The American Board of Cardiovascular Perfusion

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AMSECT Meeting
Colorado Springs, CO

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Who we are . . .

Credentialing board established in 1975 to certify clinical perfusionists through peer review

Comprised of 8-14 Directors, who are experienced CCPs, with diverse backgrounds and experiences
What we do.

- Develop and maintain quality standards that promote safety and protection of the public
- Standards include the attainment and enhancement of knowledge, skills, and ethical professional conduct
- Standards emanate from the design, implementation, and administration of the credentialing process
- Includes stimulation of innovative educational activities and promotion of ethical professional development
- Award Certified Clinical Perfusionist (CCP) credential

ABCP Position on Certification

Extracorporeal technologies such as ECMO, VAD, autotransfusion, blood therapy, pediatric perfusion, and adult perfusion are part of the consensus curriculum developed by the ACPE and followed by accredited perfusion education programs.

It is the position of the ABCP that all CCPs have acquired knowledge and have demonstrated through the certification process a validated level of knowledge in these areas.

ABCP Directors

Edward R. DeLaney, CCP  
President
Kyle Spear, CCP  
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Bradley T. Kulat, CCP  
Secretary
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Charles E. Johnson, CCP  
Director
David Palmer, CCP  
Director
William D. Riley, CCP  
Director
Carol Ann Rosenberg, CCP  
Director
Demographics

- 9 ABCP Directors
- Secondary allied health careers include respiratory therapy, nursing, paramedical, biomedical engineering & medical technology
- 8 state licensed
- 8 hold perfusion leadership roles
- All clinically active
- 3 Bachelors' degrees, 5 masters' degrees & 1 doctoral degree
- 4 pediatric & 5 adult perfusionists
- 180 cumulative CCP years

Performing clinical cases...

- CPB
- ECMO
- VAD
- Transplantation
- CPS
- Veno-venous Bypass
- Pump Assisted Coronary
- Organ Perfusion
- Pediatric
- Adult
- Chief
- Hospital employed
- Contract employed
- Clinical Instructor
- Didactic Instructor
- Administrator

How we became Directors...

- Practicing perfusionist with a minimum of 5 years experience as a CCP
- Nominated by ourselves or other CCPs
- Submitted a CV detailing education, work and professional experiences that include research/presentations/publications
- Signed commitment form to attend three meetings a year and be available on an ongoing basis for ABCP committee work
Why be a Director . . .

• To contribute to the perfusion profession
• To network with other CCPs
• To learn more about perfusion
• To expand horizons

Who we collaborate with . . .

ABCP Liaison Panel includes:
• American Academy of Cardiovascular Perfusion (AACP)
• American Society of Extracorporeal Technology (AmSECT)
• Perfusion Program Directors Council (PPDC)
• Canadian Society of Cardiovascular Perfusion (CSCP)
• Extracorporeal Life Support Organization (ELSO)
• Accreditation Committee-Perfusion Education (AC-PE)
Commission on Accreditation of Allied Health Education Programs (CAAHEP)
Canadian Medical Association (CMA)
Provide supportive services to 18 states for perfusion licensure.

ABCP Executive Directors

• Beth A. Richmond, Ph.D.
• Stephen E. Oshrin, Ph.D.
  – Executive Co-Directors
• Casey C. Turnage, Ph.D.
  – Associate Executive Director
• Patricia Kirkland
  – Administrative Assistant & Manager
• Felicia Keyes
  – Recertification Specialist
ABCP National Office
2903 Arlington Loop
Hattiesburg, MS 39401

16 Year ABCP CCP History

Licensure States
• Arkansas
• Connecticut
• Georgia
• Illinois
• Louisiana
• Maryland
• Massachusetts
• Missouri
• Nebraska
• Nevada
• New Jersey
• New York
• North Carolina
• Oklahoma
• Pennsylvania
• Tennessee
• Texas
• Wisconsin
Credentialing Process
How we do it . . .

- Establish qualifications for examination
- Develop and maintain ABCP certification examinations
  - Perfusion Basic Science Examination (PBSE)
    - measures knowledge of basic science as applied to perfusion
  - Clinical Applications in Perfusion Examination (CAPE)
    - measures knowledge of the practice of clinical perfusion

About the ABCP Examinations . . .

- Each examination is approximately 220 questions to be completed in 4 hours.
- Examinations are developed, scored, and evaluated by the Directors of the American Board of Cardiovascular Perfusion.
- Examinations are administered through Prometric Testing Centers.
  - Prometric provides examinations for over 350 organizations and delivers over 9 million examinations per year, with 377 testing sites in the U.S.

Knowledge Base

- Anatomy & Physiology
- Pharmacology
- Pathology
- Laboratory Analysis
- Quality Assurance
- Devices & Equipment
- Clinical Management
- Special Patient Groups
- Special Procedures & Techniques
- Catastrophic Events
- Monitoring
Knowledge Base Validation

- The ABCP Knowledge Base is validated by CCPs every 5 to 7 years. Open now.
- The validation survey is currently available online at www.abcp.org.
- In 2011, there were 730 completed surveys in which CCPs rated the importance and usage of ABCP Knowledge Base items.
- Adjustments were made to the Knowledge Base in response to the survey.

Importance

Usage
ABCP Practice Examinations

• In 2008, the ABCP developed and began administering a practice examination through the Prometric website.
• Questions are similar in format and content to actual items on the PBSE and CAPE.
• Results are given to the examinee by category.
• Results are NOT recorded or evaluated by the ABCP.
• Practice examinations are periodically updated.

Item Analysis

• An examination development meeting is held each summer to develop and review examination items.
• Questions are reviewed for reliability, validity, relevancy, and currency.
• Statistical history is maintained for each examination item for each time the item is used on an examination.

Question Development

What is wrong with this item?

1. Continuous warm blood cardioplegia:
   A. increases oxygen delivery.
   B. decreased myocardial oxygen consumption.
   C. causes a shift of the oxygen curve to the left.
   D. reduces coagulation in the immediate post-operative period.

   • Stem does not present a specific problem. The examinee cannot tell what is being asked from the stem.
   • Distracter B is not grammatically consistent with the stem.
   • Distracter D is not a plausible distracter.

1. An advantage of using continuous warm blood cardioplegia is:
   A. increased oxygen delivery.
   B. significantly decreased myocardial oxygen tension.
   C. a shift of the oxygen dissociation curve to the left.
   D. decreased myocardial oxygen consumption.
Monitoring ACT in the presence of Trasylol (aprotinin) is most accurate when using which of the following activators?

A. Celite.
B. glass beads.
C. kaolin.
D. diatomaceous earth.

Recertification Highlights

• Probation has been changed to conditional certification.
• Extended leave certification has been added.
• Category 1 CEUs are awarded to live webinars of approved Category 1 meetings.
• Category 1 CEUs are awarded to High Fidelity Perfusion Simulation (HFPS).
• Online filing has been enhanced.
• Category 1 CEUs are awarded for editorial reviewers.

CCP Emeritus Update

• Beginning in 2014, CCPs who retire after a minimum of 20 years of practice as a CCP are eligible for CCP Emeritus status.
• May use the title CCP Emeritus.
• Will be listed on the ABCP website as CCP Emeritus.
• Will receive a commendation certificate.
• Will receive all ABCP publications.
• 346 to date listed on the ABCP website.
• May ask for immediate CCP Emeritus status.

ABCP Updates 2015-2016

- Clinical Perfusion Activities “PCPA & SCPA”
- High Fidelity Perfusion Simulation (HFPS)
- Revisions in the Independent Case Requirements for the Clinical Application in Perfusion Examination (CAPE)
- Online Filing System (OFS) Enhancements
- CCP Emeritus Designation
- ABCP Knowledge Base Validation Study

Electronic Enhancements in Online Filing System

- The Online Filing System (OFS) now incorporates an electronic data-load system that imports perfusion data-management programs directly into the ABCP online filing system.
- A Frequently Asked Questions (FAQ) section on the ABCP website provides specific answers to commonly asked questions.
- The National Office has requested that each CCP submit a current email address so that notifications can be sent by email as well as through the USPS.
- Beginning in 2014, all recertification reports must be submitted online. Benefits of the OFS:
  - Enhanced communication
  - Online survey opportunity with option to participate; insight from AmSECT, PPDC, AC-PE, AACP, ELSO, etc.

ABCP APP

- Calendar of events
  - ABCP CEU and SDCE approved meetings
  - CEU points and meeting website access
- CCP login to file cases
- Access to Booklet of Information
- National office contact info (one touch button)
- Push notifications/reminders
- Immediate Access
  - Website, Mission Statement
  - Annual report
ABCP APP

- Available for free download by Apple app store:

- Or by Google Play:

Simulation Events

2011 Form ABCP Ad Hoc Committee
- Learn & experience simulation

2012 Recommendation to AC-PE simulation “recommended”

2013 Liaison Panel Meeting
- Request involvement defining future
- Promote ABCP CEU credit
- Formal standing ABCP committee

2014 Liaison Panel Meeting
- Request involvement defining future

2015 Promote ABCP case credit with verified simulation centers

2015 Liaison Panel Meeting
- Request involvement defining future
- Endorse accreditation

2015 Recommendation to AC-PE simulation “required”
- High fidelity “recommended”

Surveys

- Knowledge Base Survey
  - Important, results will be analyzed to make changes at the fall meeting
  - Deadline July 31st
  - 5 Category 1 CEU’s

- Recertification Survey
  - Will be used to enact change
Goals for the Future

• Liaison Panel collaboration
  • Continue to be responsive to changes within the perfusion profession

• Simulation
  • Engage the public
  • Create an environment of competency and safety

• Information Technology
  • Continue to evolve with technological changes
  • Survey our clinical colleagues

• Value Added Services
  • Extended leave
  • Licensure support
  • Educational support

Only changes that make the CCP credential stronger are considered.
Input from the profession is necessary for continuous improvement of the ABCP credentialing process.

Thank You

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