

2025 Stage A and B AFOEM Examinations

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Stage A Written Exam

Purpose

- Evaluate foundational knowledge and clinical reasoning expected of an occupational and environmental medicine trainee progressing to Stage B.

Question Development

- Large bank of MCQs created to ensure broad Stage A curriculum representation.
- Each MCQ is a Type A (One-Correct Answer) format:
 - 1 question stem
 - 4 answer options
 - Only 1 correct response

Skills Assessed in Stage A Exam

- Clinical skills expected at the end of PGY2
- Critical appraisal of general medical literature
- Professionalism and ethical practice
- Scientific foundations:
 - Basic physics, chemistry, microbiology, anatomy, pathophysiology, pharmacology, epidemiology
- Clinical reasoning, methods of clinical investigation and treatment per curriculum

Stage A Question Formats

- Short-stem MCQs
 - Primarily knowledge recall
- Longer-stem MCQs with vignette
 - Practical application, clinical reasoning and problem-solving
 - Reflect real-world decision-making scenarios

Stage A Exam Content Weighting

- Domain 10: Clinical Practice: 60-80%
- Domain 20: Workplace Hazard Assessment (20.1 only): 5-15%
- Domain 30: Critical Appraisal of Information: 10-20%
- Domain 60: Professional Qualities: 10-15%

Focus is on broad-based clinical competency with supplementary focus on professional and analytical domains.

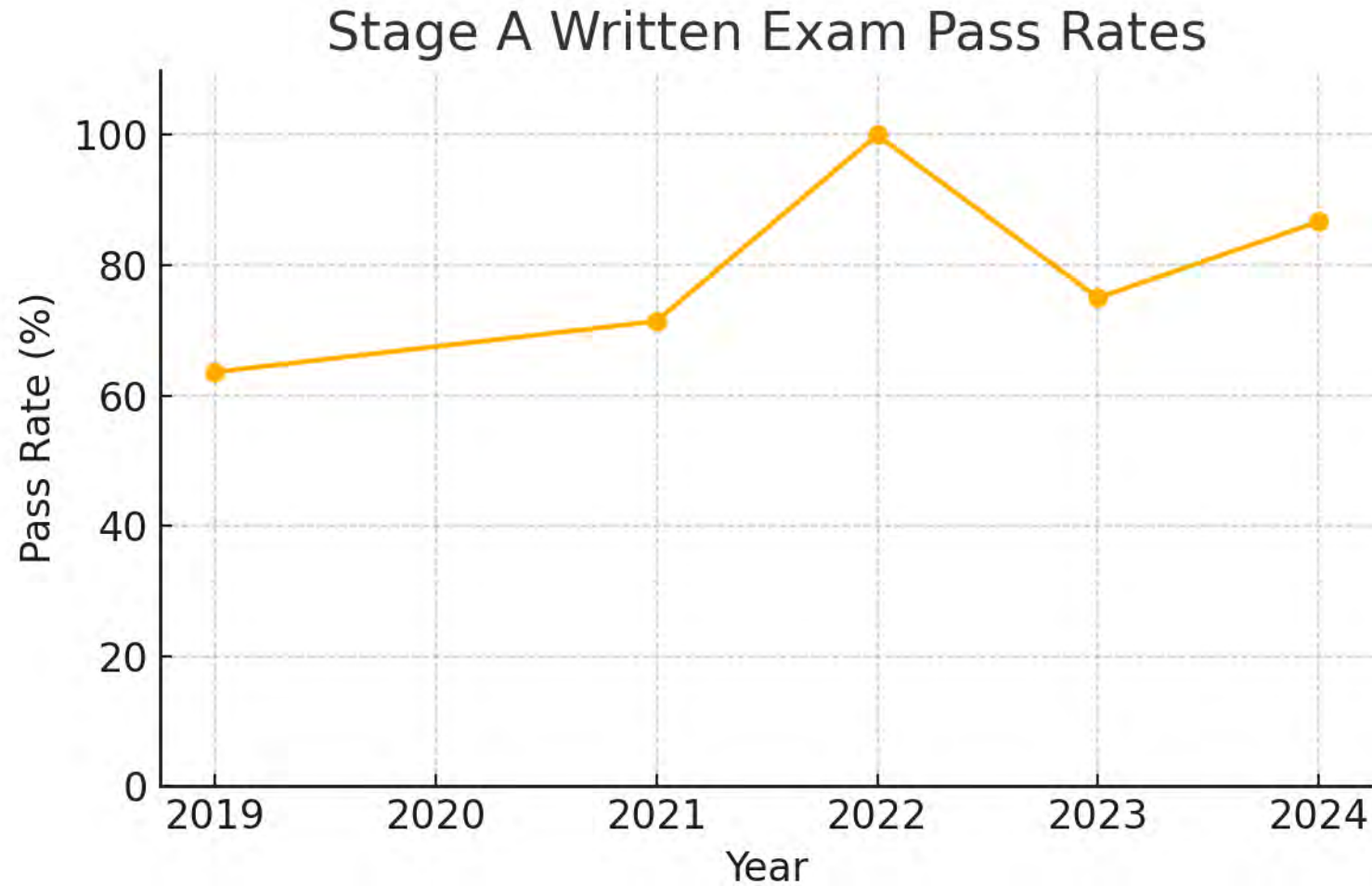
Stage A Overview

- 120 Type A MCQs (1 correct answer)
- 15 min reading time, 3-hour exam
- 1 mark per question, no penalty for incorrect answers
- Computer-marked answer sheets

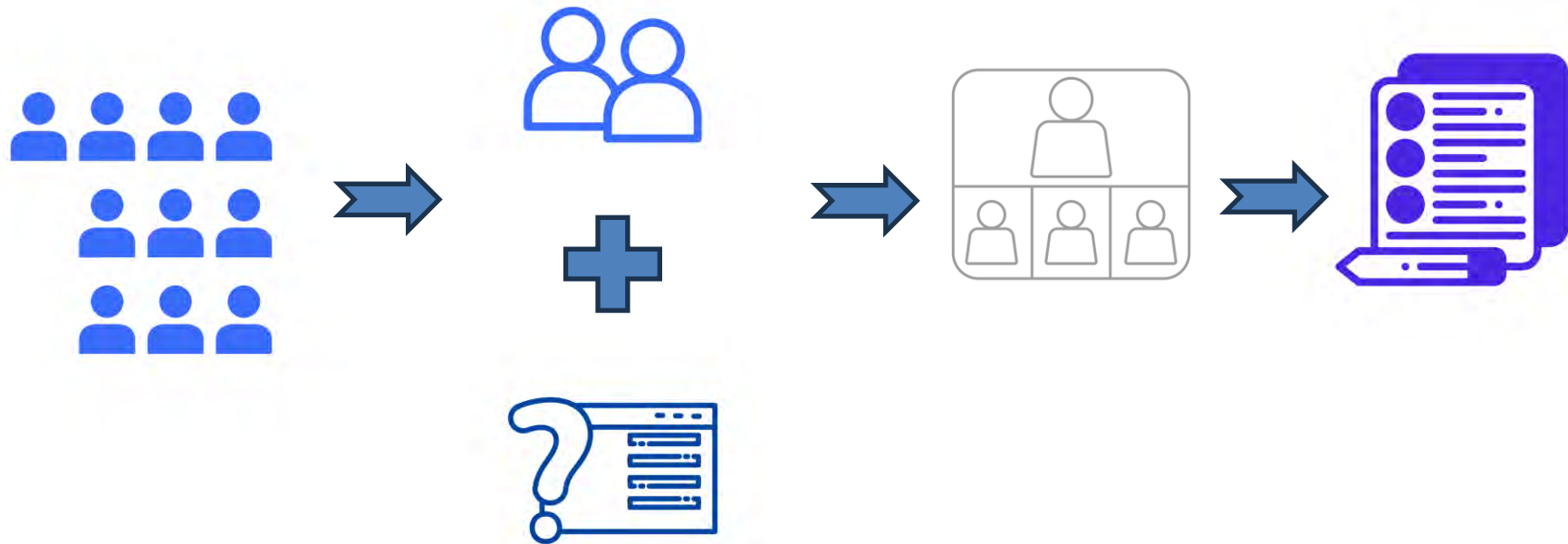
Stage A Written Exam – Marking

- Pass mark set using Modified Angoff method
- Subject matter experts estimate performance of minimally competent candidate per question
- Final score = total correct
- Post-hoc psychometric analysis, prior to finalisation and release of results
 - Questions may be removed if poorly performing

Stage A Written Exam – Pass Rates



Stage B Written Exam development



Further QA



Stage B Written Exam - Overview

- Two papers over two days, five short-answer questions per paper
- Scenario-based with sub-questions
- Fitness for duty, rehabilitation / return to work, workplace assessment, health surveillance, environmental health assessment, critical appraisal/epidemiology, policy/procedure/program development regarding health risk management concern

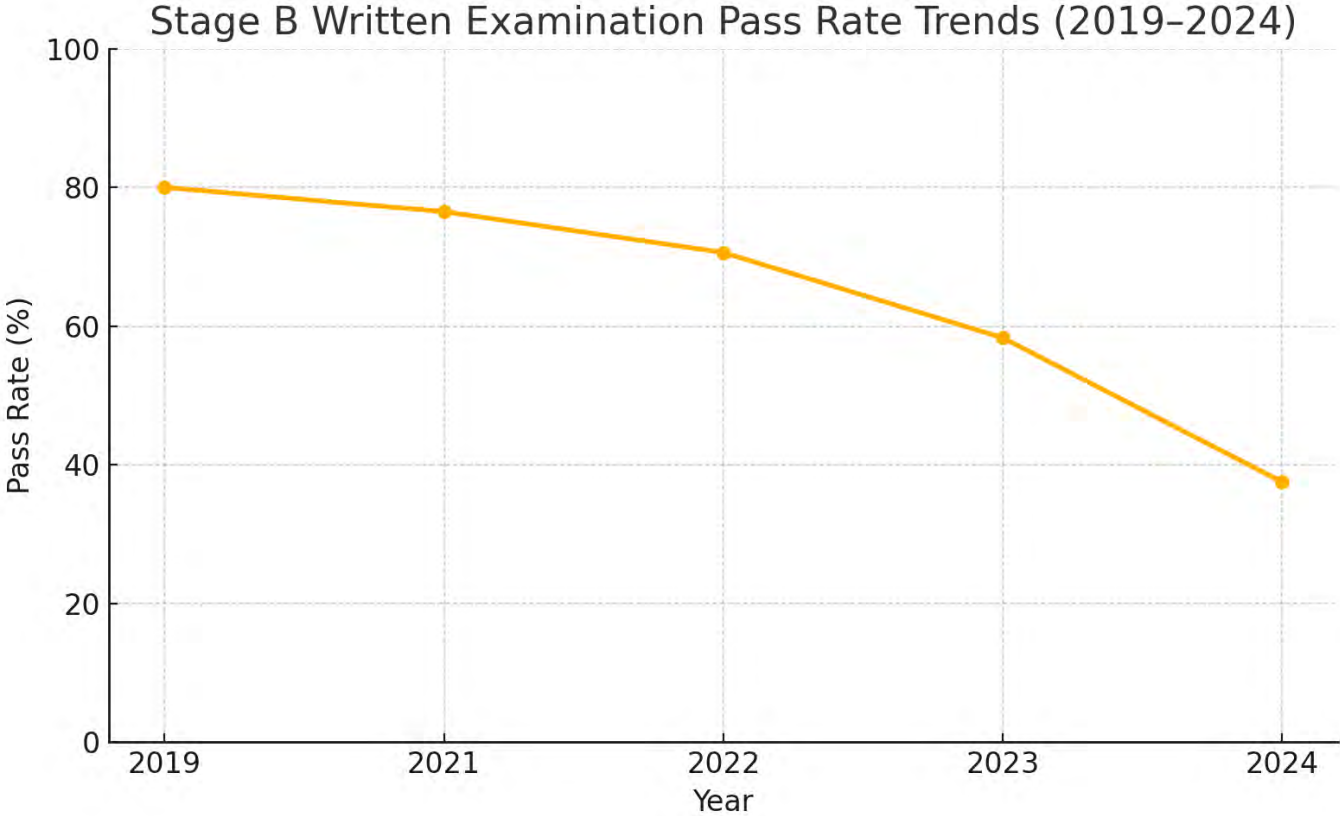
Stage B Written Exam – Overview

- Application of knowledge and problem solving
- Specific response to scenario **applied** to the issues/concerns of occupational or environmental context
 - A generic framework answer won't receive credit
- **Critical Appraisal/ research methods**
 - Review and answer questions in relation to excerpts from research paper/s
 - Understand and **apply** biostatistics, critical appraisal and research ethics principles

Stage B Written Exam – Marking

- Modified Angoff method sets pass mark per question
- Each question marked independently by two SMEs, then consensus
- One Standard Error of Measurement deducted from the pass mark to reduce false negatives

Stage B Written Examination Pass Rate Trends (2019–2024)



Stage B 2024 outcomes

- The 2024 pass rate was low in comparison to previous years.
- The feedback from Examiners was that certain questions described as 'bread and butter', were answered poorly by candidates.

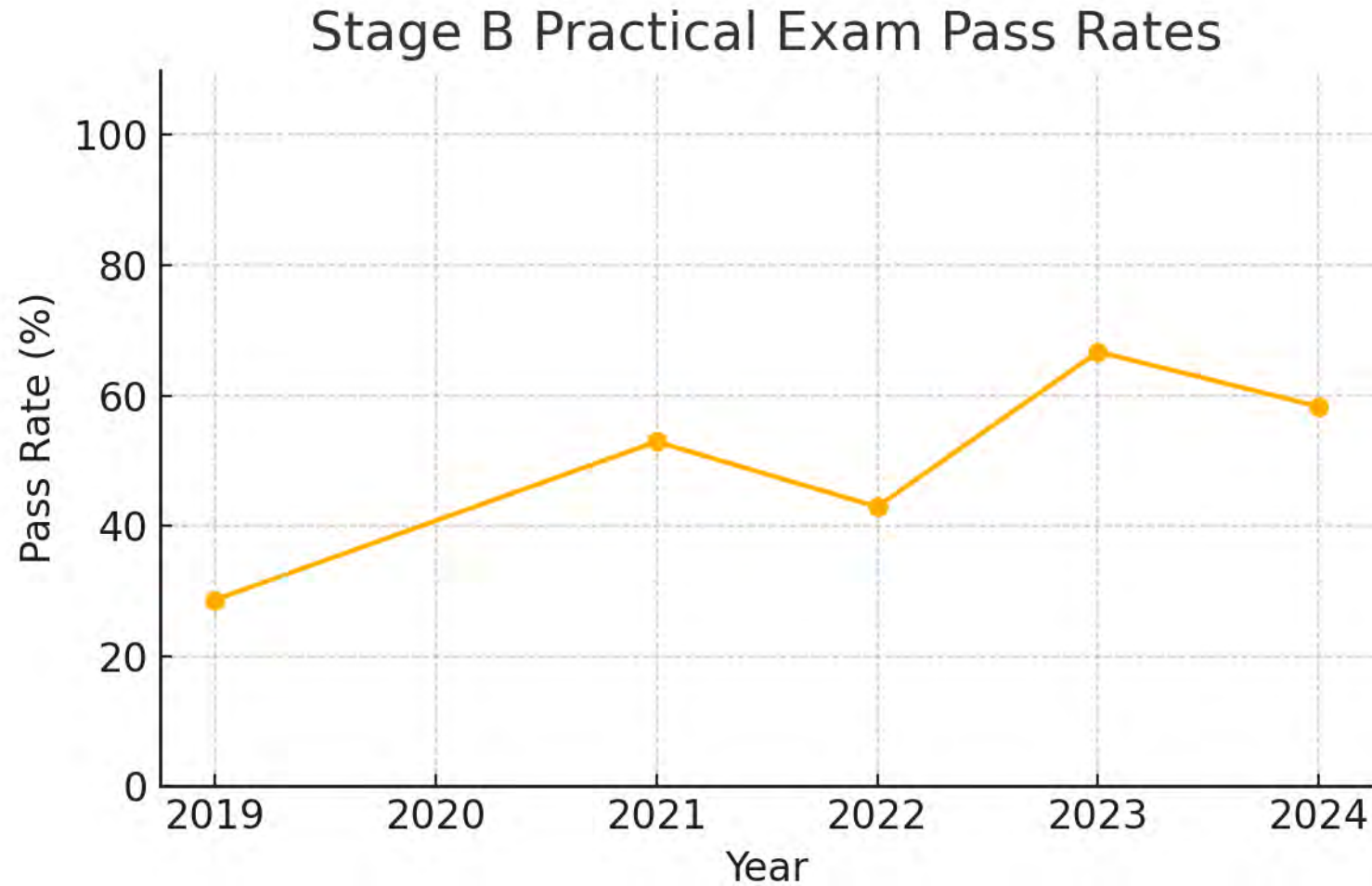
Stage B Practical Exam – Overview

- 6 stations total:
 - 2 x EBAs (20 mins each)
 - 2 x Clinical Exams (15 mins each)
 - 2 x OSCEs (30 mins each)

Stage B Practical Exam – Marking

- Must pass 1 EBA, 1 Clinical, 1 OSCE, and 4 stations overall
- Clinical station: score $\geq 15/25$ with 3/5 in patient interaction and 3/5 for at least 2 others
- OSCE: 70% marking checklist (modified Angoff) and 30% professional competencies
- EBA: marking checklist (modified Angoff)

Stage B Practical Exam – Pass Rates



Tips for Success

Stage B Written:

- Broad work-based experience and personal study
- Practice writing answers under time pressure, read the question twice

Stage B Practical:

- Practice and peer review clinical exams & OSCE scenarios
 - OSCEs: expect questions on diagnosis, prognosis, return to work, difficult conversation/conflict resolution with the simulated patient or employer
 - Clinicals: not necessarily musculoskeletal or neurology, could be respiratory, cardiovascular
 - systematic approach
 - EBA: visit worksites, practice systematic hazard ID, review occupational hygiene monitoring equipment and PPE (identification, use & limitations), become confident with interpreting spirometry, nerve conduction studies, audiometry, biological monitoring results, chest x-ray, ECG

Questions & Discussion