



Australasian Faculty of Occupational and Environmental Health Medicine (AFOEM) 2025 Stage B Written Examination

The 2025 AFOEM Stage B Written Examination Paper 1 was held on Saturday, 6 September and Paper 2 on Sunday, 7 September 2025.

The exam is a summative assessment that tests trainees' knowledge through several short answer questions. Each paper has five equally weighted questions. Each question is a scenario and includes a variable number of sub-questions. Scenarios are sampled from the *Occupational and Environmental Medicine Training Curriculum*.

Paper 1 | Domains 10, 30, 40 and 80 (but may refer to other domains)
Paper 2 | Domains 10, 20, 50, 60, 70, 80 and 90

This document provides feedback for candidates, outlining the characteristics of responses that achieved high marks and the areas for improvement where lower marks were achieved.

Candidates who performed well on the examination provided responses that demonstrated they had read the question and ensured that their responses were targeted to what was being asked in the stem. Overall, candidates had good theoretical knowledge; however, the application of knowledge was insufficient. Demonstrating high-level thinking will improve candidates' outcomes. Candidates who performed poorly gave incorrect or inadequate answers.

Candidates are reminded that only the first responses are marked, and there is nothing to be gained by providing more responses than requested. Poor handwriting should be avoided because marks cannot be rewarded for illegible answers.

In 2025, the overall pass mark was determined to be 63%. The pass mark is initially set using the modified Angoff method, followed by post-examination analysis for the removal of questions that were misinterpreted or had wording problems.

Paper 1 Question 1

Candidates performed well in the following areas:

- Identifying risk factors for silicosis as listed in the abstract
- Statistical significance of 95% confidence interval for former/current smoking history.

Candidates performed poorly in the following areas:

- Putting “adjusted odds ratio for former/current smoking history” into plain English
- Identifying how “pack years smoking” is calculated
- Missing the question regarding percentage of female cases.

Other comments:

- Further specific study in epidemiology required, some questions were not attempted or had a sentence of epidemiological terms that were not specifically relevant to the question.

Paper 1 Question 2

Candidates performed well in the following areas:

- Factors to consider when designing and implementing a questionnaire
- Aspects to consider regarding informed consent.

Candidates performed poorly in the following areas:

- Devising two study types for the scenario
- Some candidates missed listing an advantage and disadvantage for each study type.

Paper 1 Question 3

Candidates performed well in the following areas:

- Identification of zoonotic diseases
- Q fever vaccination.

Candidates performed poorly in the following areas:

- Ethical principles specific to this scenario (rural Queensland, New Zealand-owned farm).

Paper 1 Question 4

Candidates performed well in the following areas:

- Identifying factors that suggest a positive prognosis of participation in a return to work program in this scenario
- Benefits to the patient and employer for returning to work in this scenario.

Candidates performed poorly in the following areas:

- Defining impairment and disability and provide suitable examples.

Other comments:

- Throughout this question, many responses considered the worker's perspective well, but failed to categorise their responses to consider the workplace and work.

Paper 1 Question 5

Candidates performed well in the following areas:

- Lead exposure and contributing factors why sample may be positive on surface was well answered by all
- Reasons why health monitoring for lead was not needed was well covered by most.

Candidates performed poorly in the following areas:

- Having a ready list of the steps in Environmental Risk Assessment or the relevant legislation and standards for ERA
- Minimal examples of methods of health monitoring
- Formal risk communication was not answered well; most discussed the process to undertake rather than what to include in the communication.

Other comments:

- Ensure answers are catered specifically to the question as is it asked.

Paper 2 Question 1

Candidates performed well in the following areas:

- Planning a graduated return to work
- Identifying stakeholders to be involved with return to work plan
- Description of HAVs and Phalens test.

Candidates performed poorly in the following areas:

- In secondary Raynaud's most emphasised rheumatic causes but other causes were omitted
- Discussing relapse prevention.

Paper 2 Question 2

Candidates performed well in the following areas:

- Explaining impact of symptoms on predicted risks/impacts in workplace
- Identifying legislation and why it is relevant
- Knowing when to refer for specialist input, and why
- Risk factors for more severe disease following traumatic brain injury.

Candidates performed poorly in the following areas:

- TBI grading criteria
- Common policy parameters relating to fitness for driving such as durations
- Understanding the difference between legislation and non-legislation.

Other comments:

- Familiarise with specific aspects of policies – distil down the essential information needed for day to day clinical practice and remember that.

Paper 2 Question 3

Candidates performed well in the following areas:

- Health monitoring assessment components for a worker exposed to benzene.

Candidates performed poorly in the following areas:

- Some gave administrative controls as an example of isolation/engineering controls.

Other comments:

- Review workplace exposure standard types and definitions.
- Consider the hierarchy of controls – these can be assessed in multiple ways.
- Understand that isolation aims to remove the need for workers to be in an area where exposure happens. It does not simply involve placing barriers.

- Identify automation as a means to enclosing areas of benzene exposure (which prevents human contact).
- Some paradigms do not include a separate isolation category, because they are covered by other categories.

Paper 2 Question 4

Candidates performed well in the following areas:

- Identifying factors in scenario history/examination that would determine if patient is fit for work.

Candidates performed poorly in the following areas:

- Factors were identified but not described well or why important for clinical work up and differential diagnosis
- Tended not to mention neuropsychologist assessment for potential cognitive impairment
- Difficulty explaining role of an expert witness and associated requirements.

Paper 2 Question 5

Candidates performed well in the following areas:

- Hazard identification and control.

Candidates performed poorly in the following areas:

- Relevant state and federal OHS legislation
- Knowing who had primary responsibility for OHS at the operation
- Having a good structure for the elements of an OHS policy.

Other comments:

- Many candidates provided examples of good challenges of OHS policy structure, but they were not specific to a remote site, they would apply to any site, no matter where it was located.