

ABPM CAQ Exam in Amputation Prevention and Wound Care

Study Guide

This study guide was created to help prepare candidates to take the CAQ Exam. It is not all-encompassing and, instead, provides general content areas to orient the candidate to the ABPM expectations of a podiatric expert in Amputation Prevention and Wound Care. The exam committee, however, believes that most of the information needed to pass the exam is derived from the candidate's experience of practice in the specialty areas of limb salvage and wound care.

Exam Format

The CAQ exam is computer-based, in multiple-choice formats. A question stem is provided, which may include a short case-based narrative and a question, followed by a series of choices. The candidate is expected to select the best choice (or choices, depending on question format). Pay close attention to the language of the question, especially with negatively-framed questions such as those indicating "EXCEPT", "LEAST", "CONTRAINDICATED", "is NOT", etc. In addition, one or more digital media assets may accompany the question, such as a photograph or imaging study. In some questions a zoom function may be provided for the media asset. Note that an ABPM-approved list of reference ranges and other reference material may be found on the [ABPM App](#) is easily accessible to the candidate while testing. A list of normal laboratory values is also accessible to the candidate while testing. The ABPM does not expect candidates to know "normal" laboratory values, since they vary from lab to lab.

Exam Content

The examination subject content and approximate weighting is shown:

1. Diabetes (10%)

1.1. Pathogenesis of diabetic foot problems

Includes the etiology and risk factors of diabetic foot problems

1.2. Prevention of diabetic foot problems

Includes the comprehensive diabetic foot exam, risk assessment, use of thermometry and thermography, techniques to prevent peripheral neuropathy and peripheral artery disease

1.3. Principles of medical management of DM and DM emergencies

Includes identification and emergent management of hypo- and hyperglycemia, acute cardiovascular events, and other complications of diabetes

2. Wounds (38%)

2.1. Pathogenesis

Includes how lower extremity wounds of various etiologies develop

2.2. Differential Diagnosis

Includes how to differentiate various types of wounds (diabetic, venous, arterial, malignancy, burns, autoimmune, etc.) based on clinical, laboratory, and pathological features

2.3. Risk Factors

Includes factors affecting wound healing such as perfusion, nutrition, mental status

2.4. Classification

Includes common classifications of wounds such as Wagner-Meggitt, University of Texas (UT), NPUAP, PEDIS, Gustilo-Anderson, burns, CEAP

2.5. Standard of Care

Includes debridement principles, local wound dressings*, wound biopsy indications, compression

**For the purpose of the exam, local wound dressings are described by category (i.e. hydrogel, collagen, alginate, foam, etc., and not by brand name)*

2.6. Advanced Treatments

Includes treatments such as negative pressure wound therapy, cellular and tissue-based products (CTPs)*, platelet rich plasma, growth factors, stem cells

**Cellular and tissue-based product (CTP) is the term used for the category which includes all skin substitutes and tissues comprised of allograft or xenograft biologic material, living and non-living. While it is the convention for ABPM exams to use both generic and brand names on exams, CTPs in the same generic category (i.e. human amniotic tissue) often have sufficient differences that are specific to the brand. Be familiar with the CTP brands, FDA indications, contra-indications, precautions, and religious or cultural considerations (i.e. bovine, porcine, human tissues)*

2.7. Surgery

Includes skin grafts, flaps, and complications

2.8. Hyperbaric Oxygen Therapy (HBOT)

Includes indications, contraindications, complications and management

3. Peripheral artery disease (PAD) (12%)

3.1. Risk factors

Includes genetic and environmental risk factors

3.2. Diagnostics

Non-invasive vascular studies including ABI, TBI, PVR, TcPO₂, SPP, venous and arterial duplex ultrasound, and invasive studies including angiography, venography, CTA, MRA, and vascular anatomy including angiosomes

3.3. Management

Includes indications and contra-indications for medical, endovascular, and open surgical treatments

4. Infections (14%)

4.1. Diagnosis

Includes clinical signs of infection, laboratory, and imaging studies

4.2. Classification

Includes classifications of soft tissue and bone infections and sepsis, such as IDSA, and Cierny/Mader

4.3. Treatment

Includes medical and surgical management of soft tissue and bone infections, antibiotic stewardship principles, proper selection and dosing, complications of medications, and antibiotic resistance

5. Charcot foot (8%)

5.1. Diagnosis

Includes history and examination, clinical signs and laboratory studies

5.2. Imaging

Includes basic and advanced imaging and the differentiation between neuropathic osteoarthropathy and osteomyelitis

5.3. Classifications

Includes the Sanders and Frykberg and Brodsky classifications

5.4. Treatment

Medical and surgical management of acute and chronic Charcot foot

6. Pathomechanics (18%)

6.1. Wound genesis

The pathomechanical principles that lead to wound development

6.2. Offloading treatment

Includes surgical and non-surgical offloading management

6.3. Surgical management

Includes the indications and surgical management of soft-tissue and osseous deformities for the prevention and treatment of wounds

6.4. Orthotics/Prosthetics/Pedorthics

Includes the use of footwear, orthoses, and prosthetics in the prevention and management of deformities, ulcers, and amputations

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