Y3 OSCE 2016

ORIENTATION
Agenda

- Framework
- Objectives of the Y3 OSCE
- Domains Assessed
- OSCE Format
- Score Reports
- Remediation
- Q&A
THE Framework

• OSCEs (Step 2 CS) are a form of *simulation*
• Simulation closely approximates real life
• **Simulation is NOT real life**
• You are demonstrating clinical skills in a testing environment
• Half the battle is practicing your clinical skills
• The other half is learning how to TAKE THE TEST
Y3 OSCE Objectives:

• Utilize a standardized measure of student clinical performance prior to the end of the clerkship year.

• Provide students who fall below the designated cut-off in any one of the three general domains of competency with necessary remediation of clinical skills expected at a 3rd year level.

• Gives remediating students an opportunity to re-take the exam prior to the end of the 3rd year.

• Allow all students an opportunity to practice taking a clinical skills exam designed to help prepare them for USMLE Step 2 CS.
USMLE raised the bar for passing – anticipating failure rates to increase 3% among US grads and 15% among foreign grads

“Do NOT listen to your residents when seeking advice on CS prep – the CS exam has changed dramatically since they took the exam. You need to prepare and you need to take it seriously.”

Preparing for and taking the OSCE is the FIRST STEP in preparing for CS.
<table>
<thead>
<tr>
<th>Y3 OSCE</th>
<th>Step 2 CS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication and Interpersonal Skills (CIS)</td>
<td>Communication and Interpersonal Skills (CIS)</td>
</tr>
<tr>
<td>Data Gathering (DG) - eliciting a Hx and performing a PE relevant to the patient complaint</td>
<td>Integrated Clinical Encounter (ICE)</td>
</tr>
<tr>
<td>Data Synthesis (DS) – post-encounter note</td>
<td>Spoken English Proficiency (SEP)</td>
</tr>
<tr>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>
Assessment of Step 2 CS vs. Assessment of Y3 OSCE

• USMLE keeps their approaches to assessment highly confidential

• We do know they use some sort of validated communication skills rubric for CIS

• We do know they use licensed board-certified physicians to score the notes
CIS Assessment – Y3 OSCE

• Scored by highly trained SPs under supervision of CSC med-ed staff and clinical faculty

• The Kalamazoo Scale assesses the full range of communicative expectations:
  • Relationship-building
  • Facilitating discussion
  • Gathering information
  • Understanding patient perspective
  • Sharing information
  • Reaching Agreement
  • Providing Closure
CIS Assessment – Y3 OSCE (continued)

- The complete Kalamazoo rubric will be posted to the Bb site

- In addition to the Kalamazoo Scale, SPs will be assessing the following interpersonal skills:
  - Hand-washing
  - Draping (Ensuring patient’s modesty)

- Graded as S/U based on CIS across all patient encounters.
Data Gathering (DG) – Y3 OSCE

- Scored from the Post-Encounter Note
- Sub-domains
  - HPI
  - PMH (medications, allergies, PSH)
  - Fam Hx
  - Soc Hx
  - Focused PE *

- Graded as S/U based on post-encounter notes (PENs) across all patient encounters.

*PE grade is based on both SP scoring and what is documented in PEN.
Data Synthesis (DS) – Y3 OSCE

- Scored from the Post-Encounter Note
- Sub-Domains
  - Differential dx
  - Justifications
  - Diagnostic Studies (Workup)

“The note you write for CS is completely different than what you are taught in clerkships”

- Graded as S/U based on post-encounter notes (PENs) across all patient encounters.
OSCE Format

- Offered on the following dates:
  - April (4/1, 4/4, 4/8, 4/11, 4/26, 4/28)
  - May (5/5)

- Dates assigned (via computer randomization)

- Make-up date: 5/10/16 (only for students who obtain excused absence from their counselor)

- Held in the Kado Family Clinical Skills Center, Suite 206, Mazurek
## OSCE Format vs. CS Format

<table>
<thead>
<tr>
<th>Y3 OSCE</th>
<th>Step 2 CS</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 OSCE Stations</td>
<td>12 OSCE Stations</td>
</tr>
<tr>
<td>13 minute patient encounter</td>
<td>15 minute patient encounter</td>
</tr>
<tr>
<td>8 minute note</td>
<td>10 minute note</td>
</tr>
<tr>
<td>No character / line restrictions</td>
<td>Character / Line Restrictions</td>
</tr>
<tr>
<td>No Phone Case (Sample phone case on Bb)</td>
<td>~25% of students will have phone case</td>
</tr>
<tr>
<td>3.5 hours (including instructions and debrief)</td>
<td>~ 7 – 8 hours (with instructions and break)</td>
</tr>
</tbody>
</table>
Score Reports

• Score reports will be sent to students within 3-4 weeks after taking the OSCE

• Use the reports to your benefit
  • Reflect on your feedback
  • Engage with on-site preceptors
  • Apply to actual patient encounters
  • PRACTICE FOR CS

“I felt, well I passed the OSCE so I didn’t need to worry about practicing for CS. I guess I was wrong.”
Remediation

Common reasons for remediation:

• CIS:
  • Failure to consistently wash hands prior to the PE / ensure patient’s comfort / modesty (draping)
  • Failure to address challenge question(s)
  • Failure to summarize / provide closure
  • Failure to demonstrate empathy / interest in the patient
Remediation

**Common reasons for remediation:**

- **DG:**
  - Lack of hx elements on PEN
  - Single-system exam (TOO focused)
  - Lack of system-associated exam maneuvers (e.g., neck, extremities)
  - Failure to interpret VS
  - Missing meds, allergies, past surgical hx, social hx
Remediation

Common reasons for remediation:

• DS:
  • Lack of justifications
  • Failure to focus solely on pos / neg justifications
  • Listing treatments, consultations, or referrals instead of diagnostic tests
Remediation

• Most Common Reason for Remediation:
• Not Preparing!
• Be sure to read all OSCE test-prep materials on Blackboard page!
Remediation

• Ultimate goal of Y3 OSCE: Success for ALL students!
  • Will be notified in score report
  • Faculty-led workshops
  • Remediation OSCE: 6/9/15 (3-station)

Successful completion of the OSCE and, if necessary, remediation is a requirement for graduation.
When To Take CS

Following completion of Year 3.
Materials Available on Bb (January, 2016)

- Information on Kalamazoo Communication Assessment
- Exam Instructions
- Exemplar videos of interview and physical exam
- Examples of good and bad notes with explanation
- Student Schedule (will be completed in January, 2015)
Q&A
<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Phone Number</th>
<th>Email Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kendra Schwartz</td>
<td>MD</td>
<td>313.577.0880</td>
<td><a href="mailto:kensch@med.wayne.edu">kensch@med.wayne.edu</a></td>
</tr>
<tr>
<td>Simone Brennan</td>
<td>MA</td>
<td>313.577.1024</td>
<td><a href="mailto:skbrenna@med.wayne.edu">skbrenna@med.wayne.edu</a></td>
</tr>
<tr>
<td>DeShaun Harris</td>
<td></td>
<td>313.577.1075</td>
<td><a href="mailto:ddharris@med.wayne.edu">ddharris@med.wayne.edu</a></td>
</tr>
</tbody>
</table>