



**INSTRUCTIONS TO CANDIDATES**

Entry to the examination hall will be on the basis of admit card only. The admit card should be displayed on the candidate's white coat through out the examination.

**Regarding the examination**

There are two components of this examination.

COMPONENTS	TIME ALLOWED	MAX. MARKS	MIN. PASS MARKS
<b>1. Clinical:</b>			
■ Long case (One)	45 minutes: History taking and examination 15 minutes: Formulation 30 minutes: Discussion: Total time: 90 minutes	10	6
■ Short cases (4 cases)	40 minutes	10	6
<b>2. TOACS</b>	4-8 minutes per station	10	6
<b>AGGREGATE</b>		<b>30</b>	<b>18 (60%)</b>

**1. LONG CASE (10 marks ..... 90 minutes)**

Each candidate will be allotted one long case. The candidate will be allowed to spend 45 minutes with the patient. The patient will then be taken away. The candidate will be allowed 15 minutes to write a formulation of the case. A standard formulation is expected to include all the positive findings and important/relevant negative findings in history and examination. Aetiological, precipitating and perpetuating factors need to be identified alongside the data supporting the most plausible provisional diagnosis. A list of differential diagnoses may be drawn with proposed investigations (including laboratory, radiological, psychometric etc.). A management plan including physical, pharmacological and psychological methods of treatment and rehabilitation is to be followed by comments on the course and outcome (prognosis) of the disease and the treatment.

The formulation will then be presented to the examiners. A discussion related to the correctness of findings, interpretation of findings and conclusions drawn, differential diagnosis and the management plan will follow. The knowledge of recent advances relevant to the case will also be evaluated. The examiners will evaluate the candidate on the basis of his/her interviewing skills, clinical examination skills and discussion of the formulation.

**2. SHORT CASES (10 marks ..... 40 minutes)**

Candidates will be examined on at least four short cases for a total of 40 minutes jointly by the two examiners. Candidates will be given a specific task to perform on patients, one case at a time. Two minutes time is kept for changeover from one case to another.

Each candidate will be evaluated on a specific task assigned for completion in a specific time. The findings, their interpretation and a management plan (if required) will be presented to the examiners. During this part of examination the candidates will be assessed on his/her clinical skills, correctness of findings, interpretation of findings and ability to draw scientific conclusions.

**TOACS (10 marks)**

Task-Oriented Assessment of Clinical Skills (TOACS) will be held on the first day of the examination at the same time, at all centres, for all the candidates declared eligible for clinical part of the relevant examination. **Candidates will be sent information regarding the schedule of TOACS by the Examination Department.**

In the TOACS the candidates will be evaluated on procedures, x-rays, laboratory findings, instruments, specimens etc. This component of examination will consist of 10 - 15 stations, 4-8 minutes per station arranged in the examination hall and the candidates will have to rotate through all of them in turn. The TOACS stations will be of two types:

- Observed / Interactive
- Unobserved / Static

In addition to the detailed instructions enclosed, the candidates will also receive verbal instructions at the time of the examination.

**NOTE: The candidate are required to fill a self explanatory 'feedback proforma' at the end of the examination.**

## **DETAILED INSTRUCTIONS**

1. Entry with admit card only.  
The candidates must display their admit cards on their white coats throughout the examination.
2. Response sheet:
  - Prior to entering the examination hall each candidate will be provided with a response sheet. Candidates must write their **roll number** on the response sheet before starting TOACS examination.
  - The candidate will only carry his/her response sheet while rotating through the stations. No other papers will be allowed in the examination hall.
3. The candidate is not supposed to remove any document or material from any station.
4. Each station will carry equal weightage. Every station must be attempted.
5. A specified time will be allotted at each station which will be signaled by a bell.

### **Conduct of Examination**

1. The examination is in the form of a circuit. At the start the candidate would occupy the station allocated to him / her according to their roll numbers, and will move to the next station when the bell rings.
2. At these stations clear instructions would be written for performance of a task. The candidate is expected to read the instructions and act accordingly.

On unobserved / static stations the candidate will be presented with a clinical case, laboratory data, x-ray, ultrasound, CT scan, instrument, specimen etc. and will be asked to give written responses to questions asked.

In the observed / interactive stations the candidate will have to perform a procedure for example taking history, performing clinical examination, counseling, assembling an instrument etc. One examiner will be present at each such station who will either rate the performance of the candidate or ask questions testing the reasoning and problem-solving skills.

3. The performance of each candidate will be assessed by the examiners on a pre determined assessment form and the candidates will have to submit written responses to one-best / short answer questions in the response sheet.
4. Candidates will rotate through the stations in this way till they have completed the circuit. They will move only in one direction as displayed in the hall by arrow marks and will not be allowed to go back to the previous station.