

► 2005 COP Exams - Palmerston North

The examination this year has been changed to include multiple choice questions instead of the previous general viva. The examination committee made the change as it was felt that the format of the viva added little to the examination, the viva questions were little more than written questions read aloud to the candidate. It was also felt that the move to a multiple choice format would free up examiner time and enable the examination process to be shortened.

The use of multiple choice questions does allow time for the examiners to practice the clinical scenario and removes the subjective nature of the viva questions. In the past candidates have felt the examination team the candidate was sent to influenced the outcome of the examination.

The multiple-choice questions have added an increased depth to the examination and will require are more through understanding of the material by candidates.

The examinable subjects however have not changed and remain as those previously distributed.

The change format for the examination included the random allocation of candidates to the examination team with candidates performing the draw themselves, the presence of an independent non-examining board member and the use of professional secretarial services.

The presence of the independent Board member provided an independent opinion on matters relating to the examination.

Results

A total of 10 candidates sat the examination.

Overall pass 5 candidates.

Machine check  
9 candidates  
8 candidates passed.

Multiple choice.  
9 candidates  
9 candidates passed

Clinical Scenario and equipment viva  
9 candidates  
5 candidates passed

The Machine Check

The examination committee is pleased with the overall pass rate and standard for the machine check.

However the committee is concerned that candidates are simply learning the check by rote. Many candidates did not appear to have a clear understanding of what they were actually checking. This became clear in the equipment viva were the candidate was asked about separate parts of the machine

check. Many candidates had little idea of how to check separate machine items.

**Supervisors of training must stress to candidates that it is not enough to be able to check a machine by rote and that the basis of the check must be understood. The examination will continue to include aspects of the machine check in the equipment viva.**

#### The Multiple Choice

The multiple choice questions included questions from all areas ,equipment, machine check, sterilisation, safety and clinical subjects.

The questions were both multiple choice and true/false. The multiple choice questions will be reviewed as part of an ongoing improvement of this section of the examination.

Despite candidates stating how difficult the questions were the pass rate (100%) was very pleasing.

#### Clinical Scenario

Overall the standard was high.

Failure in the scenario was usually due to failure to perform adequately in a rapid sequence induction or a breach in universal standards that the committee felt put the candidate or patient at risk.

Of concern to the examiners was:

That Candidates should read and adhere to the NZATS Standards of practice.

Failure to dispose of used single use items

All used consumable (disposable items) should be discarded between patients.

**Trainees and Supervisors should note that for further examinations**

**IT WILL NO LONGER BE ACCEPTABLE TO FLUSH THE PATIENT SUCTION TUBING. SUCTION TUBING MUST BE CHANGED BETWEEN PATIENTS.**

Also of concern was:

A persistent failure to check for suxamethonium,

A failure to position the patient,

Little or no attention to patient warming.

#### Equipment Viva

Most candidates performed well. For the first time candidates were asked to perform sections of the machine check. This did high-light some inadequacies in the understanding of the machine check.

It was of concern that when asked to give examples of safety features of the modern anaesthesia machine there was no mention of O<sub>2</sub> alarms antihvnoxic devices etc. Many basic machine safety items



were neglected.

Candidates must not confuse capnography with gas analysis. Many candidates did not recognise that capnography refers only to the graphic display of the CO<sub>2</sub> trace.

Few candidates could answer questions relating to electrical safety.

Andrew Warmington  
Chairman Examination Committee