

**International Board for the  
Certification of Specialists in Oral  
and Maxillofacial Surgery  
Fellowship in Head & Neck Surgery  
Handbook**



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IMPORTANT: The enclosed Rules and Procedures are specific to Fellowship Certification in Head and Neck Surgery and Reconstructive Surgical services.

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*The IBCSOMS reserves the right to make changes in its rules and procedures for its examination and certification at any time and without prior notice. These rules and procedures supersede all rules and procedures prior to March 5, 2020*

## **Mission**

The mission of the International Board for the Certification of Specialists in Oral and Maxillofacial Surgery (IBCSOMS) to assure the public of safe and optimal care through the development and maintenance of high standards of certification Fellowship in the specialty.

## **Objectives**

The objective of the IBCSOMS is to elevate the standards of oral and maxillofacial surgery through a certification and maintenance of certification process that fosters excellence and encourages learning, thus promoting the delivery of superior health care.

To meet this objective, the IBCSOMS will:

- Evaluate specialist who apply for initial certification and assure that they have the requisite training, education and experience.
- Administer a certification process that assesses the knowledge, experience, and skills requisite to the provision of high quality patient care in oral and maxillofacial surgery.
- Administer a certification process which will allow candidates to obtain a FELLOWSHIP on either Ablative Head and Neck Oncologic Surgery only or a double certification in both Ablative and Reconstructive Microsurgical Head and Neck Surgery

## **Fellowship in Head and Neck Surgery**

The Fellowship in Head & Neck Surgery is designed for board certified oral and maxillofacial surgeons, otolaryngologists, plastic surgeons or general surgeons who have demonstrated significant achievements in this specialized area, and who conduct a practice with emphasis on, and commitment to, this focused. subspecialty of head and neck surgery

Holding this Fellowship does not bestow special privileges related to the practice of Head & Neck Oncologic and Reconstructive Surgery. The possession of this Fellowship does not comprise comprehensive qualification for surgical privileges nor does it imply exclusion of other practitioners of either Oral and Maxillofacial Surgery or other disciplines without this certification.

The ultimate goal of this Fellowship is to inform the public and our professional colleagues that the qualified surgeon who holds this Certification has completed additional specialty education, a certification examination process, and is qualified to practice Head & Neck Oncologic and Reconstructive Surgery as a focused specialty.

## **Eligibility & Application Requirements**

The eligibility pathway for qualification.

An Applicant:

1. Must be a certified specialist by their respective country board or equivalent in either Oral and Maxillofacial Surgery, Otolaryngology, Plastic Surgery or General Surgery, with an additional documented evidence of a minimum of one year of dedicated mentored training in Head and Neck Surgery
2. Must have full, active, unrestricted hospital privileges to admit and provide head and neck oncologic and reconstructive surgery services.
3. Must submit a Surgical Case Log (See page 3 for a description of the Case Log requirements) of head and neck oncologic and reconstructive surgery services.
4. Must complete an Application for Examination to be found on the IBCSOMS Website ([www.ibcsoms.org](http://www.ibcsoms.org))
5. Must remit a non-refundable Application Fee at the time of Application submission. (See page 5 for an outline of all Fees).
6. Must submit three (3) Letters of Recommendation from persons familiar with the applicant's training and scope of practice, such as:

- a. Principal Head and Neck Surgical Supervisor of the training
- b. Chief of Surgical Services at the applicants' current principal hospital.
- c. Chair of the applicants multidisciplinary tumour board.
- d. Peer head and neck surgeons

The Letters of Recommendation must attest that the applicant:

- i. Is actively and consistently involved in head and neck surgery within their service
  - ii. Is an ethical surgeon; and,
  - iii. Is not under scrutiny for any pending disciplinary, legal or other matters related to the practice of surgery.
9. Must have full, active, unrestricted hospital staff privileges to provide head and neck surgery services.

## General

The IBCSOMS may request additional information or data that addresses an applicant's ethical and moral standing in the specialty.

## Surgical Case Log

1. A surgical case log spanning no longer than the last 24 months preceding submission of an Application must be submitted as part of the Application.
2. Must include 100 operative surgical cases of head and neck oncologic and reconstructive surgical services, managed by the applicant as the primary surgeon.
3. May not include surgeries and procedures performed in an office setting.
4. May not include surgeries performed while enrolled in a Fellowship program unless there is attestation that the Fellow was the primary surgeon in the case.
5. May not include cases performed in foreign mission trips. (Such cases do not reflect the structure of the applicant's regular practice in his/her home institution).
6. If the applicant is applying to the combined Fellowship in ablation and reconstruction, the case log must include 25 additional cases of free tissue transfer (microsurgery), local and regional flaps with the Application.
7. A Surgical Case Log form is included as part of the on-line Fellowship in Head and Neck Surgery application at: [www.IBCSOMS.org](http://www.IBCSOMS.org).

## Requirements for Case Log Submission

### Head & Neck Surgery

- a. Excision of benign/malignant tumors involving hard and soft (Minimum 60 total procedures for categories a & b)
- b. Excision of benign and malignant salivary gland tumors.
- c. Neck dissections (Minimum 25 procedures)
- d. Surgical airway management (Minimum 15 procedures)

### Reconstruction

- a. Surgical management with Pedicled local, regional and distant flaps (free tissue transfer – microsurgery) for head & neck reconstruction (Minimum 25 procedures)

## Examination Registration

Once an applicant has been approved as a Candidate, he/she will be provided information to visit the IBCSOMS website and register for the next Examination administration. A non-refundable Examination Fee, payable by an acceptable credit card, will be required as part of the Candidate's online registration. It is the Candidate's responsibility to be aware and meet all deadlines. The fees for the Application and Examination are required to be made using VISA, MasterCard, American Express and PayPal.

1. If an applicant's eligibility is approved, he/she will be notified of his/her Candidate status. The approved Candidate will then return to the IBCSOMS website and register for the next examination date.
2. An approved Candidate will be granted two opportunities to take the Head and Neck Examination. A Candidate's failure to take or pass the Head and Neck Examination within these two opportunities will be required to submit a re-application; fulfill all eligibility requirements; and, remit an Application Fee at the time of re-application.
1. At the discretion of IBCSOMS, a Reapplication may include additional letters of recommendation and, an updated Surgical Case Log.

## Head and Neck Surgery Examination

The Head and Neck Surgery Examination is a three-hour 100 item computer examination. The Reconstructive Surgery Examination is an optional module with 45 questions for the computer examination. The candidate must participate in the Head and Neck Surgery examination to sit for the Reconstructive Surgery examination.

For the Head and Neck Surgery portion of the examination the questions will cover broad but comprehensive topics relating to the diagnosis, surgical and medical management, including complications, of pathologic conditions. Additionally, the reconstruction management of ablative defects, immediate and delayed, will be included.

The oral examination for the head and neck oncologic surgery must be completed if a candidate wishes to participate in the reconstructive surgery examination. Both examinations will be held concurrently.

The next exam will be administered is to be determined.

## Examination Blueprint

### A. Pathology

- a. Airway Management
- b. Benign Lesions of hard tissue
- c. Malignant Lesions of hard tissue
- d. Benign & Malignant lesions of soft tissue
- e. Salivary Gland
- f. Management of neck and neck lesions
- g. Chemotherapy and radiotherapy

### B. Reconstruction

- a. Pedicle Flaps (required for head & neck oncology)
- b. Non-vascularize Graft
- c. Free vascularized Graft

## 2021 Examination Schedule at a Glance

Head & Neck Surgery Application and Examination Dates	
Examination Application And Application Fee Period	October 8, 2021-January 1, 2022
IBCSOMS Application Review Completion Deadline	January 14, 2022
Applicant Notification of Approval/Denial	January 14, 2022
MCQ Examination Administration	March 2 & March 3, 2022
Oral Examination Administration	March 4-7, 2022
Examination Results Communicated	April 25, 2022

## Fees

An approved Application and Application Fee are valid for two examination administrations, only. Thereafter, a new Application and Application Fee must be submitted.

Exam	Head & Neck Surgery
Fees	\$500 USD Application Fee  \$2500 USD Examination Fee for IBCSOMS Fellows  \$3000 USD Examination Fee for non-Fellows

Examination Fees may be deferred for one examination administration, only. However, the Candidate must request the deferral no later than 60 days prior to the scheduled Examination administration date. A Candidate that does not pass the Examination must submit a new Examination Fee upon re-application.

A candidate that defers his/her examination until the next administration may, at the discretion of IBCSOMS, be required to submit supplemental information, including but not limited to, verifiable evidence of participation in a tumor board; letters of recommendation, and, an updated surgical case log for the period of time preceding the deferred examination date.

## **Policy**

### **Applicants' Responsibilities**

The timely submission of applications and the accuracy of the information submitted therein are the sole responsibility of the applicant. The IBCSOMS recommends reading and following all instructions thoroughly.

Application submissions arriving at the IBCSOMS administrative office past the posted deadline, regardless of the reason will not be accepted.

It is the applicant's responsibility to keep a current address, e-mail and telephone number on file. The IBCSOMS does not share contact information with any other organization.

### **Annual Registration Fee**

A non-refundable Annual Registration Fee of \$150.

### **Release of Examination Results**

The IBCSOMS will not release any examination result information by phone, fax, or e-mail. The IBCSOMS does not report pass or fail information to third parties. The IBCSOMS reserves the right to withhold examination results if any application materials are found to be deficient, expired or inaccurate. All result letters for a particular examination are mailed out in identical envelopes on the same day. The IBCSOMS is not responsible for delays because of outdated contact information on file or mail service.

### **Appeal Mechanism**

A Candidate who is unsuccessful in the Examination has a mechanism to appeal the outcome. Information about the appeal process is available upon written request from the IBCSOMS administrative office.

### **For questions please contact:**

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