

Resident Clinical Duties While Preparing for the ABR Core Examination: Position Statement of the Association of Program Directors in Radiology

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Historically, diagnostic radiology residents have been allowed time off from clinical duties to study for the ABR oral board examination. This practice has resulted in a disruptive “board frenzy” at many programs. The new ABR examination structure gives programs an opportunity to evaluate this practice. This position statement of the Association of Program Directors in Radiology describes the rationale behind a recommendation of no time off from clinical service before the ABR core examination.

Key Words: Association of Program Directors in Radiology, ABR, core examination, diagnostic radiology education, diagnostic radiology curriculum, board frenzy

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RECENT CHANGES TO THE ABR QUALIFYING AND CERTIFYING PROCESS

Recent changes to the timing, content, and structure of the ABR certification process have resulted in many changes for diagnostic radiology training programs. Beginning in 2013, the ABR core examination will be administered as a qualifying examination to residents who have completed 36 months of diagnostic radiology residency training. This core qualifying examination is in lieu of the traditional written examinations in both physics and diagnostic radiology. From that point on, individuals who are on this new examination schedule will take the ABR certifying examination 15 months after the completion of a 4-year radiology residency training program. The first certifying examination will be in 2015. This replaces the traditional ABR certifying oral examination given during the fourth year of training

(www.theabr.org). During the R4 year (after the core examination but before graduation), training programs have an opportunity, within their resources, to offer residents areas of focused training and professional and leadership development.

HISTORY OF PROTECTED STUDY TIME DURING RESIDENCY

Historically, fourth-year residents in many programs have been allowed time off from clinical duties to study for the certifying oral board examination. Time away from the clinical service has varied from program to program, but some programs have reported giving up to 6 months off all duties for studying before the examination. This has been termed by many as “board frenzy,” which is the disruptive period of time when the most well-trained residents in our programs become less available or even absent from clinical duties, including after-hours call. Some program directors have stated that because this “culture” of time off is so pervasive among programs, they have felt powerless to effect any change in behavior because their residents would feel at a disadvantage if they were not provided time off to study. For many years, the Association of Program Directors in Radiology (APDR) has attempted to make a change in this disruptive practice. In 2003, the APDR created the ad hoc Sub-Committee on the Program Director’s Role in Alleviating Board Frenzy. This subcommittee created

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a resolution that affirmed that residents should participate in clinical duties during the fourth year, which was overwhelmingly approved by APDR membership by a vote of 135 to 13. In response to this issue, the Diagnostic Radiology Residency Review Committee (RRC) of the ACGME added the following to the requirement for radiology residency training: "Full time participation by the residents in clinical and didactic activities must occur at all levels of training, including the final year of residency" [1].

DEVELOPMENT OF THE APDR POSITION ON STUDYING FOR THE CORE EXAMINATION

Despite the APDR position and the RRC requirement, the practice of allowing study time during clinical work hours has remained unaltered. Now, as we gear up for the first ABR core examination in 2013, many program directors are concerned that there is an expectation among residents that they will be given time off from clinical duties before the core examination, as has been done before the oral examination, essentially shifting the "board frenzy" from the fourth year to the third year. The Residency Structure Committee of the APDR was asked to review the issue and present its findings and recommendations to the APDR Board of Directors.

The Residency Structure Committee of the APDR is an ad hoc committee that was formed in 2007 with a mission of examining, evaluating, and responding to ideas that encompass the structure of our training programs in diagnostic radiology. With changes and new requirements coming from the ABR and the RRC, programs must adapt in many ways to stay compliant and current. This committee desires to facilitate communications that will help all programs adapt to the changing circumstances. The committee presented the following findings to the APDR Board of Directors, and the APDR has adopted the following position.

POSITION STATEMENT

The APDR recommends no time off from clinical service before the ABR core examination. The rationale for this is multifactorial and includes the following:

- With the new examination structure, programs now have only 36 months to provide "appropriate clinical rotations and formal instruction in all areas of diagnostic radiology and in the core subjects pertaining to diagnostic radiology (eg, medical physics, physiology of contrast media, etc.)" [1]. This committee has proposed clinical rotations in each of the core subspecialties, with the understanding that final rotations for both breast radiology and nuclear medicine may need to take place in the fourth year [2]. This core curriculum, which must include all aspects of clinically relevant physics, can barely be completed in the time allotted. Time off for studying during this time frame is

at odds with the necessary clinical experience required for the examination.

- The ABR core examination is a different type of examination from the traditional ABR oral examination that has fostered "board frenzy." This is a qualifying examination requiring basic to intermediate knowledge, not a certifying examination. The required knowledge is based on 3 years of study in the core curriculum. Furthermore, although the examination is image rich, it is computer based, requiring no need to prepare for the "boardsmanship" aspect of the traditional oral examination.
- The new ABR examination structure requires lifelong learning. During residency, viewing, interpreting, and reporting images at the workstation under the supervision of radiology educators will be the best way to learn clinically relevant radiology. In addition, residents should be encouraged to engage in a continuous self-study regimen so that they can learn the breadth of radiology over the course of 3 years, which will allow studying for the core examination to be truly review rather than a bolus of knowledge learned at the 11th hour. Once in postgraduate positions, it is unlikely that radiologists will have an opportunity to have time off from clinical duties to study for the certifying examination at 15 months after graduation or for the maintenance of certification examinations. Now is the time to learn the professionalism associated with being a practicing physician.

It is the responsibility of each program to ensure that residents receive an adequate number of dedicated conferences specifically targeted to the core curriculum as well as ample resources for self-study. Programs are encouraged to provide case-based review sessions throughout residency, including the time before the core examination. A short period of relief from call may be considered to ensure that residents have study time and have the opportunity to attend all conferences in the months before the examination. The APDR recommends that programs follow the guidelines set forth by the RRC, which allow short periods of relief from call granted according to program resources.

- "Program directors may exercise discretion in granting relief from call responsibilities for short periods before the oral board exam for residents entering diagnostic radiology training before July 1, 2010 and before the 'Core' board exam for residents entering diagnostic radiology training on July 1, 2010 or thereafter" (Int.C.5.) [1].

Residents are the future leaders of radiology. It is our responsibility to ensure that our residents are trained with the skill set to be successful in their careers, including the ability to achieve a balance between work, study, and home life, an important competency that will obviate the necessity for "board frenzy." It is our hope that a stan-

standardized national practice that emphasizes a continuous educational experience for our residents that includes full participation in clinical service before the core examination can be developed, embraced, and maintained.

TAKE-HOME POINTS

- The APDR recommends no time off for residents from clinical service before the ABR core examination.
- The new ABR examination structure requires life-long learning.
- It is the responsibility of each program to ensure that residents receive an adequate number of dedicated conferences specifically targeted to the core curriculum as well as ample resources for self-study.

- The APDR recommends that programs follow the guidelines set forth by the RRC, which allow short periods of relief from call before the ABR core examination, if program resources permit.

REFERENCES

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