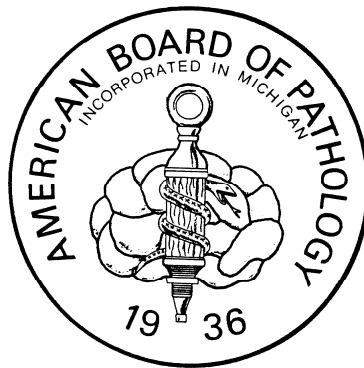


BOOKLET OF INFORMATION 2012



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POLICIES, PROCEDURES, AND REQUIREMENTS

This document supersedes all previous publications of the American Board of Pathology (ABP) concerning its policies, procedures, and requirements for certification.

All candidates for ABP certification are admitted to the examinations at the discretion of the ABP.

The admission of a candidate to an ABP certifying examination is governed by the policies, procedures, and requirements in effect during the current application period.

The ABP reserves the right to make changes in its fees, policies, procedures, and requirements at any time, with or without prior notice.

ORGANIZATIONAL HISTORY

In June 1935 the Section on Pathology and Physiology of the American Medical Association (AMA) and the American Society of Clinical Pathologists (ASCP) appointed committees that together considered the feasibility and desirability of establishing a national certifying board. The joint committee agreed unanimously that such a board should be established and proceeded to draw up bylaws.

In May 1936, the ASCP and the Section on Pathology and Physiology of the AMA accepted the proposed bylaws, authorized the nomination of four members each to the ABP, and suggested incorporation in Michigan. Approval of the ABP was granted by the Advisory Board for Medical Specialties and the Council on Medical Education and Hospitals of the AMA.

On July 19, 1936, the ABP met for the first time in Chicago. The original trustees were F. W. Hartman, E. B. Krumbhaar, H. T. Karsner, and J. J. Moore from the Section on Pathology and Physiology of the AMA, and A. H. Sanford, F. H. Lamb, A. G. Foord, and R. R. Kracke from the ASCP.

Officers elected were: A. H. Sanford, president; F. H. Lamb, vice president; F. W. Hartman, secretary-treasurer.

COOPERATING SOCIETIES OF THE ABP

Academy of Clinical Laboratory Physicians and Scientists
American Medical Association Section Council on Pathology
American Society for Clinical Pathology
American Society for Investigative Pathology
Association of Directors of Anatomic and Surgical Pathology
Association of Pathology Chairs
College of American Pathologists
United States and Canadian Academy of Pathology, Inc.

MISSION AND PURPOSE

The mission of the ABP, as a member of the American Board of Medical Specialties, is to promote the health of the public by advancing the practice and science of pathology.

The ABP accomplishes its mission through the following principal activities:

1. Establishing certification standards.
2. Assessing the qualifications of those seeking to practice the specialty of pathology.
3. Conducting voluntary primary and subspecialty certification examinations and awarding certificates to successful candidates.
4. Establishing a Maintenance of Certification program to assist physicians certified by the ABP in maintaining standards necessary for provision of quality patient care.
5. Participating in the review of pathology training programs and supporting the directors and trainees of these programs.
6. Maintaining communication with pathology and other medical organizations, with its diplomates, and with others as appropriate.

7. Encouraging the study of pathology.
8. Maintaining a registry of its diplomates.

The ABP does **not** seek special privileges for its diplomates, **nor** does it:

1. Confer an academic degree.
2. Confer a legal qualification or license to practice pathology.
3. Define hospital privileges.
4. Define the scope of specialty practice.
5. Delineate who may or may not engage in the practice of pathology.

CERTIFICATION BY THE ABP

- I. **Certification in Anatomic Pathology, Clinical Pathology, or Combined Anatomic Pathology and Clinical Pathology.** The granting of a certificate to a physician by the ABP denotes that the pathologist is a physician who:
 - A. Successfully completed a graduate medical education program in pathology accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the Royal College of Physicians and Surgeons of Canada (RCPSC)
and
 - B. Has been endorsed by the pathology training program director and faculty
and
 - C. Has successfully completed a voluntary evaluation process designed and administered by the ABP to assure the public and other physicians that, at the time of certification, the candidate had knowledge, skills, and other abilities that the ABP deems important for the practice of pathology.
- II. **Subspecialty Certification.** Pathology is a broad discipline; therefore, it is appropriate that some certified pathologists seek greater knowledge and expertise in one of the component areas of pathology. Presently, the ABP issues subspecialty certificates in blood banking/transfusion medicine, chemical pathology, clinical informatics (in conjunction with the American Board of Preventive Medicine), cytopathology, dermatopathology (in conjunction with the American Board of Dermatology), forensic pathology, hematology, medical microbiology, molecular genetic pathology (in conjunction with the American Board of Medical Genetics), neuropathology, and pediatric pathology.

Certification in a subspecialty requires additional training and an additional examination. Pathologists with subspecialty certification may choose to limit their activities entirely or in part to a specific area of competence or they may place special emphasis on it in their practices. The achievement of subspecialty certification does not reflect on the ability of other pathologists to practice in that area.
- III. **Maintenance of Certification (MOC). Primary and subspecialty certificates issued by the ABP after January 1, 2006 are time-limited (10 years).** Diplomates with one or more time-limited certificates must participate in and successfully complete the ABP MOC process (see *MOC Booklet of Information*).
- IV. **Certification Status.** Diplomates of the ABP are required to accurately state their certification status in *curriculum vitae*, publications, directories, letterhead, etc. A diplomate with a time-limited certificate whose certificate has expired must not claim to be board certified, and all descriptions of certification status must be modified accordingly. If an individual represents that he/she is certified by the ABP when such is not the case, the ABP will notify appropriate authorities, including but not limited to credentialing agencies, licensing boards, and law enforcement agencies.

REQUIREMENTS FOR PRIMARY AND SUBSPECIALTY CERTIFICATION

All applications for certification are evaluated by the Credentials Committee of the ABP. The evaluation process requires consideration of the following components.

I. PROFESSIONAL EDUCATION

A. Medical School Requirement

1. Applicants for certification by the ABP must have graduated from:
 - a. a medical school in the United States or Canada accredited by the Liaison Committee on Medical Education, or
 - b. an osteopathic college of medicine accredited by the Bureau of Professional Education of the American Osteopathic Association, or
 - c. a medical school outside the United States or Canada acceptable to the ABP.

B. Documents Required with Application

1. Applicants must upload a copy of the medical school diploma (along with an English translation if issued outside the United States in a language other than English), showing the medical degree and the date that it was awarded, or
2. Graduates of United States or Canadian medical schools may upload a letter from the Dean's office of their medical school certifying that they graduated from medical school. *A certificate showing that the applicant has passed a final examination is **not** acceptable.*

II. MEDICAL LICENSURE

A. Primary Certification

1. Applicants must have been granted or have applied for a full and unrestricted license in a state or jurisdiction of the United States or Canada that will be valid at the time examination results are released (September 1 for the spring examinations and December 1 for the fall examinations).
2. Canadian applicants must have passed the Licentiate of the Medical Council of Canada (LMCC) and RCPSC examinations and obtained the appropriate licensure in a Canadian province or obtained a full and unrestricted license in the United States.
3. **Institutional or training licenses are not acceptable.**
4. If the applicant has applied for but not yet received a medical license, he/she may upload (1) a copy of the letter or email received from the medical licensing board stating they are in receipt of your application for licensure and (2) evidence of successful completion of USMLE Step 3 or other examination required by the licensing authority.
5. Applicants who upload the information required in II.A.4 will be allowed to sit for the examination but the results will not be released until evidence of licensure is received by the ABP. **If such evidence is not received within 2 years from the date of the examination, the examination results will be declared null and void.**

B. Subspecialty Certification (including combined AP/NP certification)

1. **At the time of application**, the applicant must hold a currently valid, full and unrestricted license to practice medicine or osteopathy in a state or jurisdiction of the United States or Canada.
2. The license must be valid at the time the results of the examination are released (November 1).

C. **There are no exceptions to the licensure requirements.**

D. Notification of action against license

1. Candidates and diplomates must notify the ABP in writing within 60 days of:
 - a. any revocation, suspension, or limitation of his/her license or right to practice by any licensing agency in the United States or Canada;
 - b. voluntary surrender of such a license or right in connection with any disciplinary action or consent decree; or
 - c. entry into a rehabilitation or diversionary program for chemical dependency.

2. The candidate or diplomate must also provide the ABP all relevant documentation relating to such action, including any administrative complaints or decisions, consent decrees, or settlement agreements.
3. Failure to report such an action may result in the denial of qualification to sit for a certifying examination or the revocation of any and all certificates issued by the ABP, as applicable (see **VIII. H. Revocation of Certification**).
4. Entry into and successful participation in a rehabilitation or diversionary program for chemical dependency authorized by the applicable licensing agency will not, by itself, disqualify an applicant from taking a certification examination.

III. TRAINING REQUIREMENTS

A. General

1. Only pathology training obtained in the United States or Canada is acceptable toward meeting the ABP requirements. Training programs must be accredited by the ACGME (United States) or the RCPSC (Canada).
2. For candidates who completed training in 2008 or later, certification must be obtained with 5 years of the completion of training. Otherwise, additional training will be required. (See IV.A.4 and IV.H. 3.)
For candidates who finished residency prior to 2008, training should have been successfully completed during the 5-year period immediately preceding the final filing date for submission of the application. For these applicants, if training was completed 5–9 years prior to application, evidence of continuing medical education will be required (contact the ABP for details).
3. **No applicant will be allowed to sit for a primary or subspecialty examination if the interval since initial completion of training equals or exceeds 10 years unless additional training is obtained.**
4. Verification of the applicant's qualifications by the pathology training program director is required.
 - a. The ABP will provide an on-line evaluation form to the most recent pathology training program director. The program director must complete this on-line evaluation, which verifies that appropriate training for the requested certification has been successfully completed and that the individual is ready to take the certifying examinations.
 - b. The ABP will provide an additional online evaluation form to each pathology training program director with responsibility for any portion of an individual's training. Completing this form verifies satisfactory performance during the training in that program.
5. Each institution sponsoring a pathology training program should develop individual sick, vacation, parental, and other leave policies for the resident. However,
 - a. **1 year of approved training credit toward ABP certification requirements must be 52 weeks in duration, and the resident must document an average of 48 weeks per year of full-time pathology training over the course of the training program.**
 - b. For 1-year fellowship programs, the resident must document 48 weeks of full-time training.
 - c. Any additional leave must be made up.
 - d. Unused vacation and other leave time may not be accumulated to reduce the overall duration of training.
6. The ABP does not allow credit for student fellowships in pathology during medical school nor does it give "advanced credit" for either primary or subspecialty certification.

B. Primary Certification

1. **Combined Anatomic Pathology and Clinical Pathology (AP/CP) Certification**
 - a. 48 months of full-time training in an accredited AP/CP program. Training must include at least 18 months each of structured AP and CP training. The remaining 12 months is flexible and may include AP and/or CP. Training may include up to 6 months of research done during the pathology training program with the approval of the program director.

- b. Applicant must have performed at least 50 autopsies at the time the application for certification is submitted.
 - c. A list of completed autopsies must be uploaded with the application. The list must be numbered and include the age, sex, date of autopsy, and primary diagnosis for each patient autopsied. An autopsy submission form is available on the ABP Web site. It is not necessary to use this form; however, the autopsies must be submitted either in this same format or as an upload of the autopsy log from the ACGME Web site.
 - d. All autopsies, except forensic cases, must have a signed consent form.
 - e. In order to report an autopsy to the ABP, the applicant must actively participate in the following (as appropriate to the case):
 - 1) review of history and circumstances of death
 - 2) external examination of the body
 - 3) gross dissection
 - 4) review of microscopic and laboratory findings
 - 5) preparation of written description of gross/microscopic findings
 - 6) development of opinion on cause of death
 - 7) review of autopsy report with teaching staff.
 - f. The ABP has approved a new policy on fetal autopsies which will go into effect with applications for the 2013 AP and APCP examinations.
 1. Definition – A fetal autopsy is one that is performed on a fetus dying in-utero or born dead.
 2. For a fetal autopsy to satisfy the autopsy requirement of the American Board of Pathology, the following criteria must apply:
 - There must be an autopsy consent signed for a complete autopsy. This is not the same as an anatomic disposal.
 - The fetus must be intact.
 - Examination of the placenta must be part of the autopsy report.
 3. No more than a total of 5 fetal autopsies that have no anatomic, congenital, infectious, or genetic abnormalities (Final Anatomic Diagnosis = intra-uterine fetal demise) can count toward the 50 required autopsy cases.
 4. No more than 2 fetal autopsies on macerated fetuses can count toward the 50 required autopsy cases.
 - g. The ABP reserves the right to audit autopsy cases submitted by applicants as part of the certification requirements.
 - h. **Candidates for combined AP/CP certification will not be certified by the ABP until both the AP and the CP examinations are passed and all other requirements are met.**
2. **Certification in Anatomic Pathology**
- a. 36 months of full-time training in an accredited APCP or AP program. Training must include at least 24 months of structured AP training. The remaining 12 months are flexible; and may include AP and/or CP. Training may include up to 6 months of research done during the pathology training program with the approval of the program director.
 - b. Applicant must have performed at least 50 autopsies at the time the application for certification is submitted. See autopsy requirements under Combined AP/CP Certification (III.B.1).
 - c. Candidates already certified in CP must have an additional 24 months of full-time training in AP including 18 months of structured training in AP. The remaining 6 months are flexible but must be in one or more areas of AP. The autopsy requirements must be met as described under Combined AP/CP Certification (III.B.1).
3. **Certification in Clinical Pathology**
- a. 36 months of full-time training in an accredited APCP program. Training must include at least 24 months of structured CP training. The remaining 12 months are flexible; and

- may include AP and/or CP. Training may include up to 6 months of research done during the pathology training program with the approval of the program director.
- b. Candidates already certified in AP must have an additional 24 months of full-time training in CP including 18 months of structured training in CP. The remaining 6 months are flexible but must be in one or more areas of CP.
4. **Changing Certification from AP/CP to Certification in AP or CP Only**
 - a. Candidates must meet requirements for certification in AP or CP only (see III.B.2 and 3; **note:** different from AP/CP requirements).
 - b. A candidate must notify the ABP that he/she is relinquishing AP/CP qualification, complete another application for primary certification in the requested area, and pay the required fee.
 - c. Candidates must often use time from the other primary specialty (AP or CP) to complete the 36 months training requirement for primary certification in a single field. These months cannot be used again. If the candidate desires certification in the other primary specialty at a later date, additional training will be required.

C. Subspecialty Certification

1. Requirements for All Subspecialty Certification

- a. Candidate must have a primary certification from the ABP, RCPSC (pediatric pathology only), or current primary and/or subspecialty certification with another ABMS Board.
- b. Candidates for combined AP/NP certification must have passed the primary examination before they will be allowed to sit for the subspecialty examination.
- c. Residents may not receive credit toward subspecialty certification for subspecialty training that occurred as part of the training requirement for primary certification.
- d. Resident must complete at least 2 years of training in APCP, AP, or CP before beginning subspecialty training, except for Dermatopathology in which completion of all primary certification training requirements prior to the fellowship is required.
- e. Applicants who completed subspecialty training 10 or more years prior to application must have successfully completed 6 months of additional pathology training in an ACGME-accredited training program in the area(s) in which certification is desired.
- f. Modified training (part-time training) for subspecialty certification is acceptable if the part-time training occurs in an approved position in an ACGME-accredited program. The duration of training may not exceed twice that required for qualification.

2. Blood Banking/Transfusion Medicine

- a. For applicants who are certified in anatomic pathology and clinical pathology or clinical pathology only, or who have a primary certificate plus a subspecialty certificate in hematology from another member medical specialty board of the ABMS: **1 full year** of additional training in blood banking/transfusion medicine in a program accredited for such training by the ACGME.
- b. For diplomates of the American Boards of Anesthesiology, Internal Medicine, Obstetrics/Gynecology, Pediatrics, Surgery, Orthopedic Surgery, Plastic Surgery, Colon and Rectal Surgery, Neurological Surgery, and Thoracic Surgery: **1 full year** of additional training in blood banking/transfusion medicine in a program accredited for such training by the ACGME.
- c. For applicants, other than those described in 2.a. or 2.b., who are certified by another member medical specialty board of the ABMS: **2 years, full time**, in blood banking/transfusion medicine including 1 year as a trainee in a program accredited for such training by the ACGME and 1 additional year in blood banking/transfusion medicine acceptable to the ABP. *ABP approval for the additional year should be obtained before the individual begins the additional year.*

3. Chemical Pathology

- a. For applicants who are certified in anatomic pathology and clinical pathology or clinical pathology only: **1 full year** of additional training in chemical pathology in a program accredited for such training by the ACGME.

- b. For applicants, other than those described in 3.a., who are certified by another member medical specialty board of the ABMS: **2 years** of full-time training in chemical pathology including 1 year as a trainee in a program accredited for such training by the ACGME and 1 additional year in chemical pathology acceptable to the ABP. *ABP approval for the additional year should be obtained before the individual begins the additional year.*

4. **Clinical Informatics**

- a. Certification in Clinical Informatics is a joint and equal function of the ABP and the American Board of Preventive medicine (ABPM). Such function relates to qualification of applicants, standards of examinations, and the form of the certificate.

- b. All candidates for certification in Clinical Informatics must possess current certification by one of the ABMS member boards and meet the qualifications indicated in one of the following pathways to certification.

- c. **ACGME-accredited Fellowship Pathway**

A physician must have successfully completed the required number of months in an ACGME-accredited Clinical Informatics fellowship program. Until a sufficient number of training programs are accredited, the following additional pathways to certification will be available.

- d. **Practice Pathway**

For a period of 5 years from the date when the American Board of Preventive Medicine begins receiving applications for certification in Clinical Informatics, an applicant may submit documentation of a 36-month period of time in which he or she spent a minimum of 25% of his or her time engaged in the practice of Clinical Informatics at the subspecialty level. These experiences must consist of broad-based professional activity with significant Clinical Informatics responsibility. Documentation of Clinical Informatics research and teaching activities may also be submitted for review. The practice experience may include a period of time spent in non-accredited fellowship training.

- e. **Non-Accredited Fellowship Pathway**

For a period of 5 years from the date when the American Board of Preventive Medicine begins receiving applications for certification in Clinical Informatics, an applicant may request credit for training in a non-ACGME accredited fellowship program of equal duration to an accredited fellowship. Training in a non-ACGME accredited program of less than the required duration may be applied toward the practice pathway (see Practice Pathway above). The fellowship training curriculum, as well as a description of the actual training experience, must be submitted. The training received in the non-accredited fellowship must have been substantially equivalent to, or exceed, the training required in ACGME accredited fellowships.

5. **Cytopathology**

- a. For applicants who are certified in anatomic pathology or combined anatomic and clinical pathology: **1 full year** of full-time training in cytopathology in a program accredited for such training by the ACGME.

6. **Dermatopathology**

- a. Certification in dermatopathology is a joint and equal function of the ABP and the American Board of Dermatology (ABD). Such function relates to qualifications of applicants, standards of examinations, and the form of the certificate.

- b. Prerequisites

- 1) Certification by the ABP and the ABD.
- 2) Certification by the ABP (anatomic pathology or combined anatomic pathology and clinical pathology) or the ABD and have completed at least 1 year of training in dermatopathology in a program accredited for such training by the ACGME. This additional training must be taken after the applicant has met the **full** training requirements for certification in pathology or dermatology.

- c. Training

- 1) Training programs in dermatopathology are a joint and equal function of departments of pathology and dermatology. The pathologist applicant must spend a portion of the

required training time (as determined by the RC for Dermatopathology) in clinical dermatology.

7. Forensic Pathology

- a. For applicants who are certified in anatomic pathology and clinical pathology or anatomic pathology only: **1 full year** of additional training in forensic pathology in a program accredited for such training by the ACGME.

8. Hematology

- a. For applicants who hold any primary certificate in pathology or have a primary certificate plus a subspecialty certificate in hematology from another member medical specialty board of the ABMS: **1 full year** of additional training in hematology (pathology) in a program accredited for such training by the ACGME.
- b. For applicants, other than those described in 7.a., who are certified by another member medical specialty board of the ABMS: **2 years of full-time training** in hematology (pathology) including 1 year as a trainee in a program accredited for such training by the ACGME and 1 additional year in hematology acceptable to the ABP. *ABP approval for the additional year should be obtained before the individual begins the additional year.*

9. Medical Microbiology

- a. For applicants who hold any primary certificate in pathology or a primary certificate plus a subspecialty certificate in infectious disease from another member medical specialty board of the ABMS: **1 full year** of additional training in medical microbiology in a program accredited for such training by the ACGME.
- b. For applicants, other than those described in 8.a., who are certified by another member medical specialty board of the ABMS: **2 years** of full-time training in such training by the ACGME and 1 additional year in medical microbiology acceptable to the ABP. *ABP approval for the additional year should be obtained before the individual begins the additional year.*

10. Molecular Genetic Pathology

- a. Certification in molecular genetic pathology is a joint and equal function of the American Board of Medical Genetics (ABMG) and the ABP. Such function relates to qualifications of applicants and standards of examination.
- b. Prerequisites
 - 1) Certification by the ABP and the ABMG.
 - 2) Certification by the ABP (anatomic pathology, clinical pathology, or combined anatomic pathology and clinical pathology) or the ABMG (physician diplomates only) and have completed at least 1 year of training in molecular genetic pathology in a program accredited for such training by the ACGME.
- c. Training
 - 1) Training programs in molecular genetic pathology are a joint and equal function of departments of pathology and departments or divisions of medical genetics. The pathologist applicant must gain an understanding of the principles involved in the diagnosis, management, and treatment of genetic disorders and of counseling the patient and the family.

11. Neuropathology

- a. For applicants who are certified in anatomic pathology and clinical pathology or anatomic pathology only: **2 full years** of additional training in neuropathology in a program accredited for such training by the ACGME.
- b. For applicants who are certified in clinical pathology or are certified by another member medical specialty board of the ABMS:
 - 1) 1 full year of approved training in anatomic pathology in a program accredited for such training by the ACGME, **and**
 - 2) 2 full years of additional training in neuropathology in a program accredited for such training by the ACGME.

12. Pediatric Pathology

- a. For applicants who are certified by the ABP in anatomic pathology and clinical pathology or anatomic pathology only or in anatomic pathology or general pathology from the RCPSC: **1 full year** of additional supervised training in pediatric pathology in a program accredited for such training by the ACGME.

D. Combined Primary and Subspecialty Certification

1. General Information

- a. Combined primary and subspecialty certification is only available in AP/NP. Residents who entered training prior to January 1, 2009 who planned to obtain combined primary/subspecialty certification in other areas will be assisted in how to use the training obtained to meet criteria for separate certification in the areas of interest.
- b. Applicants for combined AP/NP certification must obtain 2 full years of approved training in anatomic pathology and 2 full years of approved training in neuropathology in a program accredited for such training by the ACGME.
- c. All applicants for AP/NP certification must meet the autopsy requirement described under section B, Primary Certification.
- d. **Applicants for combined AP/NP certification must pass the primary examination before they will be allowed to sit for the subspecialty examination.**
- e. Applicants for combined AP/NP certification must submit a completed application for both the primary and the subspecialty examinations and pay the required fee for each examination. A combined fee is no longer available.

IV. EXAMINATIONS

A. Primary Certification

1. AP/CP candidates may not apply for any part of the AP/CP examination until all training requirements are completed.
2. Candidates must pass both the written and practical portions of the AP and/or CP examinations in the same administration in order to pass the primary examination.
3. Candidates for combined AP/CP certification will not be certified by the ABP until both AP and CP examinations are passed and all other requirements are met.
4. Candidates who completed training in 2008 or later must complete all certification requirements within 5 years from the completion of training. During the qualification period a candidate may take each part of the AP and CP examinations a maximum of five times.

B. Subspecialty Certification

1. Candidates must pass both written and practical portions of the examination in the same administration in order to pass the subspecialty examination.
2. Candidates who completed training in 2008 or later must complete all certification requirements within 5 years from the completion of training (or from the date of primary certification, whichever is later). During the qualification period a candidate may take the subspecialty examination a maximum of five times.

C. Application

1. Application forms for primary and subspecialty certification are available online through PATHway on the ABP Web site (<http://www.abpath.org>). All applications must be completed and submitted online. No paper applications will be accepted.
2. The ABP accepts credit card payments only (MasterCard, Visa, American Express). Checks are no longer accepted. Payment must be made online at the time of the application in order for the application to be submitted.

D. Fees

1. The examination-application fee includes a nonrefundable administrative fee of \$100.
2. If an AP/CP applicant takes the AP and CP examinations at different times, there is a separate examination fee for each sitting.
3. See Exam Fees on the ABP Web site (<http://www.abpath.org>).

E. Date Assignments

1. Date assignments for all examinations are made by the ABP and are posted to PATHway.

2. If a candidate is unable to accept a date assignment, he/she may transfer the exam fee (minus a transfer fee of \$500) to a future administration of the examination.
3. **Transfers cannot be made within the same examination period.**
4. **Special requests for date assignments cannot be accepted.**

F. Reporting of Results to Candidates

1. If all other requirements for certification are met, each candidate will receive a report through PATHway from the ABP following the examination(s) indicating whether or not he/she has been successful.
2. Information regarding relative performance in areas of the examination will be provided to the unsuccessful candidate.
3. If a candidate has not submitted all requirements for certification, examination results will be withheld by the ABP until evidence of completion of these requirements has been received and evaluated by the ABP. **If such evidence is not received within 2 years from the date of the examination, the examination results will be declared null and void.**

G. Reporting of Results to Programs

1. In January, each program director (primary and subspecialty) will receive (via PATHway) a report of the examination performance of each graduate (by name) of that training program over the previous 5 years. This report includes the names of all residents who have done all or part of their training in the program during the 5-year period included in the report.
2. Cumulative information (without names) will also be sent to each program director (via PATHway) and will be made available to the RC for use in accreditation of the training program. This report includes only residents who did all of their training in the program.

H. Qualification Period for Examination

1. The ABP does not recognize or use the term *board eligible* and does not issue statements concerning board eligibility.
2. An applicant is declared qualified for examination only after an application has been received and approved by the Credentials Committee.
3. **Candidates who complete residency and/or fellowship training prior to January 1, 2008**
 - a. Candidates who have been declared qualified for a primary examination will be permitted to sit for the examination during a period of 3 years after being declared qualified to take the examination. They may sit for the examination as many times as it is given during that 3-year period.
 - b. Candidates who have been declared qualified for a subspecialty examination will be permitted to sit for the examination during a period of 3 years after being declared qualified to take the examination.
 - c. Candidates who have been declared qualified for a subspecialty examination that was previously given every other year will have three opportunities to sit for the subspecialty examination.
4. **Candidates for primary certification who complete residency training on or after January 1, 2008**
 - a. Residents will have 5 years from the end of their training to complete all requirements for certification by the ABP.
 - b. A resident will be declared qualified to sit for the primary certification examination after his/her application is reviewed and approved by the Credentials Committee of the ABP.
 - c. Each candidate will be given one period of qualification not to exceed 5 years from the date of completion of the training program.
 - d. The length of the qualification period will decrease proportionately with the length of time between application and completion of residency

EXAMPLES, AP/CP

Res	Completed AP/CP	Applied for Exam	Period of Board Qualification
#1	2008	2008	5 years
#2	2008	2010	3 years

- e. During a candidate's period of qualification, he/she may take the AP and/or CP examination a maximum of five times.
 - 1) The AP and CP examinations do not have to be taken at the same sitting, but both must be passed before an AP/CP candidate is declared certified.
 - 2) An AP/CP candidate who is not successful in passing both AP and CP examinations in five attempts (each) must obtain an additional year of training in the area in which he/she is unsuccessful before re-applying for the examination.
 - 3) If the candidate has passed either the AP or CP examination but not the other, he/she may apply for single certification in that discipline provided the appropriate requirements are met.
- 5. **Candidates for subspecialty certification who complete fellowship training on or after January 1, 2008**
 - a. Residents who complete fellowship training on or after January 1, 2008 must meet all requirements for certification in the subspecialty within 5 years from the completion of the fellowship program or from the date of primary certification, whichever is later.
 - b. A resident will be declared qualified to sit for the subspecialty examination after his/her application is reviewed and approved by the Credentials Committee of the ABP.
 - c. The length of the qualification period will decrease proportionately with the length of time between application and completion of the fellowship or certification.

EXAMPLES, SUBSPECIALTY (SS)

Res	Completed AP/CP	Certified AP/CP	Completed Fellowship	Applied for SS Exam	Period of Board Qualification (SS)
#3	2008	2008	2009	2009	5 years
#4	2008	2008	2009	2011	3 years
#5	2007	2009	2008	2010	4 years

- d. A candidate who is not successful in passing a subspecialty examination during the period of qualification must obtain at least an additional 6 months of training in an ACGME-accredited fellowship before re-applying for the examination.
 - 6. At any time after declaring an applicant qualified for examination, the Credentials Committee, at its discretion, may withdraw such qualification or, as a condition, may require satisfaction by the applicant of specified conditions. In the exercise of its discretion under this regulation, the Credentials Committee will be entitled to act without reason assigned.
 - 7. If it is determined that an applicant has (a) falsified information or has withheld material information in connection with his or her application or in any other representation to the ABP or any committee thereof, including, but not limited to an applicant's failure to report any revocation or suspension of, or limitation to, his or her license as required in Section II, Medical Licensure or, (b) misrepresented to any third party his or her status as a diplomate of the ABP and/or (c) engaged in irregular behavior, the applicant will not be approved for the certifying examination and will be ineligible for a period of up to 3 years before being permitted to file a new application.
- I. Irregular Behavior**
- 1. Any of the following irregular behaviors may be sufficient to bar a person from qualification, terminate participation in an examination, invalidate the results of a candidate's examination,

cause the withholding or revocation of scores or certificates, or merit other appropriate action by the ABP:

- a. The giving or receiving of aid in the examination as evidenced either by observation or by statistical analysis of candidates' answers.
 - b. The unauthorized possession, reproduction, or disclosure of any ABP examination-related materials, including, but not limited to, examination questions or answers, before, during, or after the examination.
 - c. The offering of any benefit to any agent of the ABP in return for any right, privilege, or benefit that is not usually granted by the ABP to other similarly situated candidates or persons.
 - d. Possession of notes, books, or any other examination aid in the examination area.
 - e. Engaging in irregular behavior in connection with the administration of the examination, including but not limited to:
 - 1) referring to notes, books, or any other examination aid at any time during the examination, including breaks,
 - 2) transferring or receiving information relating to the contents or answers of the examination to or from another candidate or a third party before, during, or after the examination. This prohibition includes any transfer of information between a candidate and another person at any time during the examination, including breaks, and **any reconstruction of examination questions and answers and the transfer of information concerning the same after the examination.**
 - 3) possession of a cell phone or other electronic device at the testing workstation.
2. The ABP may withhold a candidate's scores and require that the candidate retake one or more portions of the examination if presented with sufficient evidence that the security of the examination has been compromised, notwithstanding the absence of any evidence of the candidate's personal involvement in such activities.

J. Unsuccessful Candidates

1. For candidates who complete residency and/or fellowship training **prior to January 1, 2008**, the following policy will apply.
 - a. Once the initial period of primary or subspecialty qualification has terminated, candidates who have been unsuccessful in the required examination(s) may apply for one additional period of qualification based on submission of documentation of 2 years of full-time experience in the area(s) in which the candidate was unsuccessful. This is accomplished by completing the application for an additional period of qualification that is available on the ABP Web site. This application must be downloaded, completed, and mailed to the ABP office so that it is received no later than the published deadline for applications. An online application is not available. The first and second periods of qualification must be consecutive; i.e., **candidates must apply to begin the second period of qualification immediately upon termination of the first period.**
 - or
 - b. Candidates may apply for one additional period of qualification based on satisfactory completion of 1 additional year of training in an ACGME-accredited training program in the area(s) in which the individual was unsuccessful.
 - c. Candidates who continue to be unsuccessful in certification examinations may apply for an additional period of qualification based on satisfactory completion of 1 additional year of training (for primary certification) or 6 months additional training (for subspecialty certification) in an approved position in an ACGME-accredited training program in the area(s) in which the candidate was unsuccessful.
2. For candidates who complete residency and/or fellowship training **on or after January 1, 2008**, the following policy applies.
 - a. An AP/CP candidate who is not successful in passing both AP and CP examinations during his/her period of qualification or after five attempts (each) must obtain an additional year of training in the area(s) in which he/she is unsuccessful before re-applying for the examination.

- b. A subspecialty candidate who is not successful in passing the subspecialty examination during his/her period of qualification must obtain at least an additional 6 months of training in an ACGME-accredited fellowship in the subspecialty before re-applying for the examination.

V. CANDIDATES WITH DISABILITIES

A. Learning Disability

1. Policy.
 - a. The ABP will provide qualified candidates who have documented disabilities reasonable accommodations in the administration of its examinations, including auxiliary aids and services, where appropriate.
 - b. Such accommodations must not, however, fundamentally alter the measurement of the skills or knowledge the examination is intended to test or result in an undue burden.
2. Documentation of Disability.
 - a. Candidates requesting accommodation due to a disability must provide documentation of the disability and the appropriateness of the requested accommodation for the documented disability.
 - b. Such documentation must include a specific diagnosis of the disability and medical records or other documentation of the diagnosis of the disability by an appropriate medical professional.
 - c. The ABP reserves the right to verify the disability and to request additional documentation as necessary.
3. Type of Accommodation.
 - a. Candidates requesting accommodation must identify the type of accommodation requested.
 - b. The ABP, however, will determine the type of accommodation to be made for a candidate with a verified disability.
 - c. Accommodations that fundamentally alter the measurement of skills or knowledge the examination is intended to test will not be offered.
4. Application Deadline.
 - a. Initial candidates must submit requests for accommodation and documentation no later than the application deadline.
 - b. Repeat candidates who are submitting their first request for accommodation must do so by the application deadline.

B. Previous Chemical Dependency

1. An applicant for certification who, within 3 years of his or her application, has been diagnosed as chemically dependent, has been treated for drug or other substance abuse, and/or has entered a rehabilitation or diversionary program for chemical dependency authorized by the applicable medical licensing authority will be required to provide the following additional information to the ABP.
 - a. The applicant must show that he/she has successfully completed the authorized rehabilitation or diversionary program, is successfully enrolled in such a program, or is successfully enrolled in or has completed a private treatment program.
 - b. For private treatment programs, the responsible program administrators and physician must attest, to the satisfaction of the ABP, that the applicant has been free of chemical dependency for a period of time sufficient to establish that the individual is not currently engaged in the use of illegal drugs or other substance abuse and/or that the use of illegal drugs or other substance abuse is not an on-going problem. This documentation must accompany the completed application form.

VI. CANDIDATES QUALIFIED FOR COMBINED CERTIFICATION WHO ARE SUCCESSFUL IN ONLY ONE OF THE EXAMINATIONS

- A. Candidates who are qualified for combined anatomic pathology and clinical pathology must pass both examinations to receive a combined certificate.
- B. Candidates successful in only one of the primary examinations have the option to request that the ABP award a single certificate in the primary area in which they were successful.
 - 1. Candidates must provide a letter stating that they are relinquishing qualification in APCP and requesting consideration for primary certification in the area in which they were successful (AP or CP).
 - 2. Candidates must submit the appropriate fee and complete the application for single certification, which is available on the ABP Web site. This application must be downloaded, completed and mailed to the ABP office so that it is received no later than the published deadline. An online application is not available.
 - 3. Original applications and any subsequent training will be evaluated with reference to single certification requirements. All of the requirements for certification in Anatomic Pathology only or Clinical Pathology only must be satisfied as described in the current *Booklet of Information* (III.A and III.B).
 - 4. The candidate's practice must be in the area in which certification is requested.
 - 5. Training used to satisfy the requirements for a single certificate may not be used subsequently to obtain additional certification. If a candidate applies for the other primary certificate at a later date, he/she will be expected to satisfy existing requirements for the other primary certificate at the time of application.
 - 6. **Application for single certification must be submitted within 2 years of expiration of the period of qualification in which the primary examination was passed.**
- C. Candidates who are qualified for combined AP/NP certification must pass both examinations to receive a combined certificate.
- D. Candidates successful in the primary examination (AP) but not in the NP examination may apply for the awarding of a single primary certificate using the procedure previously described.
- E. Applications for single certification are evaluated in May and in November. **Applications received by March 1 will be evaluated in May. Applications received by October 1 will be evaluated in November.**

VII. EXAMINATION DATES

- A. **Location.** All examinations are computer based and are administered at the ABP Examination Center in Tampa, Florida.
- B. **Anatomic Pathology and Clinical Pathology Examinations**
 - 1. Individuals applying for the Spring primary examinations must complete their training by July 1 of the year of application.
 - 2. Individuals applying for the Fall primary examinations must complete their training by November 1 of the year of application.
 - 3. See Examinations (Schedules, Hotel Links, Information, Dates & Deadlines) on the ABP Web site (<http://www.abpath.org>).
- C. **Subspecialty Examinations**
 - 1. All subspecialty examinations will be given annually beginning in 2011.
 - 2. Individuals applying for subspecialty examinations must complete their training by October 1 of the year of application.
 - 3. See Examinations (Schedules, Hotel Links, Information, Dates & Deadlines) on the ABP Web site (<http://www.abpath.org>).
 - 4. Depending on the number of candidates, it may be necessary to give certain subspecialty examinations on multiple days. In that case, each candidate will be notified of his or her examination date approximately 6 weeks prior to the examination date listed.
 - 5. A candidate for the Spring primary examinations who wishes to apply for a subspecialty examination in the same year may submit the subspecialty application prior to the subspecialty application deadline (VII.D.1).

- a. If the candidate is successful in the primary examination, the ABP will process the application for the subspecialty examination.
- b. If the candidate is not successful, he/she will be notified and the subspecialty examination fee will be refunded.

D. Final Filing and Cutoff Dates

1. See Examinations (Schedules, Hotel Links, Information, Dates & Deadlines) on the ABP Web site (<http://www.abpath.org>) for final filing dates.
2. **Late Application Period and Fee.** A late application period for examinations is available for one month past the original deadline and includes a late fee (see Exam Fees on the ABP Web site <http://www.abpath.org>). There is no late registration period available for the August 15 deadline for the fall examinations.
3. If the candidate cancels an appearance for the examination after the deadline for application or registration or does not appear for the examination, the entire application-examination fee is forfeited with the following exceptions:
 - a. Personal illness at the time of the examination, validated by the candidate's personal physician. Documentation must be received in the ABP office within 60 days of the date of the examination.
 - b. Inability to accept the date assignment (primary certification only)
 - 1) Once examination date assignments are posted, candidates for the primary certification examination have two weeks from notification of their assignment to cancel.
 - 2) If the date is not acceptable, candidates will receive a refund of their application fee minus a \$500 charge.
 - 3) There is no opportunity to change the date assignment within a given examination period.
 - 4) If the ABP is not notified within the 2-week period, the date assignment will stand.
 - 5) It is the candidate's responsibility to notify the ABP in writing of any change that may affect a scheduled examination.

VIII. CERTIFICATES

- A. All certificates issued by the ABP after January 1, 2006 are valid for 10 years, contingent upon the diplomate meeting MOC requirements.
- B. Certificates issued prior to January 1, 2006 are not time-limited.
- C. After meeting all certification requirements, a candidate will be issued a certificate by the ABP in those fields of pathology for which the ABP declared the candidate qualified.
- D. Candidates qualified for combined certification (AP/CP or AP/NP) will receive one certificate indicating that the individual is certified in both disciplines. **This certificate will be issued only after both examinations have been passed.**
- E. The ABP does not issue duplicate certificates.
- F. Replacement Certificates
 1. If a certificate is lost or destroyed, the diplomate must request a replacement, stating on the order form the reason for replacement of the original certificate.
 2. The replacement certificate will indicate that the certificate is a replacement and the date of the replacement.
 3. The fee for a replacement certificate is \$75 payable by credit card only. The online payment form is available on the ABP Web site.
- G. Verification of Certification
 1. Requests for verification of a pathologist's certification should be made via the ABP Web site and must include enough information to identify the pathologist in question.
 2. Requests must be accompanied by online payment of \$35.
- H. Revocation or Expiration of Certification
 1. At its discretion, the ABP may revoke or suspend a certificate for due cause, including but not limited to:

- a. The diplomate did not possess the required qualifications and requirements for examination, whether or not such deficiency was known to the ABP or any committee thereof prior to examination or at the time of the issuance of the certificate, as the case may be.
- b. The diplomate made a material misstatement or withheld information in the application or in any other representation to the ABP or any committee thereof, whether intentional or unintentional.
- c. The diplomate engaged in irregular behavior in connection with an examination of the ABP (as described under Irregular Behavior), whether or not such practice had an effect on his or her performance on an examination.
- d. The diplomate was convicted by a court of competent jurisdiction of a felony or of a misdemeanor that involves moral turpitude and that, in the opinion of the ABP, has a material relationship to the practice of medicine.
- e. The diplomate made a misrepresentation to the ABP or any third party as to his or her status as a diplomate of the ABP.
- f. The ABP receives information that an adverse licensure action has been taken against a diplomate.
 - 1) For purposes of this policy **adverse licensure action** will mean:
 - a) a final action by one of the licensing agencies of the United States or Canada that revokes, suspends, or limits (including the imposition of any requirement of probation, surveillance, supervision, or review) any license or right associated with the practice of medicine issued by one of the licensing agencies of the United States or Canada and that resulted from or is based on misconduct involving patient care and/or ethical practice; or
 - (b) the voluntary surrender of a license or associated right in connection with or in lieu of any disciplinary action by, or consent decree or settlement agreement with, one of the licensing agencies of the United States or Canada.
 - g. See XI.E and F., Maintenance of Certification.
2. A diplomate may appeal a revocation of certificate pursuant to the ABP appeals procedure set forth herein.
3. If a diplomate's certificate is revoked because of an adverse licensure action, and the diplomate subsequently regains a full and unrestricted license to practice medicine, he/she may provide proof of such licensure to the ABP and request that the certificate be reinstated. If the request is approved, the certificate will be restored subject to all rules in force at the time of the restoration, including time-limited certification and mandatory participation in Maintenance of Certification.

IX. REPORTING OF DIPLOMATE NAMES BY ABP

- A. The American Board of Pathology routinely provides the American Board of Medical Specialties (ABMS) with a listing of diplomates. ABMS publishes this information online at <http://www.abms.org> for the public and specialists. This list may also be sold for commercial purposes. Candidates are given the option of reporting only their name without address at the time of application for examination.
- B. The ABP also releases this information to cooperating societies of the ABP (ACLPS, ADASP, APC, ASIP, ASCP, CAP, and USCAP) and on request to any recognized pathology society.

X. VOLUNTARY RECERTIFICATION

- A. The ABP offers Voluntary Recertification to diplomates **with non-time-limited certificates** who wish to demonstrate maintenance of competence in the practice of pathology. **This form of recertification will end with the 2013 application deadline.** Diplomates who wish to recertify or take a secure examination for licensure purposes after 2013 may do so through the Maintenance of Certification program.
- B. For additional information on this process, please download the *Voluntary Recertification Booklet of Information* from the ABP Web site.

XI. MAINTENANCE OF CERTIFICATION

- A. The Maintenance of Certification (MOC) program is required for ABP diplomates with time-limited certificates (certificates received in 2006 or after). The process will be open, however, to all certified pathologists beginning in 2011.
- B. The Maintenance of Certification program is based on four components:
 - 1. Evidence of professional standing.
 - 2. Evidence of commitment for lifelong learning and involvement in periodic self-assessment (organized CME and self-learning).
 - 3. Evidence of cognitive expertise.
 - 4. Evidence of successful evaluation of performance in practice.
- C. If a diplomate is successful in the MOC process, a new certificate will be issued 10 years after initial certification.
- D. If a diplomate does not successfully complete all requirements of the MOC process, the diplomate's certificate will expire on December 31 10 years after issuance, and he or she will no longer be listed as a diplomate.
- E. The certificate may expire prior to the completion of a 10-year cycle if interim MOC reporting requirements are not met.
- F. For additional information on this process, please download the *Maintenance of Certification Booklet of Information* from the ABP Web site.

XII. APPEALS PROCEDURE

- A. A candidate who fails an examination may request that the examination be rescored to verify the accuracy of the results as reported.
 - 1. Such request must be made via the ABP Web site within 90 days of the date that the results of the examination were made available to the candidate.
 - 2. Credit card payment of \$50 must accompany the request for rescore.
 - 3. There will be no further appeal from failure of an examination.
- B. Except as described in A., an individual who has received an unfavorable ruling from the ABP or a committee of the ABP may appeal such determination by sending a notice of appeal to the ABP within 60 days of the date such ruling was made available to the individual.
- C. On receipt of a notice of appeal, the applicable ABP committee
 - 1. will invite the individual to submit, in writing, such information as the individual feels appropriate in support of the appeal.
 - 2. may make such further investigation as it deems appropriate.
 - 3. may request the individual to submit additional information.
 - 4. will reconsider the unfavorable ruling and report its decision to the individual and the president of the ABP.
 - 5. will specify the grounds for any unfavorable action.
 - 6. in the case of an unfavorable ruling, will inform the individual that he/she may request a hearing before an appeals committee of the ABP by doing so in writing within 30 days of the date the notice of unfavorable action was mailed.
- D. On receipt of a request for a hearing, the executive vice president will inform the president of the ABP, who will appoint an ad hoc appeals committee consisting of three trustees who are not members of the committee whose determination is being appealed.
 - 1. The chairperson of the ad hoc committee will convene a meeting of the committee within 90 days of the date of its appointment to conduct a hearing at which the individual may appear in person with a legal and/or other representative to present such information deemed appropriate in support of the individual's position.
 - 2. Not less than 30 days prior to the hearing, the executive vice president will send written notice to the ad hoc committee and to the appellant stating the time and place of the hearing and will provide them copies of written material and a list of witnesses that the concerned committee intends to present at the hearing.

3. The executive vice president will also specify any information and documents the individual is required to produce at the hearing.
4. Not less than seven days prior to the hearing, the concerned ABP committee will provide the executive vice president and the individual with copies of any written reports, affidavits, or statements of experts the concerned ABP committee intends to present at the hearing.
5. Not less than seven days prior to the hearing, the individual will provide the executive vice president with such written information concerning his or her position as he or she deems appropriate; a list of witnesses, if any, whom he or she expects to call to testify; and copies of any written reports, affidavits, or statement of experts he or she intends to present at the hearing.
6. The executive vice president will submit the written material referred to in D.4. and D.5. to the members of the Appeals Committee prior to the hearing.
7. At the hearing, the concerned ABP committee and its legal or other representatives will present such relevant information and evidence as it deems appropriate to support its previously made determination. However, the committee will not have the right to present any information or evidence not previously provided as required in D.4. and D.5. The committee may call, examine, and cross-examine witnesses.
8. The individual will have the right to be represented at the hearing by legal counsel or any person of his or her choice. He or she may present such relevant information and evidence as he or she deems appropriate in support of his or her position. However, the individual will not have the right to present any information or evidence if not previously provided as required in D.4. and D.5. The failure of the individual to produce information or documents requested by the concerned ABP committee as required in paragraph D.5. will be grounds for upholding and confirming the determination of the concerned ABP committee.
9. The individual and the concerned ABP committee may submit written statements at the close of the hearing.
10. A written record of the hearing will be made available to the individual at one- half the cost of its preparation.
11. The decision of the Appeals Committee will be by vote of a majority of the committee members based on the information presented at the hearing.
12. The committee may affirm, modify, or overrule the decision of the ABP committee.
13. The Appeals Committee will inform the individual, the concerned committee, and the president of the ABP, in writing, of its decision and the reasons therefore within a reasonable time of the hearing.
14. The decision of the Appeals Committee will be final and binding.

ACCREDITATION OF PATHOLOGY TRAINING PROGRAMS

The accreditation of all programs in graduate medical education in the United States is the responsibility of the ACGME. The member organizations are: the American Board of Medical Specialties, the American Hospital Association, the American Medical Association, the Association of American Medical Colleges, and the Council of Medical Specialty Societies.

The responsibility for evaluating the quality of residency training programs in pathology is delegated to the Review Committee (RC) for Pathology of the ACGME. Members are appointed by the ACGME on nomination. The committee is also responsible for the preparation of the "Program Requirements for Residency Training in Pathology" of the "Essentials of Accredited Residencies in Graduate Medical Education" as published in the *Directory of Graduate Medical Education Programs*.

Review Process

Staff support of RC work is provided by the ACGME. This staff includes the Executive Secretary of the RC and the field representatives. The secretary is responsible for the administrative matters pertaining to the RC and its activities. The field representatives perform the on-site surveys of the residency programs and prepare the survey reports. Prior to the survey visit by the field representative,

an online program information form is completed by the residency program director in accordance with the instructions provided and submitted. The surveyor examines the information supplied in the form and collects additional information through interviews with the program director, departmental staff, hospital and/or school administrators, residents, and others pertinent to the program.

The survey report, together with the information received from the program director, is reviewed by the RC, and a formal written notification of action is sent to the program director and administrator(s) of the institution(s) involved.

Written requests in regard to residency programs in pathology should be sent to:

Linda Thorsen, Executive Director
Review Committee for Pathology
515 North State Street, Suite 2000
Chicago, Illinois 60610
312/755-5025
Fax: 312/755-7498

For detailed and specific information in regard to the general requirements for residency training programs in pathology, consult the *Directory of Graduate Medical Education Programs*.