

## 2020 Qualifying Exam Q&A for Residency Program Directors and Managers

*Webinar held on May 20, 2020*

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***GW – Dr. George Wendel***

***WL – Dr. Wilma Larsen***

**GW:** Good afternoon. I think we'll go ahead and start our conference. I want to thank you all for taking the time to have another conference with us to talk about our 2020 Qualifying Exams in Obstetrics and Gynecology and our four subspecialties. We've had a considerable amount of activity over the last week when some things became available to us with a deadline to make decisions. We communicated to you all and to the candidates and we wanted to have an opportunity to have you ask further questions to clarify things that we might not have gotten right or that we need to improve on.

First, I'll introduce myself. I'm George Wendel. I'm the Executive Director of the American Board of Obstetrics and Gynecology. I'm joined on the call by Wilma Larsen, our Associate Executive Director in charge of exams, and Cariel Apodaca, who is our Subspecialty Manager. We appreciate you taking the time.

I thought perhaps the way to start would be to ask Dr. Larsen to give you a quick update on where we are with the exams coming up and a brief summary of some of the things that happened and didn't happen over the past week.

**WL:** Welcome everyone, and thank you for agreeing to speak with us today.

I think hopefully all of you are aware, based on our communication, that the date of both the Qualifying Subspecialty and Specialty, as well as the Pediatric and Adolescent Gynecology Exams have been changed from the end of June to the 16th of July.

The last time we spoke with you, we were asking about the potential option, if you remember, of what's called client proctoring. At that time, we were exploring a number of different options for ways that we could administer the exam. In all cases, our goal was to try to maximize the number of candidates that could take the examination in 2020 if they wanted to. We had about five different options that we looked at to try to make that happen, including the client proctoring, increasing the start times for the June date, online proctoring, an additional test date in 2020. In all cases, we were having a very difficult time because we were running into issues either with Pearson VUE being able to give us a date that would allow the candidates to take the exam or different issues with some of the options.

We were contacted by Pearson VUE late last week to tell us that a major client had cancelled their examination that was scheduled for the 16th of July, and if we acted quickly, we could take that day, and because this was such a large candidate and such a large event had been planned, we literally could move all of our candidates for both the Specialty, Subspecialty, as well as the PAG Exam, to that date to allow everyone to take the exam on the same day at Pearson VUE centers. It was a very quick decision that had to be made. We made that decision and started sending out communications to let the candidates, as well as you, know that we would be moving the exam.

With all of the other options we had considered, as I said, we were running into roadblocks that would prevent us from allowing all the candidates to take the exam, so this was really the best opportunity we felt as far as being able to provide a safe exam for as many candidates as possible.

**GW:** I would say the first thing we want to do is apologize. There's no way that we could have predicted this. There's no way we think this is how we want to work with people. This is no way to introduce our future diplomates to working with ABOG for the rest of their lives, but this is the reality that we were faced with. We've disrupted their June. We've disrupted their July, and there's nothing we can do about it. We have done the best we can given the circumstances that change seemingly every couple of days.

It's hard to understand the complexity of working with a big organization like Pearson VUE. If you will, it's like trying to steer an aircraft carrier. You can't do anything simply, and you can't do anything quickly, and nothing is uncomplicated, even though on one level, it looks like it should be.

The other thing to realize is we're not a big player in the assessment industry, and we did not get offered options like big test companies that are doing national exams with thousands and thousands of candidates. We were given time-limited options that were going to close and move on to other people if we didn't jump at them. You would think that we could negotiate with people about doing half the exams here and half the exams there were not simply offered. They were not something you could demand because there are other vendors that wanted

those spaces. A lot of the things you would hope that we had economy on and ability to make flexible don't exist.

Perhaps that's an eye-opener for us as an organization about what we do in the future for our exams and who we partner with. There just aren't a lot of options that are available in a situation where the other organization is responding to basically cancelling half the exams they had scheduled across the United States and then trying to feed those candidates from a variety of situations in other dates, and knowing there are lots more critical partners for that company than ABOG.

Those were some of the harsh realities that were not spoken to us per se, but came about when we asked for things. We apologize. That's what we've learned, and we tried to do the best we could for the greatest number of people we could. In some cases, it was better, and in some cases, it was worse. In every single case, we disrupted your plans for June. For senior residents, we disrupted their personal plans for June, and we disrupted their initial plans for either their new practice or their fellowship, and we will bear the responsibility for that, apologize for that to this group for a long, long time.

It's not something we feel great about, but we feel like we did the best we could within the confines of where we are.

I wanted to just echo what Wilma said; thank you all for bending over backwards to see if you could work the client proctored alternative for us. We thought that was a very attractive option to offer, however, the more people contacted us about IT issues, it was apparent there was going to be obstacles and costs that were almost insurmountable. There were also issues about proper infection control measures, particularly for people who might be outside candidates coming in that some of you didn't know of and how would we protect the candidates, how would we protect the proctors and other people at the site, and it became apparent that that was just not going to be a viable option for us. We apologize that that seemed like a practical option, but one that ended up being less practical as time went on.

***Has the board considered surveying the candidates about examination options?***

**WL:** I think had we had more time between when we were presented with an option that would allow us to move forward versus having to give a decision on that option, we would have certainly loved to have done that. There weren't any options to give the candidates that we could do this or do that. At the time where the 16 July date was presented to us, we were not having multiple options to present to the candidates to ask them what they would like to do, so we didn't do that.

**GW:** I think going forward, this is as, as we've mentioned before, this is been a good opportunity to look at how do we meet the standards we have to as an assessment organization to make defensible decisions about passing or not passing the examination given the options that are available to offer a test. We had hoped to begin that dialogue at the July CREOG retreat. That discuss perhaps may or may not begin at that meeting depending on the format of how that evolves.

We are beginning with our board to have a look at the future of our Qualifying Exams and how they're offered to people and in what settings and with what defensibly for us as an organization. I hope we have your input on these discussions as we go forward. They're very important for our future and for the future of the organization and the candidates we hope will choose to be certified by us.

***Is there a possibility that the system used by the American Board of Surgery might be used, which changes the exam to an at-home, virtually proctored exam?***

**GW:** Some of you may know that the American Board of Surgery this year, this summer, has moved the format of their examination process. I can't get into the details of that because some of those are confidential, but the American Board of Surgery's decision to change their format for their exams this year was not done in a strategic fashion and deliberately. It was done in an emergency fashion because of the inability of the partner that they use for their examinations to deliver the exams.

If you'll hypothesize that they're an organization like us, and they might have had an exam partner like ours, they were getting prepared for a notice that over half of their candidates would have their exams cancelled overnight. They had another partner that they were able to work out something with to make it transition for one year. There are some issues about their exam this year that they're not happy about that they had to make accommodations on their exam and the number of questions and the length to fit into the model they're using this year. I can say that this is their temporary transition model, and it may not be what they do next year.

We were unable to find a partner that could work with us to do what they did. That's the reality of it. These things take at least several months to arrange, and those companies are already scrambling with other bigger companies to move their exams and everybody is booked and has commitments and we could not find someone to commit to work with us to move to an online, remote-proctoring model this year.

It is something that we'll be looking at going forward, and as I said, that's going to be part of the dialogue of what is the optimal model for our Qualifying Exams going forward.

I think that's the short answer for that. We have looked at every option. There aren't that many companies in these spaces to do these kind of things. Some of them are, if you leave to a new partner who you've never worked with, you have to hope it's going to work. There are some

challenges to doing remote, online proctoring that general surgery has told us about, and you may know from you general surgery Program Directors and Program Managers that they are scrambling to get volunteers to allow their offices to be used in some departments so that the candidates can take the remote proctored examination. There are strict requirements for technology. There are pretty strict requirements for bandwidth and things, and some people are unable to meet those. Testing at home, and that's been an unanticipated issue that the American Board of Surgery this year and working through.

***I am happy for this latest development, but it opens up a new concern. How able is Pearson to handle the request for exam site changes?***

**WL:** We definitely did have that same concern, but because we were able to take the date of the 16th and because so many slots were available, there has been the ability to move exam sites, I'm not saying 100%, but actually quite well. There are currently over 300 candidates who have moved their site. I would tell you that if you have a resident who tried to move their site on Monday and wasn't able to, I'd ask that they go back on because as more people change sites, more slots become available in the spots that they moved from. With the continued movement, there will be not only slots available at different locations, but also times available at different locations. If your resident is unhappy because they were put in a 4 o'clock time slot let's say, I would encourage them to go back on the Pearson VUE site and look because people are going in and having the ability to change the time of their exam as well as the location of their exam.

The one thing that I would remind everyone of is that if you have a resident who has an accommodation, so either a lactation accommodation or either a time accommodation, and they need to change their site, unfortunately, they do have to call the accommodation department at Pearson VUE for that. We understand that that line is very busy right and it's very hard to get through. I'm sorry, just right now there's a lot of traffic obviously because not only are we changing our exam date, but Pearson VUE is also in the process of cancelling people's exams sites because of the 50% occupancy rule.

Again, if you have an accommodation, if your resident has an accommodation, and they don't have to change their site, the accommodation moves with them and it's not an issue. If they do have to change their site though, they need to go through the accommodation department at Pearson VUE.

We've reached out to all the residents in different ways and really encouraged them to contact us if they're trying to change something and they're having difficulty. We're happy to help in any way we can. Just email the exams department at [exams@abog.org](mailto:exams@abog.org).

***The Qualifying Exam was moved for all participants to July 16. While I understand the need for maintaining compliance with the exam contents, this has put a strain on residents post-graduation. This especially for my seniors who are starting fellowships. They were required to re-register in new cities and have time off from new fellowship rotations, as well as disruptive to post-residency plans.***

**GW:** We agree. We wish it wasn't that way. One of the things we tried to do was to get some way to have an algorithm that would triage if you will, or account for, people who may be starting fellowships. We were told that's not possible and they don't do that. We tried everything we could do workarounds to make that happen. The testing organization said that they were doing their 50% cancellation algorithm randomly based on everybody who would be testing at a center that day with some degree of priority going to essential assessments, and we qualified for that.

We were given no opportunity to have any flexibility or modifications put in the system to account for that. We tried, we really tried, and the answer was just no. Everybody has to be treated equally. Everybody has an equal chance of being cancelled. When you reset this to move, everybody moves, and you can't break things up into groups and keep some on the original day and some on the second day. That was not an option offered. They don't do that.

I don't know how else to answer that one. We wished we could have done something like that that would have allowed some flexibility and some degree of ability to move your date, but it was not offered to us.

***Originally there was a plan to allow the option to continue to take the exam as scheduled if able, or delay to a later time in the fall. There was a plan to avoid issues with testing security and it was my understanding that this was in place.***

**GW:** You're right. We had a commitment from the organization to give us a second date in the fall, and there was trouble with that. When we were given a second date, it would be in centers running at 50% capacity to start with, with other people competing for those slots. There was not going to be a guarantee we could actually fulfill getting everybody an exam on those alternate dates. That, to some extent, was not how it was originally presented to us, and consequently, that's not how we presented it to you all. I apologize for that, but when we got more and more details about what that actually was, it didn't turn out to be what it was billed as. I don't know how else to say that.

**WL:** I think that's an accurate description, George. We would not have been able to have some candidates take it in June, other candidates take it at another date, and everyone be able to take it, nor would we been able to have candidates select, "Oh, I want to take it in June, so even

though I lost my start time, I'm going to take it then." Unfortunately, that just was not an option.

**GW:** Perhaps we announced that to you all prematurely given what we were told on one of our conversations and communications with Pearson. The more we learned about that as we worked with people more involved in logistics and operations, the more we learned that it wasn't quite billed. It was billed differently than what it actually was, and it wasn't going to work. It might actually be worse for everybody if we tried to do that pathway.

***Our local Pearson VUE center can easily accommodate our graduating seniors on the original testing day and still observe social distancing. We discussed this with them. Now with the forced move, my seniors are cancelling further vacations and disrupting their fellowships. Why was this decision made rather than just utilize the two date process as before and allow them to choose what works best.***

**WL:** Unfortunately, the algorithm that Pearson VUE was planning to use may not have been fully understood by your local Pearson VUE center, but it would have cancelled 50% of the candidates at that center. It may be that your center was very lightly booked, but that was not the case for the majority of candidates across the country. Most centers are fully booked in June, and once 50% of the candidates were cancelled, there would be no way for us to rebook them into June, nor could we guarantee that they could be booked into a future date later in the year as we had originally hoped.

We ended up having to make the decision that was going to work for the majority of candidates. We understand that this is disruptive, and we are sorry that it's disruptive. We're looking for the best option for the most people. When we had the option presented to us of the date where we could move everyone to, we moved forward with that.

**GW:** It's been a moving target with changing communications from many levels of our exam delivery partner. I'm not sure that all of the people that are giving answers are fully aware of what is coming their way or what has come their way. Many of the changes are done centrally, way above the level of the professional test center itself.

We couldn't have a system that wasn't given equal access to everybody. There are areas where they are individual variances in the professional test centers and their capacities and things, but we couldn't offer a test that would be available in one city and not another, and in one city at this capacity, but not offering capacity in another city. Once we appraised some of the nuances of what we were offered, it was clear there was only one option; to move everybody to a different date in July.

***If Pearson VUE is able to accommodate all candidates on July 16, and since COVID has been with us for over two months, why couldn't they be ready for June 29?***

**GW:** I think the reason that July 16 came up is that another huge company that was working with them cancelled their exam. All of a sudden, we told there was no capacity and we were looking at a fall date and they called and said, "We had a major, unexpected cancellation this week, and July 16 is open. If you can make a decision to move all your candidates to that date, we'll guarantee that we can accommodate all of them at our professional test centers, and if you don't within a certain period of time, we're going to move to another organization." That was it.

They said they would not be cancelling on July 16, that everybody could move there and it was because another unnamed organization that gave a national test had abandoned that date and they had an unexpected opening. We felt lucky that they called us and asked.

**WL:** The only thing that I would add would be that as I mentioned earlier, unfortunately, all the Pearson VUE centers are fully booked in June, so when the 50% social distancing went into effect, that's why half of the candidates were going to get cancelled. As George said, because of the 16th of July was basically un-booked entirely across the country, that's how we were able to get our candidates moved there, even with the same social distancing standards.

**GW:** It's an important concept. Internally, they just transitioned our dates to the new date. We didn't have to go into a queue if you will. They just moved all of our candidates there. It happened within the context of running at 50% capacity that they guaranteed us that everybody could take their exam that day and there would be no further problems with capacity and no cancellations. That was the one guarantee that this gave us that nothing else that they had discussed offered us.

***Can we consider giving the test at each institution moving forward?***

**GW:** I think it's certainly something to think about. This is a high-stakes exam and requires extra security measures. There are some issues about giving the test at institutions that might make that either an attractive option or one that probably is not appropriate.

The other issue that came up is that the institutions were going to be passing on the cost of their IT infrastructure and using their facilities to us as an organization. I don't know how that's handled for the CREOG exams, but we got a fair number of people who said "Our university is going to charge you to give the exam."



It's a possibility, but I don't think it's going to be high on the list going forward. In essence, one might envision online proctoring done in a group setting and the people just happen to be in a conference room at an institution because it's got better connections than their home institution, but that would not necessarily require a proctor model. There may be some sort of hybrid to what you're asking going forward, where people may want to go to the institution to take their test, and assuming that they meet the security issues with online proctoring, that could be sometimes better done at work than at home.

***Can you continue to give the exam in July? I think it would be less stressful for the residents who have to move and do not finish until June 30th and start their fellowship on July 1st.***

**WL:** We sent out a survey earlier in the year on this very issue because we'd heard from Program Directors at CREOG that there was some desire to have us move away from the end of June for our exams. We sent out a survey to programs, candidates, and chairs asking about that very issue. Surprisingly, the overwhelming majority of people that answered the survey did not want us to change the date of the exam. They felt like giving it at the end of June was appropriate.

If there are people that either didn't get the survey or really have the opinion that we should consider moving it, we can certainly consider that in the future. Our goal would be to try to have it at the time that was optimal for as many people as possible.

**GW:** I think we presented this information at the breakout sessions at the CREOG meeting earlier this year. We've talked to the chairs about this, we've talked to many groups about it. We thought there was going to be much interest in changing the date of the exam, but when we proposed options, none of them seemed popular. We want to make an evidence-based decision about what's the best timing for these exams, and I think we'd be happy to re-engage that discussion both with our board and with the GME community going forward.

There is no wrong answer on when to give your exam. There are benefits to having it early. There are benefits to having it toward the end of the residency. There are benefits to having it after you complete your residency. Some of those change based on your perspective. We're happy to do what people think is best for everybody, but most importantly, what's best for the candidates. We're happy to re-engage that discussion.

As an organization, we do have to have these contracts with our exam partners several years in advance. We've engaged in discussion earlier this year because we had to get a contract with a provider for the exam two years from now. We were ready to make a change, but there was not widespread support to do so. We're happy to re-engage that discussion and come up with a better way, if there's a better way to do it, a better time to do it.

***If someone can't do July 16, can they take it next June without paying again? How late can a candidate cancel taking their exam? I have a resident who will be 38 weeks pregnant on July 16. If she delivers prior to this date, when can she cancel?***

**WL:** As far as the first question, they absolutely can cancel without any penalty. They can either request a refund of their application fee, or if they would prefer, we're happy to apply it to the 2021 exam. All they have to do is contact us at [exams@abog.org](mailto:exams@abog.org) and we will definitely help them with that.

As far as the second question of how late can the person cancel, really they could cancel any time before the actual exam day, so up to the evening of the 15th. Even, frankly, if your resident went into labor on the morning of the 16th and had been planning to take it, we would still roll her fees over or give her a refund, whichever she would prefer. We wouldn't penalize her for that. Obviously, we're very baby friendly. We wouldn't want her to lose that money, so up until the time of the exam.

Pearson VUE appreciates it if people cancel because then other people can move into those slots. Certainly, they would ask that she would cancel as soon as she knew she couldn't take the exam. We would ask that as well, but we're not going to hold her responsible if she goes into labor on the night of the 15th. We're happy to accommodate that.

***When will the affidavit be available for our Program Directors to sign?***

**WL:** The affidavits normally post on the 31st of May, which is basically 30 days before the test. That will still happen this year. Those should be available for Program Directors on the last day of May as per usual.

The affidavits get posted 31 days before completion of the residency, so if you have a resident who is not completing the residency on time, their affidavit won't post on the 31st like everyone else as well. Just to clarify that. If you have somebody that's completing in September, their affidavit won't post until the middle of August. The rest of the affidavits would post on the 31st of May. I just want to make sure I clarified that.

***I appreciate all the work you've put into making sure our residents are qualified and safe. My only comment is in the way that the information was sent out. We had been preparing our residents based on the last call I was on, and then they received the email before program administration. We had to get them to forward us the email so we could read it. Getting the information prior to the residents, even by just a few minutes, would've been nice. Thanks for all you do for our residents.***

**GW:** We agree. We tried to time things as best we could. I don't remember the difference in the communication to the candidates, and I thought we had everything out pretty much at the same time.

**WL:** We did. Unfortunately, I'm not sure why, maybe it took longer for the Program Director to receive it than the residents, but we essentially sent them at almost exactly the same time. We can certainly try to send the Program Director and Program Manager emails a little bit before we send the resident emails or fellow emails in the future.

**GW:** We try to do that as much as we can because we appreciate the perspective you're in and the critical role you play in supporting them, particularly with something that's a completely disruptive message like this. I apologize. I thought we completed them sequentially so that they would go out that way. We thought that they were going out at the same time, not one before the other.

***Just to clarify, no cancellation letters were sent out on May 18 and 19, all exams will be administered on July 16, and candidates will or already received the notification for the new date and location choices in case they need to change location.***

**GW:** Yes, absolutely. They've all gotten it. In fact, everybody has gotten a phone call, or should have had an attempt to contact them with the phone number we had unless they've already contacted us. Over the first couple of days of his week, we have either talked to everybody or called everybody who's taking any of these exams. That's nearly 1,800 people. We felt a real responsibility to make sure that nobody fell through the cracks. As I'm anticipating, the person who wrote the question is asking are you sure you've got this out to everybody, and we put together a strategy to send it and then contact everybody to make sure they got it and see if they had any questions.

Dr. Larsen's team and a lot of people in the building came in during the COVID work-from-home to be able to get into our database and literally call every resident and fellow to make sure that they got the email and see if they had any questions or any mitigating factors that they could help them with in deciding about their test site and accommodations. I hope that happened. If it didn't, please let us know.

***I have a resident that just went on paternity leave. He was going to finish on September 30, but now that date will be pushed back. Can he still take the test in July?***

**WL:** Unfortunately, if, by the residency leave policy, he doesn't finish by the 30th of September, with all the combined time he's taken off during residency, he will need to take the exam in 2021.

We would ask that you would go into the Manager Portal and update his end date or reach out to us at [exams@abog.org](mailto:exams@abog.org) and we can do that for you so that we know the correct current status.

**GW:** I would just add, many of these requests are complicated and have individual mitigating circumstances. If there are any mitigating circumstances regarding the COVID-19 pandemic, please contact us and let us know and we can look at this by request.

***Will the ABOG website for residency managers login be updated? We can no longer view items such as the residency verification, etc.***

**WL:** Unfortunately, you are correct. Obviously you know that you can't get into your part to look into those things. We are aware of that, and our IT group is working very hard to update how you're able to access all the information that you need.

We know that's an issue since the new portal rolled out, and IT is working to correct that for you. I can't give you an exact date when that will take effect. The affidavit will now go as a task on the residency Program Director's login. When your Program Director logs into their own ABOG Portal, they will see the affidavit and the task for them to complete. That's a little bit different than it's been in the past, but it will allow them to very easily to go through and to click the affidavits that they need to take care of.

That's being handled a little bit differently this year. We are aware of the issues with the Program Manager portal and IT is actively working to fix that.

***The fall date is no longer an option, correct? If they're not taking the exam on July 16th, residents will need to reschedule for next year?***

**GW:** Wilma, that's my interpretation of it too.

**WL:** Yes. The only thing we are looking at is can we make some accommodation for residents who actively contract COVID and can't take the exam because of COVID. You are correct. If they can't take the exam on the 16th of July, they have to reschedule for next year. That is correct.

***I'm just wondering if, just going forward, the thought process of maybe not being as victim to Pearson and changes and whether or not we're going to take a little bit more control over this incredibly high-stakes exam and whether or not we're going to have a little bit more control as an organization over it going forward.***

**GW:** There are challenges that organizations face that are in the assessment industry, and as much as you hate to say it, we're a peer organization of physicians that offers exams and we need partners to deliver those exams.

Some of us are old enough to remember the days when we did send paper and pencil and booklets out and people sat in rooms and filled those out on scantron sheets and sent the exams back. That's how you delivered the exams.

That's not state of the art anymore, and that doesn't meet standards for the assessment industry, and we have the meet standards as an organization that are set by the American Board of Medical Specialties.

This experience, with exam vendors, has been shared by almost every board. I got on a call yesterday with the 26 other Executive Directors of American Board of Medical Specialty Boards, and everybody is going through the same thing.

The challenge is having a network of testing centers that is available around the country to offer tests. There are a lot of pluses to this; it's secure, it's safe, there's no cheating, and the exam content is protected. But, this has exposed the underbelly of some of the challenges of working with those providers, and we will be, like all other boards, redoing contracts with a little more flexibility.

The exciting part of all of this is there are emerging technologies coming out about better ways to do online proctoring that might be more safe. There are going to be ways to perhaps do group proctoring of tests that have a lot of degrees of security. It does post some challenges, and I don't mean to cast dispersion on one particular company because every company that does this is in the same boat. There is no vendor that is not just had their whole business model and their system just fall apart in front of them trying to respond to the COVID-19 pandemic like everybody else.

Some of this is just what happened to them. They can't open their doors and let as many people in. If you're a physician and you're in a pandemic area, you increase your capacity to make your capacity to be met through more seats. That wasn't offered by any of the testing centers. They're in the business to make money. They're running at half capacity, not trying to double their capacity.

We did hear from Pearson this week that they're going to open some temporary testing centers in some cities, and assuming that that works, they'll do it in more cities. They can't run a business with only half the people taking tests that they need to even break even.

I know this is a long-winded answer, but I would say more not so much that we're at the mercy of these other partners, but this has opened our eyes to looking to new partners that are more on cutting edges of assessment. I hope as we begin our dialogue on what assessments should look like in the future, that we can have some volunteer programs that might want to partner with us to develop some innovative ways to see what's the best way to look at assessment going forward and how do we partner to do it.

I couldn't agree with you more. There will be the days where people laugh probably about how we did exams this year in testing centers, much like we laugh about the exams on paper with scantron sheets that are then collected and sent back in.

I think there's lots of neat stuff that's coming out and we need to be part of those processes to see how they might fit in.

I think this has made us realize, if you're not innovating and thinking about the future, you're going to be susceptible to things like what just happened. We need to begin to have Plan As and Plan Bs for our future assessments. We hope to engage some of you in helping us figure out what would work and what wouldn't work.

***Can you please CC the Program Managers on all communication to the Program Director? They're very busy and may miss important communication, such as the affidavits. We've been burned too many times with deadlines that have been missed with emails only sent to PDs.***

**GW:** We agree. I think the challenge is, we as far as we know, we send everything to both groups. Part of the issue has been some of the systems are blocking some of our communications, and perhaps we would ask if you're not getting things, to call us so that we can track and make sure we have accurate email addresses, and then see if there's a way you can whitelist our communications that come through.

Some of our communications are direct communications from Dr. Larsen or some of her staff. Others are mass emails that go out from ABOG. The third way we communicate is through Constant Contact. Every institution has different firewalls and different things they block. It sounds like we need to do a better job in helping you figure out how to not have our things blocked, and we'll try to do that.

***Will the affidavits be sent to Program Directors?***

**WL:** They're not sent to the Program Director; they'll be posted on the Program Director's ABOG site. All physicians have a personal site, a personal page, on the ABOG login. This will be a task that will be posted to their site. That being said, we will be sending out emails to remind people to go in to do that task, and we will absolutely include the Program Managers on that email so that they can help Program Directors remember to go ahead and complete that task.

***Pearson VUE is scheduling residents at different times. One of my chiefs is scheduled at 4 p.m. Is that expected?***

**GW:** Yes. That was the one thing we were able to negotiate to have a little bit of flexibility on the start times. There are, in many cases, to accommodate us, I think that included expanded the times offering of the exams so there are some at 8 in the morning and some at 4, there are some at other times, I guess.

**WL:** Just to reiterate, if your resident has a start time of let's say 4 p.m. and they would rather take the exam earlier in the day, they should get on the Pearson VUE and see if they can change it. Again, as people are changing locations, start times are becoming available. When I look at the report of what has been changed, there are a number of candidates that are simply changing the time of their examination because they'd like to take it earlier in the day. I can't guarantee that it'll be available, but a lot of those are available at this point with all the location changes.

***Will the Program Managers still be able to access the affidavits?***

**WL:** No, they'll be on the Program Director's portal, but we will send the Program Managers reminders in addition to the Program Directors so that they can help the Program Directors to go ahead and go into their portal and complete them.

They'll be basically completed electronically and very easy for the Program Directors to complete on their portal as a task.

***Who can we speak to? Our PD has changed, but our new PD does not have access?***

**WL:** Please just email us at [exams@abog.org](mailto:exams@abog.org), and we'll be happy to help you with that.

**GW:** I just want to raise one thing again in hope that you can help us as July 16th comes. There will be questions that all candidates will have to answer when they enter a testing center, much like your patients are asked when they come into a clinic site to make sure that people haven't

recently been ill, that they're not symptomatic with symptoms that might be compatible with this, and that they've not recently been exposed to someone with COVID-19. We have been in intense discussions with that about physicians who are caring for women with COVID-19, not being excluded from taking the exam, assuming they were considering a low-risk exposure because the provider was wearing all the PPE necessary and following CDC and institutional infection control policies.

As the time comes closer, we will be sending out reminders to people that when they're asked, "Have you had personal contact with someone with COVID-19", that they can answer that no, that that is for personal contacts that would put you at risk. It's not, "Have you been taking care of patients who may have COVID-19 and have been properly protected and following the precautions so that you would not be exposed." We just want to remind you early about that because we don't people turned away for their exams when they come in. We've been working with Pearson VUE about that question and what it means for healthcare providers and had some success in working with them about how that might be interpreted.

They have decided to rely on us to help educate the candidates that unless they've had a personal exposure without any protection, that they should answer no to that, that they have not had any exposure to patients.

We don't want to cause any alarm or confusion. It's probably going to work out fine. Things may be different by the time we get to July, but that is one issue we continue to work with Pearson on at this point.

**WL:** In fact, George, they literally as this was starting, sent us a more updated copy, and they're doing exactly what we've asked. It's an exception. If you're a provider and you've been exposed but you were wearing appropriate PPE, that is not a reason not to take a test.

All of the new information they're going to be putting out will say that.

**GW:** Thank you all for your attendance and participation today. I want to end with the way we started. We're sorry. We take full responsibility for this, and this is not something that we normally do. This is not how we like to do business. We felt like we did the best we could in the circumstances. Please pass on our apologies and our profound feelings about how this has disrupted what was supposed to be a very important time in their life and your residency at the end of the year, and all of the people who are covering so people can study and all of that, just got changed. We feel a profound sense of responsibility. Please accept our apologies for that. I hope that this doesn't happen again. I hope we spend the rest of this year and into next year looking at innovations and options so that we can be prepared for something like this if it happens again in the future.



Again, thank you for your participation today and everything else you're doing for education of OB GYN residents around the country. Thanks.