

FELLOWSHIP EXAMINATION CANDIDATE STUDY GUIDE ORAL AND MAXILLOFACIAL SURGERY

Introduction

The intent of this guide is to provide the candidate with an understanding of the format used for the Fellowship Examination in Oral and Maxillofacial Surgery.

The example questions are intended for candidates in Oral and Maxillofacial Surgery and are meant to demonstrate the various styles of questions that may appear in the exam. The content is meant for illustrative purposes only and should not be construed as an example of the difficulty level of the examination.

Fellowship Examination Format

The Fellowship Examination is a test of clinical decision making. Specifically, the ability to assess, treat, and understand probable outcomes. The cases used in the Fellowship Examination tend to be "typical" cases that a practicing Oral and Maxillofacial Surgeon (post-licensure) would treat in clinical practice. These questions are case based. A typical clinical case protocol contains a hypothetical patient situation (a clinical vignette) developed from actual cases and may include a patient history, radiographs and/or clinical photographs. The candidate is then questioned on how he/she will manage the patient, emphasis is placed on patient care decisions, as if the candidate was caring for the patient.

As part of their preparation, it is also highly recommended that candidates gain as much experience as possible working through case-based oral examination questions. While preparing for the oral examination it is also helpful to have other colleagues and/or mentors present the candidate with clinical cases using the aforementioned format. It is better still if the candidate is provided cases that they have never seen before or are unfamiliar with.

Here is a general description of an oral case protocol; this is followed by a number of sample questions. Once again it should be stressed that the content used in these sample questions are used for illustrative purposes only and should not be construed as an example of the level of difficulty or content of the examination questions.

CLINICAL CASE PROTOCOL

A typical case would start with a clinical vignette that could include some or all of these elements:

Age and gender of the patient
Chief complaint
History of the chief complaint
Health history
Dental history
Other information as needed
Initial radiographs and/or photographs

Once the clinical vignette has been presented, the candidate is then questioned on how he/she will manage this clinical case. Additional clinical information, radiographs, and/or photographs will be made available upon request or they may be provided automatically to the candidate. An example of the sequencing of questions follows.

1) CASE ASSESSMENT, DATA GATHERING, ETIOLOGY AND DIAGNOSIS

In this section, some of the decision-making skills that may be assessed include:

Offer a final diagnosis

Systematically identify the existing problems

Use appropriate additional diagnostic modalities to aid in the diagnosis

Demonstrate a questioning strategy to investigate the chief complaint

Identify the etiology of the clinical problem

Develop a differential diagnosis if appropriate, and be able to discuss each of these legitimate possibilities based on the information provided

Possible questions that may be asked include:

Describe what you see?

How would you investigate your patient's chief complaint?

How would you manage the chief complaint?

What other information/test/image would you want to obtain for this patient?

How would you proceed?

What is your differential diagnosis?

What is your probable diagnosis?

How would you manage the chief compliant?

2) TREATMENT PLAN, THERAPY AND PROGNOSIS

In this section, some of the decision-making skills that may be assessed include:

Develop a treatment plan or management strategy for this clinical case
Discuss the advantages and disadvantages of the proposed treatment plan
Discuss the prognosis for the proposed treatment
Discuss the management of the case if key clinical information was modified such as
a different chief complaint or medical history

Possible questions that may be asked include:

You now see these radiographs/photographs/clinical tests, how would you proceed?

What would be your treatment plan for this patient?

What would be the short and long-term prognosis?

How would you explain the treatment plan to the patient?

Describe the therapy most beneficial to the patient; indicate why you feel this is the best therapy?

The patient questions you about prognosis, how would you respond?

Once you have completed the first phase of treatment, what would you do next?

The patient presents with a different medical history, for example asthma, how would you modify the treatment plan?

If the patient becomes uncooperative with your treatment, what would you do next?

3) THERAPEUTIC RESULTS, COMPLICATIONS AND MAINTENANCE

In this section, some of the decision-making skills that may be assessed include:

Management of the case following the completion of initial treatment
Development of a plan to assess the outcomes of treatment
Prevention of future complications and reoccurrence of disease
Identify and treat possible future complications
Discuss the long-term plan for this patient
Discuss alternative treatments when the patient demonstrates poor compliance

Possible questions that may be asked include:

What would be your criteria for successful treatment of this patient? How would you follow this patient long-term? Would you see this patient again? When and how often? Now that treatment is completed, would you have any concerns? Is additional treatment indicated in the future? What are the possible complications for this patient?

How would you treat this complication? If the patient did not respond to treatment, what would be your next step?

SAMPLE QUESTIONS

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CASE #1									
You are to p a 64-year-ol the followin	d male.	During your	review	(procedure) on of his medical histo	one of ory you	your patients who is note that he is taking			
Drug A:				_Drug B:					
Drug C:				Drug D:					
1. What me	edical d	isease or dise	eases o	does your patient lik	ely suff	er from?			
•	Before proceeding with the treatment plan is there anything else you want to know about the patient's condition?								
				er says: "Your patie and symptoms": (ex		ides you with the s: cough, pain, etc.)			
	oratory		,	ou require? Are the ons you require in h	,				
Tests, images and laboratory results are as follows: x-rays, blood test, ECG, etc.									
4. How would you characterize the severity of your patient's disease?									
5. What co could they b	•	•	is pati	ent experience in th	e peri-o	perative period? How			
You have el	ected t	o proceed wit	th the p	procedure (pick one) as:				
inpatient	or	outpatient	or	in office (local)	or	in office (sedation)			

You have given the following medications:

Five minutes into the procedure your patient develops the following signs and symptoms (examples): loss of consciousness, shortness of breath, chest pain, hypotension, etc.

- 6. What would you do now?
- 7. If the candidate does not ask for additional information, then ask "What findings would you be looking for?

Findings are as follows: monitor, ECG, etc.

8. What is your presumptive diagnosis (nature and severity) of this complication?