SAUDI BOARD RESIDENCY TRAINING PROGRAM

Final Written Examination of Pediatric Neurology 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, determine the candidate’s ability to think logically, to solve problems, to apply basic medical science to clinical problems, and to make judgments with valid comparisons.
- Screen candidates for the purposes of being allowed to take 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 one month before the exam date.

Rules:

- The Saudi Board final written examination will be held once each year on a date published on the SCFHS website.
- 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 reset examination.
- A candidate would remain eligible for Saudi Board final 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 final written examination including the exceptional attempt has to repeat the final year of training, after which he/she is allowed to sit the final 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 final written examination.

Examination Format:

- A Saudi Board final written examination shall consist of two papers each with 100 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 patient approach. Diagnosis and investigation questions; includes the possible diagnosis and diagnostic methodologies (laboratory investigation, radiological imaging and clinical procedures), Management questions; includes treatment and clinical management non-therapeutic, therapeutic, patient safety, complication. Health maintenance questions; includes health promotion, disease prevention, risk factors assessment, and prognosis, see examples below.

- The examination shall include basic concept and clinical questions relevant to specialty, see blueprint below.

Examination Conduct and Duration:

Exam period shall be two hours for a 100 question paper. The exam will be delivered as a computer based test when available, otherwise paper and pencil.
Passing Score:

a. 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%.

b. 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.

c. 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.

Suggested References for Saudi Board Final Written Examination of Paediatric Neurology

1. Swaiman’s Pediatric Neurology.
4. Up-to-date online resource.
5. Pediatric Neuroimaging by James Barkovich
6. Continuum journal – last five years.
7. Neurology of Hereditary metabolic diseases by Kolodny and Pastores
8. Seminars in Pediatric Neurology- last five years.
9. Clinical neurophysiology of infants, childhood and adolescence by Holmes et al.
10. Wyllie’s textbook of Epilepsy

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.
Blueprint outlines
Saudi Board Examination for Paediatric Neurology

<table>
<thead>
<tr>
<th>No.</th>
<th>Section</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Congenital and developmental disorders of the nervous system</td>
<td>8</td>
</tr>
<tr>
<td>2</td>
<td>Stroke and cerebrovascular disorders</td>
<td>7</td>
</tr>
<tr>
<td>3</td>
<td>Neurocutaneous disorders</td>
<td>7</td>
</tr>
<tr>
<td>4</td>
<td>Seizures, epilepsy</td>
<td>15</td>
</tr>
<tr>
<td>5</td>
<td>Headache and pain disorders</td>
<td>7</td>
</tr>
<tr>
<td>6</td>
<td>Development and behaviour and psychiatric disorders in children &amp; adolescence</td>
<td>5</td>
</tr>
<tr>
<td>7</td>
<td>Neurologic complications of systemic diseases</td>
<td>6</td>
</tr>
<tr>
<td>8</td>
<td>Autoimmune neurologic disorders</td>
<td>5</td>
</tr>
<tr>
<td>9</td>
<td>Neuromuscular disorders in childhood and adolescence</td>
<td>6</td>
</tr>
<tr>
<td>10</td>
<td>Traumatic injury to brain and spine /sports injuries</td>
<td>5</td>
</tr>
<tr>
<td>11</td>
<td>Neuro-oncology: tumours of central and peripheral nervous system</td>
<td>5</td>
</tr>
<tr>
<td>12</td>
<td>Neuro-ophthalmology: Disorders of eye and vision related to neurologic disorders</td>
<td>3</td>
</tr>
<tr>
<td>13</td>
<td>Movement disorders</td>
<td>8</td>
</tr>
<tr>
<td>14</td>
<td>Neurogenetics/ Metabolic disorders</td>
<td>8</td>
</tr>
<tr>
<td>15</td>
<td>Research, Ethics, Professionalism and Patient Safety</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td>100%</td>
</tr>
</tbody>
</table>

**Note:**
Blueprint distributions of the examination may differ up to +/-3% in each category.
Example Questions

**EXAMPLES OF K2 QUESTIONS**

**Question 1**

A 2-month-old baby presented with clusters of flexor movements that the pediatrician diagnosed as infantile colic. Clinical examination confirmed hypotonic baby with slightly brisk reflexes. He has one hypopigmented macule on the back. The mother showed the events on video which occurred mostly as clusters upon waking up from sleep or when going to sleep.

Which of the following is the most appropriate investigation?

A. EEG  
B. CT brain  
C. Serum Lactate  
D. Urine organic acids

**Question 2**

A 2-month-old baby presented with clusters of flexor movements that the pediatrician diagnosed as infantile colic. Clinical examination confirmed hypotonic baby with slightly brisk reflexes. He has one hypopigmented macule on the back. The mother showed the events on video which occurred mostly as clusters upon waking up from sleep or when going to sleep.

Which of the following is the most appropriate treatment?

A. Vigabatrin  
B. Prednisone  
C. Valproic acid  
D. Phenobarbitone

**EXAMPLES OF K1**

A 6-year old child with epilepsy is taking carbamazepine.

Which of the following is the most common side effect?

A. High ALT  
B. Low sodium  
C. High creatinine  
D. Thrombocytosis