

The American Board of Plastic Surgery, Inc.®



HAND SURGERY EXAM FOR INITIAL SUBSPECIALTY CERTIFICATION

2026 BOOKLET OF INFORMATION AND CLINICAL CASE LOG MANUAL

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HAND SURGERY EXAMINATION

Important Dates and Deadlines: 2026

Hand Surgery Exam Registration available	January 2026
HSE Application and Case Log available – <i>to those candidates who achieved primary certification in plastic or general surgery.</i>	January 2026
Deadline – HSE Registration	February 2, 2026
Late Deadline – HSE Registration	February 9, 2026
Deadline – HSE Application and Case Log	March 2, 2026
Late Deadline – HSE Application and Case Log	March 9, 2026
Application Approval Letters available	April 2026
HSE Scheduling Information available	June 2026
HSE Withdrawal date with partial refund	July 4, 2026
Hand Surgery Exam for Subspecialty Certification – Pearson Test Centers	August 4, 2026
Hand Surgery Exam Results available	November 2026
Hand Subspecialty Certificates mailed <i>to those who have completed all requirements of subspecialty certification.</i>	December 2026

ADJUSTED ADMINISTRATION TIMELINE FOR ABPS HAND SURGERY EXAMINATION (HSE)

Timeline for a 2026 candidate registering to take exam immediately following fellowship:

Enter Hand Fellowship	August 2025
Contact ABPS with interest. Input fellowship information to initiate Program Director Recommendation	Sep – Dec 2025
Registration Form available	Jan 2026
HSE Scheduling information available	Jun 2026
Graduate Hand Fellowship	Jul/Aug 2026
Sit for Hand Surgery Exam	Aug 4, 2026
Enter practice, begin Oral Exam (OE) case collection	Aug 2026
Receive HSE results Results valid for 5 years, must remain admissible to OE throughout <i>Candidates are not permitted to advertise any subspecialty status until certificates are issued.</i>	Nov 2026
OE Case Collection Ends	Mar 2027
Sit for Oral Examination	Nov 2027
HSE Application and Case Log available, if OE successful. Applicable hand cases from OE will automatically be included	Jan 2028
Application Approval; subspecialty certification achieved	April 2028

For those who have completed a Hand Fellowship prior to 2026:

You may request the registration form for the HSE provided you have completed an ACGME-accredited Hand Surgery fellowship and have passed the ABPS Written Examination.

The HSE Application and Case Log will be available in January following a successful ABPS Oral Examination result. Candidates may submit the Application and Case Log in the same year they plan to sit for the Hand Surgery Examination. All individual components must be completed to achieve subspecialty certifications.

Please contact the Board office at hand@abplasticsurgery.org with any specific questions regarding your individual situation.

Board Office Policies and Reminders

- Physicians with incomplete materials will be notified via email.
- Contact the Board Office if you need assistance with uploading documents to the Application or Registration Form.
- Payment of Fees is accepted only by credit card – VISA, MasterCard or American Express.
- Notification of change in address, telephone number, email, etc. must be updated on the Board's website under "My Profile" after secure log in.
- Note all Board deadline dates carefully to avoid penalties or exclusion from the examination.
- Stay current on all Board requirements via the Board's website.

If you need assistance, please contact the Board Office at hand@abplasticsurgery.org.

THIS BOOKLET OF INFORMATION SUPERSEDES ALL PREVIOUSLY PUBLISHED BOOKLETS OF INFORMATION OF THE BOARD CONCERNING REQUIREMENTS, POLICIES AND PROCEDURES AND MAY BE MODIFIED AT ANY TIME.

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Mission Statement

The Mission of The American Board of Plastic Surgery, Inc. is to promote safe, ethical, efficacious plastic surgery to the public by maintaining high standards for the education, examination, certification and Continuous Certification of plastic surgeons as specialists and subspecialists.

Purpose

The purpose of this Booklet of Information is to describe the Board's Hand Subspecialty Certification Program. Specifically, to describe registration and application processes, the case collection, and the knowledge-based examination. This Booklet of Information supersedes all previously published information of the Board covering requirements, policies and procedures and may be modified at any time.

Change in Contact Information

Keep your mailing address, telephone number, facsimile, and email current with the Board through your Physician Profile on the Board's website, www.abplasticsurgery.org. Email is the primary source of communication between you and the Board.

All inquiries regarding Hand Subspecialty Certification or Recertification should be addressed to the Board Office at hand@abplasticsurgery.org or 215-587-9322

Hand Surgery Definition

Hand surgery is the special field of medicine that includes the investigation, preservation, and restoration by medical, surgical, and rehabilitative means of all structures of the upper extremity directly affecting the form and function of the hand and wrist.

General Information

In 1982, the American Boards of Orthopaedic Surgery, Plastic Surgery, and Surgery were asked by the American Association for Hand Surgery and the American Society for Surgery of the Hand to consider special recognition of those diplomates of these Boards who had demonstrated special qualifications in hand surgery. An Ad Hoc Committee was formed which included representatives from the three Boards and the two Societies. In 1984, the Ad Hoc Committee was reorganized as a Joint Committee and empowered by the Boards to explore further the feasibility of the certification process. The Joint Committee recommended that the three Boards apply to the American Board of Medical Specialties (ABMS) for authorization to offer a Hand Subspecialty Certificate.

In 2024, the American Board of Surgery became a qualifying Board under The American Board of Plastic Surgery for the Hand Subspecialty Certificate. Beginning in 2025, a candidate or diplomate of ABPS or ABS who seeks Hand Subspecialty Certification must meet the ABPS registration and application requirements, case collection minimums, and successfully complete the knowledge-based examination abiding by the policies set forth in this booklet. After meeting all requirements, including a successful result on the examination, the diplomate will receive a Hand Subspecialty Certificate from the American Board of Plastic Surgery. Primary certification in plastic surgery or general surgery must be achieved before a subspecialty certificate is issued. Note that ABS diplomates are not required to maintain primary certification in general surgery to obtain or maintain the hand subspecialty certificate.

Also, effective 2025, candidates will have the opportunity to sit for the Hand Examination after completion of the ACGME-approved 12-month hand fellowship training, prior to obtaining primary certification. This adjusted timeline allows for candidates to take the cognitive-examination earlier in the certification process but does not necessarily accelerate the achievement of the subspecialty certification based on the 15-month independent practice requirement with application and case collection submission.

The American Board of Plastic Surgery, Inc. is not an educational institution and the certificates it issues are not to be considered degrees. The Hand Subspecialty Certificate does not confer legal privileges or license to practice medicine or the specialty of hand surgery. Standards of certification are clearly distinct from those of licensure. Possession of a Hand Subspecialty Certificate does not indicate total qualifications for practice privileges, nor does it imply exclusion of others not so certified. There is no requirement or necessity for a diplomate of The American Board of Plastic Surgery, Inc. to hold a Hand Subspecialty Certificate to be considered qualified to include hand surgery within the practice of plastic surgery. Under no circumstances should an ABPS diplomate be considered not qualified to practice within an area of a subspecialty solely because of lack of subspecialty certification.

The American Board of Plastic Surgery, Inc. has never been concerned with measures that might gain special privileges or recognition for its diplomates in the practice of hand surgery or of the primary specialty of plastic surgery. It is not the intent, nor has it been the function of the certificate or of the Board, to define requirements for membership on the staff of hospitals or to determine who shall or shall not perform hand surgery. The Board intends the Hand Subspecialty Certificate to represent those surgeons who, by virtue of additional fellowship training, practice characteristics that reflect a major commitment to hand surgery, and contributions to this field have demonstrated qualifications in hand surgery that deserve special recognition.

HAND SURGERY: INITIAL SUBSPECIALTY CERTIFICATION

The Hand Surgery Examination (HSE)

The HSE for Initial Certification is developed and administered by the Joint Committee on Hand Surgery of the American Boards of Orthopaedic Surgery and Plastic Surgery. Effective 2025, the American Board of Surgery is approved by the ABMS as a qualifying board under the American Board of Plastic Surgery – and, therefore, the ABPS issues subspecialty certificates to both ABPS and ABS diplomates.

The examination was first administered in 1989, and subsequent examinations are administered annually. The examination consists of multiple-choice questions designed to evaluate the candidate's cognitive knowledge of clinical hand surgery and the basic science relevant to hand surgery. Examination questions are prepared by, and are at the direction of, The American Board of Plastic Surgery, Inc. and The American Board of Orthopaedic Surgery (hereinafter "Boards"), the sole and exclusive property of the Boards, and said examination questions are protected under the copyright laws of the United States and other countries. The examination items may only be used for such purposes as are designated by the Boards. All other rights are reserved by the Boards.

Hand Surgery Examination Content Categories

- I. Basic Science**
 - A. Anatomy**
 - B. Mechanics**
 - C. Biology/Physiology/Healing**
 - D. Pathology/Tumors**
 - E. Diagnosis**
- II. Bone and Joint**
 - A. Fractures/Dislocations (including non-union/malunion)**
 - B. Arthritis**
 - C. Contractures**
 - D. Wrist Instability**
 - E. Osteonecrosis**
- III. Nerve – Muscle – Tendon**
 - A. Peripheral Nerve**
 - B. Central**
 - C. Brachial Plexus**
 - D. Muscle – Tendon**
- IV. Wound Management**
 - A. Physical Agents**
 - B. Coverage**
 - C. Nailbed/Fingertip**
 - D. Amputations**
- V. Vascular**
 - A. Injury and Repair**
 - B. Reconstruction**
 - C. Ischemia**
 - D. Malformations**
 - E. Replantation**
 - F. Lymphedema**
- VI. Rehabilitation**
 - A. Prosthetics**
 - B. Orthotics**
 - C. Physical Modalities/Therapy**
- VII. Miscellaneous**
 - A. Congenital Anomalies**
 - B. Infection**
 - C. Dystrophy/Pain**
 - D. Ethics and Professionalism**
 - E. Anesthetics**

The ABPS does not provide a study guide for the Hand Surgery Examination.

Requirements for Registration for the Hand Surgery Examination

To register for the Hand Surgery Examination, an examination fee must be submitted via credit card on the ABPS website, and the following statements must be true:

1. Candidates must be Board Eligible with the ABPS or ABS, and successfully complete the ABPS Written Examination or ABS Qualifying Examination, for primary certification and remain eligible throughout the subspecialty certification process.
2. Candidates must currently be in/have completed an ACGME-accredited position in an ACGME-accredited 12-month Hand fellowship.
 - a. Preliminary Fellowship Program Director Recommendation to the Hand Subspecialty Certification Process – This online form is required for any fellow requesting to take the Hand Examination at the conclusion of their 12-month fellowship, prior to achieving primary certification. The Preliminary Sign-Off is required for the candidate to gain access to the Hand Registration Form.

The Registration form will ask to confirm your contact information, training information, as well as upload a copy of a photo ID to reduce identification problems at the testing site.

Passing the Examination is just one step in the process of obtaining subspecialty certification. The requirements for certification have not changed. Candidates must achieve primary board certification by the ABPS or ABS before they can submit a full application, case list, and payment to complete the certification process.

Registration Approval - Notification of Admissibility

Once the Registration for the Hand Subspecialty Certification Examination has been approved, candidates/diplomates will be sent an email notification that the Registration Approval Letter is available for download from the Board's website at www.abplasticsurgery.org. This Registration Approval Letter confirms eligibility to take the examination. Certification is not achieved until the diplomate successfully passes the examination **and** submits an Application with Case Log approved by the Board.

Requirements for Application and Case List Submission

To meet the requirements for Hand Subspecialty Certification, the following provisos and documentation must be completed by the applicant:

1. Must be a diplomate of The American Board of Plastic Surgery or The American Board of Surgery.
2. Must complete a hand surgery fellowship of 12 consecutive months, with a minimum of 48 clinical weeks. Diplomates who entered a fellowship in Hand Surgery July 1, 1999, and thereafter must satisfactorily complete a 12-month fellowship which is accredited by the Accreditation Council for Graduate Medical Education (ACGME). The fellowship may be taken either before or after plastic surgery or general surgery residency, as long as all the requirements of both the residency and fellowship have been fulfilled. A Hand Surgery Operation Log (HSOL) and certificate of completion from the fellowship must be submitted as part of the Hand Application. **Non-ACGME fellowship positions are not accepted.**
3. Must have been in the active practice of hand surgery for *at least 15 months* at the time of certification following the completion of all formal training.

4. Must have a current, valid, full and unrestricted license to practice medicine in a state, territory, or possession of the United States or by a Canadian province. The applicant must not be the current subject of any disciplinary action or sanction including, but not limited to, license revocation, suspension, qualification or other sanction, and must continue to be licensed throughout the certification process.
 - Must submit a photocopy of this license and all registration certificate(s), bearing a valid expiration date with the Application Material with an expiration date valid at the time of submission.
 - Restrictions or sanctions to any medical license must be reported to the Board Office within 60 days of the restriction.
 - Restrictions will delay the diplomate's progress through the certification process.

NOTE: If practicing in a country other than the United States or Canada, a valid unrestricted license, translated into English, from that country is required and must be uploaded online. Foreign licenses will be accepted if the physician's license to practice medicine in a state or territory of the United States or Canada has not been suspended or revoked and has not lapsed or been surrendered in one or more jurisdictions to avoid sanctions by the jurisdiction's licensing authority.

5. Must limit major professional activity to the field of plastic surgery, general surgery, and/or hand surgery.
6. Must maintain an ethical standing in the profession and moral status in the community acceptable to the American Board of Plastic Surgery, Inc. (ABPS) and in conformity with the Code of Ethics of the Board. Moral and ethical practices that do not conform to the Board's Code of Ethics may result in rejection of a registration/application form or in deferral of examination until such matters have been satisfactorily resolved.
7. Must be actively engaged in the practice of hand surgery as indicated by holding full operating privileges in an accredited hospital throughout the certification process.
 - Letters verifying current hospital medical staff privileges in hand surgery and/or plastic surgery must be provided to the Board from all medical staff office(s) of each institution. Start and end dates of privileges must be listed.
 - **Accreditation Certificates from Outpatient Surgical Facilities:** Certificates or currently dated documentation verifying the accreditation or the accreditation in process of all non-hospital surgical facilities, where the diplomate operates, must be provided. **It is expected that all surgery performed under IV sedation or general anesthetic is performed in an accredited center.**
8. Must submit a 15-consecutive-month case list within the two years preceding submission of the Application Material. Hand surgery includes only those procedures performed on the upper extremity directly affecting the form and function of the hand and wrist. **More details and instructions on compiling the case list can be found later in this booklet.**

9. The case list must include at least 125 cases fulfilling at least five of the following nine categories:

<u>CATEGORY</u>	<u># OF CASES</u>
Bone and Joint (distal to the elbow joint)	20
Nerve.....	20
Tendon and Muscle.....	20
Skin and Wound Problems.....	14
Contracture and Joint Stiffness.....	10
Tumor.....	10
Congenital.....	3
Microsurgery Vascular.....	3
Non-operative.....	6
(a limit of 6 non-operative cases will be counted)	

- The numbers indicate the minimum number of cases to qualify as one of the required five categories. If conducting more than one procedure during an operation, only the primary procedure should be counted. Non-operative cases are those which require significant evaluation, such as pain problems. Only six non-operative cases may be counted towards the 125 minimum cases requirement.
- Do not list assistant cases, namely cases billed by the diplomate as an assistant surgeon. Cases performed by a resident and attended by the diplomate, or cases billed as co-surgeon should be included on the case list, and noted as such in the procedure section. Co-surgeon cases must include evaluation, surgical plan and follow-up care of the patient by the diplomate applying for Hand Surgery Certification.
- Do not list voluntary surgical activity in developing countries. Cases performed during such service are not to be included in case compilation because of the lack of continuum of care.
- All operative procedures on the **upper extremity** must be included whether inpatient, outpatient, or office-based surgery during the 15-month reporting period. All patients hospitalized by the diplomate as the admitting physician must also be included, even if the patient is managed non-operatively. All emergency room patients who required an operative note must be included. Do not include inpatient consultations on patients admitted by physicians on other services that did not culminate in a surgical procedure. Office-based surgery that does not require a dictated note does not need to be included. However, the Board suggests that the diplomate err in the direction of inclusion of cases rather than exclusion.

10. It is expected that ABPS and ABS hand surgeons demonstrate contributions and dedication to the discipline of hand surgery through teaching, publications, administration, and research.
11. Must submit an online Application, upload all required documents, and pay the established fees by credit card.
12. Must receive satisfactory Peer Review evaluations as to surgical qualifications by the current **Chief of Staff or Chief of Surgery** in the primary hospital and by **two hand surgeons**, local or regional, who are familiar with the diplomate's current work in hand surgery.
13. Must successfully pass all examinations prescribed by the Joint Committee on Hand Surgery of the American Boards of Orthopaedic Surgery and Plastic Surgery.

Restrictions to Medical Licensure

It is the diplomate's responsibility to report to ABPS, within 60 days, all disciplinary actions to medical licenses from any and all State Medical Licensing Boards. The following sanctions by any and all State Medical Licensing Boards where the diplomate holds a license are considered a restricted license and will delay a diplomate's admissibility to the examination process:

1. Limitation or Restrictions on practice or parts of practice
2. Probation
3. Probation with monitoring
4. Probation with supervision
5. Suspension

Other sanctions to a diplomate's medical license such as reprimands, fines, citations, community service or a stayed suspension must also be reported to the Board and will be considered by the Ethics Committee before a diplomate is admissible to the Hand Surgery Examination.

Policy for Admissibility

The American Board of Medical Specialties (ABMS) approved an eligibility policy which sets limits for attaining board subspecialty certification after post-residency fellowship training effective March 1, 2017. Member boards must limit the period that may lapse between the completion of an ACGME accredited residency training or subspecialty fellowship program and attainment of board subspecialty certification. The ABPS has set this limit to no more than 9 years to include time in practice and case list requirements for admission to the certifying examination. Those who completed subspecialty training prior to January 1, 2018, who have not yet achieved subspecialty certification must do so by January 1, 2027.

Certificates

A diplomate who has successfully completed the examination, and met all the requirements, will receive a Hand Subspecialty Certificate issued by the Board. **Certificates issued by the Board are valid for 5 years from the date of issuance. Printed certificates will include the issue date only – with no expiration date. Certification status is solely reported on the ABPS website for the public and credentialers.**

Continuous Certification Program

- Participation in the ABPS Continuous Certification Program is required to support the validity of the subspecialty certificate.
- Certificates will not be issued unless all requirements are current for participation in the ABPS Continuous Certification Program.
- ABS Diplomates:
 - Diplomates with ABS certification are not required to maintain their primary certificate with ABS.
 - If an ABS Diplomate is also participating in ABS Continuous Certification, ABPS will:
 1. Accept Professionalism review from ABS
 2. Accept up to 100 CME credits from ABS. At least 25 CME/cycle must be in Hand
 3. Accept Practice Improvement credit from ABS
 - ABS Hand Diplomates must participate in the ABPS Hand Annual Self-assessment
- Expiration of the primary plastic surgery certificate automatically causes expiration of the HSC.
 - Diplomates with an expired primary plastic surgery certificate will not be listed as holding the HSC until all Continuous Certification requirements are met.

Clinical Case Log Requirements

Note: These directions will be updated on the website as needed.

Technical Assistance is available.

Please contact Web Data Solutions at ABPS@dataharborsolutions.com or 312-944-0642 Monday-Friday: 9:00 a.m. - 5:00 p.m. Central Time

System Requirements:

In order to use the Clinical Case Log web-based tool you will need a computer with high-speed internet access. The recommended web browser is Google Chrome.

Board website: <https://www.abplasticsurgery.org>

Step 1 –Accessing the ABPS Clinical Case Log

Please email hand@abplasticsurgery.org to request Hand Surgery information.

- Your username and password have been preset by the Board. Your username is your six-digit Board ID number and your password is your last name with the first letter capitalized (e.g. Smith). If you customized your login information, it remains unchanged.

Access the Clinical Case Log link via your Hand tab on the Board's website.

Step 2 – Setting Up Your Profile

- Please read the Terms and Conditions carefully. If you agree to them, click the “Yes” button at the bottom of the page.

- There is a Business Associate Agreement between yourself and the Board for the confidentiality of the entered data.
- You must enter the state that you completed your plastic surgery training. ABS diplomates should enter the state that general surgery training was completed.
- You must indicate the start date of your 15-month hand surgery case list. All hand cases entered for the ABPS Oral Examination during the 15-month time frame specified will appear on the hand case list.
- Click the link “Click here to add a facility...” to add facilities at which you have surgical privileges. You will need to complete:
 - **Facility Name** - Use abbreviations if the name of facility is unusually long as this can cause printing problems in the statistics sheet.
 - **Facility Type** (i.e. Acute Care, Ambulatory Care, etc.) Note: A designation of Ambulatory Care will dictate an “outpatient” type for all cases listed at those facilities.
 - **Facility Zip Code**
 - **Admission Type(s)**
 - **Level of credentialing at facility:** Active, Admitting, Consultant, Attending, Courtesy or Other
 - **Surgery Center Accreditation Type (if applicable)**
 - **Surgery Center Accreditation Program (if applicable):** 1. QuadA; 2. AAAHC; 3. The Joint Commission; 4. Medicare Certification; 5. State Licensure; 6. Other: _____
 - Explanation for non-accredited surgical facilities stating reason for lack of accreditation (if applicable)
 - Click the Add Facility button. Repeat the above process to add more facilities.

Step 3 – Collecting Case Data

- Click on “Click here to add a case...”
- All required fields will appear with a red asterisk. This includes the first name and last name (initials) of patient. Complete all required fields - **YOU CANNOT FINALIZE YOUR CASE LIST UNLESS ALL REQUIRED FIELDS ARE COMPLETE.**

Patient Information

- Enter **patient name**. Only patient initials (first and last) will be displayed to the Board and on the printed case list. For added confidentiality, use only patient initials.
- Enter a **patient number** in the medical record # field. Use the same patient number for all procedures for the same patient during the case collection time regardless of the location (e.g. office, outpatient facility, hospital) to allow for cross-referencing. Do not use full social security numbers to protect patient confidentiality. Please follow your institution’s guidelines for patient confidentiality and HIPAA and State compliance requirements.
- Enter **patient date of birth**.
- Enter **patient gender**.

Facility and Procedure Information

- Enter **Hospital/Facility Name**. Click the “Edit Facility” link to add/edit the name of a facility.
- Enter the **admission status as inpatient or outpatient**. An inpatient admission is defined as an overnight stay of more than one night. An outpatient admission is defined as 23 hours or less.
- Enter the **procedure date**. Multiple procedures on the same patient, on the same date, should be entered as one case. Use the date of admission for non-operative inpatient cases.

- **Enter duration of procedure.** Duration is defined as skin-to-skin excluding anesthesia time. Approximate duration of the surgical procedure should be entered in hours and minutes.
- **Enter the Anesthesia Type.** The type of anesthesia used must be identified for each case: 1. Local (including nerve block), 2. IV Sedation 3. General Anesthesia or 4. None.
- **Enter the diagnosis description as free text.** Providing complete diagnosis information is essential. From the operative notes, give an accurate written description of the diagnosis and the operative procedure(s). **ICD-9 codes are not required.**
- **Enter the procedure description as free text.** Comments about adverse events or death of a patient may also be added here. Do not use CPT codes in place of the written description of the procedure(s). If the case was non-operative, include a discharge summary diagnosis. A text box is also provided for adverse events.

CPT Codes

- **Add a CPT code** – Enter the code in the CPT Code box **before** selecting the anatomy and classification that corresponds to the CPT code entered.
- **The Board prefers that you list only one Anatomy and Category per CPT code.**
- **Bilateral Procedures should be entered only once using one CPT code with a -50 modifier.**
- Once all information for the CPT code has been entered, click “Save Record.” All the fields will clear and your code will appear under “CPT Code (Description).” The automatic CPT code descriptors appear when a CPT code is entered. CPT codes are the copyright of the American Medical Association (AMA).
- There will be a **pencil icon** to the right of the code so that you can view information entered for that code and edit if necessary. Be sure to click “Save Record” again if edits are made.
- A **garbage can icon** to the right of the code allows a code to be deleted if needed.
- You may enter in another code after clicking “Save Record.”
- **Include all CPT codes plus modifiers used for insurance billing purposes.** CPT codes starting with 99 (evaluation and management codes for office visits, consultations, etc.) are not required. However, for non-surgical admissions to the hospital, 99 CPT codes should be used.
- A CPT code frequency field is included so that a CPT code may be entered once with the number of times that procedure was performed (e.g. X2, X3, etc. for multiple skin grafting procedures).

No one is exempt from CPT coding. Those practicing in Managed Care Practices, Military, Veterans Administration, Kaiser Permanente, Shriners' Hospitals, Canada and foreign countries must also include CPT codes for all cases.

Outcomes and Adverse Events

- If there were adverse events, indicate such in the Outcomes question. Once you click “Adverse Events”, additional fields will appear on the screen allowing you to describe the adverse events. A brief description for every adverse event is required in the text box provided.
- Severity of complications are **reported on your case list** as follows:

Major Adverse Events	Moderate Adverse Events	Minor Adverse Events
Unplanned admission	Unplanned Re-op w/o sedation	Seroma requiring drainage
MI, DVT, CVA, PE	Dressing changes > 6 weeks	Hematoma requiring drainage

Unplanned Re-op w/sedation	Infection - IV antibiotics as outpt.	Wound Infection requiring drainage
Infection - IV antibiotic as inpatient	Unplanned consult w/other specialist	PO antibiotics
Adverse drug event		Dressing changes less than 6 weeks
Unplanned ED visit		Increased number of office visits
Flap loss		
Prolonged hospital stay		

Save your Case

- You can click any of the following buttons located at the bottom of the screen to save your data:
 - ❖ **Prev** – Saves any changes and directs user to the previous case on the list.
 - ❖ **Save Case** – Saves any changes and current case remains on screen.
 - ❖ **New Case** – Saves any changes and allows user to add another case.
 - ❖ **Next** – Saves any changes and directs user to the next case on the list.

We recommend that you log out whenever you leave the site to prevent unauthorized users from accessing your Clinical Case Log data.

Step 4 – Editing/Verifying Case Data

The Clinical Case Log provides several ways for you to filter and sort your case list to ease the task of finding, verifying, and editing data. From the Case Log screen, you will see all your cases in a list. Cases will be listed as those with incomplete data, and cases that are complete. To complete incomplete cases, click on the pencil icon next to the case which will take you back to that case form. You can easily identify the missing fields by the red, bold text.

- Sorting the List – Sort the list by any of the columns displayed simply by clicking on the column heading. Clicking once will sort the list in ascending order. Clicking again will sort the list in descending order.
- Filtering Your Case List – Use the “All Facilities” drop- down box and the “All Cases” drop-down box to filter your list by these fields.
- Editing Your Data – Click on the pencil icon to open the case form and edit the data. Click on the buttons at the bottom of the screen to save the data.
- Deleting a Case – Click the trash can icon at the right side of a case from the case log to delete a case.
- An hourglass icon in the far-right column indicates that case data are incomplete.

Step 5 – Finalizing Your Case List

Once you have verified all your case data and assured its accuracy, you are now ready to finalize your case list. From the case log screen, click the “**Finalize Case List**” link at the bottom of the page. Once you finalize your case list, you will no longer be able to edit your case information. If you discover an error in your case list after you have finalized, please contact the Board Office at hand@abplasticsurgery.org.

Please note, the online Application, Application Fee and all required documents uploaded as PDF files must also be finalized on the Board’s website, www.abplasticsurgery.org. See Application Cover letter for details.

Step 6 – Saving a Copy of Your Case List (Recommended)

You do not need to submit a hard copy of your case list to the Board Office. However, the Board recommends that diplomates retain an electronic copy of their list with the statistics page for future reference for society membership or other purposes. The “Print Cases” Screen appears after clicking “Finalize Case List” which allows you to save a copy to your computer.

Clinical Case Log: Frequently Asked Questions

Q.1 Why am I receiving a message when trying to enter a new case that the surgery date is not valid?

A.1 You must first enter your case collection start date for your 15-month case list. The case collection period must be at maximum 15 months within the two years preceding the application deadline date. Surgery dates outside of this range will not be accepted during the data entry process.

Q.2 What if there is information that I feel is pertinent to the case but there isn't a place to record it on the case screen?

A.2 If a case needs some added explanation, the diagnosis and procedure description sections are free text areas where additional information can be provided. A text box is also provided for additional descriptions of adverse events. For example, infections later than six weeks occurred.

Q.3 What do the hourglass and red checkmark notations in the status column mean?

A.3 The hourglass icon indicates that a required field has not been completed for that case. Click the pencil icon to the left of the case number to open the form. The incomplete data fields will be identified by red, bold text. CPT code Anatomy & Category Classifications are often overlooked. All required data must be entered to finalize the case list. When a case is complete, the status column on the case log will update to a red checkmark.

Q.4 Should all modifiers be entered manually into the “Modifiers” field in the CPT coding tool?

A.4 Yes. The CPT code box will only accept the 5-digit number. Tab to the “modifiers” field to key in the -50 or -51 modifier manually.

Q.5 Does the “number of times” field need to be completed with the value of “2” for bilateral procedures appended with the -50 modifier?

A.5 If a bilateral modifier is used, then do not enter a “2” in the quantity field. That is for multiple procedures on the same area. (e.g. multiple wound closures in a trauma case where many lacerations were located anatomically in the same area.)

Q.6 A billing office handles my CPT coding – should cases be coded how I think they should be coded, or in the actual manner that the billing office coded the case?

A.6 All CPT codes should be entered exactly as they were billed. It is assumed that how the cases were billed with CPT coding was the same as the surgeon would have coded. Whether a surgeon’s billing is outsourced or completed in-house, the surgeon’s provider number is used and therefore the surgeon is ultimately responsible for the manner in which the billing was submitted to the third-party payers.

Q.7 Since the case list will not print without required fields entered, what is the proper procedure for recently performed cases in regard to the 4-6 wk. adverse events field or the 30-day mortality?

A.7 Enter the Adverse Events as known at the time of the submission. The Board understands this time constraint.

Q.8 How do I apply the Anatomy and Category Classifications in the CPT coding?

A.8 Click on the pencil icon next to the CPT code and go to the boxes below to select an anatomy and category classification. They are not automatically selected for you. Be sure to click “Save record” to save the classification selections.

Q.9 There is a “non-operative” category. What type of case should be entered for that category?

A.9 Non-operative cases are those which require significant evaluation, such as pain problems. Burns managed without operation is an example of a non-operative category.

Q.10 When trying to enter a CPT code, I get a “not valid” message even though it is a valid code.

A.10 If this occurs, try putting in a similar code and note the correct code in the text area of the procedure description.

Q.11 Why do the stats sheets and case lists for certain facilities take so long to appear on the screen?

A.11 The compilation of the lists and stats sheet for printing and saving demands a great deal of processor time. Allow a few minutes for those reports to load on your screen.

Q.12 How do I list inpatient non-surgical admissions, for example, cellulitis?

A.12 Enter the day of admission or discharge as the “operation date.” You can use Evaluation and Management Codes (99...) as the CPT code for that type of case.

Q.13 Where do I get answers to my questions about data entry, the Clinical Case Log program, Board requirements or printing, etc.?

A.13 1. Take time to review the Board’s materials – most answers are there. 2. Instructions and Requirements are accessible in the Clinical Case Log Menu. 3. Email questions to Web Data Solutions (WDS) at ABPS@dataharborsolutions.com. 4. Email the Board at hand@abplasticsurgery.org. 5. Call Web Data Solutions technical support at 312-944-0642. 6. Call the Board Office at 215-587-9322.

Q.15 I have two procedures for one case, and they are classified differently. Will both procedures count towards the minimum anatomy and category classifications?

A.15 Multiple procedures within a case will be counted toward satisfying the one (1) case minimum for anatomy and category classification requirements. Complex operative management represents a more substantial surgical operative experience than a less complex single task surgery. A complex injury is defined as those cases which involve several of the nine categories in addition to the skin/wound category. Therefore, in an injury involving the volar wrist, multiple tendons and the median nerve would ‘count’ as two categories, tendon and nerve – but not additionally for the skin closure. Further, no single operative case would be allowed to count for more than three categories towards the requirement of 125 cases.

For example, the management of a complex mutilating injury involving repair of muscle, tendon, nerve, vascular injury, and skin would count for tendon and muscle, nerve, and microsurgery vascular, but not for the skin. This example clearly indicates a more complex operative experience than a simple, single task surgery. Those cases in which the involvement of two categories is part of a single focus surgery, such as the use of a tendon in ligament reconstruction and tendon interposition of the basal joint, would continue to count as only one case.

Q.16 The ASSH is requesting the “cover sheet” from my case list for membership application requirements. Where do I find this document?

A.16 The statistics page generated by the Clinical Case Log after finalization of your case list is sufficient for this requirement. The statistics page is accessible to print or save by clicking the “View Statistics” link from the finalized case list screen.

Taking the Hand Surgery Examination

Rules Governing Admissibility to the Examination

Candidates are admissible to the examination only when they have satisfactorily completed the ABPS Written Examination and completed the Registration materials. No candidate will be admitted to the examination until the Board has determined that the specified requirements have been met, reviewed all supporting credentials and approved the registration form.

Each candidate will be admissible to the examination for five calendar years. The American Board of Plastic Surgery, Inc. expects that most candidates who apply for certification will be successful. Those who are unsuccessful on the first experience with the process are encouraged to continue to seek certification.

Candidates who do not successfully complete the examination during the five-year period will no longer be admissible to the HSE process. Candidates must then reapply for admission to the examination with payment of established fees. The candidate must remain admissible to the Oral Examination if they have not yet passed. If the Registration Material for readmission is approved, the diplomate will then be offered four additional examination opportunities in the following four consecutive years up to the nine-year limit required to achieve subspecialty certification.

The American Board of Plastic Surgery, Inc., may deny a diplomate the privilege of taking an examination, or may refuse issuance of a certificate, if it is found by additional disclosures or a recent change in status that the diplomate no longer meets the general or professional requirements.

Announcement Information

Candidates and Diplomates must express their interest in taking the hand examination by emailing hand@abplasticsurgery.org.

Candidates who are already admissible to the Hand Surgery Certification process will be sent an email notification annually, throughout their period of admissibility, once the Registration Form is available for online submission.

Candidates must signify their intent to take the examination by completing and finalizing the Registration Form, submitting the Examination Fee (credit card payment) and all other required materials by the deadline date.

If the Registration Form, Examination Fee, and other required materials are not received by the deadline date, the candidate will not be accepted for admission to that year's Hand Surgery Certification Examination.

Scheduling Information

Upon receipt and approval of all required Registration Form materials, the candidate will be scheduled for the examination. Diplomates will receive Scheduling Information approximately eight weeks before the examination. Scheduling will occur directly with Pearson Professional Centers.

Contact the Board Office immediately if the name on the Scheduling Information is not an EXACT match to that listed on the photographic identification. The only acceptable difference would be the presence of a middle name, middle initial or suffix on one document and its absence on the other.

Photographic identification is required for admittance to the test center.

Scheduling a Test Center Appointment

Contact Pearson Professional Centers immediately once the Scheduling Information is available to schedule an appointment. Delay in scheduling an appointment may result in the inability to schedule at the diplomate's preferred location. Confirmation will be sent by email. When calling, a Pearson representative will ask for information from the Scheduling Permit and provide details regarding the test centers and location specified by the candidate. Those who require special accommodation, and have received Board approval, must make a test appointment by calling the telephone number on the Scheduling Permit.

Examination Schedule

The Computer Based Test will consist of the following format:

- Total testing time is approximately 4 hours
- 15-minute optional tutorial
- 175 multiple-choice questions formatted in four blocks of approximately 44 questions
- Blocks of 60-minute time intervals
- 15-minute optional break
- Registration time will vary

Examination Day Requirements

Certain identification requirements are necessary for examination day. Pearson Vue Test Centers will provide diplomates with exact requirements prior to scheduling.

Notify the Board Office immediately if arrival to the test center will be delayed and the Board Office will contact Pearson. Those who are more than 30 minutes late may not be admitted to the examination.

You are not permitted to bring any notes, textbooks, clipboards, pocketbooks, electronic devices or other reference materials into the test center. Cell phones must be turned off and stored in your car or locker. Scratch paper is not permitted. Copying, by any means, of all or any part of such examination items or the unauthorized use in any way whatsoever of said examination items is strictly prohibited.

Withdrawal from Examination

Those who wish to withdraw from the examination must submit written notification to the Board Office at least 30 calendar days before the first date of the examination. The examination fee will be refunded less a processing charge. Those who withdraw from the examination after this date or who fail to appear for the examination will forfeit the entire fee.

Cancellation of Examination

Should The American Board of Orthopaedic Surgery, Inc. and The American Board of Plastic Surgery, Inc., in their sole discretion, cancel the Hand Surgery Certification Examination, or as a result of events beyond its control be unable to administer the Hand Surgery Certification Examination at the appointed date, time and location; or should the Boards fail to conclude a candidate's Hand Surgery Certification Examination, the Board is not responsible for any expense the candidate may have incurred in connection with the canceled Hand Surgery Certification Examination, nor for any expense the candidate may incur for any substitute Hand Surgery Certification Examination.

Examination Scoring

The Examination is scored and analyzed by the American Board of Orthopaedic Surgery. The Board is confident that the scoring is done with absolute accuracy.

Results and Policies

Results

The results of the examination will be posted to the Board's website in November. The time period between administration of the examination and notification of results is necessary to allow for extensive analysis and to assure that individual results are reliable and accurate. The Board will provide a Result Letter and Performance Report.

Results of the examination will not be reported to the public until a subspecialty certificate is issued. The Results are valid up to five years, to allow the candidate time to achieve primary certification, collect cases, and meet the 15-month practice requirement of the hand certification. Until primary certification is achieved, and the subspecialty certificate is issued, the candidate may NOT advertise hand subspecialty certification. Result letters will be available with secure log in to the Board's website.

Test takers will pass or fail on the strength of their performance on the examination. The score on the examination will be determined by the total number of alternatives answered correctly. Therefore, you are encouraged to answer all items.

Pass

If a candidate/diplomate passes the Hand Surgery Certification Examination, he/she will be informed in writing. An email notification will also be sent once the Result Letters and Performance Reports are posted to the individual Physician Profiles on the Board's website accessible with secure log in. Candidates are not to advertise as subspecialty certified until they achieve primary certification, **and** the hand surgery subspecialty certificate is issued. Refer to the Advertising section in this booklet.

Fail

If a candidate/diplomate fails the Hand Certification Examination, he/she will be informed in writing. A diplomate who has received a failing grade result must repeat the entire Hand Surgery Certification Examination.

Reporting to ABMS and Specialty Societies

The Board supplies basic identifying data on diplomates who are successful in obtaining Hand Subspecialty Certification and Recertification to the American Board of Medical Specialties (ABMS) for its Directory. The individual's biographic entry in the Official ABMS Directory of Board-Certified Medical Specialists will show Hand Surgery Certification and Recertification as well as Plastic Surgery Certification or ABS General Surgery Certification, if applicable.

The Board also notifies the success of diplomates on the Hand Surgery Examinations to the American Society of Plastic Surgeons, the American Association for Hand Surgery (AAHS) and the American Society for Surgery of the Hand (ASSH). Diplomates should notify the Board Office in advance if they do not wish to be included on the notification lists. Diplomates will have their biographic listings retained in the directory for Hand Surgery only if they have acquired Hand Surgery Recertification prior to the expiration of the Hand Surgery Certificate.

Special Situations – Dispute Resolution and Appeals Policy

The Board has established a policy relative to resolution of questions or disagreements regarding its decisions on admissibility, the form, content, administration or results of the examination and the revocation of certificates. If a diplomate has a concern in any of these areas, it should be expressed in writing to the Board Office. A copy of the Dispute Resolution and Appeals Policy, which is available on the Board's website, will be sent to that individual.

Diplomates with Disabilities

The American Board of Plastic Surgery, Inc. has established a policy regarding examination of diplomates with disabilities. If a diplomate is requesting accommodation based on a disability, the request should be expressed in writing to the Board Office at the time they submit the Application Material. A copy of the Policy for Examination of Diplomates with Disabilities is available on the Board's website. The American Board of Plastic Surgery, Inc. complies with the Americans with Disabilities Act (ADA) and will provide reasonable accommodations to diplomates with proven disabilities. It is expected that pre-existing disabilities were identified by the candidate for previous Board examinations. The required documentation previously approved by the Board for an identified disability accommodation will usually be sufficient for the Hand Surgery Examination.

Irregularities

The validity of scores on the examination is protected by every means available. The Board will not report a score which it has determined to be invalid, i.e., which does not represent a reasonable assessment of the diplomate's knowledge or competence sampled by the examination. The performance of all diplomates is monitored and may be analyzed for the purpose of detecting invalid scores.

Pearson test center proctors supervise the examination to ensure that the examination is properly conducted. If evidence by observation or analysis suggests that a diplomate's scores may be invalid because of irregular behavior, the Board will withhold those scores pending further investigation and the affected diplomate will be notified. Examples of irregularities affecting the validity of scores would include (but are not limited to) the following: 1) using notes; 2) sharing information or discussing the examination in progress; 3) copying answers from another diplomate; 4) permitting one's answers to be copied; or 5) unauthorized possession, reproduction, or disclosure of examination questions or answers or other specific information regarding the content of the examination before, during, or after the examination. In such circumstances, upon analysis of all available information, the Board will make a determination as to the validity of the scores in question. If the Board determines that the scores are invalid, it will not release them, and notification of that determination may be made to legitimately interested third parties.

Diplomates or other persons who are directly implicated in an irregularity are subject to additional sanctions. For example, the Board may bar the persons permanently from all future examinations, terminate a diplomate's participation in an ongoing examination, invalidate the results of the diplomate's examination, withhold or revoke a certificate or take other appropriate action. Diplomates or other persons subject to additional sanctions will be provided with a written notice of the charges and an opportunity to respond to such charges in accordance with the reconsideration and appeal procedures established by the Board.

Inquiries as to Status

The Board considers a diplomate's record not to be in the public domain. When an inquiry is received by the Board regarding a diplomate's status with the Board, a general, but factual, statement is provided which indicates that person's status within the process of certification. The Board provides this information only to individuals, organizations, and institutions with a reasonably valid "need to know" for professional reasons.

Certificates

Certificates issued by the Board shall be in such form as the Directors may from time to time determine. Certificates are signed by the Chair, Secretary-Treasurer and Executive Director of the Board and shall have placed upon them the official seal of the Board. Additional certificates are available upon written request. A fee for each certificate ordered must be included with the request (refer to Fee Schedule on the Board's website). The diplomate's name should be listed, as it should appear on the certificate.

Advertising

The diplomate may only advertise subspecialty certification once the certificate is issued by the Board. **Exam results alone do not represent subspecialty certification** – all requirements must be met including completion of the fellowship, successful examination results, registration, and application with case log approved by the ABPS. There is no status prior to obtaining full subspecialty certification. Diplomates would not be allowed to advertise that they passed the examination and are in the process of achieving certification.

ABPS diplomates who have obtained a Hand Subspecialty Certificate may advertise themselves as follows: "ABPS Certified in the Subspecialty of Hand Surgery." Those with an expired Hand Subspecialty Certificate may only list the certification on their Curriculum Vitae or advertising materials if the dates of certification are specified.

Diplomates of The American Board of Surgery who hold Hand Surgery Subspecialty Certification from The American Board of Plastic Surgery may not represent that they are a "Diplomate of the American Board of Plastic Surgery," "ABPS Board Certified in Plastic Surgery" or similar representations. Instead, the diplomates must always limit any representation regarding plastic surgery certification solely to the subspecialty certification in Hand Surgery. For example, as stated above, it is appropriate to represent that such a diplomate is "ABPS certificated in the Subspecialty of Hand Surgery." Or, for example, if the primary certification is from The American Board of Surgery the diplomate may represent that they are a "Diplomate of The American Board of Surgery (with a subspecialty certification in Hand Surgery from the American Board of Plastic Surgery)." Diplomates of The American Board of Surgery who hold a sub-specialty certification in Hand Surgery may not use the ABPS diplomate logo.

Revocation of Certificates

Any certificate issued by the Board shall be subject to revocation at any time if the Board, in its judgment, determines that a diplomate was not properly qualified to receive it or has become disqualified since its receipt. The diplomate shall be advised if revocation of certification is contemplated and shall be given an opportunity to reply to allegations bringing about such action. The diplomate will be given an opportunity to rebut such allegations according to the directions and operations manual of the Board.

The Board may revoke the Hand Subspecialty Certificate of any diplomate who, after opportunity for full and fair hearing by the medical staff or other appropriate body of a hospital, state or county medical society, government licensing body, professional specialty society or a court of law, has been found guilty of or pleaded guilty to a felony, professional incompetence, professional misconduct, unethical conduct or harmful, deceptive, or fraudulent advertising. Refer to the ABPS Code of Ethics.

The Board shall have the jurisdiction and right to determine whether the evidence and information placed before it is sufficient to constitute grounds for the revocation of any certificate issued by the Board. The diplomate will be provided with the Appeals Policy of the Board, and the Policy will be observed in pursuing resolution of the issues placed before the Board.

Each Hand Subspecialty Certificate issued by the Board shall be subject to revocation in the event that the physician so certified shall have made any misstatement of material fact, or failed to make any statement of material fact, in the application for Hand Subspecialty Certification or Recertification or in any other statement or representation to the corporation or its representatives or shall have otherwise acquired the certificate by deception. Upon revocation, the Hand Subspecialty Certificate shall be surrendered and returned to the Board Office.

Hand Surgery Certification Fees

Exam Registration Fee	\$ 800.00
Registration Late Fee	\$ 160.00
Application Fee	\$ 800.00
Application Late Fee	\$ 160.00
Exam Withdrawal Fee	\$ 520.00
Missing Items Fee	\$ 130.00
Credentials Review Fee	\$ 500.00
Ethics Review Fee	\$ 500.00
Additional Certificate Fee	\$ 145.00
Continuous Certification Fee	\$ 410.00
Hand Recertification/Renewal Fee	\$ 500.00

- Application and Examination Fees must be submitted by credit card only. Certain additional fees may be accepted by check. Foreign currencies, including Canadian, are unacceptable. Fees are non-refundable.
- Fees are subject to change by the Board. The fee schedule applicable to the current examination will apply regardless of when the diplomate is approved for admission to the examination.
- The Board is a nonprofit organization, and the fees of diplomates are used solely for defraying the actual expenses of the Board. The Directors of the Board serve without remuneration.

For questions or concerns, please contact the Board Office staff at hand@abplasticsurgery.org.

THIS BOOKLET OF INFORMATION SUPERSEDES ALL PREVIOUSLY PUBLISHED BOOKLETS OF INFORMATION OF THE BOARD CONCERNING REQUIREMENTS, POLICIES AND PROCEDURES AND MAY BE MODIFIED AT ANY TIME.



The Registered Trademark Logo of the American Board of Plastic Surgery depicts Gaspare Tagliacozzi (1545-1599) of Bologna, considered to be the father of modern plastic surgery. His contributions are summarized in the treatise he authored in 1597, "De Curtorum Chirurgia per Insitionem." The founding year of the Board, 1937, is included on the Logo. The Board's trademarked logo is not permitted for use on diplomate or candidate websites.

ABPS is a Member Board of the American Board of Medical Specialties (ABMS)

