SAUDI BOARD FINAL CLINICAL EXAMINATION

ANESTHESIA

General Information	
Exam Format	-The final clinical/practical examination shall consist of 6 graded stations, each with **(10)** minute encounters. - You will encounter **1-2** examiners in each station.
Conduct of Evaluation	
Station Information	- The 6 stations consist of **(1)** Objective Structured Clinical Exam (OSCE) station and **(5)** Structured Oral Exam (SOE) stations. -All stations shall be designed to assess integrated clinical/practical encounters. -Domains and sections may overlap, and more than one category can be evaluated within a station. -Each station may address one or more cases or scenarios. -SOE stations are designed with preset questions and ideal answers. -A scoring rubric for post-encounter questions is also set in advance (if applicable).
Time Management	-The examiner is aware of how much material needs to be covered per station, and it is their responsibility to manage the time accordingly. -The examiner will want to give you every opportunity to address all the questions within the station. -They may indicate that "in the interests of time, you will need to move to the next question." This type of comment has no bearing on your performance. It is simply an effort to ensure that you complete the station. If you are unclear about something during the station, ask the examiner to clarify. -Some stations may finish early – if this occurs, the examiner will end the encounter.
Examiner Professionalism	-The examiners have been instructed to interact with you professionally − don't be put off if they are not as warm and friendly towards you as usual. -We recognize this is a stressful situation, and the examiner is aware that you are nervous. If you need a moment to collect your thoughts before responding, indicate this to the examiner. -The nomination of examiners is based on the principle that candidates are assessed by qualified examiners selected and appointed by SCFHS. The examiner is not obligated by any means to share their personal information or professional details with the candidate.
Conflicts	-The examiners come from across the country. You will likely recognize some of them and may have worked with some of them in your center's clinical/academic capacity. This is completely acceptable to the SCFHS and is not a conflict unless you or the examiner perceive it as such (i.e., if the examiner had a substantial contribution to your training or evaluation, or if you have another personal relationship with the examiner). -Identify the conflict at the moment of introduction; examiners have been instructed to do the same. Examiners will alert the SCFHS staff – every attempt will be made to find a suitable replacement for the station.
Confidentiality	-Electronic devices are NOT permitted. -Communication with other candidates during the evaluation is prohibited.

Examination Content	
Sections	-The examination will cover **6** or more of the following sections:

1.	Core Anesthesia
2.	Medical Disorder and Anesthesia
3.	Critical Care Medicine
4.	Cardiac / Thoracic and Vascular
5.	Pain Management and Regional Anesthesia
6.	Pediatric Anesthesia
7.	Obstetric Anesthesia
8.	Neuro-Anesthesia
9.	Crisis Management

General Information	
Results	Results will be published within 14 business days following the last date of your examination.

Definition of Clinical/Practical Skill Domains	
Domain	**Definition**
Data-Gathering Skills	Defined as: the candidates' ability to obtain and identify important information, correlate the clinical data to recommend appropriate testing. It includes interviewing and history taking.
Reasoning and Analytical Skills	Defined as: the candidates' ability to rationalize recommended effective management plans, evaluate alternative plans, recognize indicators to different appropriate treatments based on relevant, correct clinical data interpterion.
Decision-Making Skills	Defined as: the candidates' ability to formulate a logical diagnosis, identify immediate needs, and make accurate inferences regarding the expected outcomes. It includes recognizing potential complications, risks, and benefits.
Professional Attitude	Defined as the commitment to deliver the highest standards of ethical and professional behavior in all aspects of health practice. Attitudes, knowledge, and skills based on clinical &/or medical administrative competence, ethics, societal, & legal duties resulting in the wise application of behaviors that demonstrate a commitment to excellence, respect, integrity, accountability & altruism (e.g. self-awareness, reflection, life-long learning, scholarly habits, & physician health for sustainable practice).

Note: - The content is subject to change at any time. See the SCFHS website for the most up-to-date information.