

# Attachment 1: Comprehensive description of the clinical skills part of the Swiss Federal Licensing Exam in Medicine

## Comprehensive description of the Clinical Skills part of the Swiss Federal Licensing Exam in Medicine

reference period 2016-2021

### 1. Course background

School/Institution	Medical faculties of the universities of Basel, Bern, Geneva, Lausanne and Zurich on behalf of the Swiss Federal Office of Public Health.
Course area	Medicine.
Curriculum years	Federal licensing exam after having graduated from a master program in medicine.
Medical education level	Graduation level.
Students' course year	Exam is typically taken in the 6 <sup>th</sup> year (3 years Bachelor, 3 years Master).
Total number of students	120-340 students per faculty.
Role of exam	High Stakes Federal Licensing Exam.

### 2. OSCE design

OSCE aims	To assess individual candidates' medical competence.
Role of exam	Summative.
Total number of students performing the OSCE	800-1200 per year.
Maximum number of students per OSCE circuit	15.
Briefing the students	Information supplied by the Federal Office of Public Health and onsite briefing through the faculties' person in charge.
Number of sites	5 (Basel, Bern, Geneva, Lausanne, Zurich).
Number of exams	5 (2016, 2017, 2018, 2019, 2021).
Number of parallel OSCEs (sequential/simultaneous)	3 parallel (3 exam days).
Number of circuits	2 per day (morning and afternoon).
Pre-test of stations (Pilot OSCE)	0.
Subject and specialty areas being assessed	Competency-based assessment without attribution to specialties. The whole 6 years' content, as described in the national outcome framework ( <a href="http://profilesmed.ch/">http://profilesmed.ch/</a> ), following a distinct blueprint.
Recording and scoring students' performance	Electronic checklist combining specific items and global ratings.
Criteria for pass/fail decision	Criterion-referenced post-hoc standard setting following the borderline regression method; the final pass/fail decisions rests with a federal examination board.
Number of Stations	12.
Station details	12 clinical stations, 2-3 additional rest stations.
Learning outcomes being assessed (Type of stations)	Clinical stations usually integrating history-taking, physical examination, management and communication competencies, according to the blueprint developed under consideration of PROFILES.
Station duration	13 minutes, additional 2 minutes time to proceed to the following station.
Identical station duration	All stations have the same duration.
OSCE duration	3 hours plus time from the 2-3 rest stations.
Number and details of teachers	Senior clinicians, SP experts and OSCE designers from the local sites.
Number and details of observers	SP experts, OSCE designers and administrative personnel, proctors from the local sites.
Number and details of examiners	Senior clinicians from the local sites, 1 per station.
Number and details of simulated patients	SP cast from and by the local SP programs, 1 per station. Usually a mix of professional and lay actors/actresses.
Training Process for SP	Standardization of SP with local sites' SP experts in 2 sessions of 2 hrs each, with station-specific exemplary pre-taped video, all pre-exam. Additional 30 minutes in the morning of the exam day.
Training Process for examiners	Standardization for first-time examiners with briefing and rating of an exemplary pre-taped exam situation, pre-exam. Additional 30 minutes in the morning of the exam day.
Number of real patients	0.
Number of stations using video, computer, mannequins or other	0.
Feedback given to students, SPs.	No feedback to students beyond pass/fail. Feedback to SP as deemed appropriate by the local SP experts, e.g. based on FAIR OSCE observations.
Validity data	Rigorous quality control before, during and after the exam is in place. Additional information beyond what is implied from information supplied above cannot be disclosed.

Above checklist based on Madalena Patrício, Miguel Julião, Filipa Fareleira, Meredith Young, Geoffrey Norman & António Vaz Carneiro (2009) A comprehensive checklist for reporting the use of OSCEs, *Medical Teacher*, 31:2, 112-124, DOI: 10.1080/01421590802578277