



**NOTES TO CANDIDATES
FOR THE PRIMARY EXAMINATION
OF THE COLLEGE OF INTENSIVE CARE MEDICINE**
(Jan 2009)

The Primary Examination of the College of Intensive Care Medicine is a test of knowledge and understanding of the basic sciences applied to the clinical practice of Intensive Care Medicine.

Intensive Care Medicine covers a wide range of disciplines and candidates for this exam should carefully consult the Primary Examination Syllabus.

Overview of the Examination

The complete Examination consists of two sections; the Written Section, and the Oral section. Marks are structured as follows:

TOPIC	MAXIMUM MARK	PASS MARK
Written Section		
2 x 150 minute papers		
Short Answer Questions	40	20
Short Facts Questions	10	5
Total Mark	50	25
Oral Section	50	25
(8 x 10 minute examinable stations)		
TOTAL	100	50

Both the total mark and the mark in each section will be considered when determining a pass/fail decision. To pass the Primary Exam, you must:

- (a) achieve a mark of at least 45% in the written section (to be invited to the oral section), and
- (b) achieve a total score of at least 50%

To best understand what is expected in the Exam, you are encouraged to read the Exam reports as they become available.

This exam is not split into separate sections by subject. Questions from the entire syllabus are present in each written paper and in the oral exam. Thus both written papers must be taken at the same sitting. If invited to the oral exam all oral stations must be attempted at the same sitting.

The Written Section

There are two papers. The time allowed for each paper is 2.5 hours. Each paper consists of 12 short answer questions (SAQ), and 20 short fact questions (SFQ). This allows approximately ten minutes per SAQ, and approximately 30 minutes for the 20 SFQs. The written section comprises 50% of the total mark: 40% is allocated to the SAQs and 10% to the SFQs.

Guidelines for answering the SAQs:

- Apportion your time carefully for all questions. Note that SAQ's with more than one part will have the marks apportioned.
- Read the question carefully and answer the issues specifically.
- Write legibly.
- Plan your answer.
- Use lists and diagrams to save time.
- Indicate units of measurement.
- Write using black or blue ink.
- Explain abbreviations when first used within each question.
- Important and relevant information gains marks.
- Note form is acceptable.

Calculators, personal computers, mobile phones and other electronic equipment will not be required and will not be permitted in the Examination room.

A list of keywords and their meanings is attached in Appendix 1.

Examples of SAQ,s and SFQ,s are in Appendix 2 (Mock Exam)

The Oral Section

This includes Cross Table Vivas and Objective Structured Clinical Examinations (OSCEs).

There are 8 stations of 10 minutes each.

Objective

The objective of the oral section is to test your:

- knowledge of basic sciences,
- ability to apply these basic sciences to a clinical setting,
- ability to systematically assess results of clinical investigations,
- ability to understand monitoring equipment used in a critical care environment.

Process of the ORAL Section

Candidates are expected to arrive at the venue at least 30 minutes prior to the scheduled commencement of the exam. There will initially be a briefing session with the Chairman or delegate to go over the process and logistics. You will rotate through eight active stations after starting at a predetermined station. A number of rest stations may be provided. You will spend ten minutes at each station with two minutes allowed to move to the next station and read a scenario outside the station.

At the beginning of every oral examination, you should identify yourself to the Examiner by your candidate number only.

You will be allocated 2 minutes to read the introductory questions outside each oral area and then spend 10 minutes at the station.

- You will commence reading for the first oral station with the first bell.
- A second bell will sound when it is time to move inside the station.
- A bell will sound when approximately two minutes remain for the completion of the station.
- A further bell will sound when it is time to move to the next station.
- There will be at least one Examiner at each station.
- The oral stations will include basic and more difficult questions to allow demonstration of an appropriate level of competence, management, etc. Even if you are not able to answer all questions correctly, you may have gained enough marks to satisfactorily complete the station.

No stoppage or changing the rotation is allowed and candidates may not return to a station.

As the format in which investigations are presented varies in different hospitals, you will be given time to familiarise yourself with each format. Laboratory results will also have the normal values included.

All stations carry equal marks. The Examiner(s) at the station will assess the performance on a mark sheet according to preset criteria.

You should take only pens into this section of the Exam.

General

Each individual written question and/or oral station is marked separately, and does not influence the marks in any other question or station.. If you are not happy with your performance in one section, determine to do better in the next.

Each Exam section is marked on the overall performance in that section. You should not assume that you have failed that section because you fail to answer specific written questions or oral stations. To fully test your knowledge a point may be reached where you cannot answer.

Results

Results will be handed to you in a sealed envelope at a designated time and place after the oral section is completed and after the Examiners' meeting. Successful candidates are presented to the Court of Examiners immediately following distribution of results.

Exam Report

A report is distributed after every Examination to Supervisors of Training, Regional Education Officers, the Panel of Examiners and Trainees. It is prepared by the Examination Committee. The purpose of the report is to provide feedback to potential candidates and those involved with teaching and training programs. It provides information about overall

performance of candidates in various sections of the Examination and highlights particular problems candidates may have had in these sections.

Feedback

Candidates who fail the Examination receive a letter several weeks after the Exam detailing their performance and the written questions and oral stations in which they failed.

Also, the candidate will receive a telephone call (usually from the Chairman of the Examination) to discuss the candidate's performance and suggest remedial action. This discussion will relate to the exam process, conduct and overall performance and how best to prepare again but does not cover specific exam questions or answers.

Carrying a Pass

Candidates are required to achieve a mark of at least 45% in the written section of the examination before being invited to attend the oral sections of that examination.

Candidates are now permitted to directly enter the oral sections of the examination at the next two scheduled examinations if they have previously passed the written section (achieved a mark of 50%) but failed the overall examination. Failure at their third attempt at the examination will require that candidate to re-sit the entire examination (including the written section) at their next sitting.

Appendix 1

Keywords:

- **Calculate** Work out or estimate using mathematical principles
- **Classify** Divide into categories; organize, arrange
- **Compare** Examine similarities and differences
- **Define** Give the precise meaning
- **Describe** Give a detailed account of
- **Explain** Make plain, interpret, and account for
- **Interpret** Explain the meaning or significance
- **Outline** Provide a summary of the important points.
- **Relate** Show a connection between
- **Understand** Appreciate the details of; comprehend

Appendix 2

Please refer to the College of Intensive Care Medicine Mock Exam.