

SAUDI BOARD RESIDENCY TRAINING PROGRAM

PSYCHIATRY

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).
- 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 non-therapeutic, 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 for Promotion Exam:

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	Proportion
1	Basic Sciences ¹	5%
2	Basic Psychopharmacology/Physical Therapy (ECT and Others)	7%
3	Essential Topics in Psychiatry ²	5%
4	Schizophrenia Spectrum & other Psychotic Disorders	7%
5	Anxiety Disorders/Obsessive Compulsive & related Disorders/Trauma & Stress related Disorders	7%
6	Depressive Disorders/Bipolar & related Disorders	7%
7	Substance-related & Addictive Disorders	5%
8	Personality Disorders	5%
9	Psychosomatic Medicine (Consultation-Liaison Psychiatry) ³	9%
10	Psychotherapy	8%
11	Descriptive Psychopathology	5%
12	Patient Evaluation	5%
13	Emergency Psychiatry	5%
14	Child and Adolescence Psychiatry	9%
15	Other psychiatric disorders ⁴	11%
Total		100

1 Basic Sciences:

Includes Neurosciences, Basic Psychology, Psychosocial Sciences etc.

2 Essential Topics in Psychiatry:

Includes Genetics, Epidemiology, Classification in Psychiatry, Ethics in Mental Health

3 Psychosomatic Medicine:

(Consultation-Liaison Psychiatry): includes Neurocognitive Disorders, Somatic Symptoms & Related Disorders etc.

4 Other psychiatric disorders:

Include Sexual Dysfunctions, Eating Disorders, Sleep-Wake Disorders, Geriatric Psychiatry, Dissociative Disorder, Cross Cultural Psychiatry, Disorders specific to Women, Forensic Psychiatry, etc.

Note:

- 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:

A) General:

1. Benjamin J. Sadock and Virginia A. Sadock, May 16, 2014. Kaplan and Sadock's Synopsis of Psychiatry: Behavioral Sciences/Clinical Psychiatry
2. Philip Cowen, Paul Harrison and Tom Burns, Oct 12, 2012. Shorter Oxford Textbook of Psychiatry
3. Gelder, Michael, Andreasen, Nancy and Lopez-ibor, 2009. New Oxford Textbook of Psychiatry, 2nd edition
4. American Psychiatric Association, May 27, 2013. Diagnostic and Statistical Manual of Mental Disorders, 5th Edition: DSM-5

B) Psychotherapy:

1. Glen O. Gabbard published by American Psychiatric Publishing, Inc., 2008. Textbook of Psychotherapeutic Treatments in Psychiatry, 1st Edition
2. Suzanne Bender MD and Edward Messner MD, Nov 19, 2003. Becoming a Therapist: What Do I Say, and Why?
3. by Jesse H. Wright, Monica Ramirez Basco and Michael E., Oct 2005. These Learning Cognitive-Behavior Therapy: An Illustrated Guide

C) Subspecialties:

1. James J. Amos and Robert G. Robinson, Jun 28, 2010. Psychosomatic Medicine: An Introduction to Consultation-Liaison Psychiatry
2. Fred R. Volkmar and Andrés Martin, Jun 14, 2011. Essentials of Lewis's Child and Adolescent Psychiatry (Essentials Of... (Lippincott Williams & Wilkins))
3. Marc Galanter & Herbert D. Kleber, The American Psychiatric Publishing Textbook of Substance Abuse Treatment (American Psychiatric Press Textbook of Substance Abuse Treatment), 4th 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 K1 QUESTIONS

Question 1

A psychiatrist is conducting an interview with a patient who has schizophrenia. During the psychiatric interview, the patient responded to the psychiatrist questions with short answers.

What is the term that is used to describe the lack of additional content of speech due to mental illness?

- A. Avolition
- B. Asociality
- C. Abulia
- D. Alogia

EXAMPLE OF K2 QUESTIONS

Question 1

An 18-year-old male patient with periods of excessive sleepiness that last for three weeks then subside with normal sleep. The mother reported overeating, self-isolation, irritability, and frequent masturbation during these periods. On examination, he is morbidly obese.

What is the most likely diagnosis?

- A. Primary Hypersomnia
- B. Narcolepsy
- C. Delayed Sleep Phase Disorder
- D. Kleine-Levin syndrome