

ODESSA NATIONAL MEDICAL UNIVERSITY

INSTRUCTION

TO THE PROCEDURE

OBJECTIVE STRUCTURED CLINICAL

EXAM (OSCE-2)

AT THE MEDICAL FACULTY

IN ODESSA NATIONAL MEDICAL UNIVERSITY

Odessa - 2021

The Objective Structured Clinical Examination (OSCE) is a practical part of the Unified State Clinical Examination (OSCE).

This is a modern type of assessment of professional competence of students and graduates, which is designed to test their acquisition of clinical skills that can not be assessed by other traditional forms of examinations.

OSCE exam at ONMedU developed on the basis of the Law of Ukraine "On Higher Education", Resolution of the Cabinet of Ministers of Ukraine № 334 of March 28, 2018 from 02/19/2019 "On approval of the Procedure, conditions and terms of development and conduct of a single state qualification exam and evaluation criteria", other orders and instructions of the Ministry of Education and Science and the Ministry of Health of Ukraine, qualification standards, "Regulations about order carrying out OSCE-2 of medical them and international faculties of ONMedU" and other normative acts of the University, adopted in the manner prescribed by law.

Basic OSCE principles:

- objective - all students perform tasks of equal complexity, which are assessed using a standard tool (checklist);
- structured - students move on a certain number of stations along a certain route, where they perform tasks in the same conditions for the same period of time;
- clinical - creating situations as close as possible to clinical (cases), in which students apply the acquired theoretical knowledge and practical skills;
- exam - assessment of competencies and skills of students on the basis of the principles of objectivity, structure and approximation to the real clinical situation with a standardized checklist.

Included in OSCE clinical disciplines:

- Internal Medicine;
- surgery;
- obstetrics and gynecology,

- pediatrics,
- tuberculosis;
- occupational pathology;
- infectious diseases;
- dermatology, venereology;
- psychiatry, narcology;
- urology;
- otorhinolaryngology;
- ophthalmology;
- children's infectious diseases,
- emergency and urgent medical care,
- ecology, hygiene
- social medicine and public health.

For certification of graduates of medical and international faculties in 2021 12 stations of OSCE are developed:

- 1 - Emergencies in pediatrics and neonatology. Practical skills
- 2 - Internal medicine. Standardized patient. Communication skills
- 3 - Pediatrics. Combined station. Hybrid patient / Written
- 4 - Obstetrics and gynecology. Standardized patient
- 5 - Surgery. Acute abdomen. Standardized patient
- 6 - Internal medicine. Practical skills
- 7 - Surgery. Practical skills
- 8 - Medical and preventive station. Practical skills
- 9 - Emergencies. Practical skills
- 10 - Public health and social medicine. Written
- 11 - Obstetrics and gynecology. Practical skills

12 - Internal medicine. Written.

Each station is located in a separate room. The station numbers and its name are clearly indicated on the door of each room.

During the exam there is a constant video and audio recording.

The exam starts according to the schedule.

At the same time the exam is made by one examination group of 12 students.

The tasks performed by students change after each group.

The break between groups is 10 minutes.

During the exam, the student passes all the stations that are included in OSKI. The time spent at each station is 6 minutes; of them 1 minute - to get acquainted with the task, and 5 minutes - to complete the task. The break for the transition between stations is 1 minute. During the break, the student moves to the next station on an individual route, which is specified in the route list.

Certification begins with registration. Students must appear 15 minutes before the exam to register. They should change into medical clothing (medical gown or surgical suit of appropriate appearance, medical cap, mask and medical footwear). During registration, the student's identity is identified, he is assigned an individual identification number, which will be indicated on the route list and in the electronic checklists of examiners, issued an individual route list, according to which the student moves to the stations. Before the exam, students sign a document on confidentiality and non-disclosure of tasks, as well as awareness of the constant video and audio recording of all stages of the exam, in particular, being in the recreation area.

The identification of the student by the examiners takes place according to the individual identification number, which is indicated in the route list during registration. The individual identification number is unique and consists of symbols, which indicate the time and date of the exam, the number of the examination group, the number of the station from which the student begins the exam.

Students who do not have academic debts, appear on time for the exam, are dressed in a medical uniform and medical shoes in a proper form, have a photo document that identifies them are allowed to take the exam.

A student who is late is not allowed to take the exam. If a student is absent from the exam for a good reason, he is given the opportunity to pass it in a specially determined period, according to the exam schedule.

The next stage of certification is a 10-minute briefing. During the briefing, students are introduced to the rules of the OSCE, the format of the exam, the order of the stations and the rules of conduct in the exam.

During the exam, students are not allowed to communicate with each other, use any teaching and support materials, use any gadgets (including mobile phones). In case of violation of the above norms, the student is removed from the exam, and the results of the exam are canceled.

The direct certification procedure is the stage of passing the stations.

1. The signal to start the exam is a long call and a voice command "Start the exam. Please go to the stations". After this signal, students must approach the entrances to the appropriate stations from which they begin the exam, according to the checklists.

2. The signal to enter the station and start the task is a single call and a voice command "Enter the station".

After this signal, the student enters the premises of the next station, where he gives his itinerary to the examiner for identification and receives the task. He has 1 minute to familiarize himself with this task, which ends with the voice command "Start the task".

3. The student has 5 minutes to perform certain actions according to the standard algorithm of actions in the described clinical situation. Even if the student

does not complete the task in the allotted time, he interrupts the work immediately after the double call, picks up his waybill and goes to the next station. If the student copes with the task of the allotted time - he still remains in the room until the double call.

4. The signal provided 1 minute before the end of the term for the task is the voice command "One minute left".

5. The signal to complete the task at the station is a double call and a voice command "Go to the next station". You need to stop, get your itinerary with the examiner's signature and go to the next station.

6. The signal for the end of the exam is a long double call and the voice command "Exam is over. Please go to the debriefing hall".

During the student's performance of the task at the station, the examiner fills in a separate electronic checklist. The checklist is displayed on the examiner's computer automatically, according to the registered waybills and the assigned task. The personal data of the student are not reported to the examiner at the station. Before starting work of the student at the station, the examiner must verify the individual identification number of the student, which is specified in his itinerary and the number of the checklist, which is displayed on the computer monitor.

In case of coincidence of numbers in the route list and in the electronic check-list, the examiner puts the signature in the corresponding column of the route list and allows the student to pass the station.

If the numbers in the e-checklist and in the itinerary do not match, the examiner must stop the student and call the next exam administrator.

In case of using paper checklists, the examiner personally writes down the student's identification number in the appropriate column of the checklist.

7. The examiner does not interfere in the process of the task, but only evaluates the student's actions, making notes in the checklist. This is a prerequisite for ensuring the objectivity of the exam.

8. The examiner may contact the student if this is a condition of the task, or in case the student violates safety rules, rules of conduct or other unforeseen situations.

9. The student may apply to the examiner if this is a condition of the task, as well as in case of deterioration or in case of other force majeure.

Scoring and debriefing.

Immediately after the completion of all stations, students move to the debriefing area. The evaluation is conducted electronically, the information is received by the secretaries on-line automatically and printed on a printer in the form of individual and group information.

Immediately after the count, the grades for the exam are announced to the students during the debriefing.

The student's assessment is based on a checklist. The maximum score for the task at 1 station is 100 points. The maximum total number of points for the exam is 1000.

The exam is considered passed if the student scored at least 60% of the maximum number of points at each station (not less than 60 points).

When forming the final statement, the stations are combined by disciplines as follows:

1. Discipline "Internal Medicine"	Station 2 - Internal Medicine. Standardized patient. Communication skills Station 6 - Internal Medicine. Practical skills Station 12 - Internal Medicine. Written.
2. Discipline "Surgery"	Station 5 - Surgery. Acute stomach. Standardized patient Station 7 - Surgery. Practical skills

	Station 9 - Emergencies. Practical skills
3. Discipline "Obstetrics and Gynecology"	Station 4 - Obstetrics and gynecology. Standardized patient Station 11 - Obstetrics and gynecology. Practical skills
4. Discipline "Pediatrics"	Station 1 - Emergencies in pediatrics and neonatology. Practical skills Station 3 - Pediatrics. Combined station. Hybrid patient / Written
5. Discipline "Hygiene, social medicine and public health"	Station 8 - Medical and preventive station. Practical skills Station 10 - Public Health and Social Medicine. Written

The final result, which is entered in the examination list is a grade for the discipline on the traditional (4-point) and 200-point scales. Thus, the student as a result of passing all stations receives 5 marks.

The score for the discipline is calculated as the arithmetic mean of the scores obtained at the stations that are part of the discipline.

For example: a student received

- 10 points at station 6 "Internal Medicine. Practical skills"

- 85 points at station 2 "Internal medicine. Standardized patient. Communication skills"

- 90 points at station 12 "Internal medicine. Written".

The total score is 185. The arithmetic mean for the discipline is $185/3 = 62$ points.

The final grade for the discipline "Internal Medicine" is 3 points ("satisfactory") on a traditional scale and 124 points on a 200-point scale.

If the student does not agree with the result of the exam, he can appeal and appeal the result.

The student may be suspended from compiling the OSCE in the following cases:

- academic debt at the time of the exam;
- use of a mobile phone, other gadget, or other media after registration and receipt of a route letter with an individual identification number;
- the fact of conversation of students with each other during passing of the examination is fixed;
- the fact of the student's conversation with the examiner during the exam is recorded, if it is not due to the performance of the task at the station;
- an attempt was made by the student to copy the task of the station to any information carrier;
- violation of ethics and moral code of ONMedU.

If the fact of passing any information about the exam by a student who has passed the exam, to other students, or to any other person, the results of the exam by this student are annulled and he is considered not to have passed the exam.

Appeal procedure.

The composition of the appeal commission at the time of the final certification is determined by the relevant order of the Rector of the University.

Students who do not agree with the results of the exam have the right to submit an application for appeal in the approved form (which can be obtained from the Secretary of the State Attestation Commission) to the Chairman of the Appeals Commission no later than the last day of graduation.

The application must clearly state the subject of the appeal with the obligatory indication of the reasons for which the student does not agree with the result of the examination.

The reasons for the mandatory appeal may be:

- 1) incorrect wording of tasks, or possible double interpretation of the task;
- 2) examination tasks have technical errors (drawings, formulas, or digital data specified in the task are not provided);
- 3) examination tasks or skills do not belong to the approved curriculum of the discipline and were not published 1 month before the exam in the relevant section of the official website of the University;
- 4) technical reasons (failure of the computer program during the student's exam, which was confirmed by the staff of NVK ITNIBO);
- 5) absence or malfunction of the equipment for performance of the task, absence of expendables at station without which performance of the task is not possible (at confirmation by the examiner of the corresponding station).

For other reasons, the student's appeal may be denied.

The appeal takes place according to the standard procedure approved by ONMedU by watching a video of the student's actions at the station with re-evaluation on a checklist by members of the appeal commission.

We wish you a successful graduation certification!