

## COMMENTARY

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# The American Board of Surgery Sub Board for Vascular Surgery: A note of caution

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The Sub Board concept was put forth by the American Board of Surgery (ABS) as a response to Vascular Surgery's initiative to establish an independent American Board of Medical Specialties-approved American Board of Vascular Surgery (ABVS), with its own Residency Review Committee (RRC-VS) to oversee the training and certification processes for vascular surgeons. The initiative to form an ABVS was fundamentally the result of Vascular Surgery's evolution into a discrete specialty and its differentiation from the parent specialty of General Surgery. However, the act of creating the ABVS was precipitated by the inability of the ABS and of the Residency Review Committee—Surgery (RRC-S) to recognize these evolutionary developments and by their unwillingness to serve optimally the interests of Vascular Surgery, particularly when these interests did not coincide with those of General Surgery. These limitations are exemplified by the insistence of the ABS that all General Surgery trainees be fully trained in vascular surgery, with the implication that they are capable of practicing the breadth of vascular surgery, and by the RRC-s' past evaluations of Vascular Surgery training programs as much or more on the basis of the numbers of major vascular cases provided to General Surgery trainees than on the basis of those provided to Vascular Surgery trainees. These requirements have been maintained despite the facts that most current and recent graduates of General Surgery training programs who go into practice perform few major vascu-

lar operations, that most such procedures are performed by surgeons certified in Vascular Surgery, and that surgeons who perform large numbers of vascular operations obtain better results than those who perform few.

In the past year, the leadership of the Vascular Surgery Societies has repeatedly and in good faith negotiated with the ABS in an effort to reach a compromise that, short of an independent ABVS, would provide Vascular Surgery with operational authority over decisions bearing on training and certification in Vascular Surgery. Despite these repeated efforts of the Vascular Surgery Society leadership to invest the Sub Board with operational authority over issues that concern Vascular Surgery, the ABS has restricted the responsibility of the proposed Sub Board to that of a body that in principle advises and makes recommendations. The Sub Board will clearly have no defined authority to act on Vascular Surgery issues that may impact General Surgery. Such authority will continue to reside with the directors of the ABS. The role and the responsibility of the proposed Sub Board will probably not be greatly different from those of the present Vascular Committee of the ABS. In reality, the creation of the Sub Board provides an impression that Vascular Surgery has control of its affairs, but in fact all decision-making powers on substantive issues are retained by the ABS directors.

It is possible that the Sub Board for Vascular Surgery in its present form will simply maintain the present unsatisfactory status quo. Although the urgent need for some major change in the relationship between Vascular Surgery and the ABS and RRC-S was recognized several years ago, considerable concern exists that the Sub Board will not produce such a change in a timely fashion. The meetings of the ABS directors occur only twice a year,

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which makes it likely that years will elapse before the Sub Board's inability to serve the needs of Vascular Surgery and vascular patients can be fully documented.

The Sub Board should be regarded with caution until it is invested with the necessary authority to serve the needs of Vascular Surgery. Our representa-

tives to the Sub Board should be charged by the leadership of the Vascular Societies to bring critical issues to the Sub Board as rapidly as possible. If the Sub Board fails, the Vascular Societies should pursue the process of gaining American Board of Medical Specialties recognition of an independent ABVS as quickly and energetically as possible.