Stage B Exam Preparation

AFOEM ATM 2023







Disclaimer

This is what worked for me

Everyone is different

Take what advice works for you; don't worry about the rest

Why Exams?





Fair representation of your performance? (*"in vitro"* testing)

Would it be better to come to the clinic to see you perform *"in vivo"* (ie in your clinic)?



Perspective:

Knowledge and application

- Know your learning style
- Know areas where you excel/have a lot of experience
- Know areas that need improvement/extra study/extra experience
- Know where you can get help
- Don't just know it apply it in your preparation



Quick Aside

- Learning Style
 - Curriculum
 - Text book
 - Work Experience
 - Discussions with peers
 - Discussions with Supervisors/other Fellows
 - Usually not just one thing (ie study plan of 3 years of review of all the points in the curriculum)
 - Combine what works best for you

Exam Technique - Written Exam

2 papers over 2 day

Written Exams – Epidemiology Section

This should be the easiest section

You know it will be there

You must review a paper or two and answer questions about it/them

Statistics are a significant part of it

LEARN THE EQUATIONS AND DEFINITIONS Have an approach for critical review (eg PICO/PICOS/SPIDER) Some candidates miss the cut-off by only a few percent

Getting close to 100% for the epidemiology section is a reasonable expectation (but takes a lot of planning, commitment and effort)

Written Exams – Remember who we are



Answer should reflect more than just pure medicine



Show that you know that our cases involve more than just our patients and their pathology Exam Technique -Practical Exams

- Three very different styles
 - Clinical Interview/History
 - Clinical Examination
 - Exhibit Based Assessment
- This is NOT an exit exam BUT it is still high standard – It asks: "Are you ready to be a senior registrar?"

Exam Technique – Clinical History Stations • Your attitude is important

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- My approach: just another day at the office
 - Try to be yourself
 - Be formal but confident
 - Treat the patients as normal even if they are actors
 - If you would normally do a brief smoking intervention for a smoker, then do it
 - Treat them as if they really are there for a consultation
- Be efficient but thorough one of my cases was a patient with a traumatic childhood with a public liability claim who had some relationship problems with her same-gender partner all of it was important
- Expect the unexpected because the college wants you to be aware that there are people of minority ethnicity, gender identity, etc, who have at times felt dismissed or misunderstood by the medical profession and does not want you to act surprised or offended or awkward
- Expect questions about diagnosis/treatment/fitness for work/return to work/prognosis/causation

Exam Technique – Clinical Examination

- Theoretically anything could be there
- In the past predominantly neurological and musculoskeletal
- But anything is fair game we are a generalist specialty
- Have an approach to a whole limb (neuro, msk, vascular, skin)
- Have an approach for the main specialties: MSK/Rheum, Neuro, Respiratory, Cardiovascular
- May ask for a whole limb or to give an answer to a specific question
- Expect same types of questions as the History stations but there may be a focus on findings, diagnosis and fitness for work

Exam Prep – Clinicl Hx and Exam

- Best way to prepare?
- Could have a small study group to practice
 - making scenarios
 - being patient
 - being examiner
 - being candidate
- See lots of different patients
 - Take lots of histories
 - Do lots of examinations



Exhibit Based Assessment

- Anything could be there
- Expect: PPE
 - What is it?
 - What does it do?
 - When is it used?
 - Would it be useful in...?

Exhibit Based Assessment

- Expect: Occ Hygiene equipment
 - What is it?
 - What does it test?
 - How is it used
 - Passive v active
 - Personal vs area
 - When is it used?
 - Would it be useful in...?









Exhibit Based Assessment

- Expect: Interpretation of Investigations
 - Anything is fair game
 - Could include:
 - Spirometry
 - ECG
 - Chest X-Ray
 - Audiometry
 - Nerve conduction studies

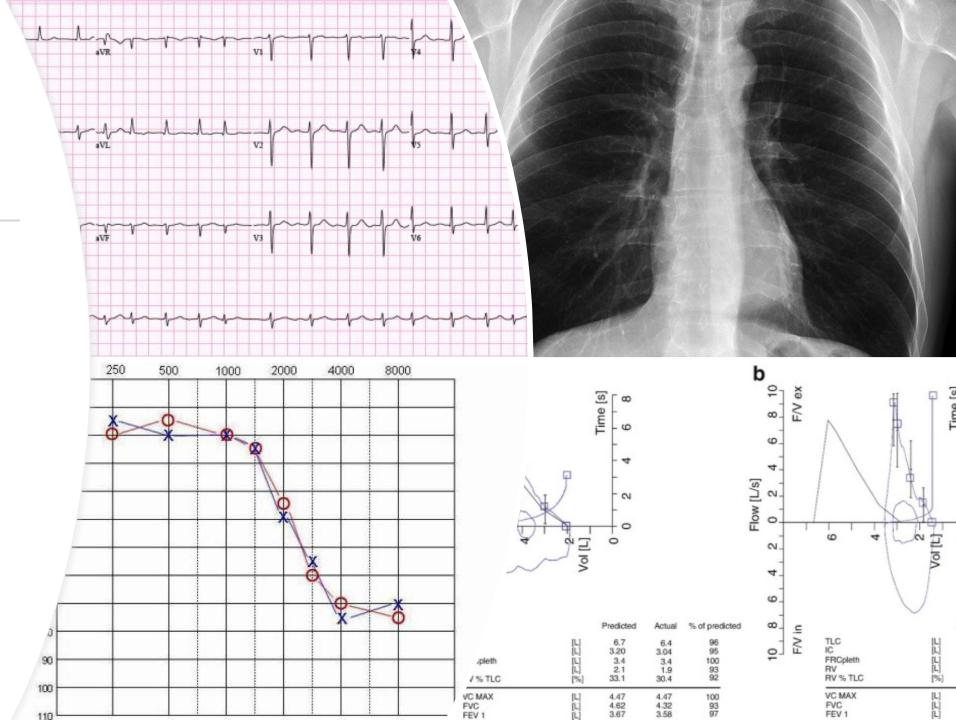


Exhibit Based Assessment

- Expect: Workplace Scenario
 Hazard ID
 - Hierarchy of Controls
 - Not just physical hazards, expect chemical (eg heavy metals, acid mist, dust, etc)
 - May be photos or video

Bottom Line

Perspective – eg

"just another day

at the office"

Knowledge and application

Try to get as wide a variety of experience as possible Don't forget what sets us apart from the boring other areas of medicine

Questions?

