

Joint Committee on Intercollegiate Examinations

Structured oral question writing guidelines

Featherstone, C. (2017)

Writing the question

All questions must be completed electronically using the JCIE Oral Question Submission Template.

Step 1. Complete Box 1. This will allow the question bank managers to direct queries about the question to its author.

Step 2. What is the purpose of the question? Identify a gap in the blueprint, or an area of the blueprint that it would be better easier to assess through a discussion rather than through SBAs/EMIs. Complete Boxes 2, 3, and 4. Refer to the Coding Sheet and Coding Definition Guide to complete Box 3.

Step 3. The scenario and associated questions as a whole should elicit the skills described in the marking descriptors. Write a scenario which focuses the candidate's thoughts on a problem relevant to the chosen topic. This could take the form of a patient vignette, which could include:

- Patient details (age, gender), their presenting complaint and its duration
- Relevant details from the patient's history
- Any other relevant information or "props" a consultant would use to determine the best course of action: physical findings, results of diagnostic studies, initial treatment, subsequent findings, images. Complete Boxes 5 and 6. Questions will only be banked once they have met the requirements of the Technical specifications and Consent sections below.

Step 4. Construct the questions in such a way that they build on the information in the scenario and provide the building blocks for a conversation which allows you see how the candidate would manage the scenario and whether they can justify their approach. Questions should follow a logical progression, increasing in complexity and mimicking the tasks which would be expected of a day one consultant. To make the most of the structured oral format:

- Avoid simple recall level questions. Recall level questions typically start with "list, define, what is [X], name..." Contrary to common perception, these are not easier than higher order questions.
- Use open higher order questions, which open up the conversation and allow candidates to demonstrate that they can apply their knowledge to the situation described and can make and justify appropriate decisions. (See Example higher order questions for some inspiration.)

Step 5. Indicate what you would expect a day one consultant to discuss, by providing acceptable (and unacceptable if relevant) key points for discussion for each question.

Step 6. Review the question, or ask a colleague to review the question using the Question Review Checklist.

Question review checklist

Blueprinting	Are the topic and task matched to the exam syllabus and is the relevant coding provided (section 3 of the template)?
Alignment	Is the task required by the question congruent with the tasks required of a Day One consultant in the generality of the specialty?
Higher order questions	Are all the questions associated with the scenario "Higher order" questions (i.e. questions which require candidates to think rather than simply remember facts; see <i>Example higher</i> order questions)?
Open questions	Are the questions open-ended to invite discussion rather than single-phrase answers?
Level of competence	Is the question pitched at the right level to discriminate between candidates either side of the level of the Day One Consultant?
Jargon	Is the question jargon free (as much possible within the topic area)? Is it free from idioms which might unfairly disadvantage non-native English speakers?
Timing	Can examiners and candidates do justice to the question within the time allocated for each Oral question?
Clarity	Is it clear from the question what candidates are expected to do?
Window dressing	Is all the information in the scenario and associated images useful for answering the question? Questions which can be answered without referring to the scenario or images are typically pitched at the recall level. They also use up precious time in the examination by giving candidates irrelevant information to process.
Marking	Does the question elicit the skills listed in the JCIE Marking Descriptors? Is it possible to score a 4? Is it possible to score an 8?

Technical specifications

Still images:

- Resolution: minimum 300dpi
- Dimensions: minimum 640 x 480 pixels
- Bit Depth: minimum 8
- Colour: CMYK

Moving images / videos:

- Duration: 12 seconds maximum
- File Formats: .mp4, .m4v, .avi or .mpg
- Resolution: 720p or 1080p
- Video should contain no sound
- The video should only play once (so not on a loop). The candidates will be allowed to view the video up to three times.
- The video should commence with a still image and end with a still image.

Consent

It is sufficient to make a clear statement that when you consent for an image to be taken the image may be used in an anonymous form for teaching or research. It is essential to emphasise that it will not be used for publication without further consent being sought. Separate consent/permission is not required for images of X-rays, pathology slides, laparoscopic images or ultrasound providing they

are effectively anonymised i.e. removal of all identifying patient marks such as name, record number, date of birth or hospital name.

Example higher order questions:

Opening / introductory questions

- What can you tell about this patient from these radiographs / images / findings?
- What are your initial thoughts about this situation / patient's condition?
- What would be your initial diagnosis be based on the symptoms described?
- What additional investigations would you want to carry out at this stage?

Subsequent questions

- What do you think is the main priority is in managing this situation? How would you go about that?
- Tests have come back showing [X]. How does this affect your management of the patient?
- The patient is concerned about [X]. How would you address this concern?
- Of the different options available for managing this situation, which would you choose and why?
- [Unexpected event during surgery]. How would you manage this situation?
- [Unexpected complication or post op development]. How would you manage this situation?
- [Recent study which suggests alternative approach]. How would this affect your management of this patient?

Consider using "what if?" questions to probe problem solving skills and "and why?" to probe clinical reasoning further.

Submitting the question

The completed question and related images should be submitted to the Question Bank Managers by email.

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Additional resources

- Case, S. and Swanson, D. (2002) *Item writing manual (3rd Edition)*, NBME (available online).
- Naeem, N., van der Vleuten, C. and Alfaris, E. A. (2012) Faculty development on item writing substantially improves item quality, *Advances in Health Sciences Education*, 17, 369-376.