

Evaluation of the Final Year Medical Students by External Examiners

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Abstract

Background: Most Iraqi medical schools follow the traditional curriculum in teaching students.
Objectives: To present and compare the results of evaluation of the final year medical students, Al-Qadissiah University school of medicine, in pediatrics by external examiners with the actual pass rate.
Materials & methods: Nineteen external examiners participated in the evaluation of 33 final year medical students in the subject of pediatrics, the study year 2005 – 2006 using semi purposeful checklists.
Results: There is a comparable difference between the results of evaluation by the external examiners and the actual pass rate of the students.
Discussion : There is a need to modify the traditional long case (TLC) and the oral (viva) examinations into a more objective ones such as OSCE (objective structured clinical examination)

Introduction

Until recently, medical school curricula have concentrated on promoting knowledge together with the ability to take a history ,examine patients effectively and formulate a reasonable diagnostic hypothesis(1). Traditional style undergraduate final examination set out to test these skills. Clinical skills are considered to be of core importance to medical students and doctors and are given high priority by GMC recommendations (2). The best way to teach and train medical undergraduates in preparation for the actual events they will face in clinical practice is a question that has exercised many minds over the centuries . Problem solving is currently a popular mode among teachers (3) . Physicians who graduated from the community oriented faculties were more satisfied with their undergraduate medical education when compared with their colleagues from traditional faculties (4). The final examination in the undergraduate medical course provide an opportunity for the

medical schools to make an overall assessment of a student s abilities (5). An apparent difference in the results of the clinical examination of the final M. B., B. S. was observed following replacement of the traditional long case (TLC) with the objective structured clinical examination (OSCE) in 1979 . (6)

Performance examinations such as OSCEs are often seen as particularly valuable in medical training. (7)

Al-Qadissiah university school of medicine was established in 1997 and it follow a traditional curriculum (8).

The objective of this study is focused on the evaluation of final year medical students by external examiners and concentrated on the clinical part of the examination in the subject of pediatrics and to compare the results with the actual pass rate of the students.

Materials and Methods

Nineteen external examiners were invited to participate in the evaluation of final year medical students in the subject of pediatrics – the clinical part of the exam, the study year 2005 - 2006. The final clinical exam in pediatrics in Al-Qadissiah university school of medicine is a hospital ward based traditional long case (TLC) exam and consist of three parts ; the long case , the short case , and oral exam . There is a certain mark for each part (40 marks for the long case, 30 marks for the short case and 30 marks for the oral exam.). The student in each part is examined by a committee of 2-3 examiners, one or two of whom are external examiners. The pass mark in the exam is 50. The external examiners were invited from the neighboring cities (Babylon, Karbala and Najaf), most of the examiners are teachers in the medical schools of the universities of these cities, and the others are pediatric specialists in the teaching hospitals in these cities. Each examiner was given a set of prepared semi-purposeful checklist that includes 7 points to be evaluated , these points are : appearance (uniform) of student , language , personality , knowledge , skills , attitude and ethics. For each point , there were 4-5 scales that should be rated by the examiner , these scales include : poor , inadequate , sufficient , good and excellent ; for the personality of the student , the examiner was asked to point out one of the following : hesitant , embarrassed , confused , alert , and smart according to his impression on the student.

Additional scales were added for certain points accordingly.

We consider the range of sufficient as the pass mark. Checklists marked by the name of the examiner or the student were omitted. The results of the cumulative impressions of the examiners were compared with the actual final marks of the students in the clinical part of the exam. The pass or the success of the student is dependent on the marks given to the student and not the result of the evaluation.

Results

Twelve of the external examiners were medical school teachers and seven were pediatric specialists; four of the medical teachers were assistant professors of pediatrics and eight were lecturers. All medical teachers had PhD (Board and MRCP) qualification. Most of the pediatric specialists had also Board certificates. The number of students entered the exam was 33. The total number of the checklist were 73. Considering the first point ; the appearance ; this point involve how the student appear at the time of the exam ; his uniform and his equipments (stethoscope , hammer , tape measure , light source , tongue depressor , etc) . Ten of the evaluations (13.7%) stated that the students were inadequately prepared for the exam, 57 (78 %) stated that they are sufficiently prepared and 6 (8.2 %) were excellent. The results of rating of other points are summarized in table -1-.

Table -1- The results of rating of the evaluation points

	Rates									
	Poor		Inadequate		Sufficient		Good		Excellent	
	NO	%	NO	%	NO	%	NO	%	NO	%
Knowledge	3	4.1	22	30.1	30	41	15	20.5	3	4.1
Skills	1	1.4	26	35.6	30	41	16	21.9	Zero	Zero
Attitude	2	2.7	15	20.5	30	41	26	35.6	Zero	Zero

The rating of evaluation of the language of the students is represented by figure (1).

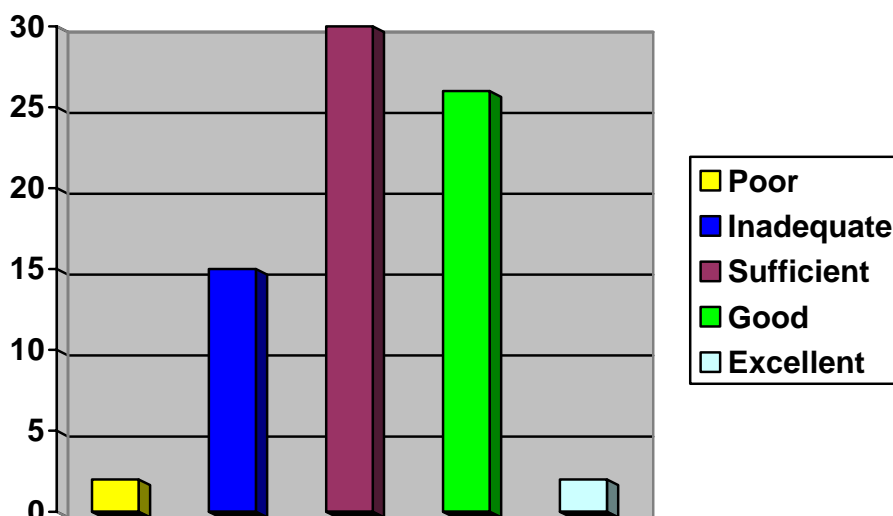


Figure (1)
Rating of language evaluation of the students

The results of rating of the personality of the students are represented by figure 2.

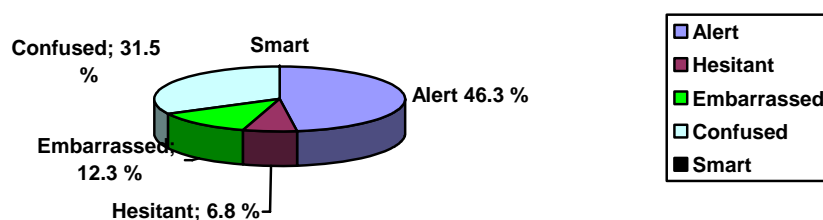


Figure 2
Rating of personality evaluation of the students

The rating of evaluation of the ethics of the students is shown in table 2.

Table -2- Rating of ethics evaluation of the students

Rate	Number	Percent
None	Zero	Zero
Poor	1	1.4
Average	23	31.5
Good	42	57.5
Excellent	7	9.6

245

The mean of the lowest rating of the points was 1.1 (2.2 %), the mean of the highest rating was 2.4 (3.3 %), the mean of rating of other grades

of the evaluation points other than the personality is summarized in figure 3.

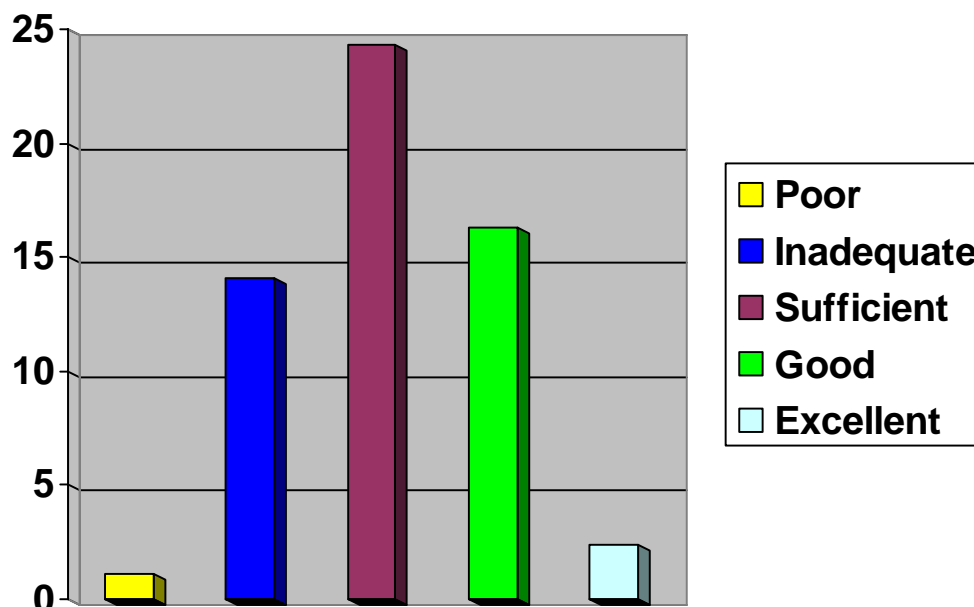


Fig (3) The mean rating of the evaluation points
Thirty students pass the clinical exam in pediatrics (91 %)

Discussion

This is the first study in medical education in this college dealing with students' evaluation. Concerning the point of appearance and equipments , it seems that our students were well prepared for the exam , although the evaluation of this point was subjective and not according to a proper checklist (9). The language evaluation of the students by the external examiners seems to be extremely impressive as it test only the speaking part of the language (10) (testing a language should involve 4 parts : listening , reading , writing and speaking) ; however 27 impressions (37 %) stated that our students had poor or inadequate language ability and this seems to be a little bit disappointing as the students spend 6 years of studying the curriculum in English. The impression of the external examiners on the students personality probably reflects the stressful condition of the exam and

the poor students experiences in dealing with exams (11), the examiners are looking for competence or fluent demonstration of a skill and the knowledge and attitudes associated with it.

The rating of evaluation of knowledge, skills and attitude is rather disappointing and is in contrast to our impression and hard working during the training course of the students in pediatrics. The marked controversy between the results of the evaluation by the external examiners and the real pass rate is unexpected and could be due to the following:

1. The subjective nature of the traditional long case exam (TLC) (12 al shallaly), they stated that, traditional oral and long case exam has been marred by being highly subjective, non-structured and biased.
2. The teachers were compassionate with the students because of the present circumstances of this country (violence, lack of electricity, instability, stress of life, bad news, etc.).

3. The security conditions of the country and the possible threat to the teachers if the pass rate is low.

The very high pass rate in the exam using the TLC is in agreement with Coovida et al (13) and Adeyemi et al (6) who found that traditional methods were found to upgrade students more often than objective structured clinical examination (OSCE). Our checklist were semi purposeful because they cover a wide range of variables that were difficult to be accurately assessed , for example , in the evaluation of skills of our students , the evaluation was not based on Multiple checklists to evaluate students Performing certain skills. (11)

Ideally medical students should be able to perform a variety of skills that include skills in history taking, examination, data interpretation, procedures, communication and attitudes (1, 11).

A further study that deals with certain specific points is suggested.

Recommendations

1. Reliance on TLC examination should be modified with implementation of OSCE in pediatrics and other departments particularly the basic medical sciences.
2. Establishment of a department for medical education in this college to improve students and teachers experiences in medical education and the best types of evaluation methods of medical students.
3. A change of the curriculum into the new types of curricula.
4. The pass rate of students should be limited to a certain rate in all departments to maintain a respectable level of scientific integrity in this college , or standardization of students marks in each subject and the pass rate is
12. El-Shallaly G, Ali E. Use of video-projected structured clinical examination (ViPSCE) instead of the traditional oral (Viva) examination in the assessment of final year medical students. *Educ Health* 2004; 17(1):17-26.

determined for each individual subject , this rule should be fixed and should be clear for students and their families to lessen the possible risk of threat to the teachers when the pass rate turned to be low.

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