

SAUDI BOARD RESIDENCY TRAINING PROGRAM

ANESTHESIA

Promotion Examination

Written Examination Format:

- A written examination shall consist of one paper with not less than 100 MCQs with a single best answer (one correct answer out of four options). Up to 10% unscored items can be added for pretesting purposes.
- The examination shall contain type K2 questions (interpretation, analysis, reasoning and decision making) and type K1 questions (recall and comprehension).
- The examination shall include basic concepts and clinical topics relevant to the specialty.
- Clinical presentation questions include history, clinical finding and patient approach. Diagnosis and investigation questions; include the possible diagnosis and diagnostic methods. Management questions; including treatment and clinical management, either therapeutic or nontherapeutic, and complications of management. Materials and Instruments questions; including material properties, usage, and selection of instruments and equipment used. Health maintenance questions; include health promotion, disease prevention, risk factors assessment, and prognosis.

Passing Score:

The trainee's performance is assessed in each of the evaluation formulas according to the following scoring system:

Score	Less than 50%	50% – 59.4%	60% - 69.4%	More than 70%
Description	Clear Fail	Borderline Fail	Borderline Pass	Clear Pass

1. To upgrade the trainee from a training level to the next level, she/he must obtain at least a **Borderline Pass** in each evaluation form.
2. The program director may recommend to the local supervision committee to request the promotion of the trainee who did not meet the previous promotion requirement according to the following:
 - A. In case that the trainee gets a **Borderline Fail** result in one of the evaluation forms, the remaining evaluation forms must be passed with **Clear Pass** in at least one of them.
 - B. In case that the trainee gets a **Borderline Fail** result in two of the evaluation forms to a maximum, provided they do not fall under the same theme (Knowledge, Attitude, Skills). The remaining evaluation forms must be passed with **Clear Pass** in at least two of them.
 - C. The promotion must be approved in this case by the scientific council for the specialization.

Blueprint Outlines:

No.	Section	Percentage
1	Basic Sciences	25%
2	Clinical Sciences	20%
3	Organ-Based Clinical Sciences	15%
4	Special Problems or Issues in Anesthesiology	10%
5	International Health Improvement System	5%
6	Remote Area Anesthesia	5%
7	Advance Monitoring in Anesthesia	10%
8	Perioperative Medicine	10%
Total		100%

- All sections incorporate applied Basic Science assessment which includes but not limited to Physiology, Pharmacology, Anatomy, Physics, and Equipment.

Notes:

- Blueprint distributions of the examination may differ up to +/-5% in each category.
- Percentages and content are subject to change at any time. See the SCFHS website for the most up-to-date information.
- Research, Ethics, Professionalism, and Patient Safety are incorporated within various domains.

Suggested References:

1. Ronald D. Miller, 2014. Miller's Anesthesia, 8th Edition.
2. Paul G. Barash, 2017. Clinical Anesthesia, (B. Lippincott Company), 8th Edition.
3. Roberta L., Hines and Katherine, Marschall, 2017. Anesthesia and Co-Existing Disease, 7th Edition.
4. David C. Chung and Arthur M. Lam, 1997. Essentials of Anesthesiology, 3rd Edition.
5. Paul L. Marino, 2016. The ICU Book.

CLASS (B) TEXTBOOKS:

6. Michael J. Cousins and Phillip O. Bridenbaugh, 1997. Neural Blockade in Clinical Anesthesia & Management of Pain, 3rd Edition.
7. David Chestnut, 2014. Chestnut's Obstetric Anesthesia, 5th Edition.
8. Jerrold Lerman and David Steward, 2009. Manual of Pediatric Anesthesia, 6th Edition.
9. William J. Sibbald, 1988. Synopsis of Critical Care.
10. Joseph E. Parrillo, 1990. Current Therapy in Critical Care Medicine, 2nd Edition.
11. Ehab Farag, 2016. Brown's Atlas of Regional Anesthesia, 5th Edition.
12. Michael J. and John Ford, 1990. Manual of Medical Procedures.
13. Margaret Wood, 1989. Drugs and Anesthesia: Pharmacology for Anesthesiologists.
14. Andrew B. Lumb, 2016. Nunn's Applied Respiratory Physiology, 8th Edition.
15. Kim E. Barrett, 2015. Review of Medical Physiology, 25th Edition.
16. Barry A. Shapiro, 1990. Clinical Application of Respiratory Care, 4th Edition.
17. Ary L. Goldberger, 2017. Goldberger's Clinical Electrocardiography: A Simplified Approach, 9th Edition.
18. J. G. Whitwam, 1994. Day-Case Anesthesia and Sedation.
19. Aviva Petrie, 1988. Lecture Notes on Medical Statistics.
20. R. A. Brown, 1994. Medical Statistics on Personal Computers, 2nd Edition.
21. Dr. Annete Vegas, 2003. Cardiac Anesthesiology Fellows Manual, 6th Edition.
22. Joel A. Kaplan, 2016. Kaplan's Cardiac Anesthesia, 7th Edition.
23. Alan Seymour, 2017. Practical Aspects of Thoracic Anaesthesia.
24. Peter Slinger, 2011. Principles and Practice of Anesthesia for Thoracic Surgery.
25. Maurice S. Albin, 1996. Textbook of Neuro-Anesthesia with Neurosurgical and Neuroscience Perspective 1st Edition.
26. Richard S. Irwin and Craig M. Lilly, 2017. Irwin and Rippe's Intensive Care Medicine, 8th Edition.

Patient Safety + Professionalism and Ethics References:

1. Professionalism and Ethics, Handbook for Residents, Practical guide, Prof. James Ware, Dr. Abdulaziz Fahad Alkaabba, Dr. Ghaiath MA Hussein, Prof. Omar Hasan Kasule, SCFHS, Latest Edition.
2. Essentials of Patient Safety, SCHS, Latest Edition.

Crash Courses:

Outline of each course including suggested reading references given by the provider.

Note:

This list is intended for use as a study aid only. SCFHS does not intend the list to imply endorsement of these specific references, nor are the exam questions necessarily taken solely from these sources.



Example Questions

EXAMPLE OF K2 QUESTIONS

Question 1:

A 65-year-old man with laryngeal webs was undergoing trans-oral laser microsurgery when a fire suddenly occurred.

Which of the following is the appropriate management?

- A. Ventilate with air
- B. Increase Fio2 to 1.0
- C. Remove the endotracheal tube
- D. Instill saline down the endotracheal tube lumen