

ANATOMIC PATHOLOGY SAUDI BOARD PROGRAM

Saudi Board Part II Final written Examination 2017

Objectives:

- Determine the quantity and quality of specialty knowledge base ranked as competent, so that the individual can be used as a referral source for the specialty.
- Using theoretical data to determine the candidate's ability to think logically, solve problems, apply basic medical science to clinical problems, and make judgments with valid comparisons.
- Screening candidates for the purpose of finalizing those eligible to sit for the final clinical examination.

Eligibility:

- Successful completion of the required period of residency training.
- Obtaining a training completion certificate (or equivalent) issued by the local supervisory committee based on a satisfactory Final In-Training Evaluation Report (FITER) and any other related requirements assigned by any mentioned scientific boards (e.g. research, publication, logbook, etc.). FITER example outlined in Appendix 6 in the exam rules and regulations document on SCFHS website.
- Any candidate missed a maximum of three (3) months of training of the whole residency program are allowed to sit for the exam (written and clinical), and his/her results will be suspended till that missing period is done.
- Registering for the examination at least 1 month before the exam date.

Rules:

- The Saudi Board Part II specialty written examination will be held once each year on a date published on the SCFHS website (normally toward the end of calendar year).
- Examination dates should be provided by the Specialty Examination Committee (SEC) in accordance with the fixed annual schedule submitted by the examination department.
- There shall be no resit exam.

- A candidate would remain eligible for Saudi Board Part II written examination for a period not longer than three years provided they could prove they had been clinically active.
- If the candidate did not pass within the three years, an exceptional attempt may be granted upon the approval of the scientific council, provided evidence of continuing clinical practice is presented.
- A candidate who failed to pass Saudi Board Part II written examination including the exceptional attempt has to repeat the final year of training, after which he/she is allowed to sit the Part II written examination twice after approval by the scientific council.
- After exhausting all the above attempts (maximum 6 attempts) the candidate will not be permitted to sit the Saudi Board Part II written examination.

Examination Format:

- A Saudi Board Part II specialty written examination shall consist of two papers each with 100 -120 Single Best Answer (SBA) MCQs). Ten unscored items can be added for pretesting purposes.
- The examination shall contain mostly type K2 questions (interpretation, analysis, reasoning and decision making) and type K1 questions (recall and comprehension).
- Clinical presentation questions include history, clinical finding and case approach. Health maintenance questions; includes health promotion, disease prevention, risk factors assessment, and prognosis.
- The examination content cover basic and clinical topics relevant to Anatomic Pathology including clinical presentation, pathologic findings, case approach, ancillary studies, quality management, and safety as well as research, EBM, professionalism and medical ethics. The exam will also include questions related to forensic medicine and cause of death, see blueprint below.

Examination Conduct and Duration:

Exam period shall be two hours for a 100 question paper and two and 1/2 hour for 120 question paper. The exam will be delivered as a computer based test when available, otherwise paper and pencil.

Passing Score:

- The passing score is 70%. However, if the percentage of candidates passing the examination is less than 70%, the passing score can be lowered by one mark at a time aiming at achieving 70% passing rate or 65% passing score whichever comes first. Under no circumstances can the passing score be reduced below 65%. Negative marking is NOT allowed.
- Alternatively, to set the passing score a standard setting method that is supported by published scientific evidence can be used, for which the Angoff method is recommended. The process to arrive to the passing score requires prior review and approval. If standard setting is used the above passing score regulation does not apply. See appendix 7 for more details in the exam rules and regulations document on the SCFHS website.
- To set a passing score using a standard setting method (b), the specialty examination committee must obtain approval of the process and passing score from the SCFHS Assistant General Secretary for Postgraduate Studies one month prior to exam administration.

Declaration of Result:

All score reports shall go through a post-hoc item analysis before being issued and approved by the SCFHS and SEC within two weeks of the examination.

Exemption:

SCFHS at present has no reciprocal arrangement with respect to this examination or qualification by any other college or board, in any specialty.

Blueprint outlines (Saudi Board Part II Final written Examination)

No.	Sections	%
1	Surgical pathology and intraoperative consultation	55-65
2	Cytopathology	15-20
3	Quality and Safety, Electronic microscopy, Laboratory techniques (e.g. stains, immunohistochemistry , cytogenetics and molecular studies)	15-20
4	Autopsy and forensic pathology	5-10
Total		100 %

***Note:**

Blueprint distributions of the examination may differ up to +/-3% in each category.

Suggested References for Saudi Board Part II

1. Robbins and Cotran Pathologic Basis of Disease. 9th Edition
2. Rosai and Ackerman's Surgical Pathology. 10th Edition
3. WHO classification Series. IARC
4. Cytology: Diagnostic Principles and Clinical Correlates, by Edmund Cibas and Barbara Ducatman
5. Manual of Surgical Pathology, by Susan Lester
6. College of American Pathologist quality manual
7. Simpson's Forensic Medicine, 13th Edition. Jason Payne - James, Richard Jones, Steven B Karch, John Manlove.

***Note:**

This list is intended for use as a study aid only. SCFHS does not intend the list to imply endorsement of these specific references, nor are the exam questions necessarily taken solely from these sources.

Example Questions

EXAMPLES OF K1 QUESTIONS

K1 Questions: Simple cognition, with recall, comprehension or the identification of a condition.

Question 1

How often should the staining quality of cytologic smears be checked?

- A. Daily
- B. Weekly
- C. Monthly
- D. Bi-weekly

Question 2

Which one of the following is best viewed by transmission electron microscopy for high magnification?

- A. Surface structure of fixed cells
- B. Internal structure of fixed cells
- C. Internal structure of live, motile cells
- D. Surface membranes of live, motile cells

EXAMPLES OF K2 QUESTIONS

K2 Higher cognition, for example with data analysis and reasoning with the case findings to decide or to establish a plan with.

Question 1

A 30 year-old man was found to have splenomegaly and pancytopenia (see reports).

Bone marrow biopsy: plump macrophages with a characteristic cytoplasmic appearance of crumpled tissue paper.

Genetic studies: mutation in the gene encoding glucocerebrosidase.

What is the most likely diagnosis?

- A. Gaucher disease
- B. Tay-Sachs disease
- C. Mucopolysaccharidosis
- D. Niemann-Pick syndrome

Question 2

A 42 year-old male has bloody diarrhea, abdominal cramps, and fever for three days. He is febrile and has abdominal pain (see reports).

Stool sample: occult blood.

Colonoscopy: marked mucosal erythema with focal ulceration and inflammatory polyps from the rectum to the ascending colon.

Colonic biopsy: broad based flask shaped ulcer. The ulcer does not penetrate the muscularis propria. There are macrophages like cells clustered at the luminal surface and within the debris. Their cytoplasm is abundant and vacuolated and contains ingested red blood cells.

What is the most likely diagnosis?

- A. Vibrio cholera
- B. Giardia lamblia
- C. Salmonella enterica
- D. Entamoeba histolytica