

الهيئة السعودية للتخصصات الصحية
Saudi Commission for Health Specialties



**FAMILY MEDICINE
SPECIALIZED CLINICAL DIPLOMA**

**FINAL CLINICAL EXAMINATION OF SPECIALIZED CLINICAL DIPLOMA FAMILY
MEDICINE**



I Exam Format

- A. The Family Medicine Specialized Clinical Diploma final clinical examination shall consist of (8) graded stations each with 10 minute encounters.
- B. Four (4) of the Eight (8) stations will be Objective Structured Clinical Exam (OSCE) stations with ONE (1) examiner each.
- C. Four (4) of the Eight (8) stations will be Structured Oral Exam (SOE) stations with TWO (2) examiner each.
- D. All stations shall be designed to assess integrated clinical encounters.
- E. Each station is assessed with a predetermined performance checklist. A scoring rubric for post- encounter questions is also set in advance.

II Final Clinical Exam Blueprint*

		DIMENSIONS OF CARE				
		Health Promotion & Illness Prevention	Acute	Chronic	Psychosocial Aspects	# Stations
DOMAINS FOR INTEGRATED CLINICAL ENCOUNTER	Patient Care		1	2	1	4
	Patient Safety & Procedural Skills	1				1
	Communication & Interpersonal Skills		1	1		2
	Professional Behaviors				1	1
	Total Stations	1	2	3	2	8



III Definitions

Dimensions of Care	Focus of care for the patient, family, community, and/or population
Health Promotion & Illness Prevention	The process of enabling people to increase control over their health & its determinants, & thereby improve their health. Illness prevention covers measures not only to prevent the occurrence of illness such as risk factor reduction but also arrest its progress & reduce its consequences once established. This includes but is not limited to screening, periodic health exam, health maintenance, patient education & advocacy, & community & population health.
Acute	Brief episode of illness, within the time span defined by initial presentation through to transition of care. This dimension includes but is not limited to urgent, emergent, & life-threatening conditions, new conditions, & exacerbation of underlying conditions.
Chronic	Illness of long duration that includes but is not limited to illnesses with slow progression.
Psychosocial Aspects	Presentations rooted in the social & psychological determinants of health that include but are not limited to life challenges, income, culture, & the impact of the patient's social & physical environment.

Domains	Reflects the scope of practice & behaviors of a practicing clinician
Patient Care	Exploration of illness & disease through gathering, interpreting & synthesizing relevant information that includes but is not limited to history taking, physical examination & investigation. Management is a process that includes but is not limited to generating, planning, organizing care in collaboration with patients, families, communities, populations, & health care professionals (e.g. finding common ground, agreeing on problems & goals of care, time & resource management, roles to arrive at mutual decisions for treatment)
Patient Safety & Procedural Skills	Patient safety emphasizes the reporting, analysis, and prevention of medical error that often leads to adverse healthcare events. Procedural skills encompass the areas of clinical care that require physical and practical skills of the clinician integrated with other clinical competencies in order to accomplish a specific and well characterized technical task or procedure.
Communication & Interpersonal Skills	Interactions with patients, families, caregivers, other professionals, communities, & populations. Elements include but are not limited to active listening, relationship development, education, verbal, non-verbal & written communication (e.g. patient centered interview, disclosure of error, informed consent).
Professional Behaviors	Attitudes, knowledge, and skills based on clinical &/or medical administrative competence, ethics, societal, & legal duties resulting in the wise application of behaviors that demonstrate a commitment to excellence, respect, integrity, accountability & altruism (e.g. self-awareness, reflection, life-long learning, scholarly habits, & physician health for sustainable practice).

Note:

Percentages and content are subject to change at any time. See the SCFHS website for the most up-to-date information.