



THE AMERICAN
BOARD OF SURGERY

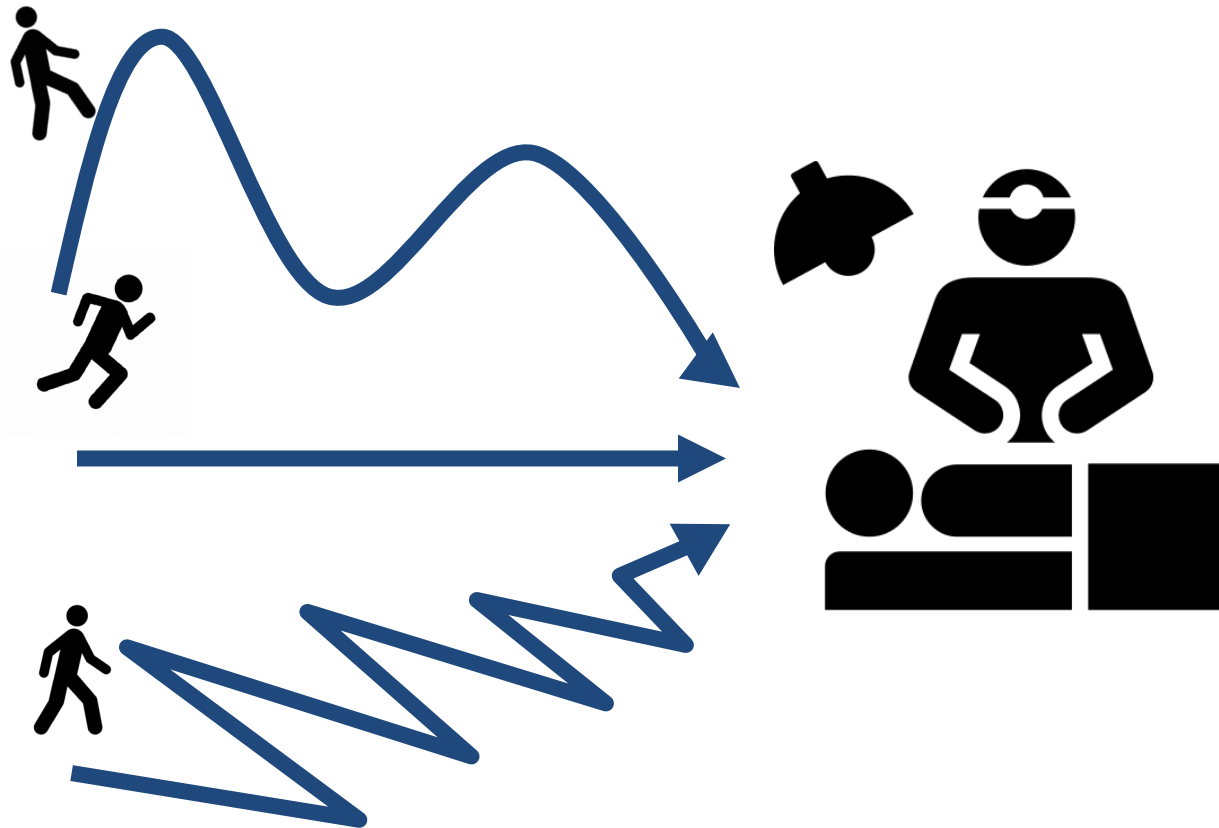
The American Board of Surgery experience with competency-based education

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AMERICAN BOARD OF SURGERY

Disclosures

Employee of the American Board of Surgery

Current system



Fixed Time = Variable Outcome

ABS EPA™ Timeline

- **2016-2018:** Decision to conduct general surgery pilot
- **2018-2020:** Pilot with 5 general surgery EPAs at 28 sites
- **2020:** Decision to proceed with full set of EPAs for all ABS specialty boards
- **2023:** Nationwide launch of EPAs for general surgery across all programs
- **2023 -2025:** Launch of other ABS boards (vascular, pediatric, TBSCC, CGSO)
- **2028:** Graduation of first resident cohort using EPA model

EPAs present day, general surgery

- Adopted by ABS for interns entering 2023
- 18 EPAs (3 phases, 4 entrustment levels)
 - Gallbladder disease
 - RLQ pain
 - Inguinal hernia
 - Trauma management
 - Consult
 - Endoscopy
 - Critically ill patient
 - Acute abdomen
 - Small bowel obstruction
 - Breast disease
 - Soft tissue infection
 - Renal replacement therapy
 - Cutaneous/subcutaneous neoplasms
 - Thyroid/parathyroid disease
 - Pancreatitis
 - Benign or malignant colon disease
 - Benign anorectal disease
 - Abdominal wall hernia



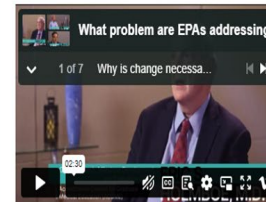
User Development

- Webinars
- Website
- Council and Board involvement
- BOD updates
- Data collection tool

Curated playlists for programs and trainees

The following library of videos is designed to provide programs and trainees with an easy spot to find and watch video resources to aid in the understanding and implementation of EPAs.

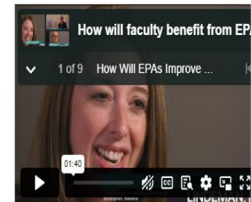
What problem are EPAs addressing?



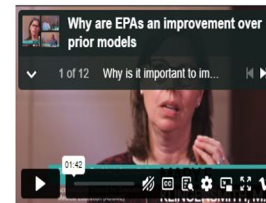
How will residents benefit from EPAs?



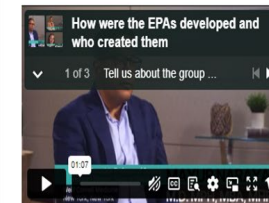
How will faculty benefit from EPAs?



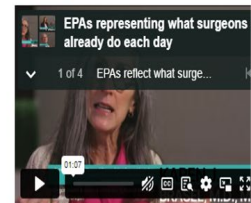
Why now? EPAs as an improvement over prior models.



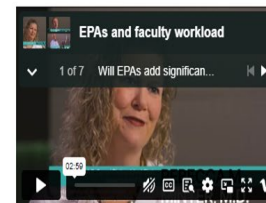
How were the EPAs developed and who created them?



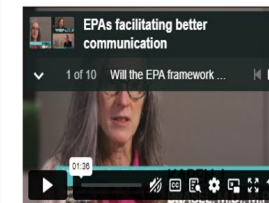
EPAs representing what surgeons already do each day



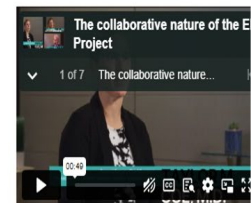
EPAs and faculty workload



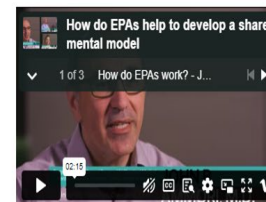
EPAs facilitating better communication



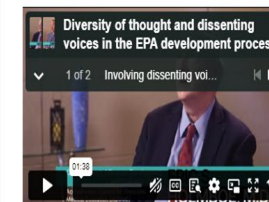
The collaborative nature of the EPA Project



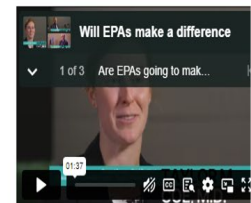
How do EPAs work? Developing a shared mental model



Diversity of thought and dissenting voices in the EPA development process



Will EPAs make a difference?



Make it easy

ABS app

general surgery

other specialty boards

45 seconds

Feedback...not “evaluation”



ABS EPA Current State

All
programs

Specialty
launch

Dashboards,
quarterly
reports

Evidence
base



General Surgery data

From ABS EPA App TM

Additional
microassessments
for 2024-2025:

SEPA 3,707

Fire fly 12,284

Year	Faculty	Resident	Total
23-24	55,455	58,861	114,306
24-25	131,949	157,834	289,783

Other specialties (data from August 1)

Specialty	Programs	Active Users	Assessments
CGSO	34	25	1964
Peds	52	47	1087
SCC	166	130	1545
Vascular	172	148	4032

Engagement lessons learned

- Deliberate process
- Long on-ramp
- Initial pilot helpful
- Human factors
- Trust with community
- Champions
- Workflow integration
- Accept variability





I turned out
OK...



Outcomes

- improved feedback
- entrustability profiles
 - across PGY
 - for individual residents (program)
 - benchmarking
 - for individual EPAs
- eliminated gender bias
- correlation with Milestones
- variability

Admissibility to certification pathway beginning 2028

ATLS

ACLS

FES

FEC

FLS

case logs

A handwritten signature in black ink that reads "Karen Brasel". The signature is written in a cursive, flowing style.

EPA profile

Summary



Successful deployment



More, better information



Tremendous opportunities



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Thank You