Purpose of the exam

The exam is designed to evaluate the knowledge, diagnostic reasoning, and clinical judgment skills expected of the certified gastroenterologist in the broad domain of the discipline. The ability to make appropriate diagnostic and management decisions that have important consequences for patients will be assessed. The exam may require recognition of common as well as rare clinical problems for which patients may consult a certified gastroenterologist.

Exam content

Exam content is determined by a pre-established blueprint, or table of specifications. The blueprint is developed by ABIM and is reviewed annually and updated as needed for currency. Trainees, training program directors, and certified practitioners in the discipline are surveyed periodically to provide feedback and inform the blueprinting process.

The primary medical content categories of the blueprint are shown below, with the percentage assigned to each for a typical exam:

<table>
<thead>
<tr>
<th>Medical Content Category</th>
<th>% of Exam</th>
</tr>
</thead>
<tbody>
<tr>
<td>Esophagus</td>
<td>11%</td>
</tr>
<tr>
<td>Stomach and Duodenum</td>
<td>15%</td>
</tr>
<tr>
<td>Liver</td>
<td>25%</td>
</tr>
<tr>
<td>Biliary Tract</td>
<td>10%</td>
</tr>
<tr>
<td>Pancreas</td>
<td>11%</td>
</tr>
<tr>
<td>Small Intestine</td>
<td>10%</td>
</tr>
<tr>
<td>Colon</td>
<td>18%</td>
</tr>
<tr>
<td></td>
<td>100%</td>
</tr>
</tbody>
</table>

Exam questions in the content areas below may also address topics in endoscopy, genetic conditions, medication management and risks, nutritional support, and quality benchmarking.
ABIM is committed to working toward health equity and believes that board-certified physicians should have an understanding of health care disparities. Therefore, health equity content that is clinically important to each discipline will be included in assessments, and the use of gender, race, and ethnicity identifiers will be re-evaluated.

Exam format

The exam is composed of up to 240 single-best-answer multiple-choice questions, of which approximately 40 are new questions that do not count in the examinee’s score. Most questions describe patient scenarios and ask about the work done (that is, tasks performed) by physicians in the course of practice:

- Making a diagnosis
- Ordering and interpreting results of tests
- Recommending treatment or other patient care
- Assessing risk, determining prognosis, and applying principles from epidemiologic studies
- Understanding the underlying pathophysiology of disease and basic science knowledge applicable to patient care

Clinical information presented may include patient photographs, imaging studies, electrocardiograms, endoscopic video, and other media to illustrate relevant patient findings. Learn more information on how exams are developed.

A tutorial including examples of ABIM exam question format can be found at http://www.abim.org/certification/exam-information/gastroenterology/exam-tutorial.aspx.

The blueprint can be expanded for additional detail as shown below. Each of the medical content categories is listed there, and below each major category are the content subsections and specific topics that may appear in the exam. Please note: actual exam content may vary.

<table>
<thead>
<tr>
<th>Esophagus</th>
<th>11% of Exam</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anatomy, development, and physiology</td>
<td>&lt;2%</td>
</tr>
<tr>
<td>Anatomic abnormalities</td>
<td></td>
</tr>
<tr>
<td>Esophageal physiology</td>
<td></td>
</tr>
</tbody>
</table>
Symptoms and clinical presentation
- Dysphagia
- Heartburn
- Chest pain
- Globus sensation

Diseases and disorders
- Oropharyngeal disorders
- Gastroesophageal reflux disease (GERD)
- Esophageal motility and functional disorders
- Barrett esophagus
- Foreign body and food impaction
- Esophageal injury
- Esophageal infections
- Neoplasms of the esophagus
  - Benign
  - Malignant
- Esophageal ulcerations
- Eosinophilic esophagitis
- Esophageal varices
- Systemic disorders involving the esophagus

Stomach and Duodenum 15% of Exam

Anatomy, development, and physiology <2%
- Anatomic abnormalities
- Physiology of the stomach and duodenum

Symptoms and clinical presentation 3%
- Upper gastrointestinal bleeding
- Dyspepsia and upper abdominal pain
- Nausea and vomiting

Diseases and disorders 10.5%
- Gastric mucosal disorders
  - Inflammatory
  - Infiltrative
- Peptic ulcer disease
  - *Helicobacter pylori*
  - Medication-induced
Neoplasms of the stomach and duodenum
   Benign
   Malignant
Gastric motility and functional disorders
Post-surgical conditions
   Bariatric surgery
   Gastric resection
   Surgery for benign disease
   Surgery for malignant disease

<table>
<thead>
<tr>
<th>Liver</th>
<th>25% of Exam</th>
</tr>
</thead>
</table>

**Anatomy, development, and physiology** 2.5%
   Anatomic abnormalities
   Hepatic physiology

**Symptoms and clinical presentation** 2.5%
   Abnormal liver chemistries
   Jaundice
   Portal hypertension
      Varices
      Ascites and hepatic hydrothorax
      Hepatorenal syndrome
      Portosystemic encephalopathy
      Pulmonary complications

Pruritus

**Diseases and disorders** 20%
   Inherited disorders
      Iron overload
      Wilson disease
      Alpha\textsubscript{1}-antitrypsin deficiency
      Cystic fibrosis
      Sickle cell hepatopathy
   Cholestatic liver diseases
      Primary biliary cholangitis
      Primary sclerosing cholangitis
      Secondary biliary cholangitis
Viral hepatitis
    - Hepatitis A
    - Hepatitis B
        - Acute hepatitis B
        - Chronic hepatitis B
    - Hepatitis C
        - Acute hepatitis C
        - Chronic hepatitis C
    - Delta hepatitis
    - Hepatitis E
Autoimmune hepatitis
Vascular liver disease
Alcohol-associated liver disease
Metabolic dysfunction–associated steatotic liver disease (MASLD)
Drug-induced liver disease
Pregnancy-related liver disease
Acute liver failure
Neoplasms of the liver
    - Benign
    - Malignant
Liver abscess
Hepatic manifestations of systemic disease
Liver transplantation
    - Indications and complications
    - Surgical considerations for patients who have liver disease
Extrahepatic manifestations in patients who have liver disease

<table>
<thead>
<tr>
<th>Biliary Tract</th>
<th>10% of Exam</th>
</tr>
</thead>
</table>

**Anatomy, development, and physiology**
- Anatomic abnormalities
- Physiology of the biliary tract

**Symptoms and clinical presentation**
- Obstructive jaundice
- Right upper quadrant pain
- Hemobilia
Diseases and disorders
   Gallstone disease
   Gallbladder diseases
   Bile duct diseases
   Biliary infections
   Neoplasms of the biliary tract
      Benign
      Malignant
   Biliary motility and functional disorders

Pancreas  

<table>
<thead>
<tr>
<th>Anatomy, development, and physiology</th>
<th>&lt;2%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anatomic abnormalities</td>
<td></td>
</tr>
<tr>
<td>Physiology of the pancreas</td>
<td></td>
</tr>
<tr>
<td>Symptoms and clinical presentation</td>
<td>&lt;2%</td>
</tr>
<tr>
<td>Duct disruptions</td>
<td></td>
</tr>
<tr>
<td>Malabsorption</td>
<td></td>
</tr>
<tr>
<td>Ascites</td>
<td></td>
</tr>
<tr>
<td>Diseases and disorders</td>
<td>8%</td>
</tr>
<tr>
<td>Acute pancreatitis</td>
<td></td>
</tr>
<tr>
<td>Chronic pancreatitis</td>
<td></td>
</tr>
<tr>
<td>Neoplasms of the pancreas</td>
<td></td>
</tr>
<tr>
<td>Benign</td>
<td></td>
</tr>
<tr>
<td>Malignant</td>
<td></td>
</tr>
</tbody>
</table>

Small Intestine  

Anatomy, development, and physiology  
   Congenital anomalies
   Acquired structural anomalies
   Digestion, absorption, and malabsorption
   Mechanical obstruction and ileus

Symptoms and clinical presentation  
   Diarrhea
   Acute abdominal pain
Chronic abdominal pain
Bleeding from small intestinal source
Abdominal distention, bloating, and gas

**Diseases and disorders** 7%
- Small bowel motility and functional disorders
- Small bowel infections
- Small bowel injury
- Immunologic and inflammatory disorders of the gut
  - Eosinophilic gastroenteritis
  - Crohn disease of the small bowel
- Complications
  - Extra-intestinal manifestations
- Celiac disease
- Neoplasms of the small bowel
  - Benign
  - Malignant
- Vascular disorders of the small bowel

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**Colon** 18% of Exam

**Anatomy, development, and physiology** <2%
- Volvulus and intussusception
- Defecation

**Symptoms and clinical presentation** <2%
- Constipation
- Diarrhea
- Fecal incontinence
- Lower gastrointestinal bleeding
- Abdominal pain

**Diseases and disorders** 15%
- Colorectal motility and functional disorders
- Colorectal infections
- Colorectal injury
- Inflammatory bowel disease
  - Microscopic colitis
  - Ulcerative colitis
Crohn disease
Drug-induced inflammatory bowel disease
Diverticular disease
Hemorrhage
Diverticulitis
Appendicitis
Neoplasms of the colon and rectum
Benign
Malignant
Vascular disorders of the colon and rectum
Perianal and anorectal disorders
Post-surgical colorectal conditions

January 2024