



Saudi Medical Licensure Examination (SMLE)

EXAMINATION CONTENT GUIDELINE

Note: Read this guide before submitting an application to test. At the time of application, you will be required to acknowledge that you have read and understood this guide and the policies and procedures contained within.

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Licensure Exam Overview

Licensure examinations are standardized tests that candidates must pass to obtain a license to practice health professions. The exams are designed to assess the ability to apply knowledge, concepts, and principles that constitute the basis of safe and effective health care.

Exam Structure

The SMLE is conducted using computer-based testing. It is divided into two parts of 100 questions, each with a time allocation of 120 minutes for each part. It may include up to 10% of pilot questions. There is a scheduled 30-minute break between the two parts. The questions have four options from which the candidate will choose one best answer. The examination shall contain recall questions that test knowledge and questions with scenarios that test other skills (interpretation, analysis, decision-making, reasoning, and problem-solving).

Test	# of Test Block(s)	Duration of Each Block
SMLE	2	120 min

Scoring System

The SCFHS conducted a rigorous standard-setting exercise with a diverse panel of Saudi physicians. Following the standard-setting exercise, the passing score was determined as 560 on the reporting scale of 200-800. This passing score was reviewed and approved by the Central Assessment Committee (CAC).

Results and Reports

Results are not provided instantly. During the window-closing period, psychometric analysis is conducted, and results are announced within 2-6 weeks of the end of a test window. Two reports will be provided to every candidate, a statement of results and a feedback report on performance compared to other test takers.

Application and Eligibility

To apply for the SMLE, you must have a recognized primary degree (MBBS or equivalent) from an accredited health science program or commenced training during the internship year or a student who is one year away from graduation.

Applying for the SMLE

When applying for the examination, you must apply through the e-application. Once your application is processed, a scheduling permit with your eligibility period will be issued. You will receive an email with instructions for accessing your permit.

After obtaining the scheduling permit, you may visit the specified website to schedule a test date (Prometric). Scheduling may not be available for more than three months in advance. Refer to SCFHS for testing windows availability.

SMLE Practice Examination

To experience a test that resembles the actual test blueprint and sampled from the SMLE item bank, you can apply for SMLE practice test from the SCFHS website. For more information, please visit the SCFHS website.

Important Instructions

What to Expect on Test Day?

- All test centers follow the same procedures and rules, which you should get familiar with before test day.
- Testing sessions for the Saudi Licensing Examinations are monitored by test center administrators (TCA) in person and through audio and visual recording. Staff are required to report any violations of assessment bylaws or test center rules.
- You must follow instructions from TCA throughout the examinations; failure to do so may result in a finding of irregular behavior.
- TCAs are not authorized to answer questions regarding registration, examination content or format, testing software, scoring, or retesting.

Registration on Test Day

SCFHS test centers open at 7:30 a.m. If you are late more than 30 minutes from the time noted on your admission ticket or absent on test day, you will not be allowed to sit for the test, and this will be considered an attempt unless an acceptable reason with required documentation is presented and accepted by the committee supervising the test as per the assessment rules and regulations.

- When you arrive at the test center, you must present your scheduling permit and the required identification. Acceptable forms of unexpired identification include:
 - Passport
 - National/Residence Identity Card (KSA Only)
- Your name, as it appears on your scheduling permit, must match the name on your form(s) of identification exactly.
- If you do not bring your scheduling permit on paper or electronically (e.g., via smartphone) and acceptable identification, you will not be admitted to the test and will be required to pay a fee to reschedule your test. Your rescheduled test date(s) must fall within your eligibility period.
- During check-in, test center staff will conduct the appropriate security check before entering the testing room to confirm that you have no prohibited items.
- You will be asked to repeat this process each time you return to the testing room after a break. Additionally, your photo ID and fingerprint may be scanned electronically, and you must sign the test center log.
- Before you enter the test room, TCA will give you laminated writing surfaces, erasers, and markers to use for making notes and/or calculations during the testing session. They should be used only at your assigned testing station.
- You must return laminated writing surfaces/e-tablets to test center staff at the end of the testing session. Do NOT write on anything other than the laminated writing surface/e-tablets (e.g., your hand, other body parts, tissue, etc.). Failure to comply may result in a

finding of irregular behavior.

- TCA will escort you to your assigned testing station and provide brief instructions on using the computer equipment. A brief tutorial is available before each examination.
- Your test session is scheduled for a fixed amount of time, and the computer keeps track of the time allocated for each block and break.
- Once you begin a testing block, the block time continues to run even if you leave the testing room (e.g., for a personal emergency).
- If you leave during the block without permission from the test proctor, the test center will file a report of the incident. Additionally, the unauthorized break screen, described in the examination tutorial, will appear on the monitor after a defined period of inactivity.

Breaks between Test Blocks

- Each time you leave the testing room, you are required to sign out and sign in when you return. You must present your identification each time you sign in.
- If you take too much break time and exceed the allocated break time, the next test block will start automatically, and the excess time will be deducted from your testing time.
- Ensure you arrive 10-15 minutes before the start of your next block to allow time for sign-in as the signing process may take around 10 minutes based on testing capacity.
- Repeated or lengthy departures from the test room for unscheduled breaks will be reported by the TCA.

End of Test

- The test session ends when you have exited all blocks or the total test time expires. You will receive a notice during checkout that you have appeared for the test.
- After you start taking an examination, you cannot cancel or reschedule that examination. If you experience a computer issue during the test, notify the test center staff immediately. The testing software is designed to restart the test at the point that it was interrupted.
- You will maintain the confidentiality of the materials, including, but not limited to, the multiple-choice items. You will not reproduce or attempt to reproduce examination materials through recording, memorization, or by any other means.

Instructions for examination day

- Any clothing or jewelry items allowed to be worn in the test room must remain on your person at all times. Removed clothing or jewelry items must be stored in your locker.
- You must conduct yourself in a civil manner at all times when on the premises of the testing center.
- To protect the privacy of all testers, the TCA can neither confirm nor deny if any particular individual is present or scheduled at the test center.
- You must return all materials issued to you by the TCA at the end of your test.
- Persons not scheduled to take a test are not permitted to wait in the test center.

Notes

- Saudi university/college students can sit for SMLE during the final year of undergraduate studies.
- Scheduling the allowed test attempts during the year is the sole responsibility of the candidate.
- SCFHS is not responsible for delaying the test attempts until the end of the year and not finding a test spot.
- Candidates can test in any SCFHS approved Prometric testing center locally and internationally as locations appear upon scheduling.
- A candidate is not allowed to sit for the test twice in the same testing window. In this instance, the result of the first dated test will be announced, and the second will be considered an attempt and result invalid.
- All candidates must review the applicant guide before taking the test.
- All eligible candidates may take SMLE up to four times a year, starting from the first attempt to obtain a pass score.
- SCFHS classification and registration rules and regulations apply to candidates who fail the SMLE for two years after the graduation date.
- After obtaining a passing score in the SMLE each candidate is eligible for two further attempts to improve their mark for the purpose of attaining a better opportunity for residency selection.

Prohibitions

Before the examination

- Seeking, providing, and/or obtaining unauthorized access to examination materials.
- Providing false information or making false statements on or in connection with application forms, scheduling permits, or other exam-related documents.
- Applying for an examination for which you are not eligible.

During the examination

- Taking an examination for someone or engaging someone to take an examination for you.
- Giving, receiving, or obtaining unauthorized assistance during the examination or attempting to do so.
- Making notes of any kind while in the secure areas of the test center, except on the writing materials provided at the test center for this purpose.
- Failing to adhere to any exam policy, procedure, or rule, including instructions of TCA.
- Verbal or physical harassment of test center staff or other examination staff or other disruptive or unprofessional behavior during the registration, scheduling, or examination process.
- Possessing any unauthorized materials, including photographic equipment, communication or recording devices, and cell phones, in the secure testing areas.
- Any other electronic communication device, not herein mentioned, are prohibited in the examination hall irrespective if they are turned off, and no provision will be made to store them.

After the examination

- Altering or misrepresenting examination scores.
- Any reproduction by any means, including, but not limited to, reconstruction through memorization and/or dissemination of copyrighted examination materials by any means, including the internet.
- Communicating or attempting to communicate about specific test items, cases, and/or answers with another examinee, potential examinee, or formal or informal test preparation group at any time before, during, or after an examination.
- Failure to cooperate fully in any investigation of a violation of the SCFHS rules.

	<ul style="list-style-type: none"> – Manage acute conditions (e.g., asthma exacerbations, pneumonia) and chronic conditions (e.g., COPD, pulmonary fibrosis). – Illustrate knowledge of preventive measures, including vaccination (e.g., influenza, pneumococcal) and smoking cessation programs. 		
Gastroenterology and Hepatology	<ul style="list-style-type: none"> – Understand the anatomy, physiology, and pathology of the gastrointestinal tract, liver, gallbladder, and pancreas. – Identify and interpret symptoms and clinical signs of the listed gastroenterology and hepatology disorders. – Illustrate knowledge of common diagnostic tools and procedures in gastroenterology. – Understand laboratory tests and their interpretation for GI and hepatic pathologies. – Understand the management of acute and chronic GI conditions, including pharmacologic therapies and lifestyle modifications. – Know the indications, contraindications, and complications of common GI procedures. – Illustrate knowledge of screening tests and preventive measures for common GI and hepatic diseases. 	Peptic Ulcer Disease	3
		IBD	3
		Chronic Viral Hepatitis	3
		Complications of Liver Cirrhosis	3
		GERD	2
		Celiac Disease	2
		Acute Viral Hepatitis	2
		Acute Non-viral Hepatitis	2
Nephrology	<ul style="list-style-type: none"> – Understand normal renal anatomy and physiology of the renal system. – Describe the mechanisms of acid-base balance, fluid, and electrolyte homeostasis. – Identify and interpret symptoms and clinical signs related to the listed nephrology disorders. – Recognize the causes and pathophysiology of common renal disorders. – Interpret the findings of imaging studies relevant to nephrology. 	Hyper and Hypokalemia	3
		Hypo and Hyper Natremia	3
		Acute Kidney Injury	2
		Chronic Kidney Disease	2
		Primary HTN	2
		Secondary HTN	1

	<ul style="list-style-type: none"> – Manage common complications related to acute and chronic kidney diseases. – Understand the pathophysiology, evaluation, and management of primary and secondary hypertension. 		
Infectious Diseases	<ul style="list-style-type: none"> – Illustrate the knowledge of the mechanisms of infection and disease processes. – Comprehend patterns of disease spread, risk factors, and methods for tracking infectious diseases. – Identify and interpret symptoms and clinical signs related to the listed infectious disease. – Understand the immune system's role in infectious disease, including immunity, hypersensitivity reactions, and vaccines. – Demonstrate knowledge of antimicrobials, including mechanisms of action, indications, dosing, and side effects. – Understand the principles of infection control. 	Pneumonia	3
		Tuberculosis	3
		Urinary Tract Infections	2
		Meningitis	2
		Infective Endocarditis	2
		Chickenpox and Shingles	2
		Brucellosis	1
		MERS-Cov, Covid-19	1
		Sexually Transmitted Infections (Including HIV)	1
		Malaria and Dengue Fever	1
Endocrine	<ul style="list-style-type: none"> – Understand hormone synthesis, release, transport, and mechanisms of action. – Identify and interpret symptoms and clinical signs related to the listed endocrinology disorders. – Interpret laboratory results for hormones and understand patterns in endocrine disorders. – Understand diagnostic criteria and protocols for managing endocrine conditions. – Understand the indications, contraindications, mechanisms of action, side effects, and monitoring requirements of medications. 	Thyroid Disorders	3
		Diabetes (Diagnosis)	3
		Acute Diabetic Complications	3
		Chronic Diabetic Complications	2
		Adrenal Disorders	1
		Osteoporosis	1
Hematology	<ul style="list-style-type: none"> – Identify and differentiate types of anemia. 	Iron Deficiency Anemia	3
		Thrombotic Disorders	3

	<ul style="list-style-type: none"> – Understand the pathophysiology and classification of hematologic malignancies. – Describe hemostatic disorders, including platelet function disorders, coagulation pathway deficiencies, and thrombotic conditions. – Identify and interpret symptoms and clinical signs related to the listed hematology disorders. – Know the indications, principles, and interpretation of common hematologic tests. – Outline general principles of hematologic treatments. 	Sickle Cell Disease	3	
		Thrombocytopenia	2	
		Hemolysis	1	
		Anticoagulant Rx Management	1	
	Rheumatology	<ul style="list-style-type: none"> – Explain the mechanisms of inflammation, tissue damage, and immune dysregulation. – Recognize disease pathways and mediators involved in rheumatological disorders. – Identify and interpret symptoms and clinical signs related to the listed rheumatology disorders. – Understand immunosuppressive and anti-inflammatory drugs' mechanisms, indications, contraindications, and side effects. – Interpret laboratory results for rheumatological disorders. – Demonstrate knowledge of common abnormalities seen in imaging modalities of rheumatological disorders. – Determine appropriate treatment regimens for the listed rheumatological disorders. 	SLE	3
			Rheumatoid Arthritis	2
			Osteoarthritis	1
			Gout	1
			Spondyloarthropathy	1
Neurology	<ul style="list-style-type: none"> – Identify and describe the structure and function of the central and peripheral nervous systems. – Identify and interpret symptoms and clinical signs related to the listed neurology conditions. 	Ischemic Stroke	3	
		Seizures Disorders	2	
		Hemorrhagic Stroke	1	
		TIA	1	
		Multiple Sclerosis	1	

	<ul style="list-style-type: none"> – Describe the mechanisms of action, indications, contraindications, and adverse effects of drugs used in neurology. – Interpret neuroimaging studies of common neurological disorders. – Understand the etiology, diagnosis, and management of stroke, transient ischemic attacks, and vascular malformations. – Identify and differentiate types of headaches and appropriate treatment options. – Describe the diagnosis and management of the nervous system's bacterial, viral, and fungal infections. 		
Oncology	<ul style="list-style-type: none"> – Identify and interpret symptoms and clinical signs related to tumor lysis syndrome and febrile neutropenia. – Outline and identify the required investigations and the laboratory abnormalities in tumor lysis syndrome and febrile neutropenia. – Outline and identify the importance of immediate management of tumor lysis syndrome and febrile neutropenia. 	Tumor Lysis Syndrome	1
		Febrile Neutropenia	1
Critical Care	<ul style="list-style-type: none"> – Interpret and analyze data from patient history, physical examinations, and clinical monitoring tools. – Identify and prioritize patient needs based on assessments. – Monitor patients continuously, recognizing early warning signs of deterioration. – Recall the indications of invasive and noninvasive ventilation in respiratory failure. – Interpret hemodynamic parameters and manage patients with various forms of shocks. – Understand the use of inotropes, vasopressors, and fluid resuscitation. 	Respiratory Failure	2
		Sepsis and Septic Shock	2
		Hemorrhagic Shock	1
		Cardiogenic Shock	1

OB/GYN (25%)	Geriatrics	<ul style="list-style-type: none"> Identify and manage common geriatric syndromes, including frailty, delirium, dementia, falls, incontinence, and polypharmacy. Assess activities of daily living (ADLs) and instrumental activities of daily living (IADLs) to gauge independence levels. Evaluate gait and balance, and implement fall prevention strategies. Demonstrate knowledge of the prevention and management of conditions prevalent in aging, such as hypertension, diabetes, osteoporosis, and cardiovascular disease. 	Acute Confusional State	2
			Dementia	1
	Psychiatry	<ul style="list-style-type: none"> Understand major psychiatric disorders' classification, epidemiology, etiology, clinical features, and diagnostic criteria. Identify and interpret symptoms and clinical signs related to the listed Psychiatric disorders. Recognize the different medical therapies, their side effects, and common antidotes. Recognize the different clinical presentations of different abused substances. Recognize patients at risk for suicide and the importance of early intervention. 	Depression	1
			Side Effects of Medications	1
			Substance Abuse	1
			Bipolar Disorder	1
			Schizophrenia	1
	General Obstetrics	<ul style="list-style-type: none"> Recognize the detailed history of the prior pregnancy and outcome. Identify risk factors related to obstetric outcomes. Interpret symptoms and signs of obstetric emergencies. Calculate the gestational age and expected date of delivery based on her condition. Interpret CTG and abnormalities. Understand the importance of pregnancy counseling. Recognize the different varieties of obstetrics diagnostic modalities, e.g. 	History & Examination	3
			Preeclampsia-Eclampsia	3
			Third Trimester Bleeding	3
Preterm Labor			3	
Preterm Rupture of Membranes			3	
Postpartum Hemorrhage			3	
Maternal-Fetal Physiology			3	

	<p>ultrasound, doppler, laboratory interpretation.</p> <ul style="list-style-type: none"> – Conduct careful obstetrics examinations and understand their limitations. – Manage obstetrics emergencies in acute situations. – Manage laboring patients and understand deviation of the norm. – Recognize the anatomy and physiology of the mother and fetus. – Recognize limitations in performing obstetrics and vaginal examinations of female patients. 	Preconception Care	3	
		Antepartum Care	2	
		Intrapartum Care	2	
		Postpartum Care	2	
		Intrapartum Fetal Surveillance	2	
		Postpartum Infection	2	
		Post-term Pregnancy	2	
		Fetal Growth Abnormalities	2	
		Legal and Ethics Issues in Obstetrics and Gynecology	2	
	General Gynaecology	<ul style="list-style-type: none"> – Obtain a detailed history of prior pregnancy and outcome. – Obtain a detailed cycle history and understand normal and abnormal menstrual history. – Recognize limitations in performing gynecological and vaginal examinations of female patients. – Recognize the normal menstrual cycle, with dysmenorrhea. – Diagnose and manage abnormalities of menstruation. – Recognize different methods of family planning, basic knowledge, and side effects. – Recognize the physiology of puberty. – Recognize early bleeding disorders (abortion, ectopic, molar pregnancy). 	History & Examination	3
			Ectopic Pregnancy	3
			Spontaneous Abortion	3
			Normal and Abnormal Uterine Bleeding	3
			Dysmenorrhea	3
			Uterine Leiomyomas	3
Family Planning			2	
Endometriosis			2	
Chronic Pelvic Pain			2	
Puberty			2	
Amenorrhea	2			
Premenstrual Syndrome and Premenstrual Dysphoric Disorder	2			
Legal and Ethics Issues in Gynecology	2			
Subspecialties		Pap Smear & DNA Probe & Culture	3	

		<ul style="list-style-type: none"> - Recognize and interpret diagnostic modalities of cervical screening and sexually transmitted infections. - Manage, assess, and treat different surgical and medical complications of pregnancy. - Manage, assess, and treat infertility and reproductive endocrinology disorders. - Manage different gynecological disorders. - Identify the symptoms and signs of gynecological malignancies and treatment modalities. - Provides care of mothers and infants with multiple gestation, alloimmunization, and fetal death. - Recognize the utilization of obstetrics procedures. - Assess, diagnose, and manage different types of pelvic organ prolapse and urinary incontinence. 	Sexually Transmitted Infections and Urinary Tract Infection	3
			Medical and Surgical Complications of Pregnancy	2
			Alloimmunization	2
			Multifetal Gestation	2
			Fetal Death	2
			Obstetrics Procedures	2
			Hirsutism and Virilization	2
			Menopause	2
			Infertility	2
			Gestational Trophoblastic Neoplasia	2
			Cervical Disease and Neoplasia	2
			Endometrial Hyperplasia and Carcinoma	2
			Ovarian Neoplasms	2
			Pelvic Organ Prolapse and Urinary Incontinence	1
Pediatrics (25%)	General Pediatric	<ul style="list-style-type: none"> - Recognize efficient history and physical examination to assess for any acute or chronic diseases in children and adolescents, including growth assessment, developmental screenings, and understanding of childhood immunizations. - Identify and manage short-term illnesses or injuries in children and adolescents, and provide ongoing care for certain common chronic pediatric illnesses. 	Gastroenteritis	3
			Febrile Seizures	3
			Bronchial Asthma	3
			Iron Deficiency Anemia	3
			Bronchiolitis	3
			Pneumonia	3
			Cellulitis	3
			Upper Respiratory Tract Infections	3

	<ul style="list-style-type: none"> – Recognize the importance of coordination care with other pediatric specialties and engage effectively with patients and families to address appropriate health behaviors that promote the well-being of their child. – Identify the current medical advancements and guidelines. 	Urinary Tract Infections	3		
		Constipation	3		
		Rickets	3		
		Otitis Media	2		
		Celiac Disease	2		
		Henoch-Schönlein Purpura	2		
		Hypertension	2		
		Well Baby	2		
		Ambulatory	<ul style="list-style-type: none"> – Recognize efficient history and physical examination to assess the patient during well-child clinic visits and for any acute or chronic diseases in children and adolescents, including growth assessment, developmental screenings, and understanding of childhood immunizations. – Identify and manage short-term illnesses or injuries in children and adolescents; provide ongoing care for common chronic pediatric illnesses; diagnose and treat common acute illnesses in children and adolescents; and provide follow-up care for common chronic conditions. – Recognize the importance of coordination with other pediatric specialties and engage effectively with patients and families to address appropriate health behaviors that promote the well-being of their children. – Identify the current medical advancements and guidelines. 	Immunization	3
				Development and Behavior	3
Failure to Thrive	2				
Squint	1				
Enuresis	1				
Central Nervous System	<ul style="list-style-type: none"> – Recognize efficient history and physical neurological examination to assess for any acute or chronic neurological diseases in children and adolescents, including seizure disorders, head trauma, and cognitive and motor delay. – Identify, evaluate, and manage acute neurological conditions in children and 	Epilepsy	3		
		Guillain-Barré Syndrome	2		
		Headaches	2		
		Hypotonia	2		
		Ataxia	2		
		Myasthenia Gravis	2		

	<p>adolescents, such as head trauma, acute onset convulsion, as well as chronic neurological diseases, such as epilepsy and cerebral palsy, in addition to understanding initially required baseline laboratory and radiological investigations.</p> <ul style="list-style-type: none"> – Recognize the importance of coordination with other pediatric specialties and engage effectively with patients and families to provide proper counseling and support for them. – Recognize the importance of medical advancements and guidelines in pediatric neurological disease. 	Cerebral Palsy	2
Cardiovascular System	<ul style="list-style-type: none"> – Recognize efficient history and physical cardiovascular examination to assess for any acute or chronic cardiovascular diseases in children and adolescents, including congenital heart diseases and acute cardiac conditions. – Identify, evaluate, and manage acute cardiovascular conditions in children and adolescents, such as acute heart failure, arrhythmias, and chronic diseases such as congenital heart diseases, in addition to understanding initially required baseline laboratory and radiological investigations and interpretation of ECG. – Recognize the importance of coordination care with other pediatric specialties and engage effectively with patients and families to provide proper counseling and support for them. – Identify the current medical advancements and guidelines in pediatric cardiovascular disease. 	Congenital Heart Disease	3
		Heart Failure	3
		Rheumatic Heart Disease	2
		Syncope	2
Respiratory System	<ul style="list-style-type: none"> – Recognize efficient history and physical respiratory examination to assess for any acute or chronic respiratory diseases in children and adolescents, including bronchial asthma, bronchiolitis, pneumonia, and chronic cough. – Identify, evaluate, and manage acute respiratory conditions in children and adolescents, such as acute respiratory distress, acute asthmatic attacks, and 	Adenotonsillitis	3
		Cystic Fibrosis	3
		Croup	3
		Sinusitis	2
		Laryngomalacia	2
		Tracheomalacia	2

	<p>chronic diseases such as bronchial asthma, in addition to understanding initially required baseline laboratory and radiological investigations such as blood gases and Chest X-rays.</p> <ul style="list-style-type: none"> – Recognize the importance of coordination care with other pediatric specialties and engage effectively with patients and families to provide proper counseling and support for them. – Identify the current medical advancements and guidelines in pediatric respiratory diseases. 		
Gastrointestinal System	<ul style="list-style-type: none"> – Recognize efficient history and physical gastrointestinal examination to assess for any acute or chronic gastrointestinal diseases in children and adolescents, including abdominal pain, vomiting, diarrhea, or constipation. – Identify, evaluate, and manage acute gastrointestinal conditions in children and adolescents, such as acute diarrhea, as well as chronic diseases such as chronic diarrhea, chronic constipation, feeding difficulties, gastroesophageal reflux disease, malabsorptive diseases, and inflammatory bowel disease, in addition to the understanding of initially required baseline laboratory and radiological investigations. – Recognize the importance of coordination care with other pediatric specialties and engage effectively with patients and families to provide proper counseling and support for them. – Identify the current medical advancements and guidelines in pediatric gastrointestinal diseases. 	Inflammatory Bowel Disease	3
		Appendicitis	3
		Jaundice	3
		Gastroesophageal Reflux	2
		Congenital Gastrointestinal Anomalies	2
		Peptic Ulcer Disease	2
		Intussusception	2
		Chronic Liver Disease	2
Musculoskeletal System	<ul style="list-style-type: none"> – Recognize efficient history and physical musculoskeletal examination to assess for any acute or chronic musculoskeletal diseases in children and adolescents, including trauma, fractures, and rheumatological diseases. – Identify, evaluate, and manage acute musculoskeletal conditions in children 	Systemic Lupus Disease	3
		Rheumatoid Arthritis	3
		Kawasaki Disease	2
		Post Infectious Arthritis	2

	<p>and adolescents, such as fractures and acute arthritis and osteomyelitis, as well as chronic diseases, such as juvenile-onset rheumatoid arthritis and scoliosis, in addition to the understanding of initially required baseline laboratory and radiological investigations.</p> <ul style="list-style-type: none"> – Recognize the importance of coordination care with other pediatric specialties and engage effectively with patients and families to provide proper counseling and support for them. – Identify the current medical advancements and guidelines in pediatric musculoskeletal diseases. 		
Infectious Diseases	<ul style="list-style-type: none"> – Illustrate In-depth understanding of bacteria, viruses, fungi, parasites, and their mechanisms of causing disease, as well as knowledge of patterns of infectious diseases, including emerging infections including sepsis, meningitis, endocarditis, and zoonotic diseases affecting children and adolescents. – Recognize efficient history and physical examination in children and adolescents suspected of having infectious diseases, in addition to interpreting diagnostic tests, including blood cultures, serologies, PCR tests, and antigen/antibody assays, and proficiency in advanced imaging and laboratory techniques for diagnosing infections. – Identify, evaluate, and manage acute infectious conditions in children and adolescents, as well as some chronic infectious conditions such as tuberculosis and HIV. – Recognize the importance of coordination care with other pediatric specialties and engage effectively with patients and families to provide proper counseling and support for them. – Identify the current medical advancements and guidelines in pediatric infectious diseases. 	Tuberculosis	3
		Pharyngitis	3
		Meningitis	3
		Encephalitis	3
		Measles, Mumps, Rubella, Pertussis	3
		Brucella	2
		Scarlet Fever	2
		Dengue Fever, Corona Viruses	2
		CMV, EBV, HSV, HIV, Hepatitis	2
		Parasites (Ascaris, Pinworms, Giardiasis, Amoeba)	2
		Osteomyelitis	1
		Malaria, Enteric Fever, Leishmania, Box	1
		Septic Arthritis	1
Nephrology	<ul style="list-style-type: none"> – Recognize efficient history and physical examination to assess for any 	Post Streptococcal Glomerulonephritis	3

	<p>acute or chronic nephrology and urologic diseases in children and adolescents, including acute urinary tract infections, nephrotic syndrome, acute kidney injury, and chronic kidney disease.</p> <ul style="list-style-type: none"> Identify, evaluate, and manage acute renal and urologic conditions in children and adolescents, such as acute urinary tract infection, nephrolithiasis, nephrotic syndrome, acute kidney injury, as well as chronic kidney diseases such as chronic renal failure and hypertension, in addition to the understanding of initially required baseline laboratory and radiological investigations. Recognize the importance of coordination care with other pediatric specialties and engage effectively with patients and families to provide proper counseling and support for them. Identify the current medical advancements and guidelines in pediatric nephrological and urologic diseases. 	Acute and Chronic Kidney Disease	3		
		Nephrotic Syndrome	3		
		Congenital Anomalies of Kidney and Genitourinary Tract (CAKUT), (Polycystic Kidney Disease, Vesicourethral Reflux, Neurogenic Bladder)	2		
		Hemolytic Uremic Syndrome	2		
		Renal Tubular Acidosis	2		
		Acute Care	<ul style="list-style-type: none"> Illustrate the ability to assess airway, breathing, circulation (ABCs), and neurological status efficiently, quickly, and accurately in children and adolescents present with critical illness or injury, in addition to identifying signs of critical conditions such as sepsis, respiratory distress, dehydration, or trauma, together with diagnosing and managing acute conditions, such as Respiratory emergencies (e.g., asthma exacerbation, bronchiolitis, croup), Shock (septic, hypovolemic, or anaphylactic), Neurological emergencies (e.g., seizures, meningitis, head trauma), Cardiovascular issues (e.g., arrhythmias, heart failure), Acute infections (e.g., pneumonia, urinary tract infections, cellulitis). Interpret laboratory tests (e.g., blood gases, electrolytes, complete blood 	Drug Ingestions (e.g. Iron, Acetaminophen)	3
				Foreign Body Inhalation	3
				Acute Respiratory Distress Syndrome	2
				Shock	2
				Arrhythmias	1
Trauma	1				
Testicular Torsion	1				

	<p>count), and imaging studies (e.g., chest X-rays, CT scans).</p> <ul style="list-style-type: none"> – Recognize the importance of collaboration with emergency pediatric specialties, intensivists, surgeons, and nurses, in addition to educating families on the prevention of emergencies (e.g., safety measures, vaccination), together with providing follow-up recommendations to prevent readmissions or complications. – Recognize the updated advanced resuscitation protocols (e.g., PALS, NRP). 		
Hematology/ Oncology	<ul style="list-style-type: none"> – Recognize efficient history and physical examination to assess for any acute or chronic hematological and oncologic diseases in children and adolescents, including anemias, thrombocytopenia, leukopenia, leukemia, and bleeding disorders. – Identify, evaluate, and manage acute hematological conditions in children and adolescents, such as acute sickle cell crisis idiopathic thrombocytopenia purpura, and understand the initially required baseline laboratory and radiological investigations. – Recognize the importance of coordination care with other pediatric specialties and engage effectively with patients and families to provide proper counseling and support for them. – Identify the current medical advancements and guidelines in pediatric hematological and oncologic diseases. 	Hemolytic Anemias	3
		Immune Thrombocytopenic Purpura	3
		Hemoglobinopathies	3
		Leukemia	2
		Lymphoma	2
		Retinoblastoma	2
		Willm’s Tumor	2
		Neuroblastoma	2
Nephroblastoma	2		
Neonatology	<ul style="list-style-type: none"> – Illustrate the ability to conduct comprehensive Neonatal Assessment through physical examinations, including Apgar scoring, gestational age assessment, and identifying congenital anomalies, recognizing signs of neonatal distress (e.g., respiratory difficulty, jaundice, sepsis), as well as diagnosing and managing common neonatal conditions, such as Respiratory Disorders: Neonatal respiratory distress syndrome (RDS), 	Transient Tachypnea of the Newborn	3
		Infant of Diabetic Mother	2
		Intrauterine Growth Retardation	2
		Meconium Aspiration	2
		Prematurity	2
		Hemorrhagic Diseases of Newborn	1

	<p>transient tachypnea of the newborn (TTN), meconium aspiration syndrome (MAS), Neonatal sepsis, meningitis, and TORCH infections, Hypoglycemia, hyperbilirubinemia, and electrolyte imbalances, together with ordering and interpreting diagnostic tests, including blood gases, bilirubin levels, metabolic screening, and imaging (ultrasound, X-ray, or MRI).</p> <ul style="list-style-type: none"> – Recognize the importance of teaching families about breastfeeding, recognize signs of illness, promote vaccinations, and coordinate screening programs for metabolic, genetic, and hearing disorders. – Recognize the advances in neonatal diseases. 		
Endocrinology	<ul style="list-style-type: none"> – Recognize efficient history and physical examination to assess for any acute or chronic endocrine diseases in children and adolescents, including diabetes, adrenal disorders, thyroid diseases, and growth disorders. – Identify, evaluate, and manage acute endocrine conditions in children and adolescents, such as diabetic ketoacidosis, and adrenal crisis, in addition to understanding of initially required baseline laboratory and radiological investigations. – Recognize the importance of coordination care with other pediatric specialties and engage effectively with patients and families to provide proper counseling and support for them. – Identify the current medical advancements and guidelines in pediatric endocrine diseases. 	Diabetes Mellitus	3
		Adrenal Disorders	3
		Thyroid Disorders	2
		Panhypopituitarism	2
		Ambiguous Genitalia	2
		Diabetes Insipidus	1
		Growth and Growth Disorder	1
Genetic/ Metabolic	<ul style="list-style-type: none"> – Recognize efficient history and physical examination in children and adolescents to assess for any child suspected to have dysmorphology or inborn errors of metabolism. – Identify, evaluate, and manage acute metabolic conditions in children and adolescents, such as hypoglycemia or metabolic acidosis, and understand 	Hypoglycemia	3
		Inborn Errors of Metabolism	2
		Dysmorphology	2

		<p>initially required baseline laboratory and radiological investigations.</p> <ul style="list-style-type: none"> – Recognize the importance of coordination care with other pediatric specialties and engage effectively with patients and families to provide proper counseling and support for them. – Identify the current medical advancements and guidelines in pediatric genetic and metabolic diseases. 		
	Allergy/ Immunology	<ul style="list-style-type: none"> – Recognize efficient history and physical examination to assess for any acute or chronic allergic or immunological diseases in children and adolescents, including atopy or immunodeficiency. – Identify, evaluate, and manage acute allergic and immunological conditions in children and adolescents and understand the initially required baseline laboratory and radiological investigations. – Recognize the importance of coordination care with other pediatric specialties and engage effectively with patients and families to provide proper counseling and support for them. – Identify the current medical advancements and guidelines in pediatric allergic and immunological diseases. 	Atopy	3
Primary Immunodeficiency			2	
Surgery (20%)	Basic Principles	<ul style="list-style-type: none"> – Recognize the clinical presentation, evaluate, and select appropriate management related, basic surgical principles. 	Surgical Infection and Antibiotics: Surgical Site Infection and Prevention	3
			Surgical Infection and Antibiotics: Infections of the Skin and Soft Tissue	3
			Anesthesia and Pain Management: Local and Regional Anesthesia	3
			Post-operative Complications: Postoperative Care	3

		Post-operative Complications: Postoperative Fever	3	
		Post-operative Complications: Thromboembolism	3	
		Fluids, Electrolytes, and Nutrition: Electrolytes and Acid Base Abnormalities	3	
		Surgical Infection and Antibiotics: Systemic Inflammatory Response	2	
		Wound Care: Wound Dressing	2	
		Anesthesia and Pain Management: Preoperative Evaluation	1	
		Wound Care: Wound Healing	1	
		Fluids, Electrolytes, and Nutrition: Nutrition in Surgical Patient	1	
	General Surgery	<ul style="list-style-type: none"> – Recognize the clinical presentation. – Diagnose and select appropriate investigation. – Apply guidelines of surgical management. – Recognize and manage different surgical complications related to general surgery. 	Breast: Breast Mass Approach	3
			Breast: Breast Cancer Screening	3
			Thyroid and Parathyroid: Complications of Thyroidectomy	3
			GIT: Upper GI Bleeding	3
			GIT: Peptic Ulcer Disease	3
			GIT: Perforated Viscous	3
			GIT: Bowel Obstruction	3
GIT: Lower GI Bleeding	3			

			GIT: Mesenteric Bowel Ischemia	3
			GIT: Appendicitis	3
			Hepatobiliary: Biliary Conditions	3
			Hernias: Inguinal Hernia	3
			Hernias: Ventral Hernias	3
			Subcutaneous Lesions: Necrotizing Fasciitis	3
			Vascular Surgery: Diabetic Foot	3
			Vascular Surgery: Acute and Critical Limb Ischemia	3
			Vascular Surgery: Compartment Syndrome	3
			Plastic Surgery: Burn	3
			Plastic Surgery: Bed Sore	3
			Breast: Nipple Discharge	2
			Thyroid and Parathyroid: Neck Mass Evaluation	2
			Thyroid and Parathyroid: Thyroid Nodule Approach	2
			GIT: GERD	2
			GIT: Colon Cancer	2
			GIT: Diverticular Disease	2
			GIT: Anorectal Conditions	2
			Hepatobiliary: Pancreatitis	2
			Breast: Benign Breast Disorders	1

		Thyroid and Parathyroid: Surgery for Hyperparathyroidism	1
		GIT: Surgical Management of Obesity	1
		Hepatobiliary: Liver Abscess	1
		Subcutaneous Lesions: Soft Tissue Mass	1
		Vascular Surgery: Abdominal Aortic Aneurysms	1
		Pediatric Surgery: Neck Mass	1
		Pediatric Surgery: Pyloric Stenosis	1
		Pediatric Surgery: Umbilical Hernia	1
		Pediatric Surgery: Undescended Testicle	1
		Pediatric Surgery: Hirschsprung Disease	1
		Pediatric Surgery: Intussusception	1
		Pediatric Surgery: Circumcision	1
		Plastic Surgery: Hand Infections	1
		Trauma and Acute Care Surgery	– Apply the concept of ATLS.
Life Threatening Injuries	3		
Chest Trauma	3		
Shock	3		
Abdominal Trauma	3		
Pelvic Trauma	3		
Head Trauma	3		

	Subspecialties	<ul style="list-style-type: none"> Recognize the principles of assessment and management of common surgical subspecialties problems. 	Urology: Acute Urinary Retention	1
			Urology: Testicular Torsion	1
			Urology: Hematuria	1
			Urology: Four nier's Gangrene	1
			Urology: Renal Colic	1
			Neurosurgery: Cerebrovascular Diseases	1
			Neurosurgery: Spinal Cord Compression	1
			Orthopedics: Open Fracture Treatment	1
			Orthopedics: Principles of Fracture/ Dislocation Management	1
			ENT: Epistaxis	1
			ENT: Foreign Body	1
			Ophthalmology: Red Eye	1
			Ophthalmology: leukocoria	1
			Ophthalmology: Ocular Trauma	1
Patient Safety, Preventive Medicine, & Ethics	Patient Safety	<ul style="list-style-type: none"> Describe how patient safety needs to be a major organizational or institutional goal demonstrated at the most senior levels. Identify opportunities for continuous patient safety culture improvements. Advocate for improvements in system processes to support continuous patient safety improvement. Demonstrate effective verbal and non-verbal communication skills to enhance patient safety. Identify how to discuss diagnosis, investigation and treatments clearly 	Effective Communication: Communication with Patient and Family	3
			Effective Communication: Inter-professional Communication	3
			Medications Safety	3
			Blood Transfusion Safety	3
			Radiation Safety	3
			Clinical Privileges	3

	<p>and comprehensively with patients and families, and confirm their understanding.</p> <ul style="list-style-type: none"> – Identify the communication skills in a manner that respects cultural diversity, cultural safety, and cultural humility. – Provide appropriately detailed and clear clinical documentation in the patient's health record. – Master patient care orders and prescriptions using evidence-based practices to reduce the risk of errors, including the use of approved abbreviations. – Use communication approaches that ensure clear and comprehensive information is provided in consultation requests and responses, investigative, operative, and other reports, and other correspondence. – Use technology to support safe communication (e.g. e-health records, electronic standardized order sets/protocols, alerts and monitoring). – Describe the different types of patient safety incidents (near miss, no harm, harm) and the response and disclosure approach that is appropriate to each type, in alignment with provincial regulations. – Identify the risk of harm to other patients who may also be affected by a patient safety incident. – Be aware of existing policies and procedures associated with disclosure and how these contribute to an organizational culture of patient safety. – Disclose the occurrence of a patient safety incident to the patient and/ or their family in a timely, empathetic, and culturally sensitive way. – Determine who is accountable for disclosure, who should be present when disclosure communications occur, how to disclose on behalf of 	Effective Communication: Patient /Community Education	2
		Surgical Safety	2
		Health Care-associated Infections	2
		Patient Identification Errors	2
		Diagnostic Errors	2
		Transitions of Care Errors (Handoff, Transfer, Discharge)	2
		Patient Empowerment	2
		Venous Thromboembolism Prophylaxis	2
		International Patient Safety Goals	1
		Continues Professional Development	1
		Institute of Medicine Quality Dimensions (Defines Quality, Domains of Quality)	1

		others, and who should be accountable for following up with the patient/family.		
Ethics	<ul style="list-style-type: none"> – Demonstrate a commitment to patients by applying best practices and adhering to the professional and ethical codes, standards of practice, and laws governing practice. – Identify and address ethical dilemmas faced in practice (such as delivering bad news, do-not-resuscitate orders, abuse, discharge against medical advice, and informed consent) by demonstrating suitable professional conduct. – Recognize the importance to treat the patient with dignity and respect the equal and inherent value of all patients. – Recognize the balance of potential benefits and harms associated with any medical act; act to bring about a positive balance of benefits over harms. – Respect the decisions of the competent patient to accept or reject any recommended assessment, treatment, or plan of care. – Accommodate a patient with cognitive impairments to participate, as much as possible, in decisions that affect them; in such cases, acknowledge and support the positive roles of families and caregivers in medical decision-making. – Exhibit professional behaviors in the use of technology-enabled communication. – Respect patient privacy and maintain confidentiality. – Recognize the importance of avoiding health care discussions, including in personal, public, or virtual conversations, that could reasonably be seen as revealing confidential or identifying information or as being 	Breaking Bad News	3	
		Patient Privacy	3	
		Confidentiality	3	
		Conflict of Interest	3	
		Sick Leave	3	
		Research Ethics	3	
		Social Media Practices/ Technology	3	
		DNR/DNI	2	
		Abuse (Spouse, Child and Elderly)	2	
		Abortion	2	
		Bullying and Abuse	2	
		Medico-legal Issues/Whistleblowing	2	
		Impaired Physicians	2	
		Informed Consent	1	
		DAMA	1	
		Death Certificate	1	
		Fertility Ethics	1	
Communications with Peers' Patients	1			
Second Opinions / Referral	1			

		<p>disrespectful to patients, their families, or caregivers.</p> <ul style="list-style-type: none"> - Recognize and manage conflicts of interest that may arise as a result of competing roles (such as financial, clinical, organizational, administrative, or leadership). - Ensure that any research is evaluated both scientifically and ethically and is approved by a research ethics board that adheres to current standards of practice. - Recognize the importance to treat colleagues with dignity and as persons worthy of respect. Colleagues include all learners, health care partners, and members of the health care team. - Recognize the importance of supporting the interdisciplinary team-based practices; foster team collaboration and a shared accountability for patient care. - Assume responsibility for personal actions and behaviors and espouse behaviors that contribute to a positive practice culture. - Recognize and respond to unprofessional and unethical behaviors in the health care professions. 										
	Preventive	<ul style="list-style-type: none"> - Demonstrate knowledge about the following concepts: the health status of populations, inequities in health, the determinants of health and illness, strategies for health promotion, disease and injury prevention and health protection, as well as the factors that influence the delivery and use of health services. - Apply policies and evidence-based guidelines for disease prevention and health promotion to individuals and/or communities. - List modifiable and nonmodifiable risk factors associated with the development of prevalent chronic conditions. 	<table border="1"> <tr> <td data-bbox="1122 1283 1419 1402">Lifestyle and Clinical Preventive Services: Preventive Cardiology</td> <td data-bbox="1419 1283 1549 1402" style="text-align: center;">3</td> </tr> <tr> <td data-bbox="1122 1402 1419 1587">Lifestyle and Clinical Preventive Services: Risk Factors for NCDs, Assessment and Modifications</td> <td data-bbox="1419 1402 1549 1587" style="text-align: center;">3</td> </tr> <tr> <td data-bbox="1122 1587 1419 1772">Lifestyle and Clinical Preventive Services: Disease Screening (Cancer, CVD, DM, HTN, Lipid)</td> <td data-bbox="1419 1587 1549 1772" style="text-align: center;">3</td> </tr> <tr> <td data-bbox="1122 1772 1419 1885">Lifestyle and Clinical Preventive Services: Exercise</td> <td data-bbox="1419 1772 1549 1885" style="text-align: center;">3</td> </tr> </table>	Lifestyle and Clinical Preventive Services: Preventive Cardiology	3	Lifestyle and Clinical Preventive Services: Risk Factors for NCDs, Assessment and Modifications	3	Lifestyle and Clinical Preventive Services: Disease Screening (Cancer, CVD, DM, HTN, Lipid)	3	Lifestyle and Clinical Preventive Services: Exercise	3	
Lifestyle and Clinical Preventive Services: Preventive Cardiology	3											
Lifestyle and Clinical Preventive Services: Risk Factors for NCDs, Assessment and Modifications	3											
Lifestyle and Clinical Preventive Services: Disease Screening (Cancer, CVD, DM, HTN, Lipid)	3											
Lifestyle and Clinical Preventive Services: Exercise	3											

<ul style="list-style-type: none"> – Develop a plan for management of lifestyle factors associated with prevalent chronic conditions at the population or community level. – Recommend lifestyle interventions to manage prevalent chronic conditions in patients. – Identify common methods for preventing the transmission of infectious diseases including reporting notifiable infectious diseases. – Identify the epidemiology, risk factors, prevention strategies, diagnosis, and treatment for infectious diseases of public health significance. – Identify common illnesses that may be caused or influenced by exposure to environmental hazards. – Recommend methods for reducing or eliminating exposure to environmental hazards and methods for addressing the health effects resulting from these exposures. – Demonstrate an understanding of the rationale and benefit of immunization, as relevant to the practice setting. – Demonstrate the ability to describe live attenuated, inactivated, and subunit immunizing agents and compare the major advantages and disadvantages of each of them. – Apply relevant principles of population health for improving immunization coverage rates. – Implement national guidelines when storing, handling, or transporting vaccines. – Recognize how to prepare and administer immunization agents correctly. – Record an immunization encounter on the appropriate documentation instruments accurately and completely. – Describe the unique immunization needs of certain populations, as relevant to the practice setting. – Recognize and interpret common statistical concepts and tests. 	Lifestyle and Clinical Preventive Services: Smoking	3
	Infectious Diseases: Mode of Transmission	3
	Infectious Diseases: Vaccination and Prophylaxis	3
	Immunization: Child	3
	Epidemiology/Biostatistics: Measures of Disease Frequency (Incidence, Prevalence)	3
	Epidemiology/Biostatistics: Types of Study Design and Selection of Studies	3
	Epidemiology/Biostatistics: Measures of Association (Relative Risk, Odds Ratio)	3
	Lifestyle and Clinical Preventive Services: Obesity	2
	Lifestyle and Clinical Preventive Services: Nutrition	2
	Lifestyle and Clinical Preventive Services: Sleep Health	2
	Lifestyle and Clinical Preventive Services: Travel Health	2
	Infectious Diseases: Indicators (Attack Rate, Case-fatality Rate, Reportable Diseases)	2
	Infectious Diseases: Outbreak Investigation	2

	<ul style="list-style-type: none"> – Identifies sources of data and common measures for descriptive epidemiology. – Calculate measures of disease frequency and excess risk for a specified disease or condition. – Recognized the guidelines necessary for the successful implementation of screening programs. – Use data to characterize the health of a local population and compare it with that of other populations. – Describe the steps of a cluster or outbreak investigation. – Describe how a response to a public health emergency is organized through the collaboration of multiple stakeholders. 	Immunization: Special Groups	2
		Epidemiology/Biostatistics: Measures of Health Status (Mortality and Morbidity Rates e.g. Maternal Mortality, Neonatal/Infant/Under-5 Mortality)	2
		Epidemiology/Biostatistics: Surveillance	2
		Epidemiology/Biostatistics: Levels of Prevention	2
		Epidemiology/Biostatistics: Interpretation of Study Results (Causality, Chance, Confounding, Bias)	2
		Immunization: Adult	1
		Immunization: Herd Immunity	1
		Epidemiology/Biostatistics: Principles of Screening (Validity, Test Parameters, Criteria for Screening Test)	1
		Epidemiology/Biostatistics: Distribution of Data (Measures of Central Tendency and Variability)	1
		Epidemiology/Biostatistics: Correlation and Regression	1

Note:

1. Blueprint distributions of the examination may differ up to +/-5% in each category.
2. See the SCFHS website for the most up-to-date information.
3. As a validity measure, items are further classified to ensure they sample various dimensions of care and physician activities. Definitions of these aspects can be found below.

Definitions

Dimensions of Care: Focus of care for the patient, family, community, and/or population

Health Promotion and Illness Prevention

The process of enabling people to increase control over their health and its determinants, and thereby improve their health. Illness prevention covers measures not only to prevent the occurrence of illness, such as risk factor reduction, but also to arrest its progress and reduce its consequences once established. This includes, but is not limited to screening, periodic health exam, health maintenance, patient education and advocacy, and community and population health.

Acute

Brief episode of illness within the time span defined by initial presentation through to transition of care. This dimension includes but is not limited to urgent, emergent, and life-threatening conditions, new conditions, and exacerbation of underlying conditions.

Chronic

Illness of long duration that includes but is not limited to illnesses with slow progression.

Psychosocial Aspects

Presentations rooted in the social and psychological determinants of health and how these can impact on wellbeing or illness. The determinants include but are not limited to life challenges, income, culture, and the impact of the patient's social and physical environment.

Physician Activities: Reflects the scope of practice and behaviors of a practicing clinician

Assessment/Diagnosis

Exploration of illness and disease using clinical judgment to gather, interpret and synthesize relevant information that includes but is not limited to history taking, physical examination and investigation.

Management

Process that includes but is not limited to generating, planning, organizing safe and effective care in collaboration with patients, families, communities, populations, and other professionals (e.g., finding common ground, agreeing on problems and goals of care, time and resource management, roles to arrive at mutual decisions for treatment, working in teams).

Communication

Interactions with patients, families, caregivers, other professionals, communities and populations. Elements include but are not limited to relationship development, intraprofessional and interprofessional collaborative care, education, verbal communication (e.g. using the patient-centered interview and active listening), non-verbal and written communication, obtaining informed consent, and disclosure of patient safety incidents.

Mastery levels

- 1** ○ Knowledge, skills, and procedures that candidates must have some understanding.

- 2** ○ Knowledge of which candidate must have a good practical understanding.
○ Skills and procedures with which candidates should have assisted, and have good practical knowledge.

- 3** ○ Core knowledge that candidates must be able to demonstrate understanding.
○ Skills and procedures that candidates must be able to perform autonomously.

References and Exam Preparation Resources

Section	Textbooks
Medicine	<ul style="list-style-type: none"> • Toronto Notes Canadian Ed Edition, Yingming A. Chen. • Davidson's Principles And Practice Of Medicine. Brian R. Walker Bsc MB Chb MD FRCPE FRSE Fmedsci. • Harrison's Principles Of Internal Medicine. Dennis L. Kasper M.D., Anthony S. Fauci, Stephen L. Hauser M.D, Dan L. Longo M.D, J. Larry Jameson M.D, And Joseph Loscalzo. • Parveen Kumar , Michael Clark. Kumar And Clark's Clinical Medicine.
Obstetrics And Gynecology	<ul style="list-style-type: none"> • Hacker And Moore's Essentials Of Obstetrics And Gynecology. Neville F. Hacker, MD, Joseph C. Gambone, DO, MPH, Executive Editor And Calvin J. Hobel, MD, . • Current Diagnosis And Treatment Obstetrics And Gynecology. Alan H. Decherney, Lauren Nathan, T. Murphy Goodwin, Neri Laufer And Ashley S. Roman, • Gynaecology By Ten Teachers, Value Pak. Louise Kenny, Helen Bickerstaff And Jenny Myers. • Llewellyn-Jones Fundamentals Of Obstetrics And Gynaecology Edition. Jeremy J N Oats, MBBS, DM, FRCOG, FRANZCOG And Suzanne Abraham, Msc, Phd(Med), MAPS.
Pediatrics	<ul style="list-style-type: none"> • Pediatrics For Medical Students. Daniel Bernstein, Steven P. Shelov MD, MS. • Nelson Essentials Of Pediatrics. Karen Marcdante MD, Robert M. Kliegman MD. • Illustrated Textbook Of Pediatrics. Tom Lissauer, Will Carroll.
Surgery	<ul style="list-style-type: none"> • Current Surgical Therapy. John L. Cameron, Andrew M. Cameron.

	<ul style="list-style-type: none"> • Bailey And Love's Short Practice Of Surgery. Norman Williams, Christopher Bultrode And P Ronan O'Connell. • The Mont Reid Surgical Handbook: Mobile Medicine Series. The University Of Cincinnati Residents And Amy Makley.
<p>Patient Safety, Preventive Medicine, and Ethics</p>	<ul style="list-style-type: none"> • Patient Safety Curriculum Guide. Geneva: World Health Organization. Walton, M. • Epidemiology, Biostatistics, Preventive Medicine, And Public Health. Katz D, Jekel J, Elmore J, Wild D, Lucan S. Jekel's • U.S. Preventive Services Task Force: Guide To Clinical Preventive Services. • Professionalism And Ethics Handbook For Residents Practical Guide. Al Kaabba F. Abdulaziz, Hussein MA Ghaiath, Kasule H. Omar. SCFHS.

***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 from these sources.

Efficiently healthy society

