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Note: This Pamphlet reflects the policies and procedures as of September 2019. All policies and procedures are subject to change. If you have any questions or require further information, please visit www.acvs.org or contact the ACVS staff at 301-916-0200 x102
Requirements for Board Certification

In order to achieve board certification, individuals must obtain each of the credentials outlined below.

I. Successful completion and approval of all Resident Training Requirements.
II. Successful submission and acceptance of a scientific manuscript in an approved journal.
III. Submission and acceptance of a Credentials Application.
IV. Successful passing of all components of the Examination.

The ACVS Examination consists of two parts: Phase I Surgical Knowledge and Phase II Surgical Competency.

Policies for candidates whose credentials were first approved in 2017 or later

Eligibility for the Phase II Examination

To be eligible to sit for the Phase II examination, candidates must have successfully completed all resident training requirements, passed the Phase I examination, and have had their credentials application approved by the ACVS Board of Regents.

Retaking the Examination

Candidates who fail one or both sections of the examination the first or second time and plan to retake those sections must register with ACVS by the established registration deadline (approximately November 21) in the year immediately preceding the desired examination. Candidates should be sure that the ACVS office has their current contact information, including email. Failed candidates will be assigned advisors who are current members of the Examination Committee. The advisors will be available to counsel candidates on their previous examination performance, including recommendations for future preparation.

Candidates who did not pass the third attempt

To be eligible to continue in the process, candidates must submit a recredentialing application that is approved by the ACVS Board of Regents.

Failure to successfully complete all required sections of the examination within three (3) attempts will require submission of a recredentialing application to the Resident Credentialing Committee. Upon approval of the application by the ACVS Board of Regents, complete re-examination is required. Candidates then have three attempts to pass both sections of the Phase II examination. Candidates should contact the ACVS office regarding current Credentials Application requirements.

Limitations

Candidates are allowed a maximum of six total attempts within nine years from acceptance of their Credentials Application to pass the Phase II examination. Any candidate who has not passed the examination after six attempts will be required to restart the process to achieve ACVS board certification and meet all requirements (new residency, Phase I examination, and acceptance of credentials, etc.) before being allowed any future attempts.

Policies for candidates whose credentials were first approved in 2016 or earlier

Eligibility for the Phase II Examination

Candidates transitioning from the traditional Certification Examination are required to take the Phase II examination if they did not pass the Case-based or Practical examination as of February 2018 or in subsequent years.
Each candidate required to take both the Phase I and Phase II examinations should register for both examinations in the same calendar year. Candidates must pass both Phase I and Phase II within three calendar years, although those years do not need to be consecutive (for example, 2019, 2021, 2022). Candidates who choose not to register for both Phase I and Phase II in the same calendar year may forfeit an attempt at the examination for which they did not register. If you take either or both examinations within a single calendar year, that counts as one attempt. Candidates are given three attempts to pass both examinations. Recredentialing will be required if the candidate has not successfully completed all required examinations (Phase I and/or Phase II) as applicable within 3 attempts per examination.

Retaking the Examination

Candidates who fail one or both sections of the examination the first or second time and plan to retake those sections must register with ACVS by the established registration deadline (approximately November 21) in the year immediately preceding the desired examination. Candidates should be sure that the ACVS office has their current contact information, including email. Failed candidates will be assigned advisors who are current members of the Examination Committee. The advisors will be available to counsel candidates on their previous examination performance, including recommendations for future preparation.

Candidates who did not pass the third attempt

Failure to successfully complete all required sections of the examination within three (3) attempts per examination will require submission of a recredentialing application to the Resident Credentialing Committee. Upon approval of the application by the ACVS Board of Regents, complete re-examination is required. The Phase I examination is required if the written or Phase I examination has never been passed. Both sections of the Phase II examination are required following recredentialing. Candidates should contact the ACVS office regarding current Credentials Application requirements.

Limitations

Candidates who began in the traditional certification examination process are given two options, whichever allows the greater number of Phase II examination attempts: 1) a maximum of six examination attempts within nine years from acceptance of their credentials application, or 2) candidates who have taken the examination six times or more by 2020 may take the examination two more times before 2023 (i.e., the last examination is in 2022), subject to successful recredentialing. Any candidate who has not passed the Phase II examination after six attempts, or, if applicable, by 2023, will be required to restart the process to achieve ACVS board certification and meet all requirements (new residency, Phase I examination, and acceptance of credentials, etc.) before being allowed any future attempts.

Policies for Dual Certification candidates

Diplomates who desire to change their species of emphasis (i.e., are seeking Dual Certification) must have had their Dual Certification application or recredentialing application approved by the ACVS Board of Regents. Dual certification candidates must pass Phase II within three attempts. Recredentialing is required after three attempts.

Retaking the Examination

Dual certification candidates who fail one or both sections of the examination the first or second time and plan to retake those sections must register with ACVS by the established registration deadline (approximately November 21) in the year immediately preceding the desired examination. Candidates should be sure that the ACVS office has their current contact information, including email. Failed candidates will be assigned advisors who are current members of the Examination Committee. The advisors will be available to counsel candidates on their previous examination performance, including recommendations for future preparation.
Candidates who did not pass the third attempt

Failure to successfully complete all required sections of the examination within three (3) attempts per examination will require submission of a recredentialing application to the Resident Credentialing Committee. Upon approval of the application by the ACVS Board of Regents, complete re-examination is required. These candidates then have three attempts to pass the Phase II examination. Candidates are required to take both sections of the Phase II examination.

Limitations

Dual Certification candidates are allowed a maximum of six total attempts within nine years from acceptance of their Application for Dual Certification to pass the Phase II examination. Any candidate who has not passed the examination after six attempts will be required to restart the retraining process to achieve ACVS board certification in the alternate species and meet all requirements before being allowed any future attempts.

Taking the Phase II Examination

Candidates sitting the examination for the first time (including Dual Certification candidates) must take both the case-based and practical sections. Candidates sitting the examination for the second or third time must take the sections not successfully completed. Both sections of the Phase II examination must be successfully completed to become certified by the American College of Veterinary Surgeons.

Certification for Successful Candidates

Candidates who pass the Phase II examination (as well as Phase I, if required for transitioning candidates) will be issued a time-limited certificate indicating that they are a Diplomate of the American College of Veterinary Surgeons in Small Animal Surgery or in Large Animal Surgery. Dual Certification candidates will be issued time-limited certificates indicating that they are a Diplomate of the American College of Veterinary Surgeons in the new species.

Time-limited certificates will be good for five (5) years. Diplomates with time-limited certificates will need to document continuous professional development through a variety of activities, such as attending or presenting at continuing education meetings, publishing manuscripts, serving on ACVS committees, and participating in resident training. The requirements for maintenance of certification are posted on the ACVS website.

Examination Schedule

Candidates will be notified of the final schedule following the registration deadline (no later than December 11).

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sunday, February 2</td>
<td>6:00–6:30pm</td>
<td>Examination Orientation Session (mandatory)</td>
</tr>
<tr>
<td>Monday, February 3</td>
<td>TBD</td>
<td>Small Animal Practical — Parts 1 and 2</td>
</tr>
<tr>
<td></td>
<td>TBD</td>
<td>Large Animal Practical — Parts 1 and 2</td>
</tr>
<tr>
<td>Tuesday, February 4</td>
<td>TBD</td>
<td>Small Animal Case-based — Orthopedic/Neurosurgery and Soft Tissue</td>
</tr>
<tr>
<td></td>
<td>TBD</td>
<td>Large Animal Case-based — Orthopedic/Neurosurgery and Soft Tissue</td>
</tr>
</tbody>
</table>
Examination Description

The Phase II Surgical Competency Examination tests all phases of surgery in all species and types of animals as well as competence in areas of specialization. The examination is composed of two (2) sections: practical and case-based. There are separate examinations for large and small animal candidates. The general content (and the weight of each content area) for the practical and case-based sections has been determined by means of an analysis of the veterinary surgeon’s occupation. In all, five hundred twenty-four (524) American College of Veterinary Surgeons (ACVS) Diplomates participated in the study that examined the importance of a variety of content areas for performance as a veterinary surgeon. Questions for the ACVS examination are made or reviewed by the Examination Committee of the American College of Veterinary Surgeons. Each question is validated by securing a reference source that corroborates the information in the question. The sources used include current veterinary textbooks, current veterinary medical and surgical journals, current medical texts and journals including, but not limited to, the included reading list.

Practical Section

The practical section will be comprised of a total of 32 questions based on visually presented material of surgically-related diseases or conditions. Candidates will be provided visual images (still and videos), as well as written information for each question. Visual material may depict anatomic specimens, instruments, surgical diseases, pathologic/histologic specimens, imaging studies, or other relevant information in order to test the candidate’s recognition and interpretive skills covering all areas of surgical practice. The 32 questions will be divided into two equal parts (16 questions each) with a 20-minute break between parts. The visual material for each question will be shown for 4 minutes, with an additional 30 minutes provided at the end of each part to review answers after the 16 questions are presented. The time allowed for each part will be 94 minutes. Each question will be worth 12 points and a minimum of 20% of the points for the examination will be based on the suggested reading of the current literature. New questions are prepared each year by members of the Examination Committee to correspond to the topic areas in the examination blueprint. Examination Committee members and several members of the Board of Regents review all questions and visual materials for clarity and fairness. Each candidate’s practical examination section is graded according to a pre-set scoring guide by multiple Examination Committee members who are blinded to individual candidate identity.

Case-based Section

The case-based section will be comprised of 2 parts, Orthopedic/Neurosurgery and Soft Tissue. The case-based section tests the candidate’s management of a sequentially presented surgical case(s) prior to, during, and after surgery. Candidates will be provided visual and written information on the case and should be prepared to answer questions covering all areas of surgical practice. Each part of the case-based section will be administered over approximately 75 minutes, with a 20-minute break between parts. Each part of the case-based section will be worth 250 points and a minimum of 20% of the points for the examination will be based on the suggested reading of the current literature. Questions are prepared each year by members of the Examination Committee. Examination Committee members and several members of the Board of Regents review all questions and visual materials for clarity and fairness. Each candidate’s case-based examination section is graded according to a pre-set scoring guide by multiple Examination Committee members who are blinded to individual candidate identity.

Examination Rules

The integrity of the Phase II Examination of the American College of Veterinary Surgeons will be maintained to ensure fairness to all candidates during the test. Any questions should be directed to Ann Loew, ACVS Chief Executive Officer, at (301) 916-0200 x108 or the Chair of the Examination Committee.
The deadline for registering for the examination is November 18, 2019—the online registration process must be completed by 11:59pm EST and fees paid online or received by ACVS no later than this date. ACVS will not allow late submission of registration or payment due to delivery service problems, insufficient postage, international customs, computer/internet issues, etc.

Registering for the Examination

Registering for the examination consists of submitting the online application and paying the examination fee.

Deadline: Submit your application and online examination fee payment no later than 11:59pm EST, November 18, 2019. Mailed examination fee payments must arrive by close of business (5pm Eastern time) on November 18, 2019 at the ACVS office.

Submit the Online Registration Application

Candidates must register online for the Phase II Examination at www.acvs.org/apply. Online registration opens September 15 for eligible candidates. During the application process, candidates will need to:

1. Provide their full name as it appears on a government-issued photo ID. Candidates are required to show one (1) VALID government-issued photo ID with signature at the test site. The name on the ID must match the name provided during the registration process exactly or the candidate will not be allowed to sit for the examination.
2. Upload a digital photo of themselves in .jpg or .tif format. The photo should be portrait style (head and shoulders) and of professional quality. The image file name must include the candidate’s last and first name (e.g., Smith_Jane.jpg).
3. Indicate whether they wish to request an accommodation for a disability or a health-related concern. Candidates requesting accommodations must indicate desired accommodations and upload all supporting documentation from an appropriate health care professional (e.g., physician, psychologist, psychiatrist) certifying the disability.
4. Agree to the terms and conditions of the ACVS Phase II Surgical Competency Examination Contract. Candidates who fail to agree with these terms will not be allowed to take the Phase II examination.
5. Indicate how the examination fee is being paid.

Pay the Examination Fee

Fee for first-time candidates = $1,695

Fee for repeat candidates = $1,210

Candidates who have taken the Phase II examination/traditional Certification Examination previously or candidates who are in the dual certification process.

The examination fee is refundable only due to extenuating circumstances (see Cancellation and Refund).

- Pay the fee online using Visa or MasterCard
- Complete the Phase II Payment Authorization Form
  - Fax to: 301-916-2287
  - Mail to
    - ACVS
    - 19785 Crystal Rock Drive, Suite 305
    - Germantown, MD 20874
    - USA
**Confirmation**

Candidates will receive an email upon successful submission of their online registration. Candidates who pay the examination fee online will receive an email upon completing the transaction. These emails note only receipt of the registration or payment and do not indicate that the registration process is complete.

**No later than December 11, candidates will receive an Examination Authorization email** from the ACVS office. The authorization email notifies the candidate of successful registration and includes the candidate’s ID number. This number will be used to track the candidate on the day of the examination. Each candidate should review carefully the information on the authorization email, as this information will indicate the sections of the examination for which the candidate is registered, and it *is the candidate’s responsibility to notify the ACVS office immediately of any perceived inaccuracies.*

If a candidate submits a registration application and does not receive the Examination Authorization email from the ACVS office by December 11, the candidate should contact the ACVS office immediately. Note: Candidates are responsible for notifying the ACVS office of any address and email changes prior to and following the examination.

**Requesting an Accommodation**

All candidates who intend to take the 2020 ACVS Phase II Surgical Competency Examination must indicate whether they wish to request an accommodation during the online registration.

ACVS complies with the Americans with Disabilities Act (ADA) of 1990 and the ADA Amendments Act of 2008. ACVS will provide certain accommodations for candidates when appropriate. Additionally, ACVS will provide accommodations for certain health-related needs. If you require some accommodation in taking the examination, you must **complete all questions and upload required documentation in your application.** Accommodations must be requested in advance of the examination as part of the online registration process. Candidates who request accommodations will be notified separately of the determination.

Candidates should use the [Pearson VUE comfort aids list](#) as a guide when seeking accommodations for health-related needs. Accommodations are not required for items on the list. ACVS will provide earplugs for the Phase II examination.

**Accommodation Requests for Disabilities**

Candidates who request an accommodation will need to indicate the type of disability, how long they have had the disability, and the type of accommodation requested. Additionally, past accommodations made in college or veterinary school must be indicated.

The following documentation must be uploaded into the online system. This documentation will be reviewed by select members of the Examination Committee, the examination consultant, and the staff liaison to the committee for the purpose of ensuring the correct documentation has been submitted and evaluating the request for the accommodation.

1. Written documentation from an appropriate health care professional (e.g., physician, psychologist, psychiatrist) certifying your disability and the accommodation being requested.
   a) For physical or sensory disabilities of a *permanent or unchanging nature* (e.g., loss of limb, loss of hearing), documentation must include a brief statement from a qualified professional confirming the condition and describing the impact of the disability on the individual.
   b) For disabilities of a non-permanent nature, written documentation must be *current* and include:
      i) a diagnosis of your health condition;
      ii) when the diagnosis was originally made and reassessed, if applicable;
iii) a description of the assessment and a copy of the assessment; and,
iv) a specific recommendation and justification for the accommodation being requested.

*Current written documentation is defined as having been completed within the following timeframes:

- last five (5) years for learning disabilities (LD), autism spectrum disorder (ASD), or intellectual disability (ID)
- last three (3) years for attention deficit hyperactivity disorder (ADHD) and all other disabilities, excluding physical or sensory disabilities of a permanent or unchanging nature
- last six (6) months for psychiatric disabilities

2. Attach written documentation from the institution with the dates and special services and testing accommodations you received during the course of your education because of your disability.

Accommodation Requests for Health-Related Needs

Candidates who have special needs that are not generally covered by the ADA (e.g., injury, broken limb, pregnancy, lactation) may request courtesy accommodations and submit applicable materials with the application. Courtesy accommodations also include any requests to bring medical items or comfort aids not on the Pearson VUE comfort aids list.

Candidates should indicate specific accommodations being requested and upload written documentation from an appropriate health care professional (e.g., physician) attesting to the health condition and supporting the accommodation being requested. This documentation will be reviewed by select members of the Examination Committee, the examination consultant, and the staff liaison to the committee for the purpose of ensuring the correct documentation has been submitted and evaluating the request for the accommodation.

Cancellation and Refund

In the event that a candidate needs to cancel their examination registration, the candidate must contact ACVS and notify the Bahia Resort, if they have reserved a hotel room.

Examination fees will be refunded only in cases of extenuating circumstances (e.g., death in the family, medical emergency) and must be supported by written documentation. Documentation for medical emergencies must be from an appropriate health care professional attesting to the health condition and inability of the candidate to sit for the examination. Allow 30 days for processing refund requests. All requests for refunds must be submitted in writing using one of these methods:

ACVS
19785 Crystal Rock Drive, Suite 305
Germantown, MD 20874
USA
acvs@acvs.org
fax: 301-916-2287

At the Examination Site

1. Candidates must be properly registered with the ACVS, listed on the test site roster, and prepared to present a valid personal government issued photo identification card (e.g., driver’s license or passport) at the test site to take each section of the examination. No exceptions to this requirement will be made.
2. Candidates must attend the examination at the appointed time. Check-in for examinations begins 30 minutes before the scheduled examination time. Candidates should plan to arrive at the testing rooms at least 15 minutes prior to the examination to allow sufficient time to check-in. Late arrivals cannot be admitted to the examination.

3. Giving or receiving assistance pertaining to information on the examination prior to, during, or after the test period is unethical and not permitted. (See Examination Security.)

4. The use of information aids during the examination is not permitted.

5. Examination materials are not to leave the examination rooms. All scratch paper will be collected at the conclusion of the examination.

6. No personal materials (e.g., pens, pencils, notes, language-translation dictionaries, books, tape recorders, cameras, cell phones, or calculators) are allowed in the examination rooms.
2020 ACVS Phase II Examination Reading List

The following references and books are suggested reading in addition to the current Phase I reading list, for preparation for the 2020 Phase II examination. Other textbooks and current references may be pertinent. Knowledge of basic and applied anatomy is assumed.

Selected References for Small Animal Surgery


Selected References for Large Animal Surgery

3. Guyton AC, Hall JE. Textbook of Medical Physiology, W.B. Saunders Co., (13th Ed), 2016. Chapters 6, 7, 8, 9 (pages 113-116); Chapters 11, 13, 14, 16, 17 (pages 212-213); Chapter 19 (pages 234-236); Chapters 25, 26, 27, 28 (pages 362-365); Chapters 31, 34, 35, 37, 80.
Many journals contain articles pertaining to surgery (both human and veterinary) and should be perused for current literature. A partial list of veterinary journals includes:

**Journals for Small Animal Surgery Candidates**
- *Journal of Veterinary Emergency and Critical Care*
- *Journal of the American Veterinary Medical Association*
- *Journal of Small Animal Practice*
- *Journal of Veterinary Internal Medicine*
- *Veterinary Comparative Orthopaedics and Traumatology*
- *Veterinary Radiology & Ultrasound*
- *Veterinary Surgery*

**Journals for Large Animal Surgery Candidates**
- *Equine Veterinary Journal & Supplements*
- *Equine Veterinary Education*
- *Journal of the American Veterinary Medical Association*
- *Veterinary and Comparative Orthopaedics and Traumatology*
- *Veterinary Radiology & Ultrasound*
- *Veterinary Surgery*

The majority of questions come from literature published in the last five years. For example, if you are taking the 2020 examination, questions will primarily come from literature published in the range of 11/01/2014 – 10/31/2019. Questions may also come from older articles considered significant and essential to the knowledge of the veterinary surgeon.
Practical Section Blueprint

Questions will pertain to surgical topics and conditions in:

a) Small Animal Examination: Domestic canine and feline, and non-species-specific

b) Large Animal Examination: Equine, food animal, small ruminant, camelid, and non-species-specific.

The test questions are distributed across a number of systems and categories. The approximate percentage of questions devoted to each system/category is shown below:

### Small Animal Practical Section Blueprint

<table>
<thead>
<tr>
<th>System/Category</th>
<th>% of Small Animal Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gastrointestinal</td>
<td>16%</td>
</tr>
<tr>
<td>Cardiovascular/Hematopoietic</td>
<td>9%</td>
</tr>
<tr>
<td>Respiratory</td>
<td>13%</td>
</tr>
<tr>
<td>Urogenital</td>
<td>13%</td>
</tr>
<tr>
<td>Musculoskeletal</td>
<td>25%</td>
</tr>
<tr>
<td>Neurological/Special Senses</td>
<td>9%</td>
</tr>
<tr>
<td>Integumentary</td>
<td>9%</td>
</tr>
<tr>
<td>Endocrine</td>
<td>6%</td>
</tr>
</tbody>
</table>

### Large Animal Practical Section Blueprint

<table>
<thead>
<tr>
<th>System/Category</th>
<th>% of Large Animal Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gastrointestinal</td>
<td>22%</td>
</tr>
<tr>
<td>Neurological/Special Senses</td>
<td>3%</td>
</tr>
<tr>
<td>Respiratory</td>
<td>16%</td>
</tr>
<tr>
<td>Urogenital</td>
<td>13%</td>
</tr>
<tr>
<td>Musculoskeletal</td>
<td>28%</td>
</tr>
<tr>
<td>Lameness and Imaging</td>
<td>3%</td>
</tr>
<tr>
<td>Cardiovascular/Hematopoietic</td>
<td>3%</td>
</tr>
<tr>
<td>Integumentary</td>
<td>6%</td>
</tr>
<tr>
<td>Surgical Preparation and Instrumentation</td>
<td>3%</td>
</tr>
<tr>
<td>Emergency and Critical Care</td>
<td>3%</td>
</tr>
</tbody>
</table>
Examination Instructions

The instructions that are read at the beginning of the practical and the case-based examinations are included to clarify the format of the examinations.

Practical Section Instructions

The practical section is divided into 2 parts, each comprising 16 questions. Each question will have a set of images shown for FOUR minutes. A ONE-minute warning will be given prior to changing the images. If you finish answering a question prior to the four-minute time limit, you MAY GO BACK to the previous questions, but you MAY NOT MOVE FORWARD to the next question until instructed to do so. Make sure you can clearly see one screen that serves your part of the room so you can see all the images when a question is presented. All screens will display identical information. Is there anybody who is having difficulty seeing a screen?

At the beginning of each new question, we will state the number of the question being presented. However, the text of the question will not be read out loud.

If we experience technical difficulties when showing an image, the timer will be stopped and will resume after the problem has been corrected. You will receive the full amount of time allotted for that question.

Videos will run on a loop continuously for the entire 4 minutes. Images will not be shown a second time. It may be prudent to take notes on questions you cannot completely answer during the four minutes each set of images is projected.

At the conclusion of the 16th question, you will be given an additional 30 minutes to review and complete the first part of the examination. There will be a 20-minute break between the 2 parts of the examination. The second part of the practical section (questions 17-32) will be delivered in the same manner as the first part, including 30 minutes at the end to review and complete your answers.

Warnings will be issued at FIFTEEN minutes, FIVE minutes and ONE minute prior to the end of each part of the examination.

If a question asks for a specific number of answers, only that number will be graded. For example, if a question asks for two answers and you provide three answers, we will look at only the first two answers. Minimize the use of abbreviations to make sure your answer is clearly understood. Commonly used medical abbreviations may be used; however, if you are concerned that the grader may not understand the abbreviation, then you should define it.

Please go through the first packet of questions and make sure that you have sixteen pages with questions on them. Be sure the Candidate ID number on each page is your Candidate ID number. If it is not your ID number, let a proctor know immediately.

Raise your hand if you need additional pencils, have a question, or if you need to leave the room for any reason. We highly recommend that you not leave the examination for a restroom break during the portion when images are being shown since we will not revisit any images once they’ve been shown. However, if you need a restroom break during the 30-minute review period, summon a proctor by raising your hand and the proctor will accompany you to the restroom. When you have completed your examination, please raise your hand so that a proctor can check over your materials before you leave the room.

Are there any questions before we begin the examination?
Case-based Section Instructions

The case-based section tests surgical principles in case management prior to, during, and after surgery. Information about these cases is presented in the form of images, videos, and data. Visual information will be projected on the screens. Data and text will be given in your examination binder. Information given on the screen is not shown on the question page. **OBSERVE ALL INFORMATION PRESENTED ON THE SCREEN PRIOR TO ANSWERING QUESTIONS IN YOUR EXAM BINDER.**

On the front cover of your binder is a sticker that shows your Candidate ID number. Please confirm at this time that the Candidate ID number on the cover of the binder is your Candidate ID number. If it is not your ID number, let a proctor know immediately.

The examination binder consists of questions with a total point value of 250. Each question will relate to a corresponding screen image. Each image presented on the screen will correspond with one page of the examination. The screen image will show the corresponding page number in your examination binder.

If a question asks for a specific number of responses, you will be graded on only the requested number of answers. **Additional responses beyond the number requested will not be graded.** For instance, if we ask you for one diagnosis and you give us two, we will grade only the first answer.

Minimize the use of abbreviations to make sure your answer is clearly understood. Commonly used medical abbreviations may be used; however, if you are concerned that the grader may not understand the abbreviation, you should define it.

You will have between two and ten minutes to respond to the questions on each page. The time allotted for each page will be indicated on the top of the page, as well as the top of the corresponding screen image. A one-minute warning will be issued prior to moving to the next page.

If we experience technical difficulties while showing an image, the timer will be stopped and will resume after the problem has been corrected. You will still receive the full amount of time allotted for that question.

When the allotted time is up for each question, you will be instructed to turn the page in your binder to the colored divider that follows. Once you turn to the divider, you may **NOT** go further in the examination until instructed to do so. Therefore, when instructed to do so at the end of each question, you will turn the page to the divider and wait for instructions before turning the divider to the next test question.

**UNDER NO CIRCUMSTANCES ARE YOU ALLOWED TO MOVE FORWARD IN THE EXAMINATION UNTIL INSTRUCTED. FURTHERMORE, YOU MAY NOT RETURN TO A PREVIOUS PAGE OF QUESTIONS AT ANY TIME DURING THE EXAM. FAILURE TO FOLLOW THESE INSTRUCTIONS WILL RESULT IN DISQUALIFICATION FROM THE EXAM.**

Scrap paper has been supplied for you to take notes during the examination. You are encouraged to use the scrap paper throughout the examination. You can refer to the notes on your scrap paper for the entire duration of the examination. Your scrap paper will be collected at the end of the examination, but will not be scored.

Raise your hand if you need additional pencils, have a question, or if you need to leave the room for any reason. We highly recommend that you do not leave the examination for any reason since questions cannot be revisited once they have been shown.

Are there any questions before we begin the examination?
**Explanation of Common Questions on the Practical or Case-based Sections**

**Laboratory Data**

- “**Interpret the laboratory data**” or “**Interpret the abnormal values**”: This means that you should indicate the most likely causes of each abnormality in this patient.

**Case example:**

<table>
<thead>
<tr>
<th>Patient Values</th>
<th>Reference Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total protein (g/dl)</td>
<td>5.3</td>
</tr>
<tr>
<td>Albumin (g/dl)</td>
<td>3.0</td>
</tr>
<tr>
<td>Globulin (g/dl)</td>
<td>2.6</td>
</tr>
<tr>
<td>Alkaline phosphatase (U/L)</td>
<td>177</td>
</tr>
<tr>
<td>ALT (U/L)</td>
<td>363</td>
</tr>
<tr>
<td>Bilirubin (mg/dl)</td>
<td>0.25</td>
</tr>
<tr>
<td>CK (U/L)</td>
<td>211</td>
</tr>
<tr>
<td>BUN (mg/dl)</td>
<td>5</td>
</tr>
<tr>
<td>Creatinine mg/dl</td>
<td>0.7</td>
</tr>
<tr>
<td>Calcium (mg/dl)</td>
<td>9.6</td>
</tr>
<tr>
<td>Phosphorus (mg/dl)</td>
<td>4.5</td>
</tr>
<tr>
<td>Magnesium (mg/dl)</td>
<td>1.7</td>
</tr>
<tr>
<td>Glucose (mg/dl)</td>
<td>70</td>
</tr>
<tr>
<td>Cholesterol (mg/dl)</td>
<td>42</td>
</tr>
<tr>
<td>Bicarbonate (mmol/L)</td>
<td>18.6</td>
</tr>
<tr>
<td>Sodium (mEq/L)</td>
<td>148</td>
</tr>
<tr>
<td>Potassium (mEq/L)</td>
<td>4.8</td>
</tr>
<tr>
<td>Chloride (mEq/L)</td>
<td>118</td>
</tr>
</tbody>
</table>

1. **Interpret the results of the chemistry profile.**

   *Decreased BUN may be due to decreased production (e.g., hepatic insufficiency), lack of intake, or increased loss.*

   *Decreased cholesterol may be due to decreased production (e.g., hepatic insufficiency) or increased loss.*

   *Hypoglycemia may be due to decreased production (e.g., hepatic insufficiency) or poor sample handling.*

   *Increased alkaline phosphatase may be due to increased production from bone (young dog) or cholestasis.*

   *Increased ALT indicates hepatocellular injury/necrosis (leakage enzyme).*

   *Results suggestive of hepatic insufficiency.*

**NOTE:** Reference ranges will be provided for complete blood counts and serum chemistry panels. Reference ranges might not be provided for other laboratory data, such as blood gas analysis, electrolyte panels or fluid analysis.
Diagnostic Imaging Studies

- **“List the radiographic abnormalities” or “List the radiographic findings”:** This means that you should concisely describe each abnormality that you see on the radiographs. Be sure to indicate the side for lesions that can be bilateral. If you observe no abnormalities, then you should state this.

- **“What is the radiographic diagnosis?”** This means to indicate the most specific conclusion that you can make from the radiographic findings.

  *Case example:*

  **Radiographic abnormalities:** *The left osseous bulla is thickened and has increased soft tissue density.*

  **Radiographic diagnosis:** *Left otitis media*

- **“Assess the fracture repair”:** This means that you should critique the repair including both positive and negative comments. This includes evaluation of the alignment, apposition or reduction, and apparatus or implants. For example:

  *Case example:*

  *Alignment is good. Reduction is not adequate because there is a gap at the fracture site. The most distal screw is too long.*

Sample Questions

*Sample practical and case‐based examination questions* are available online.

Determination of Passing Score

Practical and Case-based Sections: The Border Group Method is used to set the passing score for the practical and case-based sections, given that the Angoff method (used on the Phase I examination) is not appropriate for the type of questions used in Phase II. The Border Group Method is a two (2) step process. In the first step, three (3) score categories are created: a pass, fail, and border group. These categories are based on practical and case-based examination scores for the past ten (10) years. The second step in the process is a decision exercise for setting the exact pass score within the border group. The decision exercise involves reviewing examinations within the border group relative to established criterion level performance (e.g., absence of fatal mistakes). That is, Examination Committee members identify examinations within the border group which do not meet the established criterion level performance and those which do. The cut score is then set at the lowest score on which an individual’s test performance meets the established criterion level of performance. Throughout the entire process a candidate’s performance is being compared only to this established criterion level of performance, and not to the performance of other examinees. All steps in the Border Group Method will be performed so that the decision makers are blind to the candidates’ names.

Reporting of Results

Results of the Phase II Examination are customarily emailed to all candidates within six (6) weeks after completion of the examination. Results will indicate whether the candidate passed or failed each section of the examination (i.e., the practical and case-based). Information regarding overall performance will be available from an appointed advisor for any candidate who fails a section of the examination. Advisors will not discuss performance on individual test items, but may offer suggestions for improving performance on subsequent examinations.
Appeal Procedure

A candidate who disagrees with a determination by the American College of Veterinary Surgeons regarding the results of the Phase II Surgical Competency Examination may appeal such determination by submission of a written petition for reconsideration. This written petition may be submitted only on the grounds that the determination: (a) disregarded the established criteria, (b) failed to follow the stated procedures, or (c) failed to consider relevant information and documentation presented as detailed in the Protocol for Processing Appeals. The ACVS office must receive the petition within thirty (30) days of the date on which the ACVS decision was announced. Contact the ACVS office to receive the most current version of the protocol.

Examination Security

Procedures in the Event of Unethical Behavior

a. The validity of results awarded candidates for their performance on the American College of Veterinary Surgeons examination is protected by every means available. The American College of Veterinary Surgeons will not report results, which it has determined, are invalid (i.e., do not represent a reasonable assessment of the candidate's knowledge or competence sampled by the examination). The performance of all candidates is monitored and may be analyzed statistically for purposes of detecting invalid results.

b. If evidence by observation or statistical analysis suggests that one or more candidates' results may be invalid because of unethical behavior by one or more candidates prior to, during, or after the examination, the American College of Veterinary Surgeons may change the time and place of the examination or may withhold the results pending further investigation. The affected candidates will be so notified.

c. Examples of unethical behavior affecting the validity of results, which would necessitate the rescheduling of the examination or the withholding of results pending further investigation, would include, but not be limited to the following: (i) copying of answers from another candidate; (ii) permitting one's answers to be copied; (iii) unauthorized possession, reproduction, or disclosure of materials, including examination questions or answers, before, during, or after the examination; and (iv) other evidence indicating the security of the examination had been breached.

d. In the event candidates are observed engaging in unethical behavior, the proctor(s) will make carefully written notes, including the party(ies) involved, time, examination section, etc., but will not disrupt the examination by confronting the candidate(s). Notification of unethical behavior will be at the earliest possible time following completion of the examination. The candidate(s) will be advised of the procedure for imposing sanctions and informed that results may be withheld as invalid.

e. On analysis of all available information in such circumstances, the American College of Veterinary Surgeons will make a determination as to the validity of the results in question and will notify the affected candidates. If it is determined that the results in question are invalid, they will not be released. Notification of that determination may be made by legitimately-interested third parties.

f. In such circumstances, the American College of Veterinary Surgeons will make every effort to withhold the results of only those candidates directly implicated in the unethical behavior. In some instances, the evidence of unethical behavior is sufficiently strong to cast doubt on the validity of all results, and this evidence may not enable the American College of Veterinary Surgeons to identify the particular candidates involved therein. In such circumstances, the American College of Veterinary Surgeons reserves the right to withhold the results of
candidates not directly implicated in the unethical behavior and, if necessary, require such candidates to take an additional examination at a later date under conditions that will ensure the validity of all results.

g. Candidates or other persons who are directly implicated in an unethical behavior affecting the validity of the examination results are subject to additional sanctions, including being barred permanently from all future examinations, termination of participation in an ongoing examination, invalidation of results of the examination, withholding or revoking certification, being prosecuted for violation of copyright laws, or other appropriate action. Candidates or other persons subject to such additional sanctions will be provided with written notice of the charges and an opportunity to respond to such charges in accordance with the procedures set forth in the Procedure or Imposition of Sanctions on Candidates Accused of Unethical Behavior section of this information pamphlet.

h. Candidates or other persons who engage in other forms of unethical behavior, which may not directly affect the validity of examination results, are also subject to the foregoing additional sanctions. Examples of such unethical behavior include, among other things: false statements to, or submission of, falsified documents to the American College of Veterinary Surgeons; the use of any falsified American College of Veterinary Surgeons’ documents or the submission of such documents to other persons; or the offer of any financial or other benefit to any persons, officer, employee, proctor, or other agent or representative of the American College of Veterinary Surgeons in return for any right, privilege, or benefit which is not usually granted by the American College of Veterinary Surgeons to other similarly situated candidates or persons. Candidates or other persons subject to such additional sanctions will be provided with written notice of the charges and an opportunity to respond to such charges in accordance with the procedures set forth in the Procedure or Imposition of Sanctions on Candidates Accused of Unethical Behavior section of this information pamphlet.

Procedure or Imposition of Sanctions on Candidates Accused of Unethical Behavior

a. If the American College of Veterinary Surgeons has reason to believe that a candidate engaged in unethical behavior which may affect the validity of any examination results or in any other unethical conduct, the American College of Veterinary Surgeons shall provide written notice to the accused which will include: (i) the suspected unethical activity; (ii) the opportunity to defend against the charges in writing or at a hearing before a Special Committee of the American College of Veterinary Surgeons; and (iii) the sanction or sanctions which the American College of Veterinary Surgeons may impose if the accused fails to defend against the charges or, if after considering the defense, the Special Committee determines that the accused actually engaged in unethical behavior.

b. Within twenty (20) days after receiving aforementioned notice, the accused shall advise the Chief Executive Officer of the American College of Veterinary Surgeons, in writing, whether he or she wishes to defend against the charges and, if so, whether he or she wishes to make such a defense in writing or at a hearing. If the accused fails to respond, the American College of Veterinary Surgeons may impose on the accused any of the sanctions identified in the Examination Contract.

c. Within twenty (20) days after receipt of the accused's request for an opportunity to defend against the charges, the Chief Executive Officer of the American College of Veterinary Surgeons shall provide the accused with a written summary of the incriminating evidence, including copies of any relevant documentary evidence. If the accused has requested an opportunity to defend against the charges in writing only, the accused shall file his or her written defense with the American College of Veterinary Surgeons within thirty (30) days after issuance of the Chief Executive Officer's written summary of evidence. The Special Committee of the American College of Veterinary Surgeons shall issue its written decision as soon as possible thereafter. If a hearing has been requested, the American College of Veterinary Surgeons shall schedule the hearing at a mutually convenient time and place.
before a Special Committee within thirty (30) days after issuance of the American College of Veterinary Surgeons' written summary of evidence, and the Special Committee shall issue its written decision as soon as possible thereafter.

d. A Special Committee consisting of three (3) Diplomates appointed by the Chair of the Board of Regents of the American College of Veterinary Surgeons, who were not involved in the investigation of the allegations against the accused, shall rule on the accused's defense and, if necessary, preside at the hearing. A transcript of the hearing, if any, shall be kept.

e. The written decision of the Special Committee may be appealed in writing by the accused to the entire Board of Regents of the American College of Veterinary Surgeons within fifteen (15) days of the accused's receipt of such decision. The entire Board of Regents will review all of the evidence considered by the Special Committee, but it will not consider any evidence not previously presented to the Committee. The entire Board of Regents may affirm or reverse the decision of the Special Committee, remand the matter to the Special Committee for further consideration with precise instruction as to the basis of such reconsideration, or modify the sanctions imposed by the Special Committee. No person who served on the Special Committee shall vote or otherwise participate in the Board of Regents’ review of the Special Committee’s written decision.

f. All notices or other correspondence directed to the American College of Veterinary Surgeons or the Special Committee should be sent to the office of the American College of Veterinary Surgeons, 19785 Crystal Rock Drive, Suite 305, Germantown, MD 20874-4700.