TABLE OF CONTENTS
(Click on policy name to advance to policy.
Click on policy name again to return to Table of Contents.)

MANUAL RECORD OF CHANGES

Date	Change	Policy #
10/01/2019	Published original version	All
10/23/2020	Changed max reimbursement deadline to 30 days	5106
07/15/2021	Confidentiality & Conflict of Interest Agreement	5111
06/14/2022	Update to Off-site TDAC Meeting Venue Selection policy	5105
06/14/2022	Update to Travel Reimbursement policy	5106
02/01/2023	Standard Setting policy	5124

5092 Test Development Advisory Committee (TDAC) - Formation

Effective Date: 05/01/1997

Revision Date: 06/15/2021

1. Decision to form a TDAC is based on an identified need and approval by the Board.
2. President assigns responsibility of organizing a new TDAC to appropriate Trustee.
3. Trustee with this responsibility develops a list of potential members and consults with other Trustees and CEO as needed.
4. Other Trustees may recommend additional or alternate TDAC members.
5. Pathology societies may be asked to recommend TDAC members.
6. TDAC Chair(s) make the appointments.
7. Chief Executive Officer calls nominees explaining responsibilities and functions of the TDAC regarding objectives, confidentiality of material, reimbursement for expenses, types of questions to be created, letter of agreement, advisory function, and any other information deemed pertinent. Current contact information is obtained during this time.
8. New member packet, including confidentiality and conflict of interest agreement, is sent to new TDAC member by TDAC coordinator.

5094 TDAC - Structure

Effective Date: 05/01/1997

Revision Date: 06/15/2021

1. At present, there are 15 TDACs: Anatomic Pathology, Blood Banking/Transfusion Medicine, Chemical Pathology, Management and Informatics, Cytopathology, Forensic Pathology, Hematopathology, Clinical Informatics, Medical Microbiology, Molecular Genetic Pathology,

Neuropathology, Pediatric Pathology, Dermatopathology, AP and CP ABPath CertLink. The TDAC for Dermatopathology is a joint and equal function of The American Board of Pathology and the American Board of Dermatology. The TDAC for Molecular Genetic Pathology is a joint function of The American Board of Pathology and the American Board of Medical Genetics and Genomics. The TDAC for Clinical Informatics is a joint function with The American Board of Pathology and The American Board of Preventive Medicine.

2. TDACs shall consist of at least one ABPath Trustee and non-Trustees. The number of non-Trustees is determined by the Chair.

3. There shall be a Chair and, where appropriate, a Vice-Chair appointed by the President. The Chair shall be a Trustee of the Board (except for DP which alternates the Chair position between the two Boards).

4. Non-Trustee members must be ABPath diplomates and should be recognized subject matter experts in the appropriate field with no conflicting interests with any other certifying body. Current TDAC members select a 'short list' of suggested nominees.

5. All appointments of non-Trustees are on a yearly basis and are made prior to the year of service.

6. Terms of non-Trustee members should be staggered to not have more than one member retire from the TDAC each year.

7. Non-Trustee members must discharge all responsibilities to be eligible for reappointment.

8. Maximum period of service is six years unless otherwise approved by the TDAC Chair.

9. Reappointment shall be at the discretion of the Chair of the Committee.

10. The TDAC for Dermatopathology differs from the other TDACs of the ABPath in that its members are appointed with equal representation from the American Board of Pathology and the American Board of Dermatology. The TDAC consists of two members from the Joint Policy Committee for Dermatopathology and a maximum of eight nonmembers. The two members from the Joint Policy Committee for Dermatopathology will be Chair and Vice-Chair, one being from The American Board of Dermatology and the other from The American Board of Pathology. Procedures for appointments and reappointments are the same as for the other TDACs.

11. The TDAC for Molecular Genetic Pathology differs from the other TDACs of the ABPath in that its members are appointed by The American Board of Pathology and The American Board of Medical Genetics and Genomics (ABMGG). The TDAC consists of two members appointed by ABMGG and a maximum of eight members appointed by the ABPath. The Chair of the committee is a Trustee of the ABPath. Procedures for appointments and reappointments are the same as for the other TDACs.

12. The Test Committee for Clinical Informatics (CI) differs from other TDACs of the ABPath. This Committee is composed of members from many subspecialties and meets at the American Board of Preventive Medicine (ABPM) office in Chicago. The ABPath appoints three members and reimburses their expenses. All functions, activities, work product, and responsibilities of this Committee are the purview of the ABPM. The ABPath does not have access to the CI item bank and has no responsibility for examination construction, administration, and standard setting. The ABPath assesses the qualifications of our diplomates who want to become certified in CI, reports our diplomates' CI examination results, and issues certificates to our successful diplomates. All other CI examination and certification functions are the responsibility of the ABPM. The ABPath and the ABPM have agreed upon requirements for those candidates seeking certification by experience (grandfather) through 2022.

5096 TDAC - Chair and Vice Chair

Effective Date: 01/01/1984

Revision Date: 06/15/2021

THE CHAIR OF THE TDAC SHALL:
1. Be appointed by the President of the ABPath.
2. Be a Trustee of the ABPath (exception for TDAC for Dermatopathology, see policy# 5094, para 10).
3. Chair all meetings of the TDAC.
4. In conjunction with the CEO and staff, shall schedule all TDAC meetings, review item bank needs, and determine assignments for TDAC members.
5. Shall be responsible for overseeing the creation of specialty examinations and relevant portions of primary examinations.
6. Consult with the Vice Chair of the TDAC as needed.
7. Have other duties and responsibilities as assigned by the President.

THE VICE CHAIR OF THE TDAC SHALL:
1. Be appointed by the President of the ABPath (exception for TDAC for Dermatopathology, see policy# 5094, para 10).
2. Assure appropriate liaison with the Chair of the TDAC.
3. Assume duties and responsibilities of the Chair when necessary.
4. Have other duties and responsibilities as assigned by the President.

5098 TDAC - Function

Effective Date: 05/01/1977

Revision Date: 06/15/2021

1. The development of new questions for the written and practical examinations (including Continuing Certification) as requested by the chair of the committee. These may be questions for specifically designated categories, or the Chair may request the committee members develop questions in categories of their own choosing and expertise.
2. The preparation and assessment of digital images including graphs, charts, and illustrations with questions for the primary or subspecialty examinations.
3. The preparation and assessment of microscopic slides, virtual slides, and questions for use in the anatomic pathology examination and the subspecialty examinations in cytopathology, dermatopathology, forensic pathology, hematopathology, neuropathology, and pediatric pathology.
4. Review of questions with poor statistical performance used on examinations (TCR).
5. Review of outdated questions, reworking or deleting them.
6. The development and revision of category codes.
7. Review and update the number/distribution of questions in each category on the examination (examination question grid/blueprint).

8. Advise the ABPath on any issue that the TDAC members ask the committee Chair to bring forward for discussion and recommendation for reporting to the Trustees.
9. Other duties as assigned by the Chair of the committee or the President of the Board.

5100 TDAC - Procedures for Appointment of TDAC Members

Effective Date: 07/01/1982

Revision Date: 10/08/2004

1. TDAC membership is reviewed during each TDAC meeting. If a vacancy occurs in the following year, the TDAC will recommend, in rank order, 3 nominees. Appointments are made throughout the year so that new members (member designates) will have time to arrange their schedules to attend meetings and to develop questions.
2. In making the appointments, the Chair of the TDACs makes the final decision.
3. The CEO contacts the nominee to explain TDAC responsibilities and assess the nominee's willingness and ability to serve.
4. The appointee is required to sign a letter of agreement (see Policy #5101).

5101 TDAC - Procedure for Appointment of TDAC Members – Letter of Agreement

Effective Date: 07/01/1982

Revision Date: 09/12/2001

Sample letter is found in S:\ABP_TDAC\TDAC\Letters\Test_Committee. A new letter is developed each year.

5102 TDAC - Procedure for Appointment of TDAC Members - CC Participation

Effective Date: 12/21/2017

Revision Date: 06/15/2021

All new TDAC members must participate in the Continuing Certification (CC) Program, including ABPath CertLink. Staff will enroll new members, if not already enrolled. All CC fees will be waived.

5104 TDAC - Meetings

Effective Date: 07/01/1982

Revision Date: 06/15/2021

1. TDACs meet once a year, unless more or less frequent meetings are approved by the Chair and CEO.
2. TDACs should consider holding at least one virtual meeting every four years.
3. All meetings will be held in the ABPath office or at a place determined by the ABPath.
4. Meetings should be scheduled so that the Board Staff can prepare any needed materials.

5105 TDAC - Off-site TDAC Meeting Venue Selection

Effective Date: 05/06/2019

Revision Date: 06/14/2022

The following guidelines are provided to assist Trustees and ABPath Staff in the selection of off-site venues for TDAC meetings.

Off-site TDAC meetings will only be attended by the CEO and TDAC Coordinator from the ABPath Staff; exceptions must be approved by the CEO.

1. The meetings must be held in the continental U.S. (lower 48 states).

2. The venue must be within 120 miles of a commercial airport and not require extended boat/ferry service.

3. Meeting costs should not exceed the following:
   a. Hotel rooms - $400 per night.
   b. Food and beverage costs should not exceed $250/day/person for off-site TDAC meetings. When a TDAC-sponsored group dinner occurs, the daily meal allowance for that day will be $125. When a TDAC-sponsored group breakfast or lunch occurs, the daily meal allowance for that day will be reduced by $50 or $75 for each group meal respectively.
   c. Group activity is only allowed at off-site TDAC meetings and will not exceed $75 per individual.
   d. Food and beverage costs should not exceed $125/day/person for TDAC meetings conducted in Tampa, FL. When a TDAC-sponsored group dinner occurs, the daily meal allowance for that day will be $50. When a TDAC-sponsored group breakfast or lunch occurs, the daily meal allowance for that day will be reduced by $25 for each group meal.
   e. Bottle of wine - $65
   f. Glass of wine - $12
   g. Bottle of beer - $10
   h. Meeting rooms should be provided at no cost because of food sales.

4. The venue must be able to accommodate the group with:

    a. Secure meeting space with table and chairs for up to 18 participants that can be kept locked for the duration of the meeting.
    b. Beverage station (coffee, tea, water & sodas) during the meetings
    c. Quiet space with solid walls (no accordion-type soft walls)
    d. High-speed internet service
    e. Electrical power outlets with surge protectors

5. Places (and months) where TDACs have met in the past:

<u>Arizona:</u>
Sedona Rouge Hotel – Sedona – February
The Westin La Paloma Resort and Spa – Tucson - March

<u>California:</u>
Carmel Valley Ranch – Carmel – April
Hotel del Coronado – San Diego – January
MacArthur Place – Sonoma – July
Spanish Garden Inn – Santa Barbara – June
Tenaya Lodge, Yosemite National Park – Fish Camp – June
The Riviera Resort – Palm Spring – March

<u>Carolinas:</u>
French Quarter Inn – Charleston, SC – April
Grand Bohemian Hotel – Asheville, NC – April
Harbour View Inn – Charleston, SC - April

<u>Colorado:</u>
Hotel Jerome – Aspen – June

<u>Florida:</u>
Casa Marina – Key West – January/February
Lido Beach Resort – Sarasota – February
Sheraton Sand Key – Sand Key – February
Sundial – Sanibel Island – January

<u>Maine:</u>
Bar Harbor Inn – Bar Harbor – June

<u>Montana:</u>
The Lodge at Whitefish Lake – Whitefish – July

<u>New Mexico:</u>
Inn at Loretto – Santa Fe – August/September
La Posada – Santa Fe – May

<u>New York:</u>
Hilton (Ave. of the Americas) – NY city – October
Mohonk Mountain House – New Paltz – October/June

Washington State:
Skamania Lodge – Columbia River Gorge – September

West Virginia:
The Greenbriar – White Sulphur Springs - October

Wyoming:
Jackson Lake Lodge – Grand Teton National Park – July/August

6. Additional locations for consideration:
   Any major US city
   Wintergreen Resort – Roseland, Virginia
   Hawks Cay Resort – Duck Key, Florida
   Ritz-Carleton - Amelia Island, Florida
   Boothbay Harbor, Maine
   Kiawah Island, South Carolina
   Pictured Rocks National Lakeshore – Munising, Michigan
   Boston, Massachusetts
   New Orleans, Louisiana
   San Francisco, California
   Seattle, Washington
   The Equinox – Vermont
   Monterey, California

5106 TDAC - Travel Reimbursement

Effective Date: 01/01/1984

Revision Date: 06/14/2022

TRAVEL POLICY

1. Economy Coach class airfare will be reimbursed for TDAC members.
2. Members may use ABPath's travel agency for booking travel (refer to Newly Appointed Memo Policy in S:\ABP_TDAC\TDAC\Letters\Test_Committee).
3. Approval for rental car reimbursement must be obtained in advance.
4. The ABPath will issue reimbursement 7-14 days after receipt of the Expense Voucher and receipts. Receipts for any expenses over $25 must be submitted.
5. Expense Voucher should be submitted 10 business days after the meeting but no later than 30 days.

TYPES OF REIMBURSABLE EXPENSES

1. Personal Automobiles - Reimbursement for the use of a personal vehicle for ABPath travel is at the rate currently allowed by the IRS, plus any necessary parking or toll charges incurred. The per-mile rate covers all operating costs, including maintenance, gas, oil, depreciation, and insurance.
2. Commercial Airline Travel - Members make their own arrangements for travel to the meeting site. Prepayment for tickets is the responsibility of the TDAC member. The ABPath will reimburse for

economy-class airfare only. Ticket receipt must accompany the reimbursement request. The ABPath encourages economical practices such as purchasing tickets early and taking advantage of any available discounts.

3. Hotel – Members must pay for their hotel stay upon departure. The ABPath will reimburse hotel nights starting one day before the meeting until the last day of the meeting. If you are unable to get home at a reasonable time after the meeting, the ABPath will pay for one extra night.

4. Gratuities - Reasonable gratuities for baggage handling, taxis, housekeeping, meals, and other usual situations will be reimbursed.

5. Ground Transportation (away meetings) - Reasonable expenses for automobile rentals, buses, taxis, ride-sharing company (e.g., Uber, Lyft), and parking fees will be reimbursed. Approval for rental car reimbursement must be obtained in advance.
   - Always decline the additional insurance coverage offered by the rental car company. Physical damage insurance is usually provided as a benefit of the credit card you use to pay for the rental but check with your credit card company before renting the vehicle.
   - Car rental should only be used when it is an economical alternative to other transportation arrangements. As the driver of a vehicle, your personal auto insurance provides protection for your personal liability in the event of an accident. If you do not have a personal auto policy, or other financial responsibility insurance, you must not rent or operate a motor vehicle while on ABPath business.

6. Ground Transportation (Tampa) – A complimentary Westshore Grand Hotel shuttle service is available to and from the airport. A taxi or ride-share is acceptable only under unusual circumstances. No other form of transportation will be reimbursed.

7. Meals – For TDAC members, meals are reimbursed per the below direction when food is not provided by the ABPath. This includes all meals, snacks, and in-room minibar. When more than one dinner is covered by a single receipt, names of all diners must be noted on the back of the receipt. Unless otherwise allocated on (or on a list accompanying) a meal receipt, the total amount will be divided equally among all diners.
   a. For off-site TDAC meetings meal reimbursement will not exceed $250/day/person. When a TDAC-sponsored group dinner occurs, the daily meal allowance for that day will be $125. When a TDAC-sponsored group breakfast or lunch occurs, the daily meal allowance for that day will be reduced by $50 or $75 for each group meal respectively.
   b. For TDAC meetings conducted in Tampa, FL meal reimbursement will not exceed $125/day/person. When a TDAC-sponsored group dinner occurs, the daily meal allowance for that day will be $50. When a TDAC-sponsored group breakfast or lunch occurs, the daily meal allowance for that day will be reduced by $25 for each group meal.

8. All personal travel and lodging expenses incurred prior to or after a TDAC meeting are the responsibility of the member.

TYPES OF NONREIMBURSABLE EXPENSES

1. Laundry and dry-cleaning expenses are not reimbursed unless there is a travel emergency.
2. Accompanying Guest of a TDAC member – Airfare, meals, and other expenses for accompanying guest are not reimbursed. The guest is welcome to attend group dinners and these meals will be paid for by the ABPath.

Any questions or requests for exceptions to this policy should be discussed with the ABPath office in advance of travel.

AMERICAN BOARD OF PATHOLOGY, INC.
TDAC Manual

An Expense Voucher is available on the TDAC landing site.

5107 Travel Agency

Effective Date:

Revision Date: 01/01/2019

The Board offers, on a voluntary basis, the use of its travel agency to those TDAC members who wish to have their airfares charged directly to the Board. To take advantage of this offer, please complete the online Traveler Profile and submit it through the secure website of Bowen TravelWorld.

- Go to: www.Travelworld1.com and hover the cursor over the box marked "CORPORATE."
- Click on "Traveler Profile and complete as much information as possible.
- Your name must be EXACTLY as it appears on your driver's license or passport, including middle names and/or initials, date of birth, and gender.
- Include information such as seating preference, frequent flyer numbers, phone contacts, and email.
- Click on "SUBMIT." This information will be entered into a profile for your account.

When you wish to arrange air travel, call between 9:00 a.m. and 5:00 p.m. (ET), speak with Ms. Alexandra Treiber-Kawar, or an associate, and identify yourself as a TDAC member of The American Board of Pathology. She may be reached at 1-800-453-8344 or 813-289-8344. An after-hours **emergency** service number is 1-800-304-0642, give the agency the VIT code E3075. If you prefer to use your travel agency or book your own travel, the fare will be promptly reimbursed when submitted on our expense voucher after the meeting.

The Board appreciates all efforts to help reduce travel costs. If there are any problems in arranging your travel, please call Mrs. Clarita Scioscia, the TDAC Coordinator, at 813-286-2444 x 230, or e-mail her at clarita@ABPath.org.

AMERICAN BOARD OF PATHOLOGY, INC.
TDAC Manual

5107.1 Travel Insurance Beneficiary Form

Effective Date:

Revision Date: 01/01/2019

The American Board of Pathology has a travel accident policy to cover all members of the Test Development and Advisory Committees (TDACs) for travel related to TDAC activities. The coverage for all modes of transportation is:

        $100,000   Death and Dismemberment, per member
        $5000   Medical Expense benefit, per member and term of coverage (five days)

Name of Beneficiary: _____

Address of Beneficiary: _____

                                  _____

                                  _____

COMMENTS: _____

_____

_____

        Name of TDAC Member: _____
                                      (Printed or typed)

        Signature of TDAC Member: _____

        Date signed: _____

AMERICAN BOARD OF PATHOLOGY, INC.
TDAC Manual

5108 TDAC - Operating Procedures

Effective Date: 07/01/1982

Revision Date: 06/15/2021

1. Chair of TDAC, with Staff support, composes and sends a memorandum four to seven months prior to a meeting, notifying committee members of their assignment for examination questions and materials to be submitted and the deadline for submission.
2. Deadline for submission of examination materials is generally eight weeks prior to the TDAC meeting.
3. The memorandum includes information as to whether the exam material is to be for the primary examinations, subspecialty examinations, or Continuing Certification, for the written or practical examinations, and will indicate the type of questions required.
4. Questions and associated images, if applicable, are entered online into the TDAC Item Bank. Previously published and copyrighted materials must not be used.
5. The new questions are copied, placed in notebooks, and distributed (mailed) to committee members along with an agenda and box of microscopic slides (where appropriate), about six weeks prior to the meeting. All examination materials sent to members of a TDAC are strictly confidential and must not be duplicated in any way.
6. TDAC members should review the questions, write their edits and comments on the questions, and bring their notebooks and glass slides to the meeting.
7. If the TDAC member is not able to attend the meeting, the notebook of questions (and box of microscopic slides) must be returned to the Board office.
8. When materials are requested for a microscopic section of one of the examinations, the microscopic slides should be sent to the Board office along with the question(s). There should be enough slides submitted so that each TDAC member and the CEO have slides to review in advance of the meeting. Slides are packaged and sent to the TDAC members along with the question notebook.
9. If a slide and question is accepted by the TDAC, a determination will be made if the slide is suitable for virtual microscopy. If the question is determined to remain microscopic with glass slide, the member will be asked to submit the required number of slides for the examination. All slides should be preferably prepared from a single block. The TDAC member should ensure that all slides are high quality and equally representative of the lesion. Members have the option of sending the tissue blocks to the Board to have the remainder of the slides cut. Slides with plastic cover slips will not be accepted.
10. Images associated with a question should be submitted online in the TDAC Item Bank. Up to six images can be uploaded and the format must be JPG with a maximum image size of 5000 x 5000 pixel. At least one low and one high-power, high-resolution image should be submitted for most questions. Generic, public domain images can be used.
11. At the committee meeting, the questions are reviewed, edited, and either accepted or rejected.
12. Every effort should be made to rework questions at the TDAC meeting either during a break, at the end of the meeting, or overnight, if the committee will reconvene the following day. Otherwise, the question will be rejected.

13. The TDAC may be asked to advise the Board about examination content and philosophy. Any changes in general subject content or philosophy regarding certifying examinations and procedures must conform to ABPath standards and must be approved by the Board.

14. If there are items that the ABPath requests advice and council on, they will be included in the assignment mailing. If there are items that the TDAC members wish to have discussed, appropriate notice to the CEO and TDAC Coordinator should be made.

5111 TDAC – Confidentiality and Conflict of Interest Agreement

Effective Date:

Revision Date: 07/15/2021

CONFIDENTIALITY:
It is essential for The American Board of Pathology (ABPath) to maintain and appear to maintain the highest standards of integrity for itself, its appointees to TDACs, its procedures, and its examinations. Accordingly, in consideration of your appointment, the ABPath requires that you agree to meet the following standards of conduct:

1. Agree to hold all matters related to the preparation and selection of questions, visual materials, and microscopic glass slides to be used on ABPath examinations completely confidential, disclosing no information to anyone outside of your TDAC or the ABPath.

2. Assign to ABPath all rights and interest for any questions, visual materials, and microscopic glass slides which you, working alone or with other members of the TDAC, prepare or modify for use on ABPath examinations, and to provide the ABPath any assignments which may be required for the ABPath to perfect its copyright of such materials. This means that images and slides sent to the ABPath will not be returned and that you must not use those images or slides or prepare closely similar clones of ABPath exam questions, for use in subsequent lectures, workshops, teaching, etc.

3. Agree not to participate as an organizer, director, or chairperson, or in an advisory capacity for any pathology review course, review materials, or write questions for in-service examinations during and for two years after completion of your term on the TDAC. This includes contributing to or developing any sort of publication or online resource that is promoted as for Board review. For purposes of this agreement, the designation "Pathology Review Course" is interpreted as meaning any course designed primarily for pathologists or other physicians preparing for an ABPath examination, including a comprehensive lecture series reviewing basic and current concepts in pathology. Not included in this definition are single lectures, seminars, or workshops that are limited to current developments in a subspecialty of pathology.

4. Agree to use the greatest caution and judgment in the use of materials in lectures, seminars, and workshops to avoid giving any impression of an unfair advantage to any participants who might be contemplating ABPath certification in the future. Accordingly, do not submit material that is part of a study set, since this would provide an unfair advantage to candidates who have used the set.

5. Agree to use good judgment when participating in any residency training or fellowship program so as to appropriately discharge your responsibilities, but without creating an appearance of an unfair advantage for the trainees of that residency or fellowship program. For the term of your appointment and two years thereafter, you must not be involved in preparing or administering simulated certification examinations for residents or fellows or otherwise participate in the direct preparation of residents and fellows for the ABPath examinations.

6. Understand that you may list on your résumé or *curriculum vitae* your services as an ABPath TDAC member; however, you are not to include reference to such services in any advertisement in connection with any review or test preparation course for ABPath certification or Continuing Certification examinations or any consulting relationship for any pharmaceutical, biomaterial or pathology product or device company.

CONFLICT OF INTEREST:

TDAC members of the ABPath hold a position of trust in their service to the public, the profession, and the ABPath. TDAC members should avoid relationships which may compromise, or have the appearance of compromising, one's judgment in relationship to the ABPath. This duty prohibits TDAC members from using their positions for personal advantage or for the advantage of another organization whose interests may conflict with the ABPath.

Each TDAC member shall disclose at least annually any interest which may place them in conflict or perceived conflict with ABPath policies or interests, employment, or consulting arrangements; and ownership or other financial interests in certain types of commercial enterprises.

Examples of Potential Conflicts - Financial and Business Relationships

TDAC members must not use their position for individual advantage or the advantage of a relative or business associate. For example, TDAC members must not receive financial benefits, including gifts, loans, grants, honoraria, consultant's, or speaker's fees because of the individual's status as an ABPath TDAC member which might imply ABPath approval or endorsement of a product or business.

Examples of potentially conflicting financial interests, which must be disclosed, include (but are not limited to):

- an interest in any company that furnishes goods or services or is seeking to furnish goods or services to the ABPath;
- an interest in a company or organization whose financial interests may be affected by ABPath policy or actions;
- an interest in any company or organization whose activities compete with the ABPath.

TDAC Member Action in the Event of Conflict of Interest

Each TDAC member will be required to sign and submit to the Chief Executive Officer (CEO) of the ABPath the following annual Disclosure Statement prior to their TDAC meeting. The CEO shall review the Disclosure Statements and may request any TDAC member with a conflict to take the appropriate action (e.g. disclosure, refusal, resignation) in accordance with this Conflict of Interest Policy if the TDAC member has not already indicated that they will do so. Each TDAC member also has a continuing responsibility to disclose conflicts as they arise in a timely manner before or during TDAC meetings which may create a conflict.

Appropriate Action in the Event of a Conflict

Should a TDAC member find themselves in a conflict or potential conflict, they must disclose the circumstances to the ABPath either through the Disclosure Statement or at the time the conflict arises. The TDAC chair may request, or the TDAC member may offer to recuse themselves from discussions pertaining to the issue giving rise to the conflict.

I, _____, hereby acknowledge that, as a TDAC member of The American Board of Pathology ("ABPath"), I occupy a position of trust and that I am expected to act at all times in good faith and in the best interests of the ABPath. I have read the ABPath's Conflict of Interest Policy and support its intent. I declare that if any private interest of mine or of any individual or entity with whom or with which I have a significant relationship conflicts with my duties and responsibilities to the ABPath, I shall voluntarily disclose that conflict.

(Check one of the following.)

☐ I certify that, to the best of my knowledge, no aspect of my current personal or professional circumstances places me in the position of having an interest which is in conflict with any interest of the ABPath or with my obligations to the ABPath.

☐ I disclose the following conflicts: [Use additional pages if space below is insufficient.]

I acknowledge my continuing obligation to report to the CEO of the ABPath promptly and in writing any possible conflict of interest which comes to my attention in the future.

I have read and agree to abide by the intellectual property, confidentiality, and conflict of interest provisions set out above.

_____
(Signature - above)

_____
(Printed name - above)

_____
(Date - above)

5112 TDAC - Staff Assistance

Effective Date: 07/01/1982

Revision Date: 01/13/2010

1. Prior to a TDAC meeting, the ABPath Staff is responsible for making all arrangements (and all cancellations) for lodging, group meals, meeting rooms, and audiovisual equipment at the site chosen for the meeting.
2. The ABPath Staff is responsible for the preparation and mailing of the notebooks and any other materials requested by the Chair of the TDAC.
3. The Chief Executive Officer and TDAC Coordinator or other Staff representative attend the TDAC meetings to edit questions approved by the committee members, record the minutes of the TDAC meeting, and make other arrangements pertaining to the committee's activities and well-being.
4. After a TDAC meeting, each accepted question is edited in the Board office, and moved to the main Item Bank. A copy of each question is kept in a file in the ABPath office for three years.
5. Microscopic examination questions (not virtual microscopy) are not moved to the Item Bank until the required total number of slides has been submitted.

5114 TDAC - Guidelines for Question Writing

Effective Date: 07/01/1982

Revision Date: 06/15/2021

A manual is available to all TDAC members on the TDAC landing site at http://abpath.org/index.php/tdac-landing.

Check the National Board of Medical Examiners (NBME) web site www.nbme.org/about/itemwriting.asp for instructions on effective question writing.

Check the TDAC web page http://abpath.org/index.php/tdac-landing for Question Writing Hints - a PowerPoint presentation by Measurement Research Associates including Goals and Important Measurement Considerations for Developing and Reviewing Multiple-Choice Items.

Email TDAC Coordinator, Clarita, at clarita@abpath.org when you have finished entering all of your questions. She will edit the questions to put them in ABPath format and then print them for the notebooks. Once you have emailed her, do not make any further changes to your questions.

General Guidelines – All Questions

- Questions for all sections of the examination must be multiple-choice, single best answer.
- If you are not going to type your questions directly into the item submission website, you must copy and paste them from Notepad (not Word) or save as plain text format.
- Only use well known abbreviations that have been accepted by the TDAC. These lists are available on the TDAC web page listed above. Otherwise, place abbreviations in parentheses

after the spelled-out term, e.g., diethylstilbestrol (DES). Thereafter the abbreviation may be used alone. If the term is not used again, omit the abbreviation, unless it is essential to the candidate's recognition of the term.

- Avoid the use of imprecise terms such as *may, often, frequently* and absolutes such as *always* and *never.*
- The ABPath does not use the possessive case with eponymic terms, e.g., Down syndrome. Use generic terms instead of eponymic terms whenever possible.
- Do not use fictitious or obscure terms.
- Avoid the use of proprietary names.
- Because reference intervals vary widely, list the reference intervals when units of measure or laboratory values are used. Present data in tabular form when it makes a question easier to read.
- Titers should be expressed as the reciprocal without the 1:, that is, 32, not 1:32. Dilutions and ratios, however, are expressed as 1:__.
- Special characters may be added in the stem or distractors by clicking on the Omega symbol in the heading of each stem/distractor entry box, and selecting the special character needed.
- If you have entered a question that you would like to withdraw, type "DELETE" in the stem box, and it will be deleted by the ABPath Staff.
- When questions are edited, finalized, and moved to the permanent item bank by the ABPath Staff, the answers will automatically be alphabetized. If you do NOT want the answers in alphabetical order, for instance a listing of diagnoses that go from benign to malignant, "uncheck" the "Alphabetize Distractors" button in the lower right-hand corner of the question template.

Question Content

- The content of the question should emphasize:
  - IMPORTANT INFORMATION THAT CANDIDATES SHOULD NEED TO KNOW.
  - Information that is clearly appropriate for the level of the examination, i.e., primary, subspecialty qualification, or continuing certification.
- Avoid controversial topics for questions.
- Do not base questions on one specific article giving one piece of information. Items should be able to be answered from more than one source.

Stem

- State a single, clearly formulated problem as a question "What is the most likely diagnosis for this (location) biopsy/lesion from a #-year-old male/female?"
- Place terms or phrases that are common to all distractors in the stem.
- Short stems with only necessary information are best, omit excessive verbiage, and be sure that the stem is a complete thought.
- Do **not** place information in the stem that will teach or give a clue to the answer, especially grammatical clues.
- The use of "except" questions and other negative stems is **not** permitted.
- All questions should be written in the past tense – "A 23-year-old male/female had . . ."
- Include age and sex on all patient-based questions.
- Use male/female - not man/woman, boy/girl.

- If necessary, refer to race as Black/White/Asian/Hispanic/Native American/country of origin. Race or ethnicity should only be included when appropriately relevant.
- No stems with personal pronouns, e.g., "You are asked" or "In your lab."
- True/false questions are **not** permitted, e.g., "Which statement regarding "X" is true/correct?"
- An ideal question is one that meets the "cover the options" rule, i.e., the candidate should be able to cover the distractors and answer the question just by reading the stem.
- Omit "of the following" unless there could be other correct answers not listed in the choices for that question. e.g., "Which ~~(of the following)~~ protein function is encoded by high-risk HPV genes?"

Distractors

- If possible, answer choices should be approximately the same length and grammatically similar.
- Answer choices must be homogenous, e.g., all IHC stains, all diagnoses, all lab results, etc.
- All must be viable options that should **not** be easily narrowed down to two choices.
- They should **not be** easily groupable by the candidate, e.g., four benign diagnoses and one malignant one.
- "All of the above" or "none of the above" are **not** permitted as answer choices.
- Start in lower case unless the distractor is an independent sentence or begins with a proper name.
- Do not place a period at the end.

General Guidelines - Practical Sections of the Examination

- Image and microscopic slide questions may be simple identification/diagnosis or may be second order questions. Submission of the latter is encouraged.
- Practical question submissions with visual aids must include the anatomical site and diagnosis on the question template.
- Images must follow HIPAA guidelines for patient confidentiality.
- Carefully and fully identify visual aid materials. List the computer-generated submitter accession number from the entered question. This will prevent mix-ups among similar questions and visual aids.
- If needed, label the image with the magnification of photomicrographs, unless the question tests for that information. (see "Adding a Text Box to an image")
- In specially stained preparations, label the image with the stain, unless the question tests for that information. (see Adding a Text Box to an image)
- Visual aids should illustrate the problem with a minimum of extraneous information.
- Visual aids must have clear legend information or be explained in the stem of the question.
- When necessary, indicate the problem illustrated in the visual aid by an arrow or other mark, and note it in the stem. (see Adding an Arrow to an image)
- Visual aids must contain information needed to answer the question.
- Visual aids should not be from a study set, e.g., pictures to which some, but not all, of the candidates might have access.
- Visual aids, like questions, must not use copyrighted material.
- Public domain images (from the internet) may be used, the best being Wikimedia Commons. A tutorial to determine if an image is public domain is available on the TDAC web site.

Images

Accepted images may be used on primary or subspecialty examinations.

- Images are used to illustrate findings that cannot be well or consistently demonstrated on a glass slide.
- Images of a microscopic field should focus on a specific histologic finding.
- Images must be clear, bright, sharp, and in focus.
- Generally, at least a low-power and high-power image should be submitted.

Microscopic Slides

- Microscopic glass slides should be submitted to the ABPath office before the TDAC meeting in sufficient number for each member of the TDAC and the CEO to have a slide for review.
- The question entry accession number must be *written* on the frosted end of the slide. *Please* do **not** affix labels, as the ABPath will use their own labels.
- The slides should be representative of the lesion, and be technically high quality, with adequate fixation, and without folds, holes, or knife marks.
- **Slides with plastic coverslips will not be accepted.**
- The additional slides needed for use on the examination must be available for each question that is accepted at the meeting and be equally diagnostic. Alternatively, blocks can be submitted and ABPath will have the additional slides cut.
- Up to 6 images may be included with microscopic questions and are encouraged for immunohistochemistry. The question should still be **coded as microscopic**, not image.
- The ABPath will reimburse up to $7.00 per glass slide for each accepted case, after you submit the remaining slides and an invoice.

Figures

On some practical questions, figures or illustrations are used. These may be karyotypes, diagrams, graphs, maps, charts, or any appropriate image. Figures should be submitted online with the question.

Electron Micrographs

Electron micrographs (EM) should be submitted as high-resolution digitized images. EM questions should only be submitted if electron microscopy is still used for diagnostic purposes.

Virtual Microscopy

Virtual microscopy (VM) is best used for small biopsies, blood, bone marrow, cytology preparations, and frozen sections for which it would be difficult or impossible to get the number of identical glass slides required for the TDAC and exam. The VM hematology and cytology slides should have enough diagnostic groups/cells and not be too thick. Thick areas that require focusing are difficult to scan and visualize. Submitting two glass slides for each case is requested, but one slide is acceptable in cases when there is only a single slide, i.e. frozen sections. You do not have to submit a slide for each TDAC member since we will review and project the slides at the meeting. Accepted slides will **not** be returned.

- Take all dots/marks off the slides, with the exception of gyn cytology slides. Please clearly indicate cytology slides that should not have markings removed.
- Ideally, tissue should be no larger than 1 cm x 1 cm.
- If the tissue is larger than 1 cm or is a smear with a particular diagnostic area, make a photocopy of the slide at 200% enlargement, and mark on the photocopy the smallest areas possible which should be annotated (cropped).
- For cytology, do **not** submit SurePath slides since they are not monolayer.

Category Codes

Check the TDAC web page http://abpath.org/index.php/tdac-landing for a PDF document of the category codes. You will be able to print it out, or search for key words to help you in coding your questions. To search for a key word, open the document, click on edit-find (Ctrl+F), type in the word(s) to search for, click on next.

The computer will not save your question without a category code being chosen. Please note that there are options for a Primary Category Code Number and Secondary Category Code Number on the item submission site. The primary code should be the most granular/specific code, which is often the diagnosis. Do not use a main heading code (e.g., soft tissue tumors), a technique code (e.g., flow cytometry, special stains, IHC, FISH, etc.), or a specimen type code (e.g., blood smear, FNA, cytospin, etc.). A secondary code is **not** necessary nor desirable, but if the question could fit into two specific areas, you may add a secondary code. Please be thoughtful in your selection(s).

Instructions for Entering Questions

Login to the Data Harbor question entry site

All TDAC questions and images are submitted online. When the assignment for your TDAC meeting was mailed to you, you also received two emails from the TDAC Coordinator with the heading "entering ABPath questions." In them you received your <u>username</u> and <u>password</u> to access the ABPath item submission site: **https://secure.dataharborsolutions.com/abpath/dsp_login.aspx** for entering your questions.

1. Each time that you go to the item submission site listed above, you will enter your username and password in the provided blanks, hit "login," and a new screen will pop up asking for a <u>security code</u>.
2. Each time that you do this a *new* security code will be generated and sent to your email address. The subject line of the email should be "American Board of Pathology - Item Manager." You will have to copy and paste it into the security code blank to gain access to the item submission site.
3. Once logged in, there is a dropdown box of TDAC names. Click on your TDAC and a screen with a header bar and a listing of already submitted questions will appear.
4. In the header bar you may choose to "Create a New Multiple Choice Question" or you may "Search."
5. If you would like to review the questions you have submitted, click on "Search," scroll to the bottom of the screen, and select your name from the dropdown "Author" field. Hit "Enter" and all of your questions will appear.

Instructions for Uploading Images

- JPEG (.jpg) image(s) should be uploaded with the question submitted online.
- The question must first be saved before an image can be uploaded.
- Up to six images can be uploaded for each question.
- Images should be high resolution and up to 5000 pixels wide by 5000 pixels high or less, but no smaller than 1000 pixels wide by 563 pixels high.
- If you are submitting multiple images, upload the gross image first (if applicable) and then progress from low power to high power images.

An easy way to resize images *before* uploading is to:
1. Have your image up on the screen.
2. Right click on it and open with "Paint" (or go to "open" and select Paint).
3. Click on "resize."
4. Change "percentage" to "pixels" by clicking on the button.
5. Change whatever is the largest number (either horizontal or vertical) to 5000 and click OK. The other number will automatically change to the correct size.
6. Save the file and exit.

Trouble Replacing an Image

If you are having trouble replacing an image, the issue is probably with the web browser settings. The "cookies" are remembering your old image. To correct this problem, follow these steps:

1. Close Google Chrome.
2. Re-open Google Chrome.
3. If you continue to have the same problem, click the three dots in the upper right corner of screen key; a dropdown should then appear.
4. Select "Settings" and scroll down to "Privacy and security".
5. Select "Clear browsing data" and ensure "Advanced" is in bold blue letters and underlined in blue. Beneath "Time range" ensure only the following checkboxes are selected:
   - Browsing history
   - Download history
   - Cookies and other site data
   - Cached images and files
6. Click on "Clear data" in the bottom right corner of the pop-up window.
7. Once done, close the web browser, log into the website again and try the image upload/deletion process again.

Instructions for Screen Capture

Prepare Your Screen

1. Make sure the image on your screen is exactly as you would like it to appear.
2. Make sure the image fills your screen, so you have the highest resolution possible.
3. In Word, use View>Read Mode and adjust the zoom so the image fills the screen.
4. In Excel or PowerPoint, adjust the zoom so the image fills the screen.

You can use either Paint or the Snipping Tool to capture an image. If you do not already use Snipping Tool or Paint, you may want to pin them to your task bar, so they are readily accessible.

How to Pin Tools to your Taskbar
    Paint
1. Click the Start button.
2. In the Search field, replace Search programs and files with Paint. Paint will appear in the Search Results.
3. Right click on Paint and click "Pin to Taskbar."

    Snipping Tool
1. Click the Start button.
2. In the Search field, replace Search programs and files with Snip. Snipping Tool will appear in the Search Results.
3. Right click on Snipping Tool and click "Pin to Taskbar."

Screen capture on a PC using Paint
1. With your complete image on the screen, press the "Print Screen" key on your keyboard to copy the screen image into memory. Some keyboards may shorten this to "Prnt Scrn" or "PrntScr." Additionally, some laptop computers may have "Print Screen" sharing a key with another function, meaning that you must hold down the "Fn" key to use the "Print Screen" function.
2. Open Paint (usually found in the "Accessories" folder) and click "Paste" or press "Ctrl + V."
3. You may need to do some editing to eliminate parts of the image that were captured but not needed. Please see below or refer to "Help" in Paint or go to http://windows.microsoft.com/en-us/windows/using-paint#1TC=windows-7.
4. Click "Save As," save as type ".jpg," and select where you want to save the image and give it an appropriate filename.

Screen capture on a PC using Snipping Tool

1. With the image on the screen, open Snipping Tool.
2. Your screen will change to grey, indicating the Snipping Tool is active.
3. Drag the cursor around the area you want to capture.
4. On the Snipping Tool toolbar, click the Copy icon.

Screen capture on a MAC

Press the Apple key + Shift + 3 all at the same time. You will find a capture of the screen on your desktop named "Picture."

<u>**Adding an Arrow to an Image**</u>

1. Open the image in Paint.
2. Select the arrow icon you want to use.
3. In the image, left click and hold the mouse to place and adjust the arrow size.
4. Let go of the mouse and click outside of the arrow box, somewhere in the image.

5. Click on the "Save" icon.

Adding a Text Box to an Image – for Magnification and/or Special Stains

1. Open the image in Paint.
2. Click on the "A" icon (A = text).
3. Place the box in the lower left-hand corner of the image unless it obscures something important. The box can be moved as long as it has the "dotted" edge.
4. Select Calibri as the typeface.
5. The size should be around 36.
6. Type in the magnification/special stain/etc.
7. Select white as the "Second Color."
8. Click on "Opaque."
9. Click on box edge arrows to shrink edges to accommodate text.
10. Click out of the text box somewhere in the image.
11. Click on the "Save" icon.

Select Tool

Use the "Select" tool to select part of an image that you want to change.
1. Open the image in Paint.
2. On the Home tab, in the Image group, click the down arrow under "Select."
3. Do one of the following:
   • To select any square or rectangular part of the picture, click Rectangular selection, and then drag the pointer to select the part of the picture you want to work with.
   • To select any irregularly shaped part of the picture, click Free-form selection, and then drag the pointer to select the part of the picture you want to work with.
   • To select the whole picture, click Select all.
   • To select everything in the picture except for the currently selected area, click Invert selection.
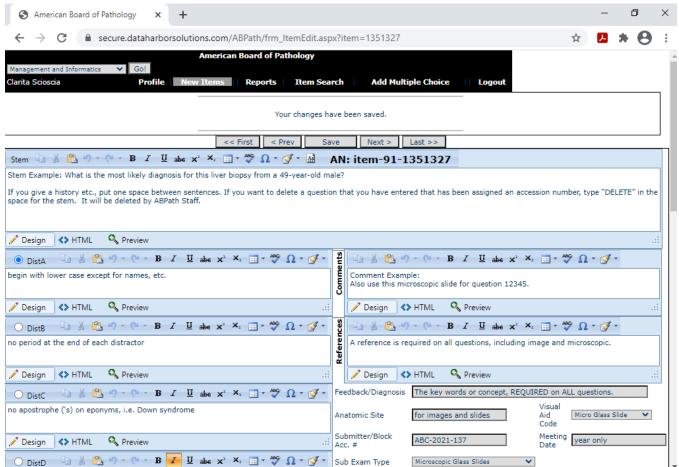   • To delete the selected object, click Delete.

Crop

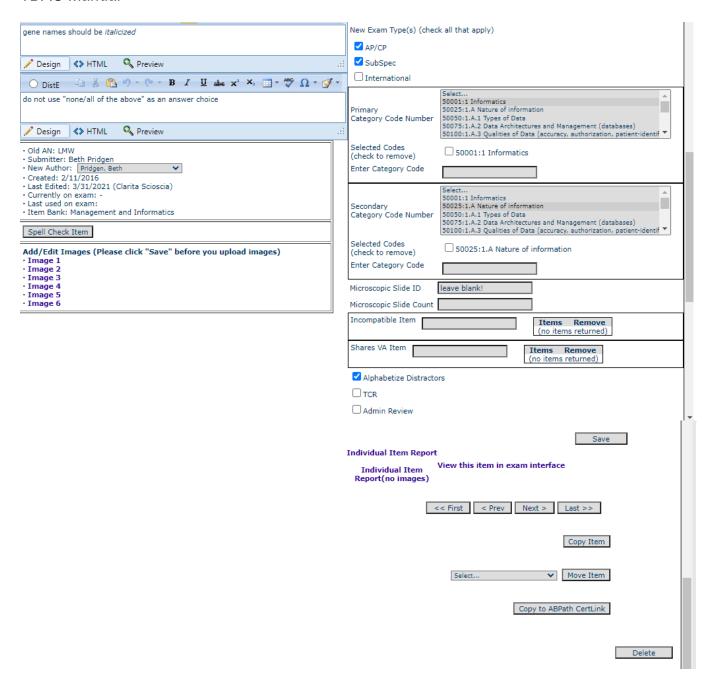Use the "Crop" tool to crop an image, so only the part you select appears.
1. Open the image in Paint.
2. On the Home tab, in the Image group, click the arrow under Select, and then click the kind of selection you want to make.
3. Drag the pointer to select the part of the image you want to save.
4. In the Image group, click "Crop" and everything outside of your selected area will disappear.
5. To save the cropped image as a new file, point to "Save as," and then click the file type for the current image. Saving the cropped image as a new image file prevents overwriting the original image file.
6. In the File name box, type a new file name, and then click "Save."

If you will be creating a figure, graph, etc., we have created "Instructions to Create a .jpg from an Image Screen Capture from programs that do not allow you to save a .jpg image." This is available on the TDAC

AMERICAN BOARD OF PATHOLOGY, INC.
TDAC Manual

webpage http://abpath.org/index.php/tdac-landing. We are limited because our exam center and remote testing site software requires that all images be in .jpg format. If you are unable to convert an image into a .jpg, you may email the image separately to the TDAC Coordinator, not attached to the question but with the corresponding question number, and it will be converted into .jpg format.

An example of the new question template is on the next few pages, along with an explanation for each box.
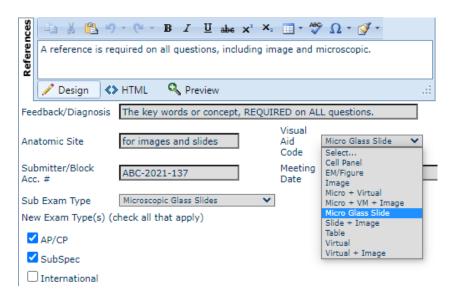
Visual Aid Codes:

- Cell panel = used for blood banking
- EM/Figure = any electron micrograph or line-type image or graph
- Image = any photographic image, including images of microscopic fields
- Micro + Virtual = same question, glass slides can be used on micro or virtual exam
- Micro + Virtual + Image = same question, glass slides/image can be used on micro or virtual exam
- Micro Glass Slide = microscopic glass slides submitted with question

- Slide + Image = microscopic glass slide <u>and</u> JPG image
- Table = any table that is not part of the question stem
- Virtual = micro glass slide to be scanned as virtual (submit 2 slides)
- Virtual + Image = virtual micro glass slide <u>and</u> JPG image

Questions entered into the online ABPath Item Bank should include all the fields required by the system.

Stem - required
The stem of the question is entered in the first box. Icons are available for special emphasis (bold, italics, underline), superscript, subscript, insertion of table templates, find (search function), help, spell check, and special characters' table.

Distractors - required
Distractors A through E are available. Each has icons for special emphasis, super and subscripts, special characters' table, and spell check. The correct answer is indicated by a radio button (circle) next to the letter of the distractor. Three (e.g., low, medium, high) to five answer choices are acceptable.

Comments
Any explanatory comments concerning the question should be entered here. Comments are not required.

References - required
One reference <u>must</u> be included for <u>every</u> question. Acceptable references are ISBN numbers of textbooks (page numbers not required), PubMed ID, DOI, or NLM numbers for articles, and http links for reliable websites.

Feedback/Diagnosis - required
Include on all questions to allow for easier question retrieval and detection of duplicate questions on exams. It should be the key words or concept the candidate would need to review to answer the question correctly. It could be the diagnosis, category, or sometimes a concept. It is not necessarily the answer (for instance if you have a list of age ranges), but rather what knowledge the question is testing.

Anatomic Site
Include for image and microscopic questions.

Visual Aid Code
If applicable, select from Cell Panel, EM/Figure, Image, Micro + Virtual, Micro + VM + Image, Micro Glass Slide, Slide + Image, Table, Virtual, Virtual + Image.

Submitter/Block Acc. #
For microscopic slides, indicate the case and block number for tissue submitted.

Meeting Date
Indicate only the **year** of the meeting in which the question is submitted.

Sub Exam Type- required
Select from Microscopic Glass Slides, Practical with or without Images, Virtual Microscopy, Written/Recall, or Microscopic and Virtual Microscopy.

New Exam Type- required
Select the examination cohort for which this question is suitable. The following choices are available: AP/CP, SubSpec, or International. Do **not** select International.

Category Code Number- required
Select the singular, most granular category code from those listed. For more information, see the "Category Codes" section in this policy.

Microscopic Slide ID – (only visible when "Micro Glass Slide" visual aid is selected)
To be completed by Staff if a question uses a slide that has already been accessioned with a different number.

Microscopic Slide Count – (only visible when "Micro Glass Slide" visual aid is selected)
To be completed by the Staff once all the microscopic slides are received.

Incompatible Item
To be completed by the Staff.

Shares VA Item
If multiple questions share the same visual aid (VA), either microscopic, virtual, or image, the accession number of the other questions(s) should be added here.

Alphabetize Distractors
When questions are edited, finalized, and moved to the permanent item bank by the ABPath staff, the answers will automatically be alphabetized. If you do NOT want the answers in alphabetical order, e.g., a listing of diagnoses that go from benign to malignant, "uncheck" the "alphabetize distractors" box.

TCR
For Staff use only.

Admin Review

For Staff use only.

Save- required

This button must be clicked in order to save the question and image in the Item Bank. It is prudent to click "Save" intermittently when entering information for the question in case there is any interruption in your connection to the item bank. There is a "Save" button at the bottom and the top of the screen. If required fields are missing information, a red alert will pop up at the top of the screen indicating what information is missing and must be entered. If your question saves correctly, you will get a message that says, "Your changes have been saved."

Copy Item

If you want to copy a question, including the reference, category code, images, etc., after saving the original, click on the "Copy Item" button. It will copy the question and have it open for you to edit. You would do this, for instance, if you were writing a second version of a question that uses the same images. You will then be able to edit and "Save" the new question that has been altered without having to upload the images a second time.

Move Item

For Staff use only. This is used to move a question that was not accepted by one test committee but referred to another for consideration.

Copy to ABPath CertLink

For Staff use only. This is used to copy a question when the author has included a "Critique" explaining why the correct answer is correct and each of the distractors is wrong.

Delete

For Staff use only. If you want to have a question deleted, type "DELETE" in the stem box.

5118 TDAC - Examination Coding System

Effective Date: 07/01/1982

Revision Date: 06/26/2015

A coding system has been established by the ABPath for questions used on examinations. A searchable PDF file is available on the TDAC landing site (http://abpath.org/index.php/tdac-landing), that contains the coding system outline, examination coding system, and a detailed listing of categories for use in creating questions for all primary, subspecialty and Continuing Certification examinations.

AMERICAN BOARD OF PATHOLOGY, INC.
TDAC Manual

5120 TDAC - Processing of Microscopic Slides and Images

Effective Date: 01/01/1992

Revision Date: 06/15/2021

A. Receipt of Materials

1. Slides are given to TDAC coordinator.
2. TDAC coordinator makes record of their arrival, and stores on TDAC shelf.
3. Slides from TDAC members are accumulated until all or nearly all are received or until deadline is reached.

B. Processing of Microscopic Slides Prior to TDAC Meeting

1. Chronologic list of cases is prepared.
2. Slides list and slides are given to Slide Librarian by TDAC Coordinator with number of boxes needed for the TDAC meeting.
3. Corresponding microscopic slides are labeled beginning with accession number (usually 7-10 slides per case).
4. Slide Librarian prepares and labels slides and slide boxes to be sent to TDAC members.
5. Extra slides are labeled and kept in holding boxes for use after the TDAC meeting.

C. Processing of Questions Prior to TDAC Meeting

1. TDAC Coordinator performs basic editing of questions.
2. Original questions are printed from the on-line TDAC Item Bank and used to make colored copies for TDAC members and TDAC Coordinator notebooks. The originals are used in CEO's book of questions.
3. A copy of the TDAC notebook micro list is placed in the micro notebook, which is returned to the shelf in the Slide Library.

D. Processing of Microscopic Materials After TDAC Meeting

1. TDAC slide boxes are given to the Slide Librarian to be filed. Unaccepted slides are destroyed or returned to TDAC members.
2. CEO's and TDAC Coordinator's questions are compared. CEO's is the working copy. (Deleted questions are crossed out on micro list.)
3. TDAC Coordinator gives the questions to Editor for editing.
4. Questions are placed in micro notebook in Slide Library.
5. As the required number of slides arrives in the office, TDAC Coordinator pulls and paper clips the appropriate questions, and gives the questions and slides to CEO to review. CEO gives questions and slides to the Slide Librarian who counts, files slides, and enters the number of slides on the question form.
6. Questions are given to the Coordinator of Information Services who enters the slide count into Item Bank and moves the approved questions from the TDAC Item Bank to the main Item Bank. Accession number of questions moved is logged into an Excel tracking sheet and the paper questions are filed.

E. Processing of Images

1. Digital images should be submitted on-line through the TDAC Item Bank with questions prior to the TDAC meeting.
2. After the TDAC, deleted and reworked questions with images are removed from the Item Bank.
3. Questions are delivered to the Editor for editing.

5122 TDAC - Continuing Certification (Formerly MOC) - Introduction

Effective Date: 05/07/2012

Revision Date: 06/15/2021

1. Continuing Certification (CC) is a program designed to ensure that physicians certified by a member board of the American Board of Medical Specialties (ABMS) are committed to maintaining the knowledge and skills that they demonstrated upon their initial certification and are committed to lifelong learning and competency by keeping up with advances in their area of specialty.
2. CC programs are required to comply with ABMS Standards for MOC/CC. There are 4 parts: Part I – Professionalism and Professional Standing; Part II - Lifelong Learning and Self-Assessment; Part III – Assessment of Knowledge, Judgment, and Skills; and Part IV – Improvement in Medical Practice.
3. All diplomates of the ABPath certified in 2006 or later are required to participate in CC to maintain certification. Diplomates must maintain primary certification to maintain subspecialty certification.
4. All new TDAC members are required to participate in CC. For non-time limited diplomates, this does not jeopardize their lifetime certifications.
5. Details regarding Continuing Certification (CC) are available on the ABPath Website at www.abpath.org.

5124 Standard Setting

Effective Date: 02/01/2023
Revision Date:

Introduction to Standard Setting
Standard setting is the process of determining a criterion-reference standard, or cut score, for an examination or a section of an examination. Multiple standard setting methods have been developed by educational measurement researchers. The American Board of Pathology uses a modified-Angoff method for standard setting and the Hofstee method as an alternative method. The goal of the standard setting process is to determine a cut score that best reflects a minimum passing score for the exam in question.

Standard Setting Meeting

When an exam undergoes a standard setting every three to five years, the ABPath TDAC coordinator will contact a group of subject matter experts (SMEs) to convene online through virtual meeting software (e.g. Zoom). Research recommends ten (10) to fifteen (15) panelists per meeting[1]. Prior to the meeting, the psychometrician will prepare an Excel spreadsheet with rows for each item, columns for panelists to place their ratings and notes, and a tab for Hofstee ratings.

Modified-Angoff Training and Scoring

The facilitator will inform the SMEs about the "minimally-competent candidate," in which a candidate has the bare minimum ability needed to be certified. The panelists will be instructed to consider one-hundred (100) such candidates. For each item, the panelists will read the item, then estimate how many of these 100 minimally-competent candidates would answer the item correctly, rounded to the nearest number divisible by 5 (e.g. 60, 65, 70, etc.). After all panelists provide an initial estimate, the facilitator will reveal the item statistics (p-value difficulty and point-biserial discrimination) for each item, at which point the panelists may amend their scores.

Round-Robin Discussion

For the first few items, it is recommended that the facilitator conduct round-robin discussions to ensure that the panelists understand the rating process. The facilitator may also conduct a round-robin discussion on an item after a non-specific interval to gauge the panelists' consistency over time.

Breaks

The facilitator will offer breaks approximately every two hours. It is recommended that breaks are taken immediately after completing a section of items, should the exam comprise multiple sections.

Hofstee Training and Scoring

Following the completion of the modified-Angoff ratings, the facilitator will introduce the Hofstee method to the panelists. The facilitator will explain how the method will use four ratings from each panelist: A1, the minimum acceptable percent-correct cut score based on the items seen during the modified-Angoff ratings; A2, the maximum acceptable percent-correct cut score; B1, the minimum acceptable percent of candidates to fail the exam; and B2, the maximum acceptable percent of candidates to fail the exam. Following the training, the panelists will provide their ratings for each of the four parameters, rounded to the nearest percent divisible by 5.

Submission of Ratings

---

[1] Zieky, M., & Perie, M. (2006). *A Primer on Setting Cut Scores on Tests of Educational Achievement*. Retrieved from https://www.ets.org/Media/Research/pdf/Cut_Scores_Primer.pdf

Following the completion of the Hofstee ratings, each panelist will submit their ratings form to the psychometrician.

Standard Setting Psychometrics
The role of the psychometrician at ABPath is to perform the necessary calibrations and analyses of the exam data and panelist responses, then present the results to the Committee on Exams.

Pre-Calibration
When possible, the psychometrician will combine three years' worth of examinee data into a benchmarking data set. This process provides item difficulty estimates based on a larger span of time than would a single year's responses. The psychometrician will perform a Rasch model analysis on the benchmarking data set to derive logit-form difficulty values (BDIFFs) for all items in the benchmarking set using WINSTEPS, a computer program that uses logistic modeling based on item response theory to estimate item difficulties and person abilities. The psychometrician will then perform a WINSTEPS analysis on the standard setting exam form alone, using the benchmarking BDIFFs for each item on the form.

In preparation for the Hofstee method, the psychometrician will construct an ogive (i.e., cumulative frequency polygon) of the candidates' percent-correct scores from the exam used for the standard setting.

Panelist Rating Analysis
The psychometrician will calculate the mean and standard deviation for each item and for each panelist. The mean of the item means is then calculated. This value will be the primary recommended cut score (i.e. criterion-referenced standard) for the upcoming exam. The standard deviations for both item ratings and panelist ratings will also be calculated. These standard deviations are then added to create the standard error of estimate for the cut score. This standard error will be subtracted from and added to the criterion-referenced standard to create a 68% confidence interval for a "true" recommended cut score if an infinite number of panelists participated in the standard setting.

The psychometrician will analyze panelists ratings for each individual item to check for outliers (i.e., ratings that are two standard deviations above or below the average rating). At the psychometrician's discretion, outlier ratings may be removed on an item-by-item basis to ensure that the overall average rating and standard deviation of each item are not affected by these outliers.

Logit Form
The criterion-referenced standard and its adjusted versions will then be converted to a logit score as determined by the Rasch calibration of the reference exam. After calibrating the exam using WINSTEPS, the psychometrician will convert the percent-correct cut score from the standard setting into a number-correct cut score based on the number of items on the exam form used in the standard setting. The psychometrician will then use the Person Score Table

from the WINSTEPS calibration to determine the logit score that corresponds to the number-correct cut score. Similar logit score conversions will then be found for the 68% confidence interval. Finally, the psychometrician will use the value of the SEM to calculate four more logit values: two SEM above, one SEM above, one SEM below, and two SEM below the recommended cut score.

Hofstee Rating
Following Angoff analysis, the psychometrician will calculate the average values of A1, A2, B1, and B2 from the panelists' Hofstee ratings. The psychometrician will then formulate a line segment with endpoints $(\overline{A1}, \overline{B2})$ and $(\overline{A2}, \overline{B1})$ using the average values of each respective rating. The psychometrician will use this line segment and the ogive created earlier to determine the point at which these lines intersect. If the point of intersection occurs between the average values of A1 and A2, then the value of A corresponding to the intersection point is the Hofstee-recommended percent-correct cut score. Otherwise, the Hofstee-recommended cut score must be adjusted by at least one SEM such that the cut score occurs between the values of A1 and A2.

Cut Score Recommendation
The psychometrician will calculate the average percent-correct cut score and the standard deviation of these cut scores from recent administrations of the exam. At least five years' worth of cut scores should be used. The psychometrician will also calculate one/two standard deviations above/below the average percent-correct cut-score. The psychometrician will create a graph showing the percent-correct cut-scores with lines for the five values calculated earlier.

If the Angoff-recommended cut score is within one standard deviation of the average percent-correct cut score, then the psychometrician will recommend that this cut score's logit-form equivalent be used for future exam administrations. The Hofstee-recommended cut score may instead be recommended if the Angoff-recommended cut score is more than one standard deviation above or below the average cut score. If both recommended cut scores are at least two standard deviations above or below the average cut score, then adjustments to the cut score will also be recommended.

Summary Report
The psychometrician will prepare a summary report of the standard setting session and its results. The report will describe the standard setting process and the standard setting session, present results from the standard setting session and analyses, and provide a recommended cut score for future administrations of the exam.

The summary report will contain key data used to support the recommended cut score. These data include a Wright map from the WINSTEPS output that shows the benchmarked logit-scale difficulty rating for each item and the logit-scale ability score estimate for each candidate based on the benchmarked items. The Wright map will also include lines depicting the location of the recommended cut scores for both the modified-Angoff and Hofstee methods with lines above

and below depicting adjustments based on standard deviation and SEM. The summary report also includes projected fail rates at each recommended cut score, including adjusted cut scores, and a history of fail rates for the exam.

The draft of the summary report will be presented to the CEO and COO of the American Board of Pathology for review. The psychometrician will then edit the summary report based on comments and suggestions made by the CEO and COO, then present a finalized version of the report to deliver to the Committee on Exams.

5200 Miscellaneous Policies – Continuing Medical Education

Effective Date:

Revision Date: 06/15/2021

TDAC members can claim 10 AMA PRA Category 1 CME credits for test writing activities.

The ABPath gratefully acknowledges the U.S. and Canadian Academy of Pathology (USCAP) for sponsoring this CME activity. Prior to the committee meeting, USCAP will ask you to complete a COI disclosure form. After the meeting, USCAP will send you a link to complete an online meeting evaluation. Once submitted, USCAP will issue your CME certificate.

5201 Miscellaneous Policies – Resource for Good Question Writing

Effective Date:

Revision Date: 01/01/2019

The National Board of Medical Examiners (NBME) has an excellent resource for question writing entitled "Constructing Written Test Questions For the Basic and Clinical Sciences." This can be viewed and downloaded from:

<div align="center">

www.nbme.org

</div>

Search on the booklet title. Section II "Writing One-Best-Answer Questions" is the most relevant section, as the booklet is quite lengthy. Their only request is that you maintain their statement of copyright.

There is an excellent brief video tutorial that all TDAC members <u>must</u> view prior to item writing at:

<div align="center">

www.nbme.org/IWTutorial

</div>