Australasian Faculty of Occupational & Environmental Medicine Guidance for responding to the Stage B written examination Answer the question!

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If you are a candidate for the AFOEM Stage B written examination, this guide is for you.

In order to pass an examination question, you must answer it. This may seem to you like a self-evident, obvious truth but, in the intense pressure of an examination, it is something that many past candidates have *not* done – with consequent lack of success.

Here I suggest an approach to questions asked of you in the Stage B written examination. Firstly, though, a brief word on how the questions are prepared.

Where do the questions come from?

Fellows of AFOEM write the questions for you. They do this in pairs and in so doing they borrow experiences from their own recent practice. Each question is framed within a handful of learning objectives of the AFOEM training curriculum. When a question is written, it is submitted to the Assessment Committee who check that it is fair and unambiguous. The Committee also checks that the spread of questions in the whole examination makes up a reasonable sample of all curricular learning objectives relevant to Stage B.

Timing - a 20/20 rule

Each examination paper allows 180 minutes (three hours) of writing time. There are five questions which means you have 36 minutes per question. Allowing time to re-read the question, plan your response to the question, hesitate a little and do a bit of crossing-out, there will be about 20 minutes left for effective writing.

Each question is worth a maximum of 20 marks so, to gain full marks, what you write must earn a mark per minute.

How much can you write in a minute? A reasonable maximum is about 20 words, in order to form your letters correctly and to use dot-points.

In summary: A maximum of 20 marks per question; a maximum of 20 words per mark.

Use of the reading time

You will have fifteen minutes to read through the examination paper but without writing, notating or highlighting anything. Thus the time to peruse each question is on average three minutes. I here offer a way that you may use this time to activate your thinking.

Most questions start with a scenario. Read the scenario and just the *first* of the parts to the question. Cover the other parts and, for 45 to 60 seconds, imagine what your examiners will ask in those other four questions. Then uncover the questions and see what is actually asked of you. Taking this active step – instead of just passively reading the question – will assist you to take a 'helicopter view' of the question overall. It uses your ability to *anticipate* – a springboard to thrust you into planning your response to the question, to which you'll return later when you have a pen in your hand.

Writing your responses

Realise that what you write is part of an intimate process. For any individual question, you are responding to just two examiners – usually two people that have sat in the same situation as you some years before. It is like talking with two colleagues about how you would handle a problem. Part of showing respect for these colleagues is to make a sincere effort to understand the problem they have presented and to respond with clarity and focus. Of course, in any form of communication under stress, words may not come in an easy way. Hence this guide.

Your examiners want to test your knowledge of a particular topic but, *more importantly*, to find out **how well you can apply your knowledge to address a practical situation**.

So, let's start with Question 1. Read the scenario and Part A. Let's say that this relates to a worker's return to work. Your mind will immediately flood with all you know about return to work. But, wait! Your examiners have *not* asked you to reveal all you know about return to work. Instead, your examiners have asked you to *apply what you know* to the practical situation of a 24 year old mine worker who has required a series of operations for a severe arm injury sustained in terrifying circumstances and who, before his injury 18 months ago, serviced heavy machinery in a coal mine on a 12 hour shift roster.

With a highlighting pen, highlight on the question paper the key words in the scenario and question. Your actual choice of words to highlight will be based in part on what question you are asked and in part on your own experience of similar situations in your occupational health practice. This highlighting faces you with features of central importance to your answer, i.e. what you must write to show your examiners that you can competently handle this situation. It also helps you recognise what is of less importance and what can be deliberately omitted from mention.

Then make a quick plan using your own shorthand on a left-hand page of the answer book (or wherever else you consider appropriate) to remove it from consideration by your examiner.

Then write your answer. Aim to help your examiner to understand your message. In writing, form your letters well. This is particularly important if your spelling is weak or if you use abbreviations. The combination of ill-formed letters plus poor spelling won't reliably convey a clear message.

Where appropriate – and it usually is – use dot points, and sometimes tables and graphs to respond to a question. Writing four or five lines of prose may be appropriate to give an explanation or to amplify some point, but dot points will usually provide a crisper message and, when you read through your response after writing it, will make it easier for you to see that you have made all the points you want to make.

As you consider the subsequent parts of the question, realise that some of what you want to say may be part of an appropriate response to another part of the question. If it's more than half a dozen words, don't write it twice. Work out where it fits best and put it there.

After writing each question-part and again at the end of the question, read through what you have said to ensure that it is clear and conveys what you want it to.

What if you haven't got a clue?

It's unlikely you'll have *no* clue. Given that you have worked in occupational medicine, have attended educational meetings and courses and are familiar with the curriculum, it would be most unlikely for you to feel clueless about a whole question. A far more likely situation is that some substance name, some form of investigation or treatment, some physical sign, some hygiene procedure, some statistical test or the name of some model of safety or environmental risk management is unfamiliar or vague in your mind.

Take a deep breath. There may be ways that you can work out the unfamiliar or vaguely-understood word from its context in the question, or by knowing the properties of similar substances, procedures or statistical tests. Realise that not knowing this may limit what you can say in regard to one particular part of the question, but it will not crush your performance.

But *don't* indulge in bullshit. It is actually OK to tell your examiners "I am not familiar with this [whatever] but, given the context, I would deal with this situation as follows ..." At least this shows that you understand your limitations yet are prepared to act. However, if you pretend you know what the thing is and you are wrong, then your examiners will seriously doubt your professionalism.

Use of abbreviations

Abbreviations can help you to save time, but use common ones. Abbreviations such as Hx (history), Ix (investigations), RTW (return to work), PTSD (post-traumatic stress disorder), TWA (time-weighted average), SCC (squamous cell carcinoma), BCC (basal cell carcinoma), CNS (central nervous system), LFTs (liver function tests), DNA (deoxyribonucleic acid), UV (ultraviolet), CEO (chief executive officer), GP (general practitioner) will be readily understood by examiners if you form your letters properly. However, the acronym for a New Zealand government authority may be unfamiliar to Australian examiners and vice versa, and any misunderstanding may cost you a mark.

So, let's now work out an approach to a question. I shall divide the response into:

- What to do in the reading time
- Planning your response
- Writing your response

Example question

What to do in the reading time

Approach: Read the opening scenario and the Part A question. For a few tens of seconds, cover the subsequent part of the question, based on your experience in similar situations, imagine what you may find there.

You, as a consultant Occupational and Environmental Physician, have been asked to conduct an independent fitness for duty assessment of Mr David Young, a 24-year-old coal mine service worker.

Mr Young has been working in his current role for four years, and his role involves the following:

- · Rotating 12 hour shift roster, including night shifts.
- Workshop and field based servicing and maintenance of heavy mobile machinery, such as dump trucks and dozers.
- Frequent manual handling of 5-10 kg, occasional manual handling up to 15 kg.
- · Frequent forward reaching and occasional overhead activity.
- Use of cranes and team lifts for heavier lifting.

Approximately 18 months ago, Mr Young was a front seat passenger in a service vehicle (utility) being driven by a co-worker at the mine site. The vehicle collided with heavy mobile machinery and became entrapped under the mobile equipment and it took some time for both workers to be extricated.

Mr Young sustained an open comminuted intra-articular distal humeral fracture of his left (non-dominant) arm. He had multiple surgeries over about twelve months. He underwent extensive post-operative exercise rehabilitation, and has been assessed to be at maximal medical improvement.

Mr Young's Orthopaedic Specialist anticipates progression to elbow joint post-traumatic arthritis in the long term, and has advised Mr Young to limit heavier lifting to limit the rate of progression of arthritis. Mr Young has a 25-50% likelihood of requiring left elbow joint replacement within the next 20 years, which would restrict him to sedentary activity thereafter, in order to protect the joint implant.

Mr Young's employer has asked you to see Mr Young prior to his return to work, to provide advice regarding his return to work.

A. Outline what is required in a rehabilitation program (actions you would take and recommendations you would provide) in order to facilitate a successful return to work for Mr Young.

So, what may you anticipate will be in the other question-parts?

This question concerns obtaining the return to work of a young shift-worker with a severe injury to his non-dominant arm under terrifying circumstances. He has been off work for 18 months. The initial question is about a return-to-work plan.

You may anticipate that the other parts of the question could relate to:

- Maybe return to work on modified duties but some physical or emotional difficulties arising.
- Maybe some issue about the job description and the inherent duties of the job.
- Maybe a failed return to work and need for negotiation and modification of return to work plan.
- Maybe some difficulties with the insurer.
- Maybe some difficulties with others in his work team.

- Maybe concerning re-training and his fitness for alternative duties.
- Maybe the need for further treatment for his physical or emotional condition.

Such ideas may come to your mind. Then you uncover the other questions to see what is actually required of you.

You find that the scenario develops further and that the other questions are (in summary):

- **B**: After three months RTW on non-field duties, the employer seeks a review with regard to the worker's future.
- C: An alternative role has been offered but requires re-training. Could he safely do it?
- **D**: Your assessment reveals delayed-onset PTSD. He commences treatment for this. Could he return to field duties?
- E: What is his longer term outlook and what interventions could optimise his employability?

You realise that some of what you anticipated is indeed asked and, of course, some isn't. However, your having taken that **active** step of anticipation will sharpen your overall view of the question and, subconsciously, will trigger your ability to plan your response when you return to that question during the three-hour writing period.

Planning your response

We now move to when you come to this question during the writing period. Read the question again (you have already read it once during reading time). Then take two steps:

- With a highlighting pen, highlight the words that seem to you to be important.
- On the left hand page, jot quickly in your own shorthand what you want to include. This is simply an 'aide-memoir' it is a brief plan to serve your own purposes.

We'll take one question-part at a time, starting with the opening scenario and Part A.

Highlighting

You, as a consultant Occupational and Environmental Physician, have been asked to conduct an independent fitness for duty assessment of Mr David Young, a 24-year-old coal mine service worker.

Mr Young has been working in his current role for four years, and his role involves the following:

- Rotating 12 hour shift roster, including night shifts.
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Mr Young sustained an open comminuted intra-articular distal humeral fracture of his left (non-dominant) arm. He had multiple surgeries over about twelve months. He underwent extensive post-operative exercise rehabilitation, and has been assessed to be at maximal medical improvement.

Mr Young's Orthopaedic Specialist anticipates progression to elbow joint post-traumatic arthritis in the long term, and has advised Mr Young to limit heavier lifting to limit the rate of progression of arthritis. Mr Young has a 25-50% likelihood of requiring left elbow joint replacement within the next 20 years, which would restrict him to sedentary activity thereafter, in order to protect the joint implant.

Mr Young's employer has asked you to see Mr Young prior to his return to work, to provide advice regarding his return to work.

A. Outline what is required in a rehabilitation program (actions you would take and recommendations you would provide) in order to facilitate a successful return to work for Mr Young.

Your own quick plan

C'cate – RTW coord.

Job – inherents, extreme demands

Confidntl but involve stkhlders

RTW plan – tasks/hrs/new skills/assess progress/reviews

RTW after 18/12 – issues – deconditioned, emotnl

Scary cause of injury → fear. ∴ c'cate hlth benefits work

?Job has changed

Move to Part B.

Highlighting

Mr Young is referred to you by his employer for review after he has been back at work for three months. He has resumed workshop- based duties.

The employer's Rehabilitation Coordinator reports in the referral that Mr Young has not been able to sustain a return to field-based tasks.

Mr Young's employer has requested your opinion in regards to Mr Young's current and longer-term work capability.

B. Outline the information you would obtain at this review, in order to provide this advice. (4 marks)

Your own quick plan

What employer said in wkr referral Wkr view of progress/what's he doing Assess functn
Ask treaters about present and future What employer can accommodate

Move to Part C

Highlighting

At review, Mr Young reports ongoing left elbow pain which increases through his work shift.

Mr Young had intended to apply for the role of mine diesel fitter, which involves using power tools, lifting 10 - 15 kg frequently and up to 30 kg occasionally. He doesn't think he could cope with such work now, and he doesn't have any ideas regarding an alternative career path.

Your examination findings at review include mildly restricted left elbow motion and grade 4/5 strength left biceps and left triceps, unchanged from your findings at assessment four months previously.

Recent functional testing indicated that he has a safe maximal lifting tolerance of 15 kg occasional and 7.5 kg frequent.

C. Comment on Mr Young's <u>current</u> fitness for duty and his likely fitness (4 marks) to safely work as a diesel fitter, with reference to relevant aspects of the above history and examination findings.

Your own quick plan

Is FFW in present role based on Hx & Exam Not fit for Diesl Fitr as described Wkrs perception Func capacity unlikely to improve Heavy work $\rightarrow \uparrow$ risk deteriortn. [note that there is some possibility of potential overlap between your answer here and your answer to Part E]

Move to Part D and.

Highlighting

At review, Mr Young reports hypervigilance, high anxiety and intrusive recollections of the accident when he travels in a work vehicle around the mine site.

He reports poor sleep and reduced social interaction. He has been absent from rostered fieldwork shifts. He has not been able to tolerate a return to field duties because of an aversion to travelling in vehicles around the mine.

Following your assessment, a diagnosis of delayed onset Post-Traumatic Stress Disorder (PTSD) is confirmed by a Consultant Psychiatrist.

D. Once Mr Young has commenced appropriate therapy for PTSD, outline how a return to field duties could be planned and implemented as part of Mr Young's rehabilitation program. (4 marks)

Your own quick plan

Employer needs to know FFW on PTSD Rx Trial of field wk Graduated return with review – buddy/support on site Involve treaters ? fluctuating capac initially – good/bad days

Move to Part E

Highlighting

E. What would you advise Mr Young's employer with regards to Mr Young's fitness to safely perform the inherent requirements of his current role in the longer term, and any workplace measures or interventions that would assist in maximising his employability?

Your own quick plan

Heavy work → ↑ risk deteriortn. elbow → affect safety
∴ limits on weights/frequency
If elb replacmt → sedent duty
Modif wk at present
Career guidance
PTSD Rx and symptoms
Liaison treaters

Writing your response

I shall not here repeat the scenarios but merely state each question-part in turn and offer a response to the examiners based on the quick plans already shown. Note the use of dot points and that, by planning a response to each question-part, you can economise on the words that you use whilst still demonstrating your understanding of the situations and showing your examiners how you would act.

- A. Outline what is required in a rehabilitation program (<u>actions you would</u> (4 marks) take and recommendations you would provide) in order to facilitate a successful return to work for Mr Young.
 - Establish communication with RTW co-ordinator.
 - Find out inherent requirements of job and anything especially arduous.
 - Possibilities for alternative and modified duties. Workplace visit may assist.
 - Decide stakeholders (employer, treaters, insurer) and involve ethically (appropriate confidentiality)
 - Develop RTW plan including tasks, hours of work, new skills needed. Aim for gradual integration. Monitor progress.
 - Issues: he possibly lacks physically. Also address mental issues assoc. with nature of accident causing injury. Also, job may differ from 18/12 ago.
- B. Outline the information you would obtain at this review, in order to provide this advice. (4 marks)
 - Patient's history of functioning at work, associated symptoms and why difficulties with field-based tasks.
 - Physical exam for pain free range of motion, strength. Refer for functional capacity assessment.
 - With consent, explore functioning, field problems with employer representative (supervisor, manager).
 - With consent, discuss long-term capacity with orthopaedic specialist.
 - Obtain impression of employer's willingness to continue with rehabilitation and possibilities for re-training and other duties within the company.

- C. Comment on Mr Young's <u>current</u> fitness for duty and his likely fitness (4 marks) to safely work as a diesel fitter, with reference to relevant aspects of the above history and examination findings.
 - History and examination suggests he is currently fit for present (alternative) duties albeit with some pain.
 - His recovery has plateaued and his functional capacity seems unlikely to improve further.
 - He is not fit as diesel fitter nor is ever likely to be while heavy lifting is required.
 - He perceives he lacks the capacity to be diesel fitter. This perception is supported by functional testing and by opinion of orthopaedic specialist that heavy work will risk deterioration in elbow.
- D. Once Mr Young has commenced appropriate therapy for PTSD, outline how a return to field duties could be planned and implemented as part of Mr Young's rehabilitation program. (4 marks)
 - With consent and appropriate attention to confidentiality, supervisor and others in his treatment team should be appraised of the PTSD and its likely effects on work.
 - With authorisation of treaters and at appropriate time, suggest trial of field-based work.
 - Then gradual introduction of this work with straightforward activities first.
 - Offer field support, i.e. buddy, at least initially.
 - Employer should know there is likely to be gradual gains but may be ups and downs.
 - Exit plan if unsatisfactory.
- E. What would you advise Mr Young's employer with regards to Mr (4 marks) Young's fitness to safely perform the inherent requirements of his current role in the longer term, and any workplace measures or interventions that would assist in maximising his employability?
 - His physical capacity is likely to diminish long-term and will be aggravated by very heavy work.
 - If arthritis advances, elbow replacement may be needed. Then no heavy strains can be tolerated.
 - May require modifications to work based on periodic review of work capacity.
 - Long term plan may involve alternative career path vocational guidance useful for that
 - Long-term outlook may be affected by efficacy of PTSD management.
 - If future work plan to be documented, treaters should be involved.

Now read back over what you have written to make sure that it is clear and that it is what you intended to write.