. Attending Completes Assessment
3. Resident Receives Feedback

Completed Surgical Skills assessments are sent back to the resident in real-time.
How it Works - Professional Behavior

Professional Behavior feedback goes directly to Program Director/Program Coordinator and/or APD.

**After Completing Rotation**
1. Resident Requests Assessment
2. Faculty Complete Assessment
3. Program Director and Program Coordinator Receive Feedback

**Yearly 360 Evaluation**
1. ABOS Sends Evaluation to Faculty, APPs, nurses, fellow residents, and others
2. They complete evaluation
3. Program Director and Program Coordinator Receive Feedback
Surgical Skills Resident Requirement

- Surgical Skills
  - 80 completed assessments for PGY 2-5/Year
  - 12 completed assessments for PGY 1/Year

Residents have 48 hours from procedure date to request assessment

Faculty will have 72 hours from request
Professional Behavior Resident Requirement

- Professional Behavior
  - 6 End-of-Rotation Assessments for PGY 2-5/Year
  - 3 completed assessments for PGY 1/Year

- ABOS KSB 360
  - Program Facilitates
  - Once per year in October

Faculty will have 2 weeks from request
ABOS KSB+ App/Web Portal (www.abos.org/ksb) for Residents
**Integrated ABOS KSB App/Web Portal**

- **ACGME Case Logs/ABOS KSB Platform**
  - Residents submit case log for ACGME and request ABOS KSB assessment in the same place.

- **ABOS staff will contact** your residency program when the integrated platform is available. Residents will receive notice once the app is updated.

- Updates will start end of summer 2023-spanning until January 1, 2025.
Email/Text to Faculty

ABOS Resident Skills Assessment Request

ABOS No Reply <noreply@abos.org>

Dr. Jane Doe: Dr. James Doe has requested an ABOS Skills Assessment for "6/16/2021 9:49 AM Primary Total Hip Arthroplasty." Click https://www.abos.org/A/A.aspx?GUID=5d9b1daa-60ee-4817-ba58-311a656d0f1f to perform the assessment. Do not reply to this message.

Dr. Jane Doe: Dr. John Doe has requested an ABOS Skills Assessment for "6/16/2021 9:30 AM Primary Total Hip Arthroplasty." Click https://www.abos.org/A/A.aspx?GUID=e77000c4-d410-178b-95d2-e81eaa110548 to perform the assessment. Do not reply to this message.
Surgical Skills Assessment

Dr. Jane Doe ABOS Skills Assessment (OP-Score) of Dr. James Doe for 6/16/2021 9:49 AM Primary Total Hip Arthroplasty

4 (of 11) Knowledge of Specific Procedural Steps: Understands steps of procedure, potential risks, and means to avoid/overcome them

○1: I had to do.
○2: I had to talk them through.
○3: I had to prompt them from time to time.
○4: I needed to be in the room just in case.
○5: I did not need to be there.

Definitions
1: I had to do - i.e., requires complete hands-on guidance, did not do, or was not given the opportunity to do.
2: I had to talk them through - i.e., able to perform tasks, but requires constant direction.
3: I had to prompt them from time to time - i.e., demonstrates some independence, but requires intermittent direction.
4: I needed to be in the room just in case - i.e., independence, but still requires supervision for safe practice.
5: I did not need to be there - i.e., complete independence, understands risks and performs safely, practice ready.
8 Facets of Surgical Procedure

1. **Pre-procedure plan**: Gathers/assesses required information to reach diagnosis and determine correct procedure required.

2. **Case preparation**: Patient correctly prepared and positioned, describes approach and lists required instruments, prepared to deal with probable complications.

3. **Knowledge of specific procedural steps**: Can sequence steps of procedure, articulates potential risks, and means to avoid/overcome them.

4. **Technical performance**: Efficiently performs steps, avoiding pitfalls and respecting soft tissues.

5. **Visuospatial skills**: 3D spatial orientation and able to position instruments/hardware where intended.

6. **Post-procedure plan**: Appropriate complete post procedure plan.

7. **Efficiency and flow**: Obvious planned course of procedure with economy of movement and flow.

8. **Communication**: Professional and effective communication/utilization of staff.
Professional Behavior Assessment

Dr. Jane Doe ABOS Professional Behavior Assessment of Dr. James Doe for 6/16/2021 10:14 AM

2. The resident effectively communicates with patients and with people who are important to those patients (Shows Compassion/Empathy, Demonstrates Communication and Listening skills, Shows Respect for Patient needs)

- 1. Strongly Disagree
- 2. Somewhat Disagree
- 3. Neutral
- 4. Somewhat Agree
- 5. Strongly Agree

Shows Compassion/Empathy (ie. Collaborates with patient, enhances the relationship)

Demonstrates Communication and Listening skills (ie. Attentive, shows patience, respect patient autonomy and empower them to make informed decisions, manages communication challenges with patients and families)

Shows Respect for Patient needs (ie. Respects patients' viewpoints and considers his/her opinions when determining healthcare decisions, regards the patient as a unique individual, treats the patient in the context of his/her family and social environment, takes time to educate the patient and their family)
Benefits

**Resident**
- Identify procedures you should be competent/exposed to before graduating
- Steer assessments towards what you need and where you want to be
- Residents want more real-time feedback
- Formative & Summative
- Documentation

**Program Director**
- Immediate documentation
- Surgical Skills and Professional Behavior Tool maps to Milestones
- Future: Reduce administrative burden on residents
- Reports to help you identify competency of resident before signing off they are ready to sit for Part I exam

**Faculty**
- Text Message/Email requests
- No Portal/Login
- “Quiet Hours”- No texts at night.
- Opportunity to improve teaching/communication
**MYTH VS. FACT**

**MYTH**
- Data will be used for hiring or credentialing
  - ABOS will not share this data
- Data will follow to Fellowship
  - Data is not validated nor intended for Fellowship apps or recruitment.

**FACT**
- Program Director has ultimate discretion
- Participation will be a requirement to sit for ABOS Part I.
Integrated ABOS KSB App/Web Portal

- ACGME Case Logs/ABOS KSB Platform
  - Residents submit case log for ACGME and request ABOS KSB assessment in the same place.

- **ABOS staff will contact** your residency program when the integrated platform is available. You will receive notice once your app is updated.

- Updates will start end of summer 2023-spanning several months.
ABOS Resident Dashboard
ABOS Dashboard (www.abos.org)

- Longitudinal Progress
  - Multi-Purpose
    - Rules and Procedures
    - Link to Resident Assessment Request Portal
    - Surgical Skills Assessment Ratings
    - Professional Behavior Assessment Ratings
    - OITE Performance
    - Part I Examination Application
ABOS Resident Dashboard Visuals

My Tier 1 Core Procedures

<table>
<thead>
<tr>
<th>Procedure</th>
<th>No of Evaluations</th>
<th>Level Of Competence Achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Total Hip Arthroplasty</td>
<td>12</td>
<td>5</td>
</tr>
<tr>
<td>Tissue Exposure</td>
<td>9</td>
<td>5</td>
</tr>
<tr>
<td>Trigger Finger Release</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Below Knee Amputation</td>
<td>2</td>
<td>4</td>
</tr>
</tbody>
</table>

View My Tier 1 Core Procedures

My Tier 2 Subspecialty Procedures

<table>
<thead>
<tr>
<th>Procedure</th>
<th>No of Evaluations</th>
<th>Level Of Competence Achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ankle Arthroscopy</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Elbow: Duska Biceps Tendon Repair</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Patellar: SCLF</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Revision Total Hip Arthroplasty</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Biopsy of Bone Lesion</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Shoulder: Rotator Cuff Repair</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

View My Tier 2 Subspecialty Procedures
ABOS Resident Dashboard Visuaels
Orthopaedic Knowledge

- Scaled Orthopaedic In-Training Examination (OITE) scores
- Common set of questions on ABOS Part I Examination and AAOS OITE
- Identify a minimum OITE score that roughly corresponds to a passing score on Part I Examination
### ABOS Part I Certification Examination Blueprint

#### General Principles

<table>
<thead>
<tr>
<th>Subject</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bivariate/Epidemiology</td>
<td>0.5-1.5%</td>
</tr>
<tr>
<td>Legal/Ethical/Systems-based Practice</td>
<td>0.5-1.5%</td>
</tr>
<tr>
<td>Basic Science Principles</td>
<td>3.5%</td>
</tr>
<tr>
<td>Anatomy and Surgical Approaches</td>
<td>3.5%</td>
</tr>
<tr>
<td>Multiple Trauma</td>
<td>3.2%</td>
</tr>
<tr>
<td>Metabolic Bone Disease</td>
<td>0.5-1.5%</td>
</tr>
<tr>
<td>Medical Aspects of Sports Medicine</td>
<td>0.5-1.5%</td>
</tr>
<tr>
<td>Perioperative Management</td>
<td>1.3%</td>
</tr>
</tbody>
</table>

#### Adult Spine

<table>
<thead>
<tr>
<th>Spinal Region</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cervical</td>
<td>2.5-5.5%</td>
</tr>
<tr>
<td>Thoracic</td>
<td>0.25-0.75%</td>
</tr>
<tr>
<td>Lumbar</td>
<td>3-4%</td>
</tr>
<tr>
<td>Nonspecific site</td>
<td>1-2%</td>
</tr>
</tbody>
</table>

#### Upper Extremities

<table>
<thead>
<tr>
<th>Joint</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scapula/Cleavage/Axillar/Scalenal/Sternoclavicular</td>
<td>0.5-1.5%</td>
</tr>
<tr>
<td>Shoulder joint</td>
<td>3.75-10.75%</td>
</tr>
<tr>
<td>Humerus</td>
<td>0.25-0.75%</td>
</tr>
<tr>
<td>Elbow joint</td>
<td>2.25-5.75%</td>
</tr>
<tr>
<td>Forearm</td>
<td>0.5-1.5%</td>
</tr>
<tr>
<td>Wrist</td>
<td>3-4%</td>
</tr>
<tr>
<td>Hand</td>
<td>2.5-4.5%</td>
</tr>
</tbody>
</table>

#### Lower Extremities

<table>
<thead>
<tr>
<th>Joint</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pelvis</td>
<td>1-2%</td>
</tr>
<tr>
<td>Hip</td>
<td>3.25-7.75%</td>
</tr>
<tr>
<td>Femur</td>
<td>1.25-3.75%</td>
</tr>
<tr>
<td>Knee</td>
<td>5.25-14.75%</td>
</tr>
<tr>
<td>Tibia/Phulga</td>
<td>2-4%</td>
</tr>
<tr>
<td>Ankle/leg</td>
<td>3-9%</td>
</tr>
<tr>
<td>Foot</td>
<td>2-4%</td>
</tr>
</tbody>
</table>

#### Pediatrics

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upper Extremity</td>
<td>1.25-2.75%</td>
</tr>
<tr>
<td>Lower Extremity</td>
<td>3-4%</td>
</tr>
<tr>
<td>Spine</td>
<td>3-4%</td>
</tr>
<tr>
<td>Sports</td>
<td>3-4%</td>
</tr>
<tr>
<td>General</td>
<td>3-4%</td>
</tr>
<tr>
<td>Neurovascular</td>
<td>0.5-1.5%</td>
</tr>
</tbody>
</table>

#### ABOS Part I Certification Examination Blueprint

<table>
<thead>
<tr>
<th>General Principles</th>
<th>10-21%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bivariate/Epidemiology</td>
<td>0.5-1.5%</td>
</tr>
</tbody>
</table>

- Interpretation of epidemiologic information (disease prevalence and incidence, disease outcomes [e.g., fatality rates], associations [e.g., risk factors], health impact [e.g., risk differences and ratios], sensitivity, specificity, predictive values).
- Study design and interpretation of experimental studies (e.g., clinical trials), types of observational studies (e.g., cohort, case-control), sampling and sample size, subject selection and exposure allocation (e.g., randomization).
- Hypothesis testing and statistical interference (confidence intervals, statistical significance and type I error, statistical power and type II error).

#### Legal/Ethical/Systems-based Practice

| 0.5-1.5% |

- Consent and informed consent to treatment, physician-patient relationship, death and dying, research issues, interactions with other health professionals, cultural competence, physician wellness/humor, safety, quality, teamwork, cost, value-based care, diversity.

#### Basic Science Principles

| 3-5% |

- Biology (fracture healing, biologics, pharmacology), biomechanics (including gait), inflammatory cascades and coagulation.

#### Anatomy and Surgical Approaches

| 3-5% |

- Anatomy, surgical approaches, and soft-tissue coverage.

#### Multiple Trauma

| 1-2% |

- Acute respiratory distress syndrome, systemic inflammatory response syndrome, fat embolism syndrome, orthopedic management of polytrauma patient, initial assessment (ABCS, head, spine), open fractures, bone grafts/bone graft substitutes, mangled extremity, host risk factors, shock, hemopneumothorax.

#### Metabolic Bone Disease

| 0.5-1.5% |

- Osteoporosis, vitamin D, diabetes, Paget’s disease, hyperparathyroidism.
How to Get Started

1. Download the ABOS KSB+ App (Android or Apple) or use the ABOS KSB+ Web Portal (www.abos.org/ksb).
   a. Username created for you and communicated via Welcome Email
      i. Create password
      ii. Forgot Username

2. Set up Access to your ABOS Resident Dashboard (www.abos.org)
   a. Click Login
   b. Username same as ABOS KSB+ App/Web Portal
   c. Create Password

When in doubt: Use the Forgot Username/Forgot Password buttons on either page or contact ksb@abos.org