

AMERICAN BOARD OF PATHOLOGY

Annual Report

2023

YEAR IN REVIEW

HIGHLIGHTING

PROGRAM ENHANCEMENTS

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<https://www.abpath.org>



2023

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About The American Board of Pathology

WELCOME

The American Board of Pathology (ABPath) was established in 1936 to advance the specialty of pathology and ensure the competence of pathologists for the benefit of the public. Certification by the ABPath is a hallmark of public and professional trust. As we face new challenges in healthcare, the vital role of board-certified pathologists is more important than ever. Our Mission and Vision statements exemplify our commitment to promote excellence in pathology and maintain the highest standards of care.

WHAT WE DO

The American Board of Pathology issues primary certificates in Anatomic and Clinical Pathology, Anatomic Pathology, Clinical Pathology, Anatomic Pathology/Neuropathology, and certification in eleven subspecialties.

MISSION

The mission of the American Board of Pathology, a member of the American Board of Medical Specialties, is to serve the public and advance the profession of pathology by setting certification standards and promoting lifelong competency of pathologists.

VISION

The American Board of Pathology improves the health of the public by promoting excellence in the practice of pathology.



STRATEGIC GOALS

1. Identify and implement relevant and meaningful processes for the assessment of residents and fellows in initial certification programs.
2. Increase the value of Continuing Certification programs by promoting lifelong learning, creating relevant assessments, and supporting diplomates in their efforts to stay current in their area of practice.
3. Increase diplomates' and other stakeholders' satisfaction with and perceived value of ABPath and certification.
4. Develop infrastructure and implement processes that support and promote strategic and organizational effectiveness.
5. Ensure long term financial viability of the ABPath.
6. Increase the effectiveness of the Board of Trustees.

Message From The President



Innovation, accountability and transparency are among the American Board of Pathology's core values. In 2023, the Board's strategic and operational initiatives underscored the ongoing commitment to our goals of identifying and implementing relevant and meaningful processes for the assessment of residents and fellows in initial certification programs and increasing the value of continuing certification by promoting lifelong learning, creating relevant assessments, and supporting diplomates in their efforts to stay current in their areas of practice.

Recognizing the need to better prepare trainees to provide unsupervised care for patients, there has been renewed momentum by the American Board of Medical Specialties (ABMS) and the Accreditation Council for Graduate Medical Education (ACGME) over the past two years to accelerate the development of and transition to competency-based medical education (CBME) in the graduate medical education setting. CBME is not new. In 1999, the ACGME and the ABMS endorsed the six domains of clinical competency, and the Next Accreditation System and milestones were introduced in 2013 (1). CBME is a learner-centric, outcomes-based approach to education in which the central tenet is to "start with the end in mind" and focus on what type of graduate is needed. The needs

of patients and the health system define competencies and educational outcomes, which then inform the development of the curriculum, and assessments that are designed to drive learning, evaluate competency and support the desired outcomes.

In the CBME framework, the relationship between education and assessment is closely interwoven with a move from a single point in time, high stakes summative assessment to more continuous, multiple work-place based assessments, using direct observation with emphasis on formative feedback, followed by an end of training higher stakes certification examination. In Miller's Pyramid of competency evaluation through performance (2), assessment of knowledge by multiple choice questions still has an important place in testing large bodies of knowledge—"the *knows* and *knows how*," which is foundational to learning. Complementing this with demonstration of learning and performance in the practice environment via assessment methods such as simulations and Entrustable Professional Activities (EPAs) allows us to get at the "*shows*" and "*does*" higher levels of competency that support "*entrustment*" decisions.

Competency Based Assessment (CBA) and Competency Based Board Eligibility (CBBE) is where the role of specialty certification boards comes into play. ABMS member boards are embracing CBME and some specialties (e.g., general surgery, orthopedic surgery, family medicine, pediatrics, and others) have piloted and have/are implementing CBME/CBA in training and certification requirements. (3) Advantages of in-training CBA include emphasizing a growth mindset, identification of gaps with time to remediate during training; better assessment of content areas not well represented on the certification exams and of competencies/skills that cannot be adequately addressed with a multiple-choice exam; as well as being able to provide more objective evidence of competency-based board eligibility (CBBE) for the trainee, program directors and certification boards. As we know, with change comes challenges- CBME/CBA requires substantial buy-in from education leadership, faculty and learners as well as resources for successful implementation.

Determining ABPath's role in the development and implementation of CBME for Pathology was a major initiative during my presidency. In November 2023, after active engagement and many discussions with the leadership of other ABMS boards, the Pathology ACGME review committee, the National Pathology EPA Group and the Board's cooperating societies, the Trustees adopted a resolution on the ABPath's strategy for CBA. (4) Among Dr. Procop's strategic initiatives as the Board's incoming CEO, was piloting a voluntary, formative, competency-based, in-training assessment. This aligns perfectly with the Board's CBA strategy and a simulated sign-out pilot in breast pathology is expected to launch in 2025. The

ACGME previously included graduated responsibility in the pathology training requirements, with the goal of attaining oversight supervision and starting in July 2024, incorporation of competency-based workplace assessments for fellow feedback will be a core requirement for pathology subspecialties. (5). ABPath will continue to engage with other stakeholders to collect data to inform meaningful future changes to certification in the CBME setting.

The Board has actively engaged in collecting data toward harmonizing training requirements, training and certification with the needs of practicing pathologists and identified gaps in training. (6, 7, 8, 9) CBA could facilitate "education equity" if learning modules are provided before the assessment, especially in "need to know areas" that not all programs are able to provide exposure to. Dr. Procop completed and recently launched a histology primer to fill a significant gap in the transition from UME to pathology residency- this has already been accessed by over 1200 users. In 2023, the Board's test development advisory committees were charged with analyzing and qualifying exam item category codes to develop detailed content specifications for primary and subspecialty examinations, beyond the exam blueprints that are currently available. The draft will be available for public comment in the latter half of 2024, before being finalized and approved for release on the recently updated ABPath website. (<https://abpath.org/>) Over the past year, the Board has shared data and responded to publications on trends in

primary and subspecialty examinations (11,12, 13). The exam application process has been streamlined by eliminating late deadlines and fees and a major update of PATHway is underway which will enhance diplomate communications. The ABMS recognized Health Care Administration, Leadership, and Management (HALM) as a subspecialty in February 2023 and ABPath diplomates are eligible to apply for this certification (14).

Because CBME is an approach to medical education and not just about assessment, it will be able to inform future meaningful changes to the curriculum in response to gaps that the new assessment efforts demonstrate and identify areas where higher levels of competency are better achieved in the practice setting rather than in the training period. As medical practitioners, we have the privilege of self-regulation and the ABPath supports the need for lifelong learning. The ABPath Continuing Certification (CC) Program is in compliance with the **ABMS standards for CC**, and currently enrolls close to 12,000 diplomates. As an early adopter and one of seven ABMS specialty

boards that use the CertLink platform for longitudinal assessment (10), ABPath offers a choice of 31 practice areas for a personalized assessment design. In 2023, we launched a two-year ABPath CertLink quality improvement initiative to enhance user experience and provide a robust assessment “of learning” and incorporate new content “for learning.” We appreciate diplomate feedback and have an ongoing list of future enhancements that will continue to increase the value of the CC program.

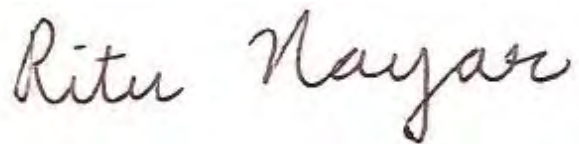


I am delighted to report that the **ABPath Speakers Bureau**, a pilot I initiated in the fall of 2023, was approved by the Trustees as a standing program through which each of the 142 ACGME-accredited pathology residency programs have now been contacted by the Board and will be visited once over a 4 year period by a trustee or our CEO, either in person or virtually, to engage with diplomates and educators and provide updates on the present and future initiatives of the Board.

Thanks to the commitment of our “small but mighty staff” in Tampa—led by Dr. Gary Procop (CEO) and Ty McCarthy (COO) and ~200 pathologists and trainees who lend their time and expertise to serve as volunteers for the Board of Trustees, our test development and advisory committees and CC crowdsourcing—we are well poised to address the opportunities and challenges of these exciting and transformative times in education, certification and the practice of pathology. In 2023, I had the pleasure to recognize Drs. Susan Fuhrman, Karen Kaul, and Steven Swerdlow as Life Trustees of the ABPath,

thank Constance Filing, our first public member, for her service and invite Dr. Javarro Russell, Senior Director for the MCAT Program at the AAMC to fill this key role on our Board. We also welcomed the American Society of Dermatopathology (ASDP) as the Board’s 16th Cooperating Society. (15)

It has been my privilege and a highlight of my professional career to have served as President of the ABPath. I am excited about the future prospects for pathologists and our specialty and look forward to my remaining years as a Trustee of the Board. For 2024, our President, Dr. Barbara Sampson brings significant experience and expertise to lead the Board forward in its continuing support of our diplomates, and ABPath’s mission to serve the public and advance the specialty of pathology.



Ritu Nayar, MD
ABPath President 2023



**At the ABPath booth:
Dr. Nayar flanked by ABPath staff
Renee Holder and Mary Pyfrom**



ABPath Highlights

RESOLUTION ON COMPETENCY-BASED ASSESSMENT STRATEGY

In 2023, the American Board of Pathology (ABPath) initiated an exploration of Competency-Based Assessment (CBA) as a component of Competency-Based Medical Education (CBME) within pathology training. This initiative aims to enhance the evaluation of pathology residents' skills, abilities, and judgment, aligning more closely with the demands of the field. Additionally, this effort presents an opportunity to reconsider and potentially refine the duration, structure, and content of both primary and subspecialty certification examinations in the coming years. During this planning phase, ABPath has actively engaged with Cooperating Societies to gather input, reviewed CBA methodologies employed by other American Board of Medical Specialties (ABMS) boards, and participated in ABMS-ACGME CBME conferences and interest group discussions. These collaborative efforts have provided a wealth of information and guidance.

Following these valuable discussions, ABPath has outlined the next steps for re-evaluating certification examinations and investigating in-training CBA methods leading to the adoption of the following resolution:



WHEREAS, the assessment of skills, ability, and judgment relevant to pathology is implicit in the mission of the American Board of Pathology, in addition to the assessment of knowledge, and

WHEREAS, competency-based assessment (CBA) aligns with and supports this mission, and promotes competency-based medical education (CBME), now therefore,

BE IT RESOLVED that the American Board of Pathology will re-evaluate the length, format, and content within the primary and subspecialty certification examination(s) and

BE IT FURTHER RESOLVED that the American Board of Pathology shall pilot in-training CBA methods as a means to provide formative and summative feedback to trainees and program directors prior to primary certification examination and

BE IT FURTHER RESOLVED that the American Board of Pathology will determine the relationship of CBA with certification.

This resolution underscores the Board's commitment to advancing the pathology profession, ensuring our certification process remains rigorous and reflective of the evolving demands of the medical field.

EXAM APPLICATION PROCESS STREAMLINED BY ELIMINATING LATE DEADLINES AND FEES

In October 2023, ABPath announced a significant change to its certification examination application and registration process.

Effective for the 2024 exam season, ABPath will no longer offer a late application/registration deadline or assess a late fee for Primary and Subspecialty certification exams.

Historically, ABPath has offered applicants a late

application deadline, accompanied by a late fee, in addition to the original deadline. However, moving forward, we honor only one application deadline per exam in order to expedite the application approval process for physicians seeking board certification in pathology.

[Read the original announcement here.](#)

2023

ABPATH WELCOMES NEW PUBLIC BOARD MEMBER JAVARRO RUSSELL, PHD

The ABPath announced the election of Javarro Russell, PhD as the new public member to the Board of Trustees with a term beginning on January 1, 2024. Dr. Russell brings a wealth of experience in exam development and administration, making him a valuable addition to the Board.

[Read the full announcement here.](#)



JAVARRO RUSSELL, PhD





SUSAN FUHRMAN, MD; KAREN KAUL, MD, PHD; AND STEVEN SWERDLOW, MD HONORED AS LIFE TRUSTEES

Susan Fuhrman, MD; Karen Kaul, MD, PhD; and Steven Swerdlow, MD, were honored in August of 2023 as Life Trustees for their many years of dedicated service and contributions to the Board. They were awarded the Life Trustee plaques by Dr. Ritu Nayar, President at the Summer 2023 Board of Trustees meeting.

Susan Fuhrman, MD was a Trustee from 2011-2022 and served as President in 2019 and Vice President in 2018. Dr. Fuhrman is the former System Director for Pathology and Laboratory Services at OhioHealth, a large not-for-profit integrated healthcare delivery system based in Columbus Ohio.

Karen Kaul, MD, PhD was a Trustee of the ABPath from 2011-2022 and was President in 2018 and Vice President in 2017. Dr. Kaul is the Chair of the Department of Pathology and Laboratory Medicine at NorthShore University HealthSystem in Evanston, Illinois, and a Clinical Professor of Pathology at the University of Chicago Pritzker School of Medicine.

Steven Swerdlow, MD was a Trustee of the ABPath from 2011-2022 and served as President in 2020 and Vice President in 2019. Dr. Swerdlow is a former Professor of Pathology and Director, Division of Hematopathology at the University of Pittsburgh School of Medicine.

[Read more about our Life Trustees here.](#)

STEVEN SWERDLOW, MD, SUSAN FUHRMAN, MD, and KAREN KAUL, MD, PhD



LAUNCH OF THE NEW ABPATH.ORG WEBSITE

In July of 2023, ABPath launched the all-new [ABPath.org website](#), the dedicated source for comprehensive information on board certification in pathology. The primary goal during the development of this site has been to enhance user-friendliness, providing a seamless experience for pathology residents/fellows preparing for board certification exams and board-certified pathologists participating in the Continuing Certification Program. With a modern design and intuitive navigation, we aimed to improve our visitors' interaction with the site. Some new features include a new expanded menu, quick links for candidates, diplomates, and credentialers, and an improved search function.

ABMS RECOGNIZES HEALTH CARE ADMINISTRATION, LEADERSHIP, AND MANAGEMENT AS A SUBSPECIALTY

The American Board of Medical Specialties (ABMS) officially approved Health Care Administration, Leadership, and Management (HALM) as a subspecialty at its February 2023 Board of Directors meeting. The American Board of Anesthesiology, American Board of Emergency Medicine, American Board of Family Medicine, and American Board of Preventive Medicine co-sponsored the application for the subspecialty certificate, allowing physicians certified by 13 of the 24 ABMS Member Boards to apply for the new certificate.

In addition to the four co-sponsoring Member Boards, there are currently nine other boards whose diplomates will be eligible to apply for this subspecialty certificate through ABEM including the ABPath.

[Read the full announcement here.](#)

THE AMERICAN SOCIETY OF DERMATOPATHOLOGY (ASDP) AS A COOPERATING SOCIETY

The American Society of Dermatopathology (ASDP) was approved as a Cooperating Society of the ABPath. The addition of ASDP as an ABPath Cooperating Society was approved on February 17, 2023, at an ABPath Board of Trustees meeting. The mission of the ASDP is to improve patient care, support member needs and advance the field of Dermatopathology through education, advocacy and innovation.

[Read the full announcement here.](#)



ABPATH LAUNCHES TWO-YEAR IMPROVEMENT INITIATIVE FOR ABPATH CERTLINK TO ENHANCE USER EXPERIENCE

ABPath officially launched a two-year quality assurance/quality improvement initiative for ABPath CertLink® (ABPCL) in February 2023. ABPCL is the online longitudinal assessment platform for the Continuing Certification Program. This initiative is designed to enhance the user experience and ensure that the program continues to support the highest standards of continuous learning and professional development of board-certified pathologists.

“We have listened to the feedback from our diplomates and are taking action to make a great program even better,” says CEO of ABPath Gary W. Procop, MD. “We are committed to providing the highest quality program for our physicians, and this two-year improvement initiative is a testament to our dedication to our diplomates and the profession of pathology.”

[Read more about the Initiative here.](#)



MEET OUR PLATINUM VOLUNTEER ITEM WRITERS!



David Alter, MD

Dr. Alter was one of the top contributors of items (questions) in 2022 and 2023 for ABPath CertLink, ABPath's online longitudinal assessment for the Continuing Certification Program. We appreciate his dedication and his thoughtful approach to his volunteer question submissions.

As a board-certified Clinical Pathologist in Chemical Pathology (ABPath) and its doctoral counterpart, Clinical Chemistry (ABCC) with 23+ years in non-academic and academic environments, I believe all pathologists, regardless of specialty or practice type, should be familiar with aspects of Chemical Pathology as it can be the connective tissue across most, if not all, pathology disciplines; AP and CP. To that end, I submit Chemical Pathology questions to be used in ABPath CertLink along three themes: 1) fundamental concepts; 2) as related to other pathology specialties (AP and CP) and 3) its role for the future and current laboratory medical director. In my opinion, the Continuing Certification (CC) Program provides an efficient mechanism to disseminate these concepts to practicing pathologists. For that reason, I encourage diplomates to include Chemical Pathology questions as part of their quarterly Certlink assessment. As someone with a non-time-limited certification, I have found it very helpful for my continued growth as a Pathologist.



Gulisa Turashvili, MD, PhD

Dr. Turashvili generously contributed over 27 items in 2023 to be used in ABPath CertLink. We thank her for her time, dedication and expertise in support of Continuing Certification in Pathology.

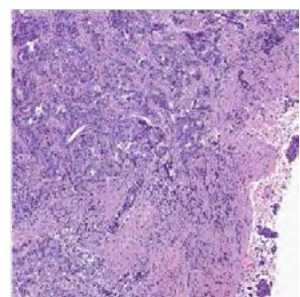
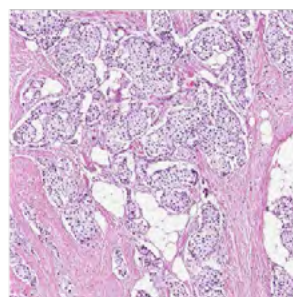
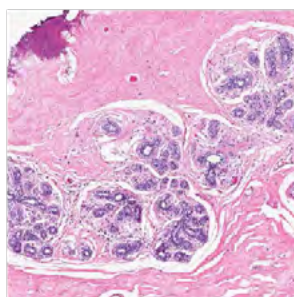
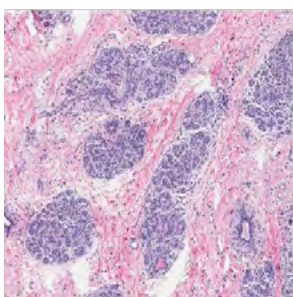
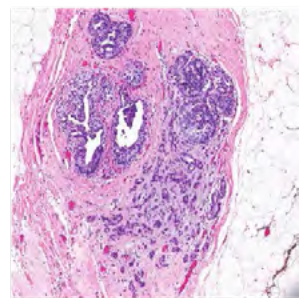
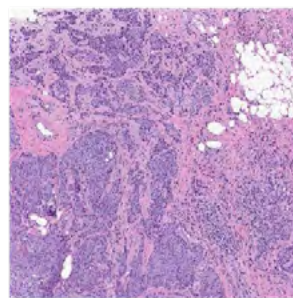
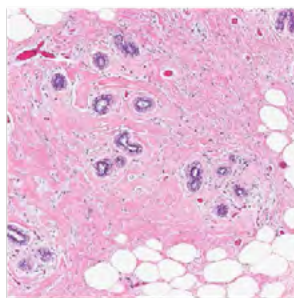
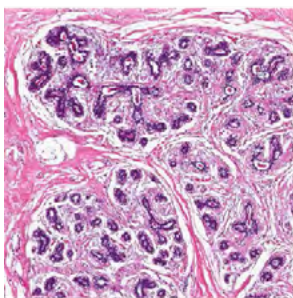
Gulisa Turashvili, MD, PhD, is an Associate Professor of Pathology at the Emory University School of Medicine, and Gynecologic and Breast Pathologist at Emory University Hospital, Atlanta, GA. She is also the Surgical Pathology Fellowship Director and Gynecologic Pathology Rotation Director. Dr. Turashvili received her medical degree from Tbilisi State Medical University in Georgia. Her pathology training included Anatomic Pathology Residency at Queen's University, ON, Canada, and Gynecologic and Breast Pathology Fellowships at Memorial Sloan Kettering Cancer Center, New York, NY. She is the Deputy Editor-In-Chief of Gynecologic Pathology at PathologyOutlines and a member of the Pathology Work Group of International Gynecologic Cancer Society, College of American Pathologists Cancer Committee, and other international and national committees. Dr. Turashvili serves on the Editorial Board of Modern Pathology, Laboratory Investigation, BMC Cancer, and other peer-reviewed journals. She has co-authored several book chapters and over 115 peer-reviewed publications.



THANK YOU TO PAUL SHITABATA, MD

ABPath extends its gratitude to Dr. Paul Shitabata, President of the Dermatopathology Institute in Torrance, CA, and Director of Dermatopathology at Harbor-UCLA Division of Dermatology, for his generous donation of an impressive glass slide library. These

slides will be an invaluable resource for developing certification examinations and competency-based assessments, inspiring future generations of pathologists.



Cooperating Societies

The ABPath collaborates with our Cooperating Societies to identify and address issues of importance to the profession of pathology. Through these valuable relationships, our Cooperating Societies support diplomates in their life-long learning and improvement in practice, their participation in Continuing Certification, and document their participation in educational and quality assessment activities.

The Societies' participation in our annual ABPath Summit of Cooperating Societies has been especially beneficial as training requirements for board certification evolve. In 2023, our Trustees met with the Societies in Chicago to discuss competency-based assessment in pathology and received feedback from each society. The discussion and feedback collected will be instrumental in exploring and developing competency-based assessment in pathology training.

2023 COOPERATING SOCIETIES

- Association for Academic Pathology (formerly the Association of Pathology Chairs)
- Association for the Advancement of Blood and Biotherapies
- Academy of Clinical Laboratory Physicians and Scientists
- American Association of Neuropathologists
- American Medical Association Pathology Section Council
- American Society for Clinical Pathology
- American Society of Dermatopathology
- American Society for Investigative Pathology
- American Society of Cytopathology
- Association for Molecular Pathology
- Association of Directors of Anatomic and Surgical Pathology
- College of American Pathologists
- National Association of Medical Examiners
- Society for Hematopathology
- Society for Pediatric Pathology
- United States and Canadian Academy of Pathology



CBME FOR PATHOLOGY GRADUATE MEDICAL EDUCATION



Board Certification Examinations

ADMINISTRATION HISTORY OF ABPATH CERTIFICATION

ABPath offers four Primary certificates and 11 Sub-specialty certificates in pathology. This table reflects when we began offering each primary and subspe-

cialty certification and how many certificates have been issued from inception through 2023.

EXAMINATION STATISTICS

Certification	Initial Year	Number of Certificates
Anatomic Pathology (AP)	1936	9,785
Anatomic Pathology and Clinical Pathology (AP/CP)	1936	25,734
Anatomic Pathology and Neuropathology (AP/NP)	1961	451
Clinical Pathology (CP)	1936	4,030
Blood Banking/Transfusion Medicine (BB/TM)	1973	1,702
Chemical Pathology (CH)	1951	182
Clinical Informatics (CI)	2013	227
Cytopathology (CY)	1989	5,001
Dermatopathology (DP)	1974	1,908
Forensic Pathology (FP)	1959	1,859
Hematopathology (HP)	1955	3,610
Medical Microbiology (MB)	1950	405
Molecular Genetic Pathology (MG)	2001	838
Neuropathology (NP)	1948	654
Pediatric Pathology (PP)	1990	634





2023 Primary Exam Statistics

The ABPath uses criterion-referenced scoring for its certification examinations. Setting the criterion standard for each exam is performed every 3-5 years. The number of candidates passing the examinations may not match the number of candidates certified for several reasons:

1. Some AP/CP candidates, both first-time takers and repeaters, take only one portion (either AP or CP) of the examination. These candidates are not certified until both AP and CP are passed.
2. Certified candidates include AP/CP candidates

who passed either the AP or CP examination previously and requested single certification during the reporting year.

3. Certified candidates also include candidates who passed the examinations in a previous year but did not provide documentation of licensure or other required information until the reporting year.

[See the ABPath Website for examination information.](#)

2023 PRIMARY EXAMINATION

	Total Candidates			First-Time Takers			Repeaters		
	#	#Pass	% Pass	#	#Pass	%Pass	#	#Pass	%Pass
AP	703	549	78%	567	488	86%	136	61	45%
CP	586	542	92%	544	520	96%	42	22	52%

5-YEAR CERTIFIED REPORT

Primary	2019	2020	2021	2022	2023
APCP	451	397	533	490	479
AP only	58	73	105	98	76
CP only	40	25	55	54	55
APNP	10	8	17	7	5

PRIMARY EXAM PASS RATES

% PASS = SPRING EXAM PASS RATE

Primary	2019 % Pass	2020 % Pass	2021 % Pass	2022 % Pass	2023 % Pass
AP only	82*	85	82	84*	82
CP only	85*	88	94	94*	94

*New criterion standard applied

Subspecialty Exam Statistics

2023 SUBSPECIALTY CERTIFICATION EXAMINATIONS

	Total Candidates			First-Time Takers			Repeaters		
	#	#Pass	%Pass	#	# Pass	%Pass	#	#Pass	%Pass
BB/TM	60	58	97	49	49	100	11	9	82
CH	-	-	-	-	-	-	-	-	-
CI	22	17	77	19	16	84	3	1	33
CY	131	116	89	119	108	91	12	8	67
DP	52	46	88	49	43	88	3	3	100
FP	61	52	85	60	52	87	1	0	0
HP	143	134	94	134	129	96	9	5	56
MB	12	10	83	12	10	83	-	-	-
MG	62	59	95	57	55	96	5	4	80
NP	27	25	93	25	23	92	2	2	100
PP	24	21	88	20	19	95	4	2	50
FPclinMB*	-	-	-	-	-	-	-	-	-

*FPclinMB = Focus Practice Designation-Clinical Microbiology

5-YEAR CERTIFIED REPORT

Subspecialty	2019	2020	2021	2022	2023
BB/TM	47	39	39	29	58
CH	1	2	-	-	-
CI	18	17	27	25	17
CY	137	104	109	115	117
DP	45	34	41	41	46
FP	38	47	38	53	52
HP	119	116	108	110	133
MB	14	6	18	8	10
MG	59	48	49	51	59
NP	12	17	11	14	22
PP	23	16	20	18	21
FPclinMB*	-	1	-	-	-

*FPclinMB = Focus Practice Designation-Clinical Microbiology



SUBSPECIALTY EXAMINATION PASS RATES

Subspecialty	2019 % Pass	2020 % Pass	2021 % Pass	2022 % Pass	2023 % Pass
BB/TM	96	89*	81	62	97
CH	100	100	-	-	-
CI	78	89	77	66	77
CY	96	86*	86	83	89
DP	98	95	87	89*	88
FP	93	89*	95	98	85*
HP	97	94*	94	90	94
MB	100	100	100	69*	83*
MG	98	98*	94	84	95*
NP	96	100	90	83*	93*
PP	96	89	91	82*	88
FPclinMB**	-	100	-	-	-

*New criterion standard applied

**FPclinMB = Focus Practice Designation-Clinical Microbiology

11,749 Diplomates are enrolled in the Continuing Certification Program

Continuing Certification

PARTICIPATION STATISTICS

	2019	2020	2021	2022	2023
New Certificates Enrolled	1087	961	1091	1120	1164
Certificates Lapsed/ Revoked	90	97	64	46	47
New Diplomates Enrolled	585	525	736	659	639
Diplomates Lapsed/ Revoked	64	70	52	34	34

Total Diplomates Enrolled at the End of 2022: 11,160

TOP IMPROVEMENT IN MEDICAL PRACTICE (IMP) ACTIVITIES REPORTED BY DIPLOMATES IN 2023

1. ABPath-Approved Slide Review Program
2. Department or Hospital/Institution Quality Assurance Committee
3. CLIA Mandated Cytology Proficiency Testing

Financial Report

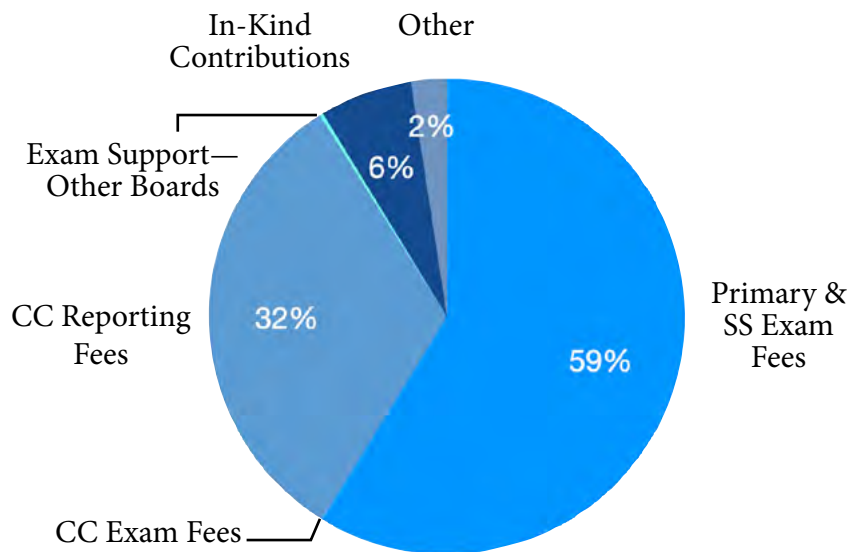
FOR FISCAL YEAR 2023

REVENUE

ABPath revenue is generated from multiple sources. Candidates pay examination fees for the Primary, Subspecialty, and Continuing Certification reinstatement exams and diplomates pay a fee for administration of the Continuing Certification Program. The AB-Path supports two other boards with their exams each year; the revenue is captured under Exam Support. Examination questions are written by volunteer pathologists. Per the IRS, their services must be reported as an In-Kind Contribution (equivalent time a pathologist would be paid had they charged for these services).

2023 Revenue		
Primary/SS Examination Fees, Net of Refunds	58.78%	\$ 3,259,995
CC Examination Fees, Net of Refunds	0.03%	\$ 1,500
CC Reporting	32.24%	\$ 1,787,905
Exam Support: Other Boards	0.24%	\$ 13,290
In-Kind Contributions	6.29%	\$ 348,658
Other	2.43%	\$ 134,814
Total Revenue w/o Restrictions	100%	\$ 5,546,162

Source: YearEndAudited2023;



2023 REVENUE



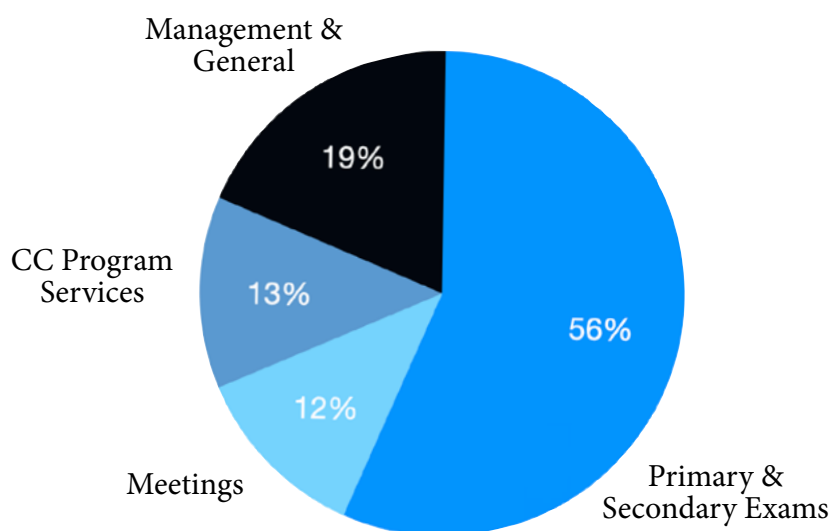
EXPENSES

Examination expenses cover the cost of credentialing candidates; the development, administration via Pearson VUE test centers, and scoring of the exams, and reporting results. Meeting expenses include the travel and administrative expenses for volunteer test committee members and Trustees. Management and general expenses include employee salaries, benefits, insurance, information technology support and licensing, facility and equipment rental and maintenance, ABMS member fees, and the cost of providing services to our diplomates, such as AC-CME PARS. CC Program Services includes all of the above type expenses that are directly affiliated with the CC Program to include ABPath CertLink®.

Expenses		
Program Services		
Examinations	56.42%	\$ 3,341,094
Meetings	11.99%	\$ 710,231
CC Program Services*	12.80%	\$ 757,959
Management & General**	18.79%	\$ 1,112,701
Total Expenses	100%	\$ 5,921,985

*Source: CC&ABPCL2023

** Also includes management/oversight and overhead costs of the CC Program.



2023 EXPENSES

The 2023 Board of Trustees

The ABPath is governed by 12 physician members and one public member. Each member is highly esteemed and accomplished in their respective fields and subspecialty. ABPath Trustees are responsible for setting the strategic goals and governing and upholding the integrity of the Board's mission to serve the public and advance the profession of pathology by setting certification standards and promoting lifelong competency of pathologists.



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2023 TEST DEVELOPMENT AND ADVISORY COMMITTEES (TDAC)

The ABPath appreciates the many contributions of our Test Development and Advisory Committee members who volunteer their time as subject matter experts to provide direction and content for certification examinations. Each of the committees is chaired by an ABPath Trustee. We thank them for contributing their time and talents.

The 2023 members were as follows:

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ABPATH CERTLINK®

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TDAC
Test Development and
Advisory Committees

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Christopher Lee Williams, MD

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(Includes ABPath and American Board of Medical Genetics and Genomics appointees)

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Kathleen Nicol, MD
Heather Rytting, MD
Sara Vargas, MD

CC ADVISORY COMMITTEE

The Continuing Certification (CC) Advisory Committee is made up of volunteer diplomates with diverse backgrounds, specialties, and experience and is chaired by an ABPath Trustee. It is responsible for advising the ABPath Board of Trustees for continuous evaluation and improvement of Continuing Certification from a diplomate's perspective. Each member serves three years on the Committee

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Roseann Wu, MD
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CC Advisory
Committee
Continuing Certification

RESIDENT AND FELLOW ADVISORY COMMITTEE

The ABPath Resident and Fellow Advisory Committee is made up of Pathology Residents and Fellows with the purpose of providing feedback and suggestions for improvement to ABPath about the board certification process.

2023 COMMITTEE MEMBERS

Gary Procop, MD – Chair
Fahire Akarca, MD
Thuy Cao, MD
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Resident
& Fellow
Advisory Committee



ABPath TDACs



ANATOMIC PATHOLOGY



CYTOPATHOLOGY



HEMATOPATHOLOGY



NEUROPATHOLOGY



CHEMICAL PATHOLOGY



FORENSIC PATHOLOGY



PEDIATRIC PATHOLOGY



BLOOD BANKING/ TRANSFUSION MEDICINE



ANATOMIC PATHOLOGY ABPATH CERTLINK®



CLINICAL PATHOLOGY ABPATH CERTLINK®

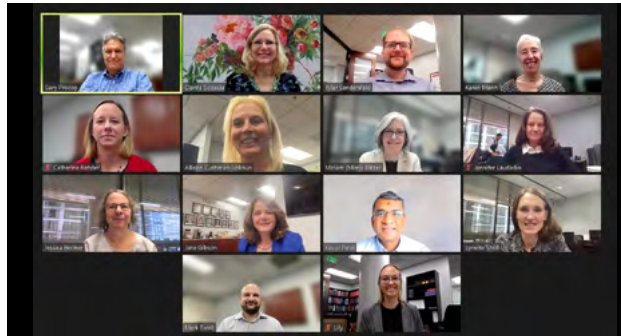
VIRTUAL MEETINGS



MANAGEMENT AND INFORMATICS



MEDICAL MICROBIOLOGY



MOLECULAR GENETIC PATHOLOGY

RECOGNITION of SERVICE



Erin Presnell, MD



Uma Sundram, MD



Susan Muller, MD



Jason L. Hornick, MD



Stacy E. Melanson, MD



Gordon L. Love, MD



Karen Mann, MD



Anthony Yachnis, MD



Tolgay Ocal, MD



Kathleen Nicol, MD

ABPath Publications

The following posters were presented at the ABMS 2023 Annual Meeting in Chicago:

ABPath CertLink®—Taking Great to Greater Kasey Williamson, Ritu Nayar, MD, Bonnie Woodworth, Ty McCarthy, Gary W. Procop, MD, MS, MED

[View and Download the Poster](#)

Degrees of Separation—ABPath Primary Examination Pass Rate Differences by Degree (MD vs DO; MD vs PhD) from 2006-2022 Tyler J. Sandersfeld, PhD, Ty McCarthy, Gary W. Procop, MD, MS, MED

<https://shrtm.nu/PwpPXAR>

ABPath CertLink® - Taking Great to Greater

Kasey Williamson, Ritu Nayar, MD, Bonnie Woodworth, Ty McCarthy, Gary W. Procop, MD, MS
The American Board of Pathology (ABPath)

Background

ABPath CertLink (ABPCL) is a longitudinal assessment platform designed to support continuous learning and professional development. ABPCL is used to fulfill the assessment requirement for ABPath's Continuing Certification (CC) Program.

2022 ABPCL End-of-Year Survey Data

Respondents	Strongly Disagree	Disagree	Agree	Strongly Agree	Strongly Agree or Agree
ABPCL helps identify knowledge gaps.					
2,693	79	3%	159	6%	1,587 59%
868	32%	91%			
ABPCL helps me stay current in my specialty.					
2,680	83	3%	190	7%	1,494 56%
913	34%	90%			
ABPCL questions are useful learning tools.					
2,669	69	3%	114	4%	1,394 52%
1,092	41%	93%			
I am satisfied with the ABPCL platform.					
2,670	69	3%	99	4%	1,227 46%
1,275	48%	94%			
ABPCL question difficulty was appropriate.					
2,667	49	2%	126	5%	1,807 68%
685	26%	93%			
ABPCL questions assessed my judgment, going beyond factual recall.					
2,656	56	2%	214	8%	1,688 64%
698	26%	90%			

Objective

To implement a Quality Assurance/Quality Improvement (QA/QI) process that supports CertLink's goal of being an assessment of learning... *for* learning.

Survey Comments

The questions are good. Keep up the good work! This is an outstanding and essential tool in maintaining proficiency while earning CME!

Test questions need better review, there were a couple that were blatantly incorrect.

ABPath has done a great job making this process professionally relevant and educational.

Many of the images were blurry and of very low quality. Also, some of the questions were poorly worded.

Plan to Improve – The Rebuild Phase

Active Items
From current ABPCL item bank

→

Medical Editors
Review for Style, Format, Grammar, Punctuation

→

Subject Matter Experts
Address Content Accuracy, Images, Terminology Updates, Feedback from ABPCL Participants

→

Medical Editors
Confirm all item components are correct

→

Review Team
ABPath staff ensures items are ready for publishing

→

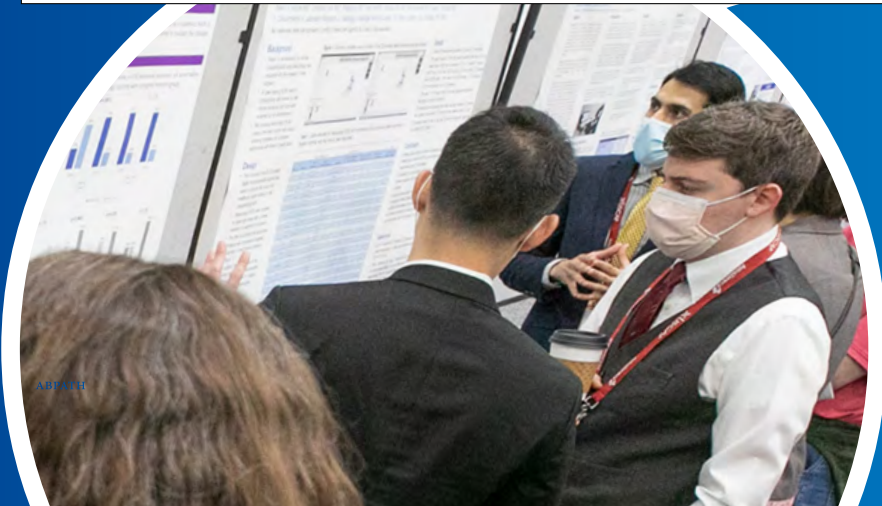
Updated ABPCL Item Bank

The Maintenance Phase

After a sustainable 2-year pool of thoroughly-vetted items has been established, ABPath will transition to a QA/QI of the existing items and introduce new content every six months.

Future Considerations

- Administration of unscored items... for learning
- Journal article-based questions
- Virtual microscopy functionality
- PROF, SBP, and PBLI competency content introduction





Degrees of Separation - ABPath Primary Examination Pass Rate Differences by Degree (MD vs. DO; MD vs. MD,PhD) from 2006 to 2022

Tyler J. Sandersfeld, PhD, Ty McCarthy, Gary W. Procop, MD, MS
The American Board of Pathology

BACKGROUND & OBJECTIVE

The American Board of Pathology administers two Primary Certification Examinations each year for practicing pathologists in Anatomic Pathology (AP) and Clinical Pathology (CP). Most candidates and diplomates hold Doctor of Medicine (MD) degrees, but some candidates may instead hold Doctor of Osteopathy (DO) degrees or the combination of Doctor of Medicine and Doctor of Philosophy (MD,PhD), among others. It has been observed on occasion that DO candidates have had more difficulty passing the ABPath Primary Certification Examinations than MD candidates. The ABPath sought to determine whether MD candidates significantly and meaningfully differed in their pass rates versus DO candidates. Additionally, the ABPath wanted to see whether MD,PhD candidates performed differently from MD candidates.

METHODS

The ABPath gathered all pass/fail results from the AP and CP exams from 2006 to 2022 for first-time candidates. The candidates were separated by degree into three groups: MD; DO; and MD,PhD. All candidates holding other degrees (MBBS, MbChB, etc.) were excluded from this study. Comparisons were done between MD and DO candidates and MD and MD,PhD candidates; DO and MD,PhD candidates were not directly compared.

Due to the large number of candidates, hypothesis testing may provide significant results for spurious effects. Therefore, odds ratios and Cohen's *d* effect sizes were calculated to determine the extent of a degree type's effect on pass rates over that on another degree type. First, the odds ratio between MD and DO or MD,PhD and MD was calculated for each individual year and the entire 17-year period from 2006 to 2022. The formula for the bias-corrected odds ratio (OR) is:

$$OR = \frac{\left(\frac{P_{MD}}{F_{MD}}\right) / \left(\frac{P_{DO}}{F_{DO}}\right)}{\left(\frac{P_{MD,PhD}}{F_{MD,PhD}}\right) / \left(\frac{P_{MD}}{F_{MD}}\right)}$$

where *P* is the number of passing candidates and *F* is the number of failing candidates for MD, DO, or MD,PhD candidates. These odds ratios were then converted into the logarithmic odds ratio (LOR):

$$LOR = \ln(OR)$$

These log odds ratios were finally converted into a standardized effect size called Cohen's *d**.

$$d = (LOR \times \sqrt{3})/\pi$$

The absolute value of the effect size must be at least 0.2 to be considered meaningful. An effect size of 0.2 to 0.499 is "small," an effect size of 0.5 to 0.799 is "medium," and an effect size of 0.8 or greater is "large." Additionally, each odds ratio was converted to a z-score:

$$z = LOR \sqrt{\frac{1}{P_{MD} + F_{MD}} + \frac{1}{P_{DO} + F_{DO}} + \frac{1}{P_{MD,PhD} + F_{MD,PhD}} + \frac{1}{P_{MD} + F_{MD}}}$$

The two-tailed probability of each z-score was calculated and tested; a p-value of 0.05 or below was statistically significant.

RESULTS

MD vs. DO: AP test results showed a statistically significantly higher pass rate for MD candidates over DO candidates throughout the 17-year period, but this can be attributed to the large sample size. The overall effect size between MD and DO candidates fell short of the 0.20 threshold for a "small" meaningful effect. Only two individual years showed a statistically significant advantage for MD holders with a medium effect. CP test results showed no significant or meaningful difference between MD and DO candidates throughout the 17-year period, and only one individual year with a statistically significant medium effect favoring MD holders.

MD vs. MD,PhD: AP test results showed a statistically significantly higher pass rate for MD,PhD candidates over MD candidates throughout the 17-year period, but this can be attributed to the large sample size. The overall effect size between MD and MD,PhD candidates fell short of the 0.20 threshold of a "small" meaningful effect. No individual years showed a statistically significant advantage for MD,PhD candidates. CP test results showed a statistically significant medium effect favoring MD,PhD candidates over MD candidates throughout the 17-year period. Every individual year from 2006 to 2020 showed a meaningful effect size favoring MD,PhD candidates, with four of those years showing a statistically significant medium-to-large effect.

DISCUSSION

The odds ratios for MD and DO candidates' pass rates from 2006 to 2022 showed that while MD candidates did have a slightly higher pass rate on the AP, the difference was not great enough to justify a meaningful effect favoring MD candidates on either Primary Certification Examination.

MD,PhD candidates were significantly and practically more likely to pass the CP Primary Certification Examination than MD candidates over the 17-year period. Considering that MD,PhD holders are more likely to work in clinical laboratories throughout their training than just MD holders, this may explain the

MD vs. DO - AP							
Year	OR	LOR	Cohen's d Effect	Favoring	z	P(t)	
2006	1.941	0.663	0.366	Small	MD	1.719	0.086
2007	1.868	0.625	0.344	Small	MD	1.269	0.205
2008	1.127	0.119	0.066	-	-	0.186	0.853
2009	3.879	1.356	0.747	Medium	MD	2.626	0.009
2010	2.498	0.916	0.505	Medium	MD	2.244	0.025
2011	1.802	0.589	0.325	Small	MD	1.545	0.122
2012	0.865	-0.150	-0.082	-	-	-0.238	0.812
2013	1.189	0.173	0.095	-	-	0.342	0.732
2014	1.320	0.277	0.153	-	-	0.546	0.585
2015	0.384	-0.956	-0.527	Medium	DO	-1.284	0.199
2016	1.876	0.629	0.347	Small	MD	1.467	0.142
2017	1.516	0.416	0.229	Small	MD	0.719	0.472
2018	2.094	0.739	0.407	Small	MD	1.594	0.111
2019	1.278	0.245	0.135	-	-	0.550	0.582
2020	1.326	0.282	0.155	-	-	0.545	0.586
2021	1.799	0.587	0.324	Small	MD	1.459	0.150
2022	0.301	-1.200	-0.662	Medium	DO	-1.616	0.106
Overall	1.365	0.311	0.172	-	-	2.731	0.006

MD vs. DO - CP							
Year	OR	LOR	Cohen's d Effect	Favoring	z	P(t)	
2006	0.834	-0.181	-0.100	-	-	-0.381	0.703
2007	0.723	-0.325	-0.179	-	-	-0.614	0.539
2008	2.306	0.836	0.461	Small	MD	1.708	0.088
2009	1.736	0.551	0.304	Small	MD	1.114	0.265
2010	2.487	0.911	0.502	Medium	MD	2.178	0.029
2011	1.998	0.692	0.382	Small	MD	1.663	0.096
2012	0.744	-0.296	-0.163	-	-	-0.393	0.695
2013	1.339	0.292	0.161	-	-	0.570	0.568
2014	0.585	-0.536	-0.296	Small	DO	-0.865	0.387
2015	0.767	-0.266	-0.147	-	-	-0.350	0.726
2016	0.602	-0.507	-0.279	Small	DO	-0.671	0.502
2017	1.669	0.512	0.282	Small	MD	0.765	0.444
2018	2.034	0.710	0.391	Small	MD	1.436	0.151
2019	0.650	-0.431	-0.238	Small	DO	-0.780	0.435
2020	1.504	0.408	0.225	Small	MD	0.775	0.438
2021	2.489	0.912	0.503	Medium	MD	1.541	0.123
2022	0.591	-0.526	-0.290	Small	DO	-0.495	0.620
Overall	1.009	0.009	0.005	-	-	0.073	0.942

MD,PhD vs. MD - AP							
Year	OR	LOR	Cohen's d Effect	Favoring	z	P(t)	
2006	1.424	0.353	0.195	-	-	0.929	0.353
2007	1.499	0.405	0.223	Small	MD,PhD	0.819	0.413
2008	1.479	0.392	0.216	Small	MD,PhD	0.862	0.389
2009	1.348	0.299	0.165	-	-	0.603	0.546
2010	1.606	0.474	0.261	Small	MD,PhD	1.202	0.229
2011	1.264	0.234	0.129	-	-	0.716	0.474
2012	1.371	0.316	0.174	-	-	0.788	0.431
2013	1.110	0.104	0.057	-	-	0.270	0.787
2014	1.114	0.108	0.060	-	-	0.266	0.791
2015	1.565	0.448	0.247	Small	MD,PhD	1.165	0.244
2016	1.739	0.553	0.305	Small	MD,PhD	1.012	0.311
2017	1.692	0.526	0.290	Small	MD,PhD	0.825	0.409
2018	1.088	0.085	0.047	-	-	0.177	0.859
2019	1.021	0.021	0.011	-	-	0.053	0.958
2020	1.703	0.533	0.294	Small	MD,PhD	0.968	0.333
2021	1.052	0.051	0.028	-	-	0.141	0.888
Overall	1.365	0.311	0.172	-	-	2.731	0.006

MD,PhD vs. MD - CP							
Year	OR	LOR	Cohen's d Effect	Favoring	z	P(t)	
2006	3.767	1.326	0.731	Medium	MD,PhD	2.486	0.013
2007	2.240	0.807	0.445	Small	MD,PhD	1.874	0.061
2008	5.781	1.755	0.967	Large	MD,PhD	2.894	0.004
2009	1.830	0.604	0.333	Small	MD,PhD	1.229	0.219
2010	1.513	0.414	0.238	Small	MD,PhD	0.845	0.398
2011	2.065	0.725	0.400	Small	MD,PhD	1.612	0.107
2012	3.337	1.205	0.664	Medium	MD,PhD	1.628	0.103
2013	7.937	2.072	1.142	Large	MD,PhD	2.027	0.043
2014	4.853	1.579	0.871	Large	MD,PhD	2.152	0.031
2015	2.459	0.900	0.496	Small	MD,PhD	1.446	0.148
2016	4.584	1.523	0.839	Large	MD,PhD	1.476	0.140
2017	3.352	1.210	0.667	Medium	MD,PhD	1.152	0.249
2018	5.396	1.686	0.929	Large	MD,PhD	1.632	0.103
2019	1.667	0.511	0.282	Small	MD,PhD	1.115	0.265
2020	5.091	1.627	0.897	Large	MD,PhD	1.576	0.115
2021	1.194	0.099	0.054	-	-	0.153	0.878
2022	1.297	0.260	0.143	-	-	0.331	0.741
Overall	3.054	1.116	0.616	Medium	MD,PhD	7.650	0.000

BACKGROUND & OBJECTIVE

The American Board of Pathology administers two Primary Certification Examinations each year for practicing pathologists in Anatomic Pathology (AP) and Clinical Pathology (CP). Most candidates and diplomates hold Doctor of Medicine (MD) degrees, but some candidates may instead hold Doctor of Osteopathy (DO) degrees or the combination of Doctor of Medicine and Doctor of Philosophy (MD,PhD), among others. It has been observed on occasion that DO candidates have had more difficulty passing the ABPath Primary Certification Examinations than MD candidates. The ABPath sought to determine whether MD candidates significantly and meaningfully differed in their pass rates versus DO candidates. Additionally, the ABPath wanted to see whether MD,PhD candidates performed differently from MD candidates.

METHODS

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First, the odds ratio between MD and DO or MD,PhD and MD was calculated for each individual year and the entire 17-year period from 2006 to 2022. The formula for the bias-corrected odds ratio (OR) is:

$$OR = \frac{\left(\frac{P_{MD}}{F_{MD}}\right) / \left(\frac{P_{DO}}{F_{DO}}\right)}{\left(\frac{P_{MD,PhD}}{F_{MD,PhD}}\right) / \left(\frac{P_{MD}}{F_{MD}}\right)}$$

where *P* is the number of passing candidates and *F* is the number of failing candidates for MD, DO, or MD,PhD candidates. These odds ratios were then converted into the logarithmic odds ratio (LOR):

$$LOR = \ln(OR)$$

These log odds ratios were finally converted into a standardized effect size called Cohen's *d**.

$$d = (LOR \times \sqrt{3})/\pi$$

The absolute value of the effect size must be at least 0.2 to be considered meaningful. An effect size of 0.2 to 0.499 is "small," an effect size of 0.5 to 0.799 is "medium," and an effect size of 0.8 or greater is "large."

Additionally, each odds ratio was converted to a z-score:

$$z = LOR \sqrt{\frac{1}{P_{MD} + F_{MD}} + \frac{1}{P_{DO} + F_{DO}} + \frac{1}{P_{MD,PhD} + F_{MD,PhD}} + \frac{1}{P_{MD} + F_{MD}}}$$

The two-tailed probability of each z-score was calculated and tested; a p-value of 0.05 or below was statistically significant.

RESULTS

MD vs. DO: AP test results showed a statistically significantly higher pass rate for MD candidates over DO candidates throughout the 17-year period, but this can be attributed to the large sample size. The overall effect size between MD and DO candidates fell short of the 0.20 threshold for a "small" meaningful effect. Only two individual years showed a statistically significant advantage for MD holders with a medium effect. CP test results showed no significant or meaningful difference between MD and DO candidates throughout the 17-year period, and only one individual year with a statistically significant medium effect favoring MD holders.

MD vs. MD,PhD: AP test results showed a statistically significantly higher pass rate for MD,PhD candidates over MD candidates throughout the 17-year period, but this can be attributed to the large sample size. The overall effect size between MD and MD,PhD candidates fell short of the 0.20 threshold of a "small" meaningful effect. No individual years showed a statistically significant advantage for MD,PhD candidates. CP test results showed a statistically significant medium effect favoring MD,PhD candidates over MD candidates throughout the 17-year period. Every individual year from 2006 to 2020 showed a meaningful effect size favoring MD,PhD candidates, with four of those years showing a statistically significant medium-to-large effect.

DISCUSSION

The odds ratios for MD and DO candidates' pass rates from 2006 to 2022 showed that while MD candidates did have a slightly higher pass rate on the AP, the difference was not great enough to justify a meaningful effect favoring MD candidates on either Primary Certification Examination.

MD,PhD candidates were significantly and practically more likely to pass the CP Primary Certification Examination than MD candidates over the 17-year period. Considering that MD,PhD holders are more likely to work in clinical laboratories throughout their training than just MD holders, this may explain the medium overall effect. Only 2021 and 2022 showed no meaningful difference between MD and MD,PhD candidates on the CP. This change may reflect changes in educational content delivery during the COVID-19 pandemic.

* Cohen, J. (1988). *Statistical Power Analysis for the Behavioral Sciences* (2nd ed.). Hillsdale, NJ: Lawrence Erlbaum

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Gary W. Procop, MD, MS, MEd
Chief Executive Officer

Pictured from left to right:
Front row: Kasey Williamson, Renee Holder, Geri Wills, Ty McCarthy, Dr. Gary W. Procop, Anthony Schlinsog, Josie Santos, Amanda Zombro
Back row: Colette Earnest, Mary Pyfrom, Clarita Scioscia, Tyler Sandersfeld, Alissa Eagle, Bonnie Woodworth, John Lemke, Mario Lévesque
Not pictured: Gabriela Lago and Lily Vieth

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Our staff is proud to support the ABPath mission and strategic goals. They work very hard to support our candidates and diplomates in achieving and maintaining their board certification.

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In Memoriam

The American Board of Pathology family deeply mourns the loss of Mario Lévesque, who passed away in early 2024. Mario was a valued member of our team and made significant contributions to our success. We extend our heartfelt condolences to his family and loved ones. Mario will be remembered fondly by all who had the privilege of working with him.



Mario Lévesque



2023

Newly Certified Diplomates

Congratulations to the Following Diplomates Who Received their Primary Board Certification in 2023

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