

SAUDI BOARD RESIDENCY TRAINING PROGRAM

Internal Medicine

Promotion Examination

Written Examination Format:

- A written examination shall consist of one paper with not less than 100 MCQs with a single best answer (one correct answer out of four options).
- The examination shall contain type K2 questions (interpretation, analysis, reasoning and decision making) and type K1 questions (recall and comprehension).
- The examination shall include basic concepts and clinical topics relevant to the specialty.
- Clinical presentation questions include history, clinical finding and patient approach. Diagnosis and investigation questions; include the possible diagnosis and diagnostic methods. Management questions; including treatment and clinical management, either therapeutic or non-therapeutic, and complications of management. Materials and Instruments questions; including material properties, usage, and selection of instruments and equipment used. Health maintenance questions; include health promotion, disease prevention, risk factors assessment, and prognosis.

Passing Score for Promotion Exam:

The trainee's performance is assessed in each of the evaluation formulas according to the following scoring system:

Score	Less than 50%	50% – 59.4%	60% - 69.4%	More than 70%
Description	Clear Fail	Borderline Fail	Borderline Pass	Clear Pass

1. To upgrade the trainee from a training level to the next level, She/he must obtain at least a **Borderline Pass** in each evaluation form.
2. The program director may recommend to the local supervision committee to request the promotion of the trainee who did not meet the previous promotion requirement according to the following:
 - A. In case that the trainee gets a **borderline Fail** result in **one** of the evaluation forms, the remaining evaluation forms must be passed with **Clear Pass** in at least **one** of them.
 - B. In case that the trainee gets a **borderline Fail** result in **two** of the evaluation forms to a maximum, provided they do not fall under the same theme (Knowledge, Attitude, Skills). The remaining evaluation forms must be passed with **Clear Pass** in at least **two** of them.
 - C. The promotion must be approved in this case by the scientific council for the specialization.

Blueprint Outlines

No.	Section	Proportion%
1	Cardiology	15-18
2	Pulmonology	15-18
3	Hepatology and GI	15-18
4	Nephrology	10-12
5	Infection diseases	10-12
6	Endocrinology	10-12
7	Hematology	5-7
8	Rheumatology	5-7
9	Neurology	5-7
10	Critical care	5-7
11	Oncology	2-4
12	Geriatrics	1-2
13	Dermatology	1-2
14	Psychiatry	1-2
Total		100%

Note:

- Blueprint distributions of the examination may differ up to +/-3% in each category.
- Percentages and content are subject to change at any time. See the SCFHS website for the most up-to-date information.

Suggested References:

- 1- Harrison's Principles of Internal Medicine
- 2- Davidson's Principles and Practice of Medicine
- 3- Medical Knowledge Self-Assessment Program (MKSAP)
- 4- Up to Date

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

EXAMPLE OF K1 QUESTIONS

Question 1

Deficiency of which of the following vitamins is associated with megaloblastic anemia?

- A. Vitamin D
- B. Vitamin B1
- C. Vitamin C
- D. Vitamin B12

EXAMPLE OF K2 QUESTIONS

Question 1

A 60-year-old man presents to the Emergency Room with a 4-hour history of central chest pain. Past medical history is significant for type 2 diabetes, hypertension, hyperlipidemia and smoking. He takes Aspirin, Amlodipine, Telmisartan and Simvastatin. There is a n S4 gallop. Lungs are clear. Blood work results are pending (see report).

Heart rate	102\min
Blood pressure	152/93 mm Hg
Oxygen saturation	96% on room air

A STAT ECG:

Depressed ST segment in the anterior leads.

Which of the following is the most likely diagnosis?

- A. Acute esophageal spasm
- B. Lobar pneumonia
- C. Acute mesenteric ischemia
- D. Acute myocardial infarction



Crash Courses:

Cardiology

- Coronary artery disease (CAD).
- Hypertension.
- Ventricular arrhythmias.
- Atrial fibrillation.
- Valvular heart disease.
- Heart failure.
- Non-ischemic Cradiomyopathies.
- Pericardial diseases.
- Cardiovascular risk reduction.
- Pre-operative cardiac assessment.

Pulmonary

- Obstructive pulmonary diseases.
- Pulmonary Tuberculosis.
- Lung mass.
- Pleural diseases.
- Respiratory failure.
- Pneumonia.
- Pulmonary vascular diseases.
- Interstitial lung disease.
- Pre-operative assessment.

GI & Hepatology

- Viral Hepatitis.
- Liver cirrhosis.
- Peptic ulcer disease.
- Bowel disorders.
- Diarrheal disorders.
- GI bleeding.
- Esophageal disorders.
- Pancreatic-biliary disorders.
- Non-viral hepatitis.
- Acute liver failure.

Nephrology

- Acute kidney injury.
- Chronic kidney disease.
- Glomerulonephritis.
- Sodium disorders.
- Potassium disorders.
- Acid base disorders.
- Resistant hypertension.
- Renal replacement therapy.



Infectious Diseases

- Endocarditis.
- Soft tissue infection.
- Meningitis.
- Musculoskeletal infections.
- Tuberculosis.
- HIV.
- Nosocomial infections.
- Infectious diarrhea.
- Brucellosis.
- Malaria.
- blood stream infection.
- Miscellaneous viral infections.
- Vaccinations.
- Infection control precautions.

Endocrinology

- Thyroid disorders.
- Adrenal disorders.
- Pituitary disorders.
- Diabetes Mellitus.
- Calcium disorders.
- Osteoporosis
- Obesity

Hematology

- Thrombocytopenia.
- TTP/HUS.
- Thrombotic and Anticoagulation.
- Sickle cell disease.
- Transfusion medicine.
- Anemia.
- Hematological malignancies.

Rheumatology

- Rheumatoid arthritis.
- Vasculitis.
- Crystal arthropathies.
- Seronegative spondyloarthropathies.
- Systemic sclerosis.
- SLE.
- Polymyositis /Dermatomyositis.
- Sjogren's syndrome.

Critical Care

- Sepsis and shock.
- Massive pulmonary embolism.
- Respiratory failure.
- Drug intoxication.



Neurology

- Stroke.
- Seizure disorders.
- Parkinson's disease.
- Headache.
- Demyelinating disorders.
- Neuromascular disorders.
- Spinal cord compression.
- Peripheral neuropathies.

Oncology

- Solid organ tumors.
- Cancer therapy complications.
- Palliative care.

Geriatrics

- Falls
- Delirium
- Dementia

Dermatology

- Drug allergy.
- Vasculitis rash.
- Serum sickness.
- Steven Johnson syndrome.
- Toxic epidermal necrolysis.
- Pressure ulcers.

Psychiatry

- Medical complications of psychiatric medications.
- Substance abuse.
- Eating disorders.