American Board of Surgical Assistants

30 Years of Excellence to the Surgical Community
1987 to 2017

DR. PAUL F. WEEKS, MD
FOUNDER & CHIEF EXECUTIVE OFFICER
Who We Are

The American Board of Surgical Assistants (ABSA), was founded in 1987, by Paul F. Weeks, M.D. as a national credentialing organization, for surgical assistants.

The ABSA now administers both a national & international certification examination, for surgical assistants, covering all surgical disciplines and all areas of perioperative medicine.

The examination evaluates candidate knowledge of surgical anatomy, procedures and techniques, diagnostic studies, emergency situations, OSHA regulations and general patient safety.
We acknowledge that the role and function of a surgical assistant is to assist the surgeon, in the performance of a surgical procedure.

It is understood and acknowledged that certification as a surgical assistant through the ABSA (SA-C) does not allow for any independent performance, of any medical or surgical procedures, within the United States of America or its territories.
Our Mission

As a leading provider of surgical assistant examination and credentialing, the ABSA strives to develop and maintain quality standards for the surgical assistant, thereby promoting safety and protection of the public.

These standards include furtherment of knowledge, education and ethical conduct of the surgical assistant, through the continuation of the credentialing process and the promotion of pre and post educational training.

The ABSA shall not discriminate, at any time, among applicants as to age, sex, race, religion, national origin, handicap, marital or other protected status.
We as surgical professionals have an awesome responsibility to our patients, colleagues and ourselves!

- What is surgical assisting all about?
- How do we define Medical Professionalism?
- Who are we and how do we define ourselves and the role we are expected to fulfill?
What is Surgical Assisting All About?

Surgical Assisting involves active participation of a trained individual who is capable and able to assist the surgeon in completing a surgical procedure, safely and expeditiously.
A surgical assistant functions in the role of a second physician, at the operating table.

Ideally this individual should be another qualified surgeon or surgical resident, however, other licensed physicians experienced in surgical assisting would be the next choice.

Non-licensed physicians or non-physicians with additional formal training and national certification as a surgical assistant are also acceptable, as deemed appropriate by the primary responsible surgeon, for the type and complexity of the surgical procedure.
The primary function of a surgical assistant is to assist the surgeon, provide exposure, maintain hemostasis, and serve other technical functions as designated by the responsible licensed surgeon.

It is understood and acknowledged that certification and/or licensure as a surgical assistant (and not licensed as a physician in the USA), does not allow for any independent performance of any medical or surgical procedures, within the United States of America or its territories.
First and foremost, *Medical Professionalism* describes the skills, attitudes, values and behaviors common to those, in each area, of medical specialization and/or practice.
Medical Professionalism

It includes, but is not limited to, maintaining competency with ever changing global information, knowledge and skill sets.

Personal integrity, altruism, strict adherence to ethical codes of conduct, accountability and a dedication to one's profession are what makes each of us, a true professional.
Traditionally, and until relatively recently, health care had been delivered in what can best be described as a multidisciplinary model of teamwork.

In this model, each member of the health care team fulfilled a certain well-defined and predetermined role with little or no overlap between the activities of the team members.

Ultimate decision-making authority rested nearly always with the physician.
Medical Professionalism

With the increased utilization of *Allied Health Professionals*, we are finding this decision-making authority becoming more and more blurred.

This extended decision-making authority also increases the medical malpractice risk for both the physician provider and the allied health practitioner.

As a result it is imperative that each individual constantly challenges themselves to be the absolute best they can be, while maintaining the highest level of *Medical Professionalism*.
Our patients and colleagues expect and deserve nothing less!
A Strategic Alliance... now and for the future

The *International Organization of Surgeons and Surgical Assistants* and the *American Board of Surgical Assistants* have formed a *Non-Equity Strategic Alliance*, for the advancement, recognition and credentialing of all professional surgical assistants, not only in the United States of America but throughout all nations.

This and other future alliances will provide all professional surgical specialists including physicians, surgical assistants, nurses and technologists, throughout the world, with a unifying body and common point of communications.
Eligibility

You are eligible to sit for the ABSA Certification Examination for Surgical Assistants, if you meet one of the categories specified below.

- US & Foreign trained Physicians
- Licensed and Non-Licensed Personnel

Each candidate must possess more than a basic surgical and anatomical knowledge, along with the manual and technical skills necessary to function effectively, in the role of a surgical assistant.

Eligibility criteria and requirements have been set by the American Board of Surgical Assistants, which has final authority, regarding who may or may not sit for the examination.

There is no "Grandfather" option available!
As a physician you are eligible to sit for the ABSA Certification Examination for Surgical Assistants, if you completely meet the following criteria.

- Medical School Graduation.
- Residency or Advanced Training.
- Successful completion of an examination and/or coursework, documenting English proficiency.
- Curriculum Vitae.
- Color passport size photo

The above required items must document a minimum of two years primary or advanced surgical experience.

OR
US & Foreign trained Physicians

- Documentation of having first assisted, for a minimum of two years.
- Documentation of having first assisted on at least 400 clinical surgical cases or 1500 clinical surgical hours, during the last two years, where you were listed as the first assistant, on the operative record.
Licensed and Non-Licensed Personnel

- PA's, RN's, LPN's, CST's and ST's must provide documentation of successful completion of a formal surgical assisting training program, with a curriculum approved by the ABSA.

- Documentation of two (2) years clinical surgical work experience (resume or other)
  
  - Color passport size photograph
Examination

The ABSA Certification Examination for Surgical Assistants is comprised of three (3) sections;

200 multiple-choice questions, covering all surgical disciplines and all areas of perioperative medicine, including instrumentation and a manual / practical skills evaluation.

The examination evaluates candidate knowledge of surgical anatomy, procedures and techniques, diagnostic studies, emergency situations, OSHA regulations and general patient safety.
Examination Subject Breakdown

• General Surgery - 24%
• Orthopaedics - 15%
• Gynecological - 14%
• Varied other Surgical Specialties - 10%
• General Operative Knowledge - 21%
• Anatomy & Medical Terminology - 16%
The general knowledge section of the examination is comprised of 180 multiple-choice type questions, covering all areas of perioperative medicine and all surgical disciplines.
Key Benefits

- This section of multiple-choice type questions, allows the ABSA to evaluate a candidate's general knowledge, in all surgical disciplines.
- This section requires a candidate to possess more than just a superficial knowledge, of surgical medicine.
- This section permits a candidate to have validation of their knowledge, of surgical medicine, by means of a structured examination process.
The *Specialty Section* of the examination further evaluates advanced knowledge of surgical practice and assisting, by requiring completion of 20 very detailed multiple-choice type questions, with respect to surgical instrumentation, identification and usage.
Key Benefits

- This specialty section permits the ABSA to evaluate, in a very detailed form, a candidate's knowledge of surgical instrumentation.
- This specialty section also allows the ABSA to evaluate, a candidate's knowledge specific to usage and handling of surgical instrumentation.
The Practical Examination Section examines manual skills and permits the ABSA to evaluate the candidate, in areas that do not readily lend themselves to written examination.
Practical Examination Section

The following is a list of the items that will be evaluated, by an ABSA designated examiner, at the testing center:

- One Handed Tying
- Two Handed Tying
- Instrument Tying
- Deep Tying
- Tying Under Tension
- Surgeons Knot
- Figure-of-Eight Stitch
- Simple Running Stitch
- Mattress Stitch
- Running Subcuticular Stitch

**Key Benefits**
- This section allows the ABSA to evaluate the candidate's manual skills.
- The candidate has the opportunity to demonstrate their ability, to competently and smoothly perform tying and suturing.
As an ABSA, Surgical Assistant - Certified

I pledge to pursue and uphold the highest attainable ethical standards.

I will place the physical and psychological well-being of my patients above all else.

I will continue to improve my medical knowledge and surgical skills.

I will conduct myself in a manner that is honest and above reproach, at all times, especially when dealing with my patients, colleagues and medical staff.

I will assist my colleagues when requested and will seek their guidance when my own abilities are in doubt.

Finally, I will support and strive to advance the objectives and goals of the surgical profession and specifically those of the:

American Board of Surgical Assistants
First Assistant

The first assistant on a surgical procedure is defined as the individual providing primary assistance to the primary (main) surgeon, during a surgical procedure. This individual **CANNOT** be involved in any other role or function, during the surgical procedure (i.e. first or second scrub and/or passing instruments). This individual must also be listed on the operative record as the first assistant, not as a first or second scrub!

Although descriptions may vary from institution to institution, the role of the first assistant requires active participation, during the surgical procedure. This involves providing exposure, hemostasis, tying or sewing plus other functions (excluding acting as the scrub nurse or technician) as determined by the primary surgeon, responsible for the patient and procedure.

An individual may not act as a first assistant, for example, on a simple hernia repair or similar case with only themselves and the surgeon. This is a surgeon/scrub role and not a surgeon/assistant role.
Second Assistant

This individual is not the primary assistant to the primary surgeon and is hereby defined and designated as a retractor holder. An assistant as defined under this section does not qualify as a first assistant.
Hospitals and/or free-standing surgical centers often refer to Non-MD surgical assistants by general terms such as: certified first assistants, first surgical assistants, first assistants, or just surgical assistants.

Different credentialing organizations utilize different registered designations. Please contact each individual organization for their specific credential.

The ABSA designation is Surgical Assistant - Certified (SA-C).

The Surgical Assistant - Certified (SA-C) may function in the role of either a first or second assistant, as determined by the primary surgeon, depending on the operative procedure.
Statistics as of January 1, 2017

2016: 785 Candidates, 731 passed, 54 failed, --- Pass Rate: 93.1%, Failure Rate: 6.9%
2015: 708 Candidates, 666 passed, 42 failed, --- Pass Rate: 94.1%, Failure Rate: 5.9%
2014: 600 Candidates, 570 passed, 30 failed, --- Pass Rate: 95.0%, Failure Rate: 5.0%
2013: 606 Candidates, 589 passed, 17 failed, --- Pass Rate: 97.2%, Failure Rate: 2.8%

(4 year pass/fail statistical averages; Pass Rate: 94.8%, Failure Rate: 5.2%)

These pass/fail statistics are comparable to physician, medical / surgical specialty boards.
Finally, as of 04 February 2017 the ABSA has:

3057 Active Surgical Assistants - Certified (SA-C's)

** 5529 candidates certified as SA-C's since 1987 **
Telephone: (Central Time Zone)
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