

Examination Day

Before Examination Day

- **What to bring**
 - Scheduling permit that you received after registration
 - Confirmation notice
 - Unexpired government-issued ID with photograph and signature (driver's license, passport, etc.)
 - You will not be admitted to the testing site without proper ID.
 - You will have to pay an extra fee to reschedule the test.
 - Your name must match the name on your scheduling permit.
 - Lab coat and stethoscope are **strongly** recommended.
 - The testing site will have a limited supply of these.
 - Each testing site contains locked storage to place personal items, but not luggage.

- **What not to bring**
 - Pens, cell phones, watches, pagers, 2-way communication devices, and notes must be placed in locked storage and cannot be taken into the testing rooms.
 - No waiting area for spouses, family, or friends
 - They must meet you after the examination.
 - Medical conditions requiring medications, external appliances, or electronic devices must be communicated in writing 4 weeks prior to testing to obtain permission.

- **What to wear**
 - Comfortable and professional clothing
 - White coat or clinic coat
 - Adhesive tape will be placed over any identifying information.

- **Proper behavior**
 - Arrive at the time printed on the confirmation notice.
 - Communicating in languages other than English is prohibited between examinees during breaks.
 - You will be monitored by test center staff
 - Each examination room will have video cameras and microphones to record encounters.
 - You may not discuss the examination with fellow examinees at any time.

Day of Examination

- **On-site orientation**
 - Arrive on time for the orientation or you will have to complete a late admission form.
 - The orientation room will have the equipment that appears in the actual patient room for you to try out and become familiar with.
 - The examination room usually has a Snellen visual chart, otoscope, ophthalmoscope, tuning fork, reflex hammer, and blood pressure cuff.

- **Patient encounters**
 - There are 12 encounters of 15 minutes each.
 - A signal is given and the 15-minute period begins.
 - Each door has a plastic box with a form containing patient information, vital signs, and a chief complaint.
 - The bottom of the form tells you what to do during the encounter.
 - Don't write all of this information down because there is a 2nd copy in the room.
 - You are not allowed to re-enter the patient's room if you leave, so make a mental note of what you need to do before entering.
 - The patient wears a gown and sits on the examination table facing the door.
 - You can sit on the stool in front of the patient after introducing yourself.
 - The corner has a workstation for the patient to grade you after the encounter. It is not for your use.
 - You will not have enough time to do a complete physical examination, so be focused.
 - Do not do rectal, breast, pelvic, genitourinary, inguinal hernia, or corneal reflex examinations.
 - Do not do a throat swab, but write this in your plan on the note.
 - An announcement will let you know when 5 minutes are left.
 - The announcement at 15 minutes and a knock on the door indicate the end of the period, and you should conclude the interview.

- **Telephone patient encounters**
 - The encounter begins in a manner similar to the patient encounter above.
 - Enter the room and sit at the desk.
 - Press the yellow speaker on the telephone to start the interview.
 - Do not touch any buttons until you are ready to stop the interview.
 - You are not allowed to call back after you disconnect the interview.
 - There will be no physical examination, so leave that part of the note blank.

- **Patient note**
 - You have 10 minutes to type the patient note in the required format on the computer.
 - You are not allowed to hand write the note.
 - Study examples to know the correct format.
 - Do not include treatment, referrals, or consults in the plan.

- A signal is usually given to let you know that 2 minutes are left.
- The next patient encounter starts after this and the cycle continues.

- **Scoring**

- **Integrated clinical encounter (ICE)**
 - Assessment of data gathering and interpretation skills
 - Patients complete checklists for history and physical examination.
 - Trained physician raters also complete a checklist of the note to evaluate diagnostic impressions, potential diagnoses, and diagnostic studies.
- **Communication and interpersonal skills (CIS)**
 - Assessment of communication skills for developing patient relationship, gathering information, emotional support, and making decisions for the patient.
 - Patients complete a checklist of required items.
- **Spoken English proficiency (SEP)**
 - Assessment of clarity of spoken English and communication
 - Patients complete rating scales evaluating pronunciation, comprehension, and amount of listener effort required to understand questions.