



# The Journal of Education in Perioperative Medicine

LETTER TO THE EDITORS

## RE: Conley et al. APPLIED Advocacy: How the ABA Improved the RTID, and How It Could Be Even Better

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### TO THE EDITORS:

We thank Dr. Conley and colleagues for their dedication to anesthesiology resident education and their advocacy on behalf of residency programs, as detailed in their editorial of April 2023.<sup>1</sup> As representatives of the American Board of Anesthesiology (ABA), we share their desire to optimize the educational environment within training programs and are grateful for their recognition of improvements to the ABA Residency Training Information Database (RTID).

The redesigned RTID, launched in November 2022, provides features and enhancements suggested at national meetings, requested at program director (PD) meetings hosted by the ABA in Raleigh, and discussed in other formal and informal communications. Improvements include methodology to more efficiently enter and retrieve data for the majority of trainees who have satisfactory performance, the provision of automatic credit for clinical base year training, a streamlined report approval process, and advanced roster sorting.<sup>2</sup> The RTID updates were performed in the context of major and ongoing enhancements to the ABA information technology infrastructure and will benefit PDs and, especially, their administrative partners who have the most interactions with the RTID system.

Residency programs are accountable to their trainees, faculty, institutions,

and patients, as well as to external organizations, including the Accreditation Council for Graduate Medical Education (ACGME). As the authors point out, the ACGME has stipulated criteria for the determination of satisfactory program performance. The information in the RTID, as currently displayed, provides sufficient data to signal to programs whether they are likely to be compliant with the ACGME requirement, which states “For specialties in which the ABMS [American Board of Medical Specialties] member board and/or AOA [American Osteopathic Association] certifying board offer(s) an annual oral exam, in the preceding three years, the program’s aggregate pass rate of those taking the examination for the first time must be higher than the bottom fifth percentile of programs in that specialty.”<sup>3</sup> For anesthesiology, the ABMS board “annual oral exam” equivalent is the ABA APPLIED Examination, consisting of the standardized oral examination (SOE), and the objective structured clinical examination (OSCE). Provision of results for each element of the APPLIED Examination would provide granularity beyond ACGME reporting requirements. At its meeting in January 2023, the ABA Board of Directors approved the provision of such data to programs through the RTID. This decision was communicated to PDs at meetings in Raleigh in February 2023 and will be operationalized for the 2024 examination year, in conjunction

with other ABA information technology updates.

The provision of individual physician examination data to programs raises privacy concerns. While recognizing that residency programs are judged on the basis of the performance of their graduates, the ABA has a direct relationship with those graduated physicians, some of whom may not wish to have their data shared with anybody—including their former residency program. As with the collection of candidate race and ethnicity data, the board’s attitude to the provision of examination results to programs has shifted, based on evolving legal advice and changing societal attitudes and expectations. Nonetheless, graduates of residency programs will have the ability to opt out of the future default position in which the ABA makes physician-level results of each element of the APPLIED exam (SOE and OSCE) available to programs through the RTID. (This opt-out provision will also apply to the ADVANCED exam.)

The ABA welcomes continued engagement with those responsible for resident and fellow training. Although perspectives and obligations may differ, a common goal may be summarized in the mission of the ABA, which is to “advance the highest standards of the practice of anesthesiology.”

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## References

1. Conley C, Kwan J, Nadler M, et al. APPLIED advocacy: How the ABA improved the RTID, and how it could be even better. *J Educ Perioper Med.* 2023;25(2):E701.
2. American Board of Anesthesiology. Residency training information database manual. <https://rtidreact.theaba.org/login>. Accessed July 17, 2023.
3. Accreditation Council for Graduate Medical Education. Program Requirements for Graduate Medical Education in Anesthesiology. [https://www.acgme.org/globalassets/pfassets/programrequirements/040\\_anesthesiology\\_2023.pdf](https://www.acgme.org/globalassets/pfassets/programrequirements/040_anesthesiology_2023.pdf). Accessed July 17, 2023.

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**Note:** Drs. Keegan, Macario, and Gaiser are ABA Directors and receive honoraria for their participation in ABA activities. Dr. Harman is an ABA staff member. Dr. Gaiser is a member of the Executive Committee of the Accreditation Council for Graduate Medical Education. Support was provided solely from institutional funds.