Summative Clinical Competency Exam Class of 2020

March 5 - March 22, 2019





GENERAL INSTRUCTIONS FOR SCCX

- Detailed instructions on website.
- Please read them before you arrive on your first exam day
- If you have any questions, feel free to email Mary (<u>maiello@siumed.edu</u>)
- You will take the LPA & PFP on Day 2 of your SCCX (bring headphones for PFP)



EXAM COMPOSITION



- •2 days, 7 cases each day
 - 10 CCX cases (20 min SP, 45 min CCX)
 - 4 Pt Note cases (15 min SP, 10 min Note)
- All case problems from *Must See Objectives for Graduation: common complaints, not necessarily common diagnoses*
- Schedules are on CCX Assessment website





OVERVIEW: BEHAVIOR

- Arrive 10 minutes before your 1st case
- Sign confidentiality statement
- Pharmacopoeia is only reference allowed
- No food/drink in computer lab
- Honor code applies
 - Do not talk about cases anywhere.
- Do not leave PDL area during exam period.
- Do not use cell phones or computers.
- Do not bring or wear a Smart watch.



OVERVIEW: EXAM ROOM LOGISTICS

- Bring own stethoscope or borrow from PDL
- Task is specified on Door Chart (and you may take it in room with you)
- Approach each patient as the **physician in charge** of diagnosis and the ongoing care of the patient.
- Use your initial DDX to direct your questions and exams.
- If you *retake* vitals and they are different from chart, use the ones on the chart.





OVERVIEW: SP ROOM REMINDERS

- Be prepared to start on time.
- Use Head to Toe PE guidelines for physical exam (including listening/palpating on skin).
- Cards only given AFTER exam is completed (or during the physical exam).
- Camera serves in lieu of assistant/nurse.
- There will be a 5 minute warning knock.
- Close visit appropriately.





OVERVIEW: COMPUTER LAB LOGISTICS

- Proctors are there to **HELP...use them if needed**.
- A few older Pharmacopoeias available.
- If you have computer problems, let the proctor know.
- Leave your notes in the shred box on proctor table when finished.





HOW SCCX IS DIFFERENT...

Cases are drawn from..

- All organ systems
- All core clerkships
- All Doctoring curricula
- **Performance expectations** are based on the standard of care for the complaint, not other students.
- Not all cases follow a *diagnostic model*: read the presenting and be prepared to listen to the patient.
- Reading the presenting will be included in timed encounter.





HOW SCCX IS DIFFERENT...

Findings

- Must interpret vitals, do not just list them
 - (e.g., VSWNL ≠ no fever)

Labs

- If asked to interpret, describe what you see
- Order only those labs needed. Just because you can order tests does not mean you should. You are always allowed to order labs in a diagnostic case.

SP Checklist

• No points given for History items.



DX JUSTIFICATION

- Resources on CCX Assessments website
 - DX Scoring form
 - DX Justification Tips
- Space limit 2900 characters, approximately 400 words, with *count-down* counter
- Jeanne Keller practice case updated and available at https://siumed.dxrccx.com/



DX JUSTIFICATION SCREEN

Your Diagnosis Review Information Likely Diagnoses Findings	Diagnosis(es) Justification		Problem List Instructions 44:06 Next
Likely Diagnoses Findings	*		*
* 4000 characters left	Likely Diagnoses Findings	4000 characters left	



PATIENT NOTE CASES



- USMLE, Step 2 CS protocol
- 15 minute SP, 10 minute patient note
- All notes entered on computer
- Hx, PE, DDX with supportive findings, Diagnostic studies
- Include invasive exams in diagnostic studies
- Clarity, organization, quality, interpretation, nonegregious/dangerous
- Keep clipboard off keyboard while entering



PATIENT NOTE FORM-FINDINGS



Patient Note Instructions Findings Data Interpretation Diagnostic Studies	24:33	Submit and E
History Findings: Describe the history for this patient. Include information relevant to the patient's problem(s). Enter your history findings.		
110 characters left Physical Examination Findings: Describe findings relevant to the patient's problem(s).	đ.	
Enter your exam findings		
110/ characters left		
Data Saved		



DDX & SUPPORTIVE FINDINGS



Patient Note Instructions Findings	Data Interpretation Diagnostic Studies		23:	33 Submit
Data Interpretation Diagnosis #1 3 Enter Diagnosis #1 and press Enter/Return		_	History Findings	
100 characters left				
History Findings	Exam Findings	Add More		
Enter history support finding 1	Enter exam support finding 1			
Enter history support finding 2	Enter exam support finding 2			
Enter history support finding 3	Enter exam support finding 3			
100 characters left History Findings Enter history support finding 1 Enter history support finding 2	Exam Findings Enter exam support finding 1 Enter exam support finding 2	Add More	Exam Findings	
Enter history support finding 3 Diagnosis #3 3	Enter exam support finding 3			
Enter Diagnosis #3 and press Enter/Return 100 characters left				
History Findings	Exam Findings	Add More		
Enter history support finding 1	Enter exam support finding 1			
Enter history support finding 2	Enter exam support finding 2	_		
Enter history support finding 3	Enter exam support finding 3			



DIAGNOSTIC STUDIES



tient Note Instructions Finding	s Data Interpretation Diagnostic Studies	22:05 Submit ar
agnostic Studies	(Add More)	
nter diagnostic study 1		
iter diagnostic study 2		
nter diagnostic study 3		





SCORING: HOW SCCX IS DIFFERENT....

- Patient Satisfaction score is independent (not part of case score: separate score across all cases)
- Dx Justification 20% of case score
- Minimum passing score set across all cases (expect 65% or higher)
- Must pass minimum number of cases to pass examination (expect 10 or more to pass)



PASSING THE SCCX



- Case/SCCX Grading:
 - CCX cases:
 - 20%: Diagnosis Justification
 - 80%: H&P Checklist, Findings, DDX, Labs, DX, Problem List, TX (each single item worth 1-2% of score regardless of what it is)
 - Patient Note cases
 - 75% Patient Note and 25% PE Checklist
 - Pass level at 65% (or higher) on at least 10 cases
- Patient Satisfaction Grading:
 - Must achieve 4's across all items in 11 cases



SCORING TIMELINE

- SCCX scored in March
- Automatic review of SCCX failures
- Results distributed mid-April
- Reports in campus mailboxes and sent to SPC simultaneously (will notify you via e-mail)
- Remediation recommendations not official until SPC approves the recommendations



IF YOU DO NOT PASS....



- Overall SCCX: Clinical Reasoning course 3 weeks: June 10-June 28, 2019
- Patient Satisfaction: 1 week Enhancing Communication in MD/Pt relationship (Week of June 3, 2019)



CCX ASSESSMENTS WEBSITE HTTP://WWW.SIUMED.EDU/OEC/CCX-ASSESSMENTS.HTML



CCX in Year 3:

. Y3 CCX information can be found in the Pediatric and Psychiatry core link. See below for Summative CCX information.

SUMMATIVE CCX (SCCX)

- Summative Clinical Competency Examination for Class of 2019 -- Memo to Students
- General Instructions for SCCX
- Patient Note Instructions for SCCX
- SCCX Student Group Assignments
 - Group 1
 - Group 2
 - Group 3
 - Group 4
 - Group 5
 - Group 6
- Patient Note Form
- Sample DXJs: Sample #1, Sample #2
- DX Justification Scoring Form
- Common abbreviations for USMLE-CS Patient Note
- Patient Satisfaction Checklist
- USMLE Step 2 Web Site: Step 2 CS; Step 2 CK
- Head to Toe Physical Exam Guidelines
- SIU School of Medicine Graduation Objectives
- Honor Code
- Summative Clinical Competency Examination (SCCX) Grade Review Process
- Diagnosis Justification Tips
- CCX Lab List
- SCCX Orientation Slides
- SCCX Orientation Video
- SCCX Feedback Questionnaire



CCX Assessments website is located in Education & Curriculum under General Information

http://www.siumed.edu/oec/ccxassessments.html

OR

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Dr. Erica Nelson (enelson@siumed.edu)





QUESTIONS?

