National Commission on Certification of Physician's Assistants

Recertification Examination for Physician's Assistants

1981

Prepared by National Board of Medical Examiners and National Commission on Certification of Physician's Assistants

Description of Examination

Recertification Examination for Physician's Assistants

Schedule

Registration of candidates for morning session
Distribution of materials and instructions
Multiple-Choice Examination—Book A
Break for lunch
Registration of candidates for afternoon session Distribution of materials and instructions
Patient Management Problems-Book B
Break-Distribution of materials and instructions
Patient Management Problems-Book C

RECERTIFICATION EXAMINATION FOR PHYSICIAN'S ASSISTANTS

Description of Examination

The Recertification Examination for Physician's Assistants is a written examination including Multiple-Choice Questions and Patient Management Problems. The examination is sponsored by the National Commission on Certification of Physician's Assistants (NCCPA) and prepared by the National Board of Medical Examiners.

General Information and Regulations

1. ADMISSION CARD

The enclosed admission card must be presented as you report for the examination. Please retain it for your reference in entering your Identification Number on your answer sheets.

2. REGISTRATION

Registration is scheduled for 8:00 a.m. No candidate will be admitted to the examination after the testing session has begun. You must be present for subsequent sections of the examination no later than the times noted. During the first ten minutes allotted for each section, the proctor will give detailed instructions for the conduct of the examination, which must be adhered to explicitly.

3. SCORES

You must take all sections of the examination. The fee will be forfeited by anyone who fails to appear for any section, unless he or she is excused for a reason satisfactory to the NCCPA.

4. WITHDRAWALS

Please notify the NCCPA at once if it is impossible for you to take the examination at the location indicated.

J. PENCILS

Bring to the examination an eraser and two #2 lead pencils.

6. BEHAVIOR DURING THE EXAMINATION

- A. Do not bring any books or papers into the examination room.
- B. Do not communicate with other candidates in any way.
- C. If you withdraw from the sight of the proctor without permission, your examination shall be closed.
 - D. If you complete a given section of the examination before the end of the allotted time, you may leave quietly without disturbance to others.

7. VALIDITY OF SCORES

The integrity of the scores awarded examinees for their performance on NCCPA examinations is protected by every means available. All possible efforts are expended to assure that the tests are administered under standard conditions and in conformity with the principles on which the test and its scoring are founded. These efforts are made to assure that no examinee or group of examinees receives, either advertently or inadvertently, unfair advantages in the test.

Any score that the NCCPA determines does not represent a reasonable assessment of the examinee's knowledge or competence sampled by the examination shall be deemed irregular. The answer sheets of all examinees are monitored and may be analyzed statistically for purposes of detecting irregular scores.

Irregular behavior during an administration of an examination, such as giving or obtaining unauthorized information or aid, as evidenced by observation or statistical analysis of answer sheets, constitutes sufficient cause to invalidate an examinee's participation in the examination or to take other appropriate action.

If evidence which suggests scores may be irregular because of either deliberate or inadvertent behavior of an examinee is brought to its attention, the NCCPA may withhold an examinee's score until determination is made as to whether, in the opinion of the NCCPA, the performance of the examinee is a reasonable assessment of the knowledge or competence sampled by the test. If the NCCPA determines that a score is irregular, it will notify the examinee of the basis of its decision and the options for corrective action. Such examinees may be permitted to take another examination immediately, may be admitted to a future examination by specific action on the part of the NCCPA, or may be disqualified for future examinations and as candidates for certification by the NCCPA. After disqualification, an examinee may be admitted to future examinations or restored to candidate status by the NCCPA after receipt of satisfactory evidence of the examinee's continued good standing and progress as a physician's assistant.

By completing the application, all applicants for examination acknowledge that they are aware of these regulations for maintaining the validity of individual scores.

SAMPLE QUESTIONS

This portion of the brochure has been prepared in order to provide samples of the three types of multiple-choice questions and of patient management problems that will be included on the Recertification Examination for Physician's Assistants.

Please remember that these are only samples of the question types you will encounter and do not reflect the scope or degree of difficulty of the examination. On the actual examination each type of question, with appropriate instructions, is grouped together in the test booklet.

A sample answer sheet and an answer key are provided at the end of the following section of multiple-choice items.

I. MULTIPLE-CHOICE QUESTIONS

A. ONE BEST CHOICE TYPE

The first type of question, that of one best choice, consists of a question or incomplete statement followed by five suggested answers or completions. Select the *one* answer that is BEST in each case and fill in the circle containing the corresponding letter on the answer sheet.

- A patient with acute cholecystitis usually has all of the following EXCEPT
 - (A) pain in the right upper quadrant
 - (B) vomiting
 - (C) a history of attacks of biliary colic
 - (D) leukopenia
 - (E) fever
- Which of the following is the treatment of choice for pneumococcal pneumonia?
 - (A) Tetracycline
 - (B) Erythromycin
 - (C) Penicillin
 - (D) Chloramphenicol
 - (E) Sulfonamide
- A six-month-old infant would be LEAST likely to
 - (A) grasp objects
 - (B) stand unsupported
 - (C) put toys to his mouth
 - (D) roll over
 - (E) smile

B. MATCHING TYPE

The second question type consists of four or five lettered headings followed by a list of numbered words or statements. For each numbered word or statement, select the one lettered heading that is most closely associated with it and fill in the circle containing the corresponding letter on the answer sheet. The directions will indicate whether a lettered heading may be used only once or whether it may be used once, more than once, or not at all.

In this sample set of matching questions a lettered heading may be used once, more than once, or not at all.

Questions 4-6

- (A) Acute conjunctivitis
- (B) Glaucoma
- (C) Corneal trauma or infection
- (D) Acute iritis
- 4. Intraocular pressure is elevated
- 5. Vision is not usually affected
- 6. Fluorescein is useful in diagnosis

C. MULTIPLE TRUE-FALSE TYPE

The third type of question consists of a stem followed by four true or false phrases or statements. Determine whether each of the phrases or statements is true or false and then respond according to the following code. On the answer sheet fill in the circle under

A if only 1, 2, and 3 are correct,

B if only 1 and 3 are correct,

C if only 2 and 4 are correct,

D if only 4 is correct,

E if all are correct.

FILL IN ONLY ONE CIRCLE ON YOUR ANSWER SHEET FOR EACH QUESTION

	Direction	as Sumn	arized	
A	В	С	D	E
1, 2, 3 only	1, 3 only	2, 4 only	4 only	All are correct

- Classical physical findings in a patient with mitral stenosis include
 - (1) a loud first heart sound
 - (2) an opening snap
 - (3) a diastolic murmur
 - (4) a systolic murmur
- Signs characteristic of parkinsonism include
 - (1) resting tremor
 - (2) lack of facial expression
 - (3) shuffling gait
 - (4) muscular rigidity
- 9. In a wound requiring closure with absorbable sutures, which of the following can be used?
 - (1) Silk
 - (2) Nylon
 - (3) Cotton
 - (4) Chromic catgut

SAMPLE ANSWER SHEET

10000B

2 A B C O E

3 A B C O E

40800

5 A B C O

6 A B C O

7 A 8 C O E

8 A B C O E

9 A B C O E

Answer Key

- 1. D
- 2. C 3. B
- 4. B
- 5. A
- 6. C
- 8. E
- 9. D

II. PATIENT MANAGEMENT PROBLEMS

A. USING THE PROGRAMMED TESTING TECHNIQUE

The programmed testing technique described and illustrated below has been designed to assess certain aspects of clinical problem solving by offering an opportunity to obtain additional clinical information, order diagnostic studies and procedures, make diagnostic hypotheses, prescribe therapy, and make other decisions related to managing patients.

Each patient case consists of several problems followed by a series of options. The examinee's task is to determine which options are appropriate for one particular patient at one point in time just as would be expected in management of an actual patient. The examinee is NOT told how many options should be selected, and there is usually no indication in the feedback whether or not the option should have been selected.

For each option presented, feedback is available in a box to the right of that option. In the actual examination, the boxes will appear to be blank just as they appear in this brochure. The printing in the boxes will become visible after the application of a special pen which will be provided at the time of the examination. At the examination site, examinees will be given complete instructions and an opportunity to practice the technique on a sample problem before starting to work on this section of the examination.

In scoring these problems, examinees will be given credit for selecting an appropriate course of action. Examinees will be penalized for selecting courses of action which are not pertinent, necessary, or are contraindicated. Examinees will also be penalized for failing to select pertinent courses of action.

In the condensed sample below, as in the actual examination, several problems (S-1, S-2 and S-3) are associated with one patient. The problems should be taken in the order in which they are presented.

B. INSTRUCTIONS FOR SAMPLE PATIENT

- 1. First read the initial information.
- 2. Next, read all of the options that follow under Problem S-1. Then select a course of action that you think is most pertinent and develop the feedback in the box numbered to correspond with this choice. (In the actual examination, as mentioned above, the printing in the box will become visible after the application of the special pen which will be provided.) The information you receive in the box may lead you to select other options within this problem, or you may decide to make other choices quite independent of results already obtained.
- After you have completed Problem S-1, and bearing in mind the additional information resulting from your decisions, proceed in a similar manner with Problem S-2 and then with Problem S-3.

Sample Patient

A 20-month-old child is brought to the clinic because of a sudden onset of wheezing and shortness of breath which began one hour ago.

Problem S-1

Questions specifically pertinent to the evaluation of this patient's problem include those concerning:

Special pen would be applied here, one light

		stroke on each line of print until the asterisk (*) appears.
1.	Onset of wheez-	1.
2.	History of uri- nary frequency	2.
3.	Family history of diabetes mel- litus	3.
4.	Previous epi-	4.

In this simplified example of a child with a foreign body in the bronchus, the correct courses of action in Problem S-1 are 1 and 4. An examinee would be given credit for selecting 1 and 4, but would be penalized for selecting 2 and 3 or for NOT selecting 1 and 4.

Feedback for options that should be selected would read as follows:

- 1. One hour ago while eating peanuts*
- 4. None*

ing

o indicates the end of the feedback

Feedback for incorrect options would read as follows:

- 2. None*
- Maternal grandmother has adult-onset diabetes*

Problem S-2

Physical examination procedures which would be specifically pertinent in evaluating this patient's problem include: (NOT what would you do.)

	applied here, one light stroke on each line of print until the asterisk (*) appears.
Auscultation of chest	5.
Palpation of in- guinal nodes	6.
Percussion of chest	7.
Measurement of height	8.
	Palpation of inguinal nodes Percussion of chest Measurement of

In Problem S-2 the correct courses of action are 5 and 7. The other choices are not specifically pertinent. Although it is not incorrect to complete a review of systems or family history, under the circumstances described, the other history choices are not specifically pertinent. Similarly, a complete physical examination is not specifically pertinent in evaluating the patient's problem. In general, in deciding which history and physical choices to select, you should choose all of the choices which are specifically pertinent while being reasonably selective.

There is never any need to go back to earlier problems in a patient case. In this case, for example, you should not decide at the end of the case that since the child is likely to be admitted to the hospital, you must go back to S-1 and S-2 and gather more information beyond what was originally necessary in evaluating the patient's problem.

Feedback for correct options would read as follows:

- Left side normal breath sounds; right side decreased sounds, prolonged expiration with wheeze*
- Normal resonance left lung field; flatness right lower lung field*

Feedback for incorrect options would read as follows:

- 6. None palpated*
- 8. 93.9 cm (37 in)*

Problem S-3

In consultation with the physician, appropriate management at this time would include:

Special pen would be applied here, one light stroke on each line of print until the asterisk (*) appears. Referral 9. surgeon for possible bronchoscopy 10. Administra-10. tion of subcutaneous epinephrine 11. Arrangement 11. for skin testing for allergy

In Problem S-3 the correct course of action is 9.

Feedback for the correct option would read as follows:

9. Selection recorded*

Feedback for incorrect options would read as follows:

- 10. Selection recorded*
- 11. Selection recorded*