

ECEIM 2021 exam Hannover, Germany

- Updated October 2020

Information for candidates taking the ECEIM general and certifying examinations in 2021

This document contains information to help you prepare for the ECEIM general and certifying examinations.

For additional information please see the ECEIM website. If you encounter any problems contact the exam committee chairperson, Wendy Talbot email: wendy.talbot@eceim.info using the subject heading: EXAM CANDIDATE 2021

Examination location and dates

Due to the ongoing Covid-19 pandemic the ECEIM executive committee and the ECEIM examination committee have reviewed the arrangements for the 2021 ECEIM examination and concluded that travel to Hannover in January 2021 for the purposes of the examination is neither desirable nor feasible. The 2021 examination will continue to go ahead being **replaced by an entirely online format which candidates will take at a location local to them under the supervision of an approved invigilator**. The MCQs and online OCMs will take place on the **ExamSoft platform preloaded onto the candidate's computer** as would have been the case in Hannover. We will confirm as soon as possible the process for the oral CJT which will now take place as a video call using one of the available applications (e.g. Teams, Zoom etc). **Invigilators will be nominated by the candidate** (ECEIM or other EBVS college or by a professional invigilation service in an approved testing centre-subject to approval of the committee). **The invigilator MAY NOT BE the residents supervisor** and must be authorised in advance by the examination committee. Invigilators must be available to be present throughout the whole of the examination process and, for those taking the CJT, the time which would have been spent in the holding room. **Candidates fulfilling the exam entry requirements will be emailed after the 1st November a form to complete nominating their invigilator.**

We currently expect the dates of the examination to remain unchanged; however, there may be some changes to the time of the individual sections of the exam. All examinations will be conducted between 9am and 6pm Central European Time.

Whilst I am sure there will be many questions around the process I hope that you will agree that this is a sensible and pragmatic compromise given the circumstances. Communication during this time is a priority and the examination committee will endeavour to keep you fully informed of the process.

If you are a potential candidate for the 2021 exam and you have questions of a general nature relating to the process please can I ask that these are directed in the first instance through your representatives, Francesca Worsmann (standard residency) or Abbe Kirtland (alternative residency). If anyone is concerned this may negatively impact their ability to take the examination or you have a confidential query please contact me at Dr Wendy Talbot, wendy.talbot@eceim.info as soon as possible.

Dates:

Tues. 2nd February 2021: General paper 1 AM; General paper 2 PM

Weds 3rd February 2021: Certifying MCQ paper AM; OCM examination PM

Thurs 4th February 2021: CJT all day with individual candidate times to be allocated

Structure of the examinations and logistics

Important notes:

THERE HAS BEEN AN EXTENSIVE REVISION OF THE EXAMINATION FORMAT FOR 2021. THESE CHANGES ARE DESIGNED TO PROVIDE THE BEST POSSIBLE EXAMINATION. IT IS ESSENTIAL YOU ARE FAMILIAR WITH THE FORMATS FOR EACH SECTION. YOU SHOULD READ AND DIGEST THESE NOTES CAREFULLY – DO THIS AS SOON AS YOU HAVE APPLIED TO SIT THE EXAM

- The GENERAL paper will be examined first in 2021
- The multiple-choice question papers and the OCM will be presented in an electronic format with answers to be entered directly on a **COMPUTER WHICH THE CANDIDATE MUST BRING WITH THE EXAMPLIFY SYSTEM PRELOADED AND TESTED** (see below).

The new online testing platform = 'Exemplify'

All online examinations will be delivered using an online platform. Prior to the examination, candidates must:

1. Confirm their device meets the minimum required standard for [Windows](#) or [Mac](#) computers
2. Undertake a test assessment designed to orientate candidates and test the compatibility with your software
3. Undertake practice assessment designed to orientate candidates to the question formats used in the examination
4. Engage in training sessions provided by the examination committee either at summer school or at the other times provided during the summer of 2020 (see website for details)
5. Download exemplify and the examinations as instructed by the chair of the examination committee
6. Bring a compatible laptop device, charger and adapter to the examination
7. As appropriate, consent to remote invigilation and recording of personal activity and keystrokes

Where candidates fail to meet these requirements it will usually result in candidates being unable to complete the examinations and will count as an unsuccessful attempt of the examination.

Part 1: General examination (G1 & G2) - online (2nd February 2021)

General paper 1 will comprise 50 multiple choice questions (MCQ). The aim of these is to test candidates' knowledge and understanding of concepts relating to the medical and biological sciences that underpin clinical practice of internal medicine (for example pharmacology, microbiology, physiology, pathology, epidemiology, diagnostic imaging).

General paper 2 will also comprise 50 MCQ, aimed to test candidates' clinical knowledge and ability to address specific clinical problems. The blueprint below documents how many MCQ will be assigned to specific body systems and spheres of knowledge within the examination.

The examination will be conducted in 2 sections each lasting 3 hours, allowing up to 3.6 minutes per question. Candidates will be allowed to take a non-medical English language dictionary into the examination. If the examination takes place in Hannover, plain paper, pens, will be provided. Calculators are provided as part of the assessment platform. Candidates will be encouraged to provide feedback on specific questions in particular to identify any difficulties in comprehension they have encountered and these comments will be considered in the examination assessment process.

Part 2: Certifying examination (3rd and 4th February 2021)

This will consist of 3 sections:

1. Certifying Multiple Choice Paper - online:

This paper comprises 50 MCQ aimed to test candidates' ability to address clinical problems. Particular emphasis will be given to candidates' ability to demonstrate clinical judgement when presented with a case scenario. A maximum of 3 hours is allowed for the examination, averaging 3.6 minutes per question. Candidates will be allowed to take a non-medical English language dictionary into the examination. Candidates will be encouraged to provide feedback on specific questions in particular to identify any difficulties in comprehension they have encountered and these comments will be considered in the examination assessment process.

2. Clinical Judgement test (replaces the previous essay section) – oral:

Candidates will be required to answer 4 compulsory clinical judgement tests over a period of 2 hours.

Candidates will enter the preview room at their allotted time. Here they will be receive clinical information on 4 cases or subject areas and given 1 hour to review the information. To ensure that the examination is consistent, all candidates will be presented with the same information.

Following the 1-hour preparation, the candidate will be examined orally by two different teams of 2 examiners in two different rooms (one for cases 1 and 2 and one for cases 3 and 4). For every case, one examiner will lead the discussion, while the other (or both) documents the candidates' answers. During the examination, the candidate will be asked the questions that were prepared during the preparation time, and further structured questions regarding clinical decision making. This section of the examination will be completed in 60 minutes (30 minutes per room). An external observer will attend the CJT session which will be recorded on

videotape; a copy of this recording will be retained by the Examination Committee for review in the event that the candidate lodges an appeal against the Examination Committee's decision.

To prevent unfair discussion of the examination, candidates will be segregated for this component of the examination. Candidates should anticipate having to spend several hours in a secure area; they may bring food and books or other items to fill the time. Please note that use of electronic devices with the potential to go online will not be permitted. Refreshments will be provided.

3. Objective case management – computer based (replaces the previous oral OCM):

The OCMs will be completed on the same Exemplify system used for the MCQS.

There will be 5 OCMs each comprising 10 questions addressing a specific testing point regarding that case. OCMs will use a combination of advanced question formats (single best answer, extended matching questions, single word/phrase responses, script concordance test) to progress in a single direction through the cases. Once a question is answered more information will appear to progress through the case and it will not be possible to go back to previous questions.

A maximum of 3.5 hrs is allowed for the OCM examination, providing candidates with 10 minutes to read each case scenario and 30 minutes to progress through each case.

Language

The exam will be conducted in English. Candidates who are not native English speakers have the option of having a translator fluent in their own language attend the oral CJT examination. If you would prefer to have a translator present then please indicate this on application for the examination.

Proposed schedule of the examination

Please note these are provisional times only. Details will be confirmed after you receive notification of whether your application has been successful.

Date	Section	Time
2 nd February 2021	General Part 1	09:30-12:00
2 nd February 2021	General Part 2	14:00-17:00
3 rd February 2021	Certifying MCQ	09:00-12:00
3 rd February 2021	OCMs	14:00-17:30
4 th February 2021	CJTs	Candidates will be given individual appointments

NB:

Due to the nature of this examination, each section will be administered at one time and place ONLY. There will be no alternative arrangements for any reason.

HOW THE EXAMINATION IS SCORED:

In any given year it is possible for all candidates to pass the examination. Cut-off standards for passing the examination are determined by Diplomates who rate the examination, and are not based on a predetermined proportion of the candidate population passing or failing. The rating process is designed to ensure that at least the minimum level of competence required for specialist status is achieved by those passing the Examination.

Candidates must pass both the general and certifying examination in order to be considered eligible to become Diplomates of the College (see ECEIM constitution). Candidates who fail the General examination have to re-sit both MCQ papers of the general examination. As described in the constitution of ECEIM, candidates that fail only one section of the Certifying Exam can re-take that section individually. Candidates that fail individual components of the examination must retake only the failed components, however, candidates must re-take all the papers they have not yet passed **each time** they attempt to complete the examination. All parts must be completed within **8 years** of the initial application. The maximum number of **reapplications** to sit parts or all of the examination is **3**. This applies to candidates who sit all parts of the examination at once as well as to candidates of category 1a, who sit the General Examination already during their residency before taking the Certifying Examination.

Re-sits in the new exam format:

- Candidates who would have been required to re-sit the **essay will now be required to pass the clinical judgement test.**
- Candidates who would have been required to re-sit the **oral OCM will re-sit the OCM online**

There is no change to the number of re-applications allowed. For example, if a candidate had two more attempts at the essay, under the new system they will have 2 attempts at the clinical judgement test.

General Examination: marks from papers 1 and 2 will be combined to produce one final mark. The MCQs are set and evaluated by Diplomates of ECEIM and by colleagues who are Diplomates in related disciplines or from outside of Europe. A process of rating and evaluation of validity by Diplomates of ECEIM will determine the pass grade.

Certifying Examination: candidates must achieve a pass mark in each of the 3 sections.

- **Certifying Multiple Choice Questions:** these are set and evaluated by Diplomates of ECEIM and by colleagues who are Diplomates in related disciplines or from outside of Europe. A process of rating and evaluation of validity by Diplomates of ECEIM determines the pass point at the level of a new diplomate.

- **Objective Case Management:** The candidate will be expected to answer a predefined series of objective advanced format questions relating to disease aetiopathogenesis, and diagnostic and therapeutic plans, based on the case material provided. All candidates will be asked the same series of questions, in the same predetermined order. Each question within the OCM will be marked independently of the other questions in that case according to a predetermined marking scheme. In this way a candidate is not penalised more than once for an incorrect response. The correct response is determined by the responses of a panel of diplomates prior to the examination. Where the panel cannot agree on a single best response, marks will be assigned that demonstrate how candidates performance compared to existing diplomates.
- **Clinical Judgement Test:** The candidate will be expected to develop justifications and case management that are evidence based. For each questions candidates will be scored as providing an inadequate answer, a borderline fail answer, an answer using evidence expected of a new diplomate or an answer above the standard expected of a new diplomate. The descriptors for these will be determined for each question based on the quality of available evidence in the current reading list. The passmark will be determined by exceeding a median score above the mid-point between a new diplomate and a borderline failing candidate across the entire test (ie across all four scenarios)

Appeals: for details of the Appeals process, see the ECEIM constitution.

BLUEPRINT FOR MCQ SECTIONS

SYSTEM/SPHERE OF KNOWLEDGE	GENERAL 1 BIOLOGICAL & MEDICAL SCIENCES	GENERAL 2 CLINICAL SCIENCES	CERTIFYING CLINICAL PROBLEMS
Behaviour	2	-	-
Cardiovascular	2	3	3
Clinical Pathology*	3	-	-
Critical Care & emergency medicine	-	3	3
Dermatology	2	3	3
Diagnostic Imaging*	2	-	-
Epidemiology and medical statistics*	4	-	-
Endocrinology, metabolic & hepatic	3	4	4
Exercise Physiology & sports medicine	2	-	3
Fluid, electrolyte and acid-base balance	-	3	3
Gastrointestinal	3	7	7
Genetics & molecular biology*	4	-	-
Haemolymphatic		4	3
Immunology*	3	-	-
Infectious disease & microbiology*	5	3	1
Neurology, neuromuscular, & musculoskeletal	1	4	3
Nutrition*	3	-	-
Ophthalmology		3	3
Parasitology*	3		1
Perinatology*		3	3
Pharmacology & toxicology*	4	-	-
Respiratory	3	7	7
Urinary	1	3	3
Total	50	50	50

* Elements of these disciplines will be incorporated into the clinical questions and problems relating to the various body systems.

FURTHER DETAIL ON QUESTION FORMATS AND EXAMPLES

Multiple Choice Questions

The MCQs are designed to test knowledge, synthesis of information and clinical judgement. Clearly the realities of practice dictate that the selection of diagnostic tests and treatments is often constrained by financial considerations but, for the purposes of this examination, candidates are encouraged to select their answer on the basis of best medical practice and to assume that there are no specific financial constraints unless mentioned within individual questions. Questions on exotic diseases or important diseases which occur only in certain parts of Europe will be included however, in selecting questions, the examination board will ensure that there is no geographic bias and thus, diseases which do not occur within some areas of Europe will not be given undue prominence within the examination. Candidates who are experiencing difficulties related to language during the examination are encouraged to seek assistance from the invigilators. Candidates will also be given the opportunity to comment on the questions, particularly if they feel that the language is difficult, or the options for answers are ambiguous.

All MCQs will be of single best answer format with 3 distractors (incorrect or less good options). This means that you must select the **one option** that you consider the **best answer** to the question. The distractors are likely to be options that are not necessarily completely wrong but the correct answer will be one that the majority of evidence or opinion in the current literature supports. For example, if you are asked “If antimicrobial therapy is to be used, which of the following drugs is considered the most appropriate for treating *Strep. equi equi* infection?” with the options of: penicillin, trimethoprim sulphamide, ticarcillin or oxytetracycline? Notice that *Strep. equi equi* can be sensitive to all of these drugs but penicillin is the correct answer. Of the options given, it is recommended by most (probably all) current texts, although there are clinical circumstances in which one would conceivably choose to use one of the other options (for example if your case was known to be allergic to penicillin, or there were practical difficulties over arranging intramuscular injection etc). Equally, when presented with that question, you may feel that you want to make an argument that you would not use antimicrobials in a case of Strangles, however this specific MCQ does not address that issue therefore that argument, while perfectly valid in general terms, is not relevant to this specific MCQ question.

Examples of MCQ typical of those that will be included in each of the 3 MCQ papers (i.e. General 1: Medical and Biological Sciences, General 2: Clinical Sciences and Certifying: Clinical Problems) are given below.

Objective Case Management Section

The aim is to test clinical judgement and competency through demonstration of the ability to work up a case in a structured and logical way. A combination of advanced question formats (single best answer, script concordance tests, extended matching questions and single word/phrase answers) will be used to progress through the 5 cases in a uni-directional manner. The OCMS test the ability to integrate and act on new information provided at each stage including: history; clinical and laboratory data; disease pathogenesis; diagnostic tests; differential diagnosis; treatment/ management; prognosis and prevention.

Clinical Judgement Test

This is an oral exam designed to test the ability to justify clinical reasoning and decision-making at the level required for a specialist. Typically, a case or subject area discussion may be based around a controversial topic. Candidates are expected to logically and critically discuss the reasons for clinical decision-making using evidence from the current literature.

Further information, example questions and training resources for the revised examination format can be found at www.eceim.info/exam.

Please check this page regularly as we intend to add to the available training material over the coming months to assist in your preparation.

SUGGESTED READING LIST

The entire examination will emphasize information taken from the current veterinary literature. Selected information will also be taken from the current human and general biomedical literature. With respect to the veterinary literature, current veterinary textbooks and papers published in the refereed journals listed below should be the primary study area. Candidates are advised to prepare for the examination by a systematic review of recent textbooks and periodicals. Your mentors can help you select appropriate study material. WE CANNOT DEFINE CONCLUSIVELY THE BODY OF KNOWLEDGE NECESSARY TO PASS THIS EXAMINATION – the following list is **ONLY A GUIDELINE**.

Textbooks (most recent editions of):

A current textbook in physiology (e.g. Guyton and Hall or Cunningham)
Respiratory Physiology (West)

Cardiology of the Horse (Marr)
Equine Clinical Immunology (Julia and Felipe)
Equine Dermatology (Scott and Miller)
Equine Diagnostic Ultrasound (Reef)
Equine Emergency and Critical care (Southwood and Wilkins)
Equine Infectious Diseases (Sellon and Long)
Equine Internal Medicine (Reed, Bayly, Sellon)
Equine Fluid Therapy (Fielding and Magdesian)
Equine Neurology (Reed and Furr)
Equine Ophthalmology (Gilger)
Equine Sports Medicine and Surgery (Hinchcliff et al)
Interpretation of Equine Laboratory Diagnostics (Pusterla and Higgins)
Large Animal Internal Medicine (Smith et al)
Large Animal Neurology (Mayhew)
Veterinary Epidemiology (Thursfield)

Journals

Last 5 years (2016- 2020 inclusive)

Equine Veterinary Education
Equine Veterinary Journal
Journal of the American Veterinary Medical Association
Journal of Veterinary Emergency and Critical Care
Journal of Veterinary Internal Medicine
Veterinary Clinics of North America
Veterinary Journal

Most recent versions of ACVIM and ECEIM consensus statements (**irrespective of year**)