

THE AMERICAN BOARD OF SURGERY

Incorporated



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Council Nominating Organizations:

The ABS has completed its three-year process of review and revision of our governance structure. The new structure consists of 5 specialty boards, a governing board, and a strategic council and council committees.

The new structure is specifically tailored to make the highest and best use of the skills of our very accomplished and talented volunteers; to enhance the flexibility, strategy and creativity of the ABS processes; and to simultaneously protect the corporate entity of the American Board of Surgery. This was a director driven process, beginning with an internal review of governance in 2016, and continuing with a strategic plan and governance redesign that included input and guidance from all of our stakeholders, including nominating societies, peer societies, advisory councils, specialty boards, and members of the board of directors both past and present. In the new structure all of the traditional work of the ABS continues, although some of the roles have been renamed or recategorized.

Our directors have traditionally been nominated through our nominating societies because of their vision and leadership. Envisioning the future of surgery through assessment, education and training standards, research, and diplomate relationships will remain in the purview of the nominees from our societies. The group of individuals charged with this work, formally the directors of the ABS, are now called the Council as a group, and Members of the Council of the ABS as individuals. The previous Board of Directors has been split into Council Members (the majority) and a new governing board.

The new governing board of the ABS is a competency-based board, positioned to take responsibility for the financial and legal health of the organization. These charges include finance, governance, and reputation, and the directors of that board bear legal fiduciary responsibility for those decisions. The bylaws provide that the majority of directors of the board will be surgeons, but the move to a competency based board allows us to recruit experts in other fields as well.

The specialty boards will continue to do the work of exam development and delivery, as well as working with our partners in surgical training to establish standards in training and beyond. In addition to our existing specialty boards of Complex General Surgical Oncology, Pediatric Surgery, Trauma Burns and Critical Care, and Vascular Surgery, we have established the board of General Surgery, previously known as the General Surgery Advisory Council or GENSAC. Each group will focus on their own core training standards as well as education and assessment issues.

All current nominating societies will continue to nominate to the Council, and the Members of the Council will continue the work of setting the global trajectory of education, assessment, research, and diplomate issues through their various committees. Each Council Member will also sit on a specialty board, as they have in the past. Unlike the past, they will now be able to focus specifically on their own specialty. Some Members of the Council, depending on their competencies and the specific needs of

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the board of directors, will shift to the board from time to time. The bylaws require that at least 7 members of the board of directors come from the Council.

This new structure sets us up to be able to fulfill our mission and protect the organization. It meets both legal and best practice standards for non-profit governance. We feel confident that it allows us to make the best and highest use of our Council Members, board of directors, and specialty board members, as well as the hundreds of volunteers who contribute by writing items, scenarios or serving as associate examiners.

As always, we will notify you several months in advance when we seek new nominees from your societies. You should be hearing from us shortly if nominees are required for the coming year. Thank you for your support and partnership in the house of surgery.

Jo Buyske, MD, DABS, President and CEO