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| Portfolio: | Education | Ref. No. | REG-2078 |
| Team: | Examinations | | |
| Title: | Conduct of the Clinical Examination | | |

1. PURPOSE AND SCOPE

This regulation provides the criteria for the conduct of the Clinical Examination (CE).

The CE is a summative assessment of a candidate's knowledge, understanding and application of the basic science and clinical practice relevant to all forms of surgery.

From 2022, the CE will become a prerequisite for selection into Surgical Education and Training (SET) for the following SET programs:

- a. Plastic and Reconstructive Surgery Australia

From 2023, the CE will become a prerequisite for selection into SET for the following SET programs:

- b. General Surgery Aotearoa New Zealand
- c. Orthopaedic Surgery Aotearoa New Zealand
- d. Plastic and Reconstructive Surgery Aotearoa New Zealand
- e. Urology

The CE will remain a requirement for Trainees selected into a SET Program for the following specialties:

- a. Cardiothoracic Surgery
- b. Plastic and Reconstructive Surgery Australia (selected pre-2021)
- c. Plastic and Reconstructive Surgery Aotearoa New Zealand (selected pre-2023, commencing training 2024).
- d. Vascular Surgery

Trainees should refer to the relevant specialty specific training regulations to determine SET requirements.

2. KEYWORDS

Clinical Examination, Examinations, Surgical Education and Training, OSCE

3. BODY OF POLICY

3.1. Format of the Examination

The examination consists of 16 Objective Structured Clinical Examination (OSCE) stations made up of the following four types of questions:

- 3.1.1. Examination
- 3.1.2. Non-technical Skills
- 3.1.3. History
- 3.1.4. Procedure

Stations will cover various areas of clinical practice.

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3.2. Eligibility to Present for the Examination

- 3.2.1. The following candidates are eligible to apply and present:
- a. Trainees, including Trainees on interruption or who have deferred commencement on a SET program; and
 - b. Prevocational Doctors who have passed the Generic Surgical Sciences Examination (GSSE).
- 3.2.2. Trainees in the following specialties are exempt and no longer required to present for the CE:
- a. General Surgery
 - b. Neurosurgery
 - c. Orthopaedic Surgery
 - d. Otolaryngology Head and Neck Surgery
 - e. Paediatric Surgery
 - f. Australian Plastic and Reconstructive Surgery (selected after 2021)
 - g. Aotearoa New Zealand Plastic and Reconstructive Surgery (selected after 2022).

3.3. Application

- 3.3.1. The examination dates and application closing dates are published on the RACS website.
- 3.3.2. Candidates must apply to present for the CE through the online registration system via the RACS website, select their preferred session and pay the examination fee in full at the time of registration.
- 3.3.3. An application outside the published timeframes will not be accepted.

3.4. Timeframe and Venue

- 3.4.1. The CE is generally conducted in February and June in Australia and Aotearoa New Zealand. An October examination will be scheduled for prevocational doctors if required.
- 3.4.2. Two sessions are generally held on the Saturday, one in the morning and one in the afternoon. One additional session may be scheduled on the Sunday morning if needed.
- 3.4.3. Each session requires a minimum capacity of 10 candidates. The maximum capacity for a session is 20 candidates.
- 3.4.4. Candidates will be allocated a session according to nominated preferences. Preferences cannot be guaranteed if minimum capacity is not achieved or preferences exceed the maximum capacity requirements.
- 3.4.5. Candidates should not confirm travel arrangements until receipt of the venue notice which includes confirmation of allocated session (approximately three weeks after registrations close). Allocations cannot be altered.

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3.5. Time Limitations and Number of Attempts

- 3.1.1. All Trainees with the exception of those exempted in clause 3.2.2 must pass the CE within two years of commencement of the Trainee's first clinical rotation or period of accredited research.
- 3.5.1. Where an examination is cancelled by RACS, Trainees may seek permission from the relevant Specialty Training Board for an extension to the time limit.
- 3.5.2. Where a Trainee has interrupted training, the two year time limit will be extended by that period of interruption, if:
- CE sittings are scheduled during that period of interruption;
 - the Trainee has not attempted a CE sitting during that period of interruption; and
 - the interruption justifies an extension to the time limit that is supported by the relevant Specialty Training Board (STB).
- 3.5.3. The two year time limit will not be extended for a Trainee who has interrupted training but attempts one or more sittings of the CE while on interruption.
- 3.5.4. A maximum of four attempts at the CE are permitted for a Trainee.
- 3.5.5. All sittings of the examination attempted by Trainees, while in clinical training, accredited research, on interruption or deferred from training will count towards the four attempts.
- 3.5.6. Trainees who have not passed the examination after four attempts or within the period specified in 3.5.1 (whichever is sooner) will be dismissed from the SET program.
- 3.5.7. Former Trainees who are successfully reselected to SET must pass the CE within in the first year and two attempts, unless specified otherwise in their selection offer of appointment. Failure to complete the examination within the specified timeframe will result in dismissal.
- 3.5.8. There is no time limit or limit on the number of attempts for prevocational doctors.

3.6. Trainees who Transfer between Specialty Training Programs

- 3.6.1. If a Trainee enters a program having already completed time in another program including Cardiothoracic Surgery, Plastic and Reconstructive Surgery, Urology, Vascular Surgery and General Surgery Aotearoa New Zealand SET programs in the first two years of active training:
- A successful attempt at the CE will carry over;
 - Unsuccessful attempts will be counted towards the total number of attempts permitted; and

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- c. Time already spent in the first training program will count towards the two year limitation.

3.7. Conduct of the Examination

- 3.7.1. The conduct of the examination is the responsibility of the CE Subcommittee.
- 3.7.2. The following roles are required for the purposes of conducting the CE:
- a. Examiner
- An Examiner is responsible for examining candidates to assess application of basic science knowledge and understanding and clinical practice relevant to all forms of surgery.
- b. Observer
- An Observer of the CE will have no direct role in assessment and can be present for the following reasons: education, due process and training. Observers may only attend with the permission of the Chair of the Clinical Examination Subcommittee. Candidates may not nominate an Observer.
- Any written notes made by an Observer, relate solely to their reasons for observing and do not form part of the candidate's assessment.
- c. Surrogate Patients/Assistants
- Surrogate patients/assistants are volunteers and assist the CE Coordinator on the day of the CE. Trainees may not participate as a surrogate patient/assistant.
- 3.7.3. Disruptive behaviour by a candidate or surrogate patient/assistant in any segment of the examination will be investigated as misconduct. If a candidate is reported to be causing a disturbance during the examination, they will be removed from the examination room. In this instance:
- a. The candidate involved will not be given extra time at the end of the examination for any reason including time taken to address the incident; and
- b. An examiner or other person supervising an examination segment will complete an incident report for consideration by the Surgical Science Examination (SSE) and Clinical Examinations (CE) Committee.

3.8. Prohibited Equipment or Materials

- 3.8.1. Equipment or materials which are not permitted to be taken into an examination room by a candidate ("prohibited equipment or materials") includes but is not limited to:
- a. all watches, timers, mobile phones, calculators, portable computers, tablets or other electronic audio-recording devices (e.g. audio- recording wrist bands, pens, spectacles, mp3 players,

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iPods, iPads, etc.); and

- b. notes, books, textbooks or other materials.

3.8.2. Candidates who take prohibited equipment or materials into an examination room will be informed that they must leave the examination room immediately and will not be permitted to take further part in the examination.

3.8.3. The candidate's result for the examination will not be approved and any examination fees paid will be forfeited as per terms stipulated in clause 3.17.8.

3.8.4. An examiner or other person supervising an examination segment will complete an incident report for consideration by the SSE and CE Committee.

3.9. Cheating

3.9.1. Cheating is defined as, but is not limited to:

- a. gaining or attempting to gain access to any materials such as specimens or images, or patients involved in the examination, prior to an examination;
- b. disseminating or making available questions or answers to another candidate or prospective candidate relating to the current examination;
- c. procuring knowledge of the questions, and their answers, from anyone before the examination.

3.9.2. An examiner or other person supervising an examination segment will, upon identifying suspected cheating during the examination, complete an incident report for consideration by the SSE and CE Committee.

3.10. Report of prohibited equipment or materials or cheating

3.10.1. Upon receipt of an incident report of the taking of prohibited equipment or materials into an examination room or cheating, the Chair of the SSE and CE Committee will transmit the report to the relevant STB for consideration pursuant to the RACS Misconduct Regulation and the individual STB training regulations.

- 3.10.2. If a report on the taking of prohibited equipment or materials into an examination room or cheating is received by the SSE and CE Committee, or if a STB receives the report directly:
- a. prior to the examination taking place; the candidate's application for presenting to an examination will be withheld until such time an investigation has concluded; if an allegation is upheld in addition to any penalty imposed by the STB, the candidate's application will not be valid and the entire examination fee paid will be forfeited as per terms stipulated in clause 3.16 of this Regulation.
 - b. during the examinations and prior to the examination results being made available to candidates - the examination result will be

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withheld until such time as an investigation has concluded; if the allegation is upheld, in addition to any penalty imposed by the STB, the examination result will not be approved and the candidate will be regarded as having an unsatisfactory performance.

- 3.10.3. After the examination results have been made available to candidates; if the allegation is upheld, in addition to any penalty imposed by the STB, the examination result will be withdrawn and the candidate will be regarded as having an unsatisfactory performance.

3.11. Privacy and Confidentiality

- 3.11.1. Any person involved with the CE as per clause 3.7 and any candidate presenting for the examination shall:
- treat as strictly confidential any materials, images, content or discussions of any examination component viewed or discussed for the purposes of conducting the CE.
 - respect the privacy and autonomy of surrogate patients who play a role in this examination.
- 3.11.2. Any breach of confidentiality by any candidate may be treated as cheating and dealt with according to RACS policy.

3.12. Special Circumstances Relating to Examinations

Refer to Exceptional Circumstances and Special Consideration Policy.

3.13. Marking System

- 3.13.1. The overall pass mark is determined from the station pass marks and the standard error of measurement for this examination. A candidate will be scored at each station using a checklist and a six point global rating scale. The pass mark for each station is determined using the Borderline Regression Method.
- 3.13.2. In order to pass the examination, a candidate must fulfil both of the following requirements:
- Achieve equal to or greater than the minimum passing score for the whole examination. This is the sum of the 16 stations' pass marks plus one standard error of measurement.
 - Meet the component requirement: passing at least two stations of each type (Examination, Non-technical Skills, History and Procedure).
- 3.13.3. Minimum Standard Pass
- A candidate, who falls within the following criteria in any two attempts at the CE, will be elevated to a pass on the second occasion:
- a score no less than one standard error of measurement below the pass mark, and
 - fulfilled the component requirement

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3.14. Results

- 3.14.1. Results are ratified by the SSE and CE Committee.
- 3.14.2. The candidate will be informed of their pass/fail result via their portfolio.
- 3.14.3. The candidate will receive feedback on their performance via email.
- 3.14.4. Results of SET Trainee candidates will be communicated to their relevant STB.

3.15. Feedback to Unsuccessful Candidates

- 3.15.1. Written feedback on a candidate's performance in each station will be provided to
 - a. the SET Trainee's supervisor;
 - b. a supervisor nominated by the STB for Trainees who have deferred or interrupted training; or
 - c. the mentor nominated by the prevocational doctor.
- 3.15.2. The unsuccessful candidate should seek counsel from their respective supervisor or nominated mentor.
- 3.15.3. The supervisor or nominated mentor should not give the feedback and examiner comments directly to the candidate, but should utilise the feedback provided to guide the candidate in formulating an examination preparation strategy for any future attempt.

3.16. Recognition

The highest scoring candidate for each examination receives the Clinical Committee Prize (certificate) with recognition on the RACS Website.

3.17. Withdrawals and Refunds

- 3.17.1. A candidate who wishes to withdraw from the examination must do so via the online withdrawal form on the RACS website. Candidates will receive a full refund if an examination is cancelled by RACS.
- 3.17.2. Candidates who withdraw from an examination prior to the application closing date will be refunded 95% of the examination fee.
- 3.17.3. Candidates who withdraw from an examination after the closing date and more than 10 days prior to the commencement of the first scheduled day of an examination will be refunded 50% of the examination fee.
- 3.17.4. The full examination fee may be refunded on medical or compassionate grounds.
- 3.17.5. Requests for withdrawal and refunds must be made in writing, along with any supporting evidence if seeking a refund on medical or compassionate grounds.
- 3.17.6. Candidates will not receive a refund if notification of withdrawal from the examination is received fewer than 10 business days prior to the commencement of the first scheduled day of the examination.

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- 3.17.7. Candidates will not receive a refund for non-attendance.
- 3.17.8. Candidates will not receive a refund if they are prevented from participating in the examination as a result of taking prohibited equipment or materials into an examination room or cheating or misconduct.

4. ASSOCIATED DOCUMENTS

Policies

Dismissal from Surgical Training Regulation
 Exceptional Circumstances and Special Consideration Policy
 Trainee Registration and Variation Regulation
 SET Misconduct Regulation

Other

Assessment Information for Candidates
 Application for Special Consideration
 Examination Incident Report

Approver Education Committee
Authoriser Council