

CHANGES TO THE FELLOWSHIP EXAMINATION – EFFECTIVE FROM 2008

For the attention of Fellows, Supervisors of Training and Trainees

Two major changes to the General and Paediatric Fellowship Examination will come into effect from 2008.

1. CHANGES TO THE STRUCTURE AND FORMAT OF THE EXAMINATION

At a recent meeting of the Examinations Committee and Board, it was decided to change the structure and format of the Fellowship Examination. Essentially the changes involve:

- a) Merger of the Written Section with unmanned components of OSCEs
- b) Merger of some of the manned OSCEs with the Viva day
- c) Increasing the emphasis on the clinicals (with incorporation of clearer assessment process into the ICU cases, for those skills previously examined in cold cases)
- d) Reduction of the duration of the exam

The following resolutions have been approved and will apply from the April/May 2008 sitting to both the General and Paediatric Fellowship Examinations.

1. That the Written Section incorporate the non-manned component of the OSCE Section.
2. That the Written Section comprise two papers of Short Answer Questions, and include data analysis and interpretation, monitoring and equipment.
3. That a pass of 50% or more in the Written Section is required in order to be invited to the Oral Section.
4. That the Procedure and Communication stations of the OSCE Section be incorporated into the Viva Section which would then be comprised of 8 stations.
5. That the Clinical Section comprise two ICU cases of 20 minutes duration each, and that the 2 cold cases be removed.
6. The distribution of marks be as follows:
 - Written Section (30 marks)
 - Viva Section (40 marks)
 - Clinical Section (30 marks)
7. That the pass criteria will be:
 - A minimum of 50% or greater total mark
 - A fail in not more than one section
 - A score of 40% or greater in the clinical section

2. REQUIREMENT FOR COMPLETION OF FORMATIVE ASSESSMENTS BEFORE APPLYING TO SIT THE FELLOWSHIP EXAMINATION

To optimize candidate preparation for the Clinical Section of the Fellowship Examination, the Board has resolved that Supervisors of Training (SOT) or their nominees should ensure that candidates have been formatively assessed performing FOUR (4) "Clinical Cases", including clinical examination, presentation of findings and an appropriate management plan in an examination type setting prior to presenting for the Fellowship Examination.

Therefore the Board has resolved, that as from 2008:

In the six months prior to the closing date for the Fellowship Examination, each candidate should be certified by a SOT or nominee as having been formally assessed on four separate ICU cases. Documentary evidence of this should be submitted along with the application form. The candidate should perform an observed clinical assessment of a critically ill patient in a critical care facility; present their clinical findings to "the assessor" with an appropriate discussion of relevant management issues (suggested time = 20 minutes). An additional 10 minutes should then be set aside after each case to provide the candidate with feedback regarding their performance and allow for relevant discussion regarding the clinical scenario.

For candidates who are unsuccessful in the Fellowship Examination:

- Recertification of completion of 4 formative cases is required for each attempt at the Fellowship Examination.
- Application to sit the Fellowship Examination will not be accepted without documentary evidence of completion of the formative assessments.

This requirement will also apply to OTS assessment.

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