

SAUDI BOARD RESIDENCY TRAINING PROGRAM OF ORAL MEDICINE AND PATHOLOGY

Promotion Examination

Objectives:

- The objective of the annual promotion examination is to evaluate the trainee and ensure that he/she has acquired the required knowledge and skills during the relevant year.

Eligibility for Written Examination:

- End of first and third year of residency training in Oral Medicine and Pathology SCFHS residency-training program.

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.

General Rules:

- The end of Year exam will be held at the end of the first and third of the Oral Medicine and Pathology SCFHS residency-training program (end of July of the academic year). The exact date will be announced on the SCFHS website.
- The examination formats and the pass score shall be determined by the Scientific Council / Committee based on the standards approved by the Central Training Committee in accordance with the training conduct regulations approved by the Council of Education and Training.

- Written promotion examination results shall be valid for the specific year in which they were conducted and shall not be considered in the following year (in case the trainee is not promoted).

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.

Score Report:

- All score reports shall go through a post-hoc item analysis before being approved by both the Assistant of General Secretary for Postgraduate studies of SCFHS and Scientific Examination Committee (SEC), and then issued by the SCFHS within two weeks of the examination.



Blueprint Outlines

No.	R1	Section	Proportion%
1	Basic Courses	General Pathology	10%
2		Head and Neck Anatomy	10%
3		Physiology	10%
4		Pharmacology	10%
5		Hematology	10%
6	Specialty Courses	Oral Medicine and Pathology	15%
7		Oral Biology and Genetics	10%
8		Oral Radiology	10%
9	Others	Research Methodology and Scientific Writing	10%
10		Ethics and Professionalism	5%
Total			100%

No.	R3	Section	Proportion%	
1	General and Oral Medicine	Medicine	8%	45%
2		Oncology and Hematology	7%	
3		Dermatology	8%	
4		Head and Neck Radiology	5%	
5		Special Care Dentistry	7%	
6	Oral Medicine and Orofacial Pain		10%	
7	Systemic Pathology: <ul style="list-style-type: none"> • Skin • Central Nervous System, Respiratory tract and Cardiovascular System • Endocrine system, Gastrointestinal System and urinary tract • Breast and reproductive system • Soft tissue and bone • Hematolymphoid 		20%	45%
8	Head and Neck, and Oral Pathology		20%	
9	Ancillary Technique, Quality Control, Lab safety, and lab management		5%	
10	Others	Research Methodology and Scientific Writing	5%	10%
11		Ethics and Professionalism	5%	
Total				100%

Note:

- Blueprint distributions of the examination may differ up to +/-5% 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 for R1 and R3:

- Pharmacology and Therapeutics for Dentistry, 7th Edition
- Clinical Anatomy By regions, Richard S.Snell, 8th edition,
- Genetics: Analysis and Principles, by Robert Brooker (5th Edition)
- Brad Neville, Douglas D. Damm, Carl Allen, Angela Chi.
- Jean M. Bruch and Nathaniel Treister. Clinical Oral Medicine and Pathology 2nd ed. 2017 Edition
- Kumar.V, Abbas. A. K, Aster. J. C. Robbins Basic Pathology, 9th ed. Saunders
- Classic Article reviews with assigned topics
- Courses: Outline of each course include the suggested reading reference

More suggested References for R3:

- Head & Neck Tumor WHO classification 2017.
- Michael Glick. Burkitt's Oral Medicine 12th ED. 2015.
- James W. Little, Donald Falace, Craig Miller, Nelson L. Rhodus. Dental Management of the Medically Compromised Patient. Mosby 2017.
- Rotations: Basic of each rotation and the suggested reading reference

Crash Courses:

- Outline of each course including suggested reading references given by the provider.

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

During a physical examination, you have a patient stick out his/her tongue and say AAH.

Which of the following muscle that is responsible for this movement?

- A. Geniohyoid
- B. Styloglossus
- C. Genioglossus
- D. Palatoglossus

Question 2

The clinician tells the patient, "The pathologist called your biopsy pre-cancerous".

That means the pathologist diagnosed the lesion as which of the following?

- A. Dysplasia
- B. Metaplasia
- C. Hyperplasia
- D. Hypertrophy

EXAMPLE OF K2 QUESTIONS

Question 1

A 27-year-old man come to the clinic for regular dental checkup. Oral Examination revealed generalized gingival inflammation and enlargement covering more than two thirds of the teeth. patient reported that he had this abnormality after starting a new medication for his medical condition.

Which of the following is the most likely cause?

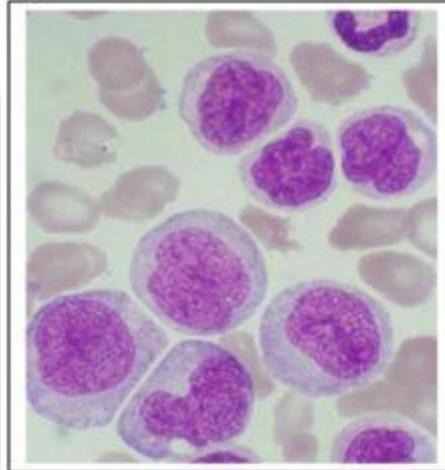
- A. Warfarin
- B. Phenytoin
- C. Prednisone
- D. Metoprolol

Question 2

Figure 2A



Figure 2B



A 55-year-old man who has enjoyed excellent health presents to the office complaining of easy bruising. He has noted that over the last few weeks, he always seems to have an ecchymotic lesion somewhere on his extremities or his trunk. There was no known trauma. Additionally, he states that he is fatigued more easily than is his norm. On examination, vital signs are normal. No abnormal adenopathy. His extremities are negative except for a diffuse petechial rash on both lower extremities below the knee (see images, lab results and reports).

Test	Results	Normal Values
Hb	7.8	14-18 gm/dl
MCV	85	80-95 fl
Platelets count	200	150-400X10 ⁹ /L

HEENT:

Conjunctival pallor, extensive swelling of the gums (see Figure 2A) and palatal petechiae.

CBC:

WBC 17,000 with 15% polys, 10% lymphs, 5% monos, 70% blasts. PT and PTT are normal. The peripheral smear is shown in Figure 2B.

Which of the following is the most likely diagnosis?

- A. Acute Myelogenous leukemia
- B. Chronic Myelogenous leukemia
- C. Acute lymphoblastic lymphoma/leukemia
- D. Follicular lymphoma with extramedullary hematopoiesis