Oral Examinations Workshop

Nice, May 2019
What are you testing

• Wide range of COMMON disorders as set out in curriculum
• Ability to process
• Ability to form a differential
• Ability to apply knowledge
Planning an Oral Examination

• Requires manpower
• Requires time
• Requires commitment
• Requires expense * overnight accommodation and lunch
• Requires good logistics
Planning an Oral Examination

• How many exam attempts

• Minimal time between resits

• Appeals process
General Rules

• Each Q has a few lines / paragraphs of text  LEAD IN
Planning an Oral Examination

• Pre determine the number of examiners available
  • Preferably that examiners DO NOT know the candidate
  • If candidate known then candidate rotated to different examining pool

• This determines the maximum number of candidates
Asking & Answering Qs for an Oral Examination

- Examining Board
- Chair of Examination Board (rotation through election *)
- Deciding Question rotations
How many Examiners: Oral Examination

- 8 hour day 8am - 6pm
- 2 coffee breaks

- (morning & afternoon) and lunch
- 8 - 12.30 & 1.30 – 6pm

- Avoiding Examiner Fatigue

- Examiners should be in PAIRS
How many Examiners : Oral Examination

• To examine 24 candidates

• 4 x 30 minute module exams* ( 2 examiners )
• You need minimum of 48 examiners ( 24 pairs )

• 2 x 60 minute modules exams * ( 2 examiners)
• You need minimum 8 examiners / 2 hours for 4 candidates
Planning an Oral Examination

• Pre determine the eligibility of candidates

• E.g. Organ Transplant surgery

• E.g. Endocrine Surgery
Planning an Oral Examination: Candidate eligibility

- E.g. Organ Transplant surgery
- European / Non European (20%)
- Current licence to practice as a surgeon including abdo/digestive/vascular
- Have attended at least one national/International training course
- Attended at least 1 international congress in last 3 years
- Present a surgical logbook if asked
- Published at least one peer reviewed paper / given at least one oral presentation at International congress
- Should be able to demonstrate theoretical, practical and clinical skills
- Training carried out in competent well recognised transplant centre *
Planning an Oral Examination

• Pre determine the eligibility of Examiners

• Board Certified in specialty they are examining

• Complete a pre-exam training course*
Planning an Oral Examination: For whom

• Oral exam only
  • Endocrine surgery, Organ transplantation

• All candidates sitting a paper / MCQ/ written exam
  • Neuroradiology,

• Pass fail candidate only
Scheduling an Oral Examination

• Best time is around an international meeting
  • Neuroradiology: ESR meeting

• Best pool of examiners

• Minimum additional cost to examining board
  • Schedule exam 1 day pre meeting
  • Exam cost burden is one overnight and meals

• Minimal additional cost to the exam candidate

• Chairman of Exam Board arranges the schedule
Logistics: Oral Examinations

• How many stations

• Separate examining rooms

• All in one room
Planning an Oral Examination

• Practical techniques

• Knowledge based Q

• Pan European protocols
  • NOT country specific

• Pre-selected articles for distribution
  • Cannot be co-authored by any of the examiners
Setting Qs for an Oral Examination

• Pre set clinical cases (4 preferably)
• PowerPoint presentation *
• Findings displayed and Qs asked regarding results
• Additional findings and further interpretation
• Preclinical knowledge pertinent to case discussed

• Consistency Questions for all candidates
• Consistency clinical cases for all candidates
Asking & Answering Qs for an Oral Examination

- Alternating role
- Minimum 2 examiners (internal consistency)
- One asks the Questions
- The other of pair pays attention to and marks the answers
  - Examiner makes notes for feedback/in case of appeal
- Marks done at end of exam module

- Rules of Engagement: Greeting
- Recuse if candidate known or has worked with examiner
Asking & Answering Qs for an Oral Examination

• Pre set Time for exam
• 20 minutes – 30 minutes
• Minimum of all 4 Qs to be covered
• Bell warning at 5 minutes ?
• Asking candidate if Q understood ( advantage PowerPoint )
Asking & Answering Qs for an Oral Examination

• No prompting
• Move on after time set for each question
• Ensure good lighting
• Ensure noise element minimal
• Ensure similarity of stations
Planning Times Oral Examination- Avoiding Examiner fatigue

• Each candidate: Minimum 2 sets of examiners (2+), preferably 4
  • Greta reliability & validity

• Each session 30 minutes (some offer 60 but too long)

• Examiners break every 2 hours for 30 minutes

• Stagger the starting times and breaks
Asking & Answering Qs for an Oral Examination

- No prompting
- Move on after time set for each question
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Asking & Answering Qs for an Oral Examination

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Exam SECURITY : Oral Examinations

• Check in desk and verification of credentials

• Once candidate examined, must not be able to contact other candidates

• May need to alternate Block 4 Questions for one group & Block 4 Questions for second group

• All candidates in one room / café

• Separate exit
Deciding Scoring & Scoring Instructions Oral Examination : Endocrine Surgery

• UEMS : Intercollegiate Board of General Surgery, UK (modified)
• Each examiner gets a scoring sheet
• Mark are 4-8
• Awarded for 3 fields
  • Preclinical or basic science knowledge
  • Clinical appraisal of a case
  • Specific background or ability to read critically a scientific paper sent to candidates
Deciding Scoring & Scoring Instructions Oral Examination: Endocrine Surgery

- **8**: Very good pass. Appropriate level of competence & advanced knowledge.
- **7**: Good pass. Appropriate level & fluent in essential & required knowledge.
- **6**: Pass. Appropriate level and knew essential & required knowledge.
- **5**: Fail. Candidate did not achieve appropriate level and did not know essential.
- **4**: Serious fail. Candidate showed serious defects in knowledge.
• Scoring sheet

• Name of Candidate: ________________________________________

• Name of Examiner: _______________________________________

• Viva Grade (4-8) Comments

• Pre-clinical

• Clinical

• Scientific

• TOTAL

• Signature (examiner)
Asking & Answering Qs for an Oral Examination

• External Auditor

• Own examining Board / Specialist Society

• CESMA
Debriefing: Guide to an Oral Examination

- Examiners return all copies to Chairman debriefing session
- Marks not to be copied or removed from debriefing hall
- Examiners don’t discuss results with anyone outside of exam pool
Debriefing : Guide to an Oral Examination

- Marks may be amended down
- Marks may NOT be amended upwards

- Pre-set PASS : Must set overall Pass mark minimum of 4 per Q and pre-pre-clinical, Clinical, and paper
- Pre set : pass a minimum number of modules
- If failed in ONE module. That must be discussed

- After discussion with panel, discussing performance in passed modules, and then failed module, the MAJORITY must agree to pass by vote
- If NO majority, candidate has failed
Debriefing: Guide to an Oral Examination

• Pre-set PASS: Must set overall Pass mark minimum of 4 per Q and per pre-clinical, Clinical, and paper

• If 4 Questions,
• Each Q max 24, Each Q minimum 12: Minimum pass 4 x 12 = 48
• Each Q has fields that must be explored a pre-clinical, clinical & paper section 12
• Pre set: Prerequisite: Minimum to pass in pre-clinical
Appraisal experiences of Oral examination

• Security issues

• Examiners meeting before exam for debriefing

• ‘Tour ‘ of exam location

• Inspection computers & Lighting
Appraisal experiences of Oral examination

• Logistics and cost

• If large numbers of candidates (even 26)
  • Separate rooms
  • One large hall
Running an Oral examination ERRORS
Appraisal experiences of Oral examination

• Candidate knew examiner (even trained him)

• Examiner recused, one did not

• Anonymity essential:

• Qs regarding training and provenance create unconscious bias
Appraisal experiences of Oral examination

- Ill defined pre-set Questions: Topics
- Floating Questions
- No specific pre-set areas
Appraisal experiences of Oral examination

- One examiner asking the Question
- One taking the notes
Appraisal experiences of Oral examination

• Pan European @ Minimum knowledge base

• We don’t do that at our institution

• I'm only trained in that specialty area

• The physician sorts out the post op meds schedule!