

ANATOMY OF THE ORAL EXAM

- TWO EXAMINERS/EXAM ROOM
  - ONE GIVES THE SCENARIO
  - ONE RECORDS THE EVENTS
- TWO SCENARIOS
- NO EXTRAS ALLOWED-NOTE PAD AND PEN PROVIDED FOR YOU
- YOU WILL NOT GET FEEDBACK ON PERFORMANCE
- NOT ALLOWED TO DISCUSS THE EXAM
- LOOKING FOR PATIENT SAFETY
- BE SAFE IN RECOMMENDED THERAPY

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## **ANATOMY OF THE SCENARIO**

- PRESENTATION
  - TAKE NOTES
  - LOOK AT NOTES
- · TAKE A HISTORY
  - RECOMMEND TREAT EXAMINER LIKE THE PATIENT
  - CHIEF COMPLAINT
  - ALLERGIES
  - · REVIEW OF SYSTEMS

**THERE ARE ALWAYS PHOTOS** 

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## **ANATOMY OF THE SCENARIO**

- DEVELOP A PLAN SYSTEMATICALLY
  - LOOK FOR DANGERS AND LIFE THREATENING CONDITIONS FIRST. IT WILL BE IN THE HISTORY
  - ADDRESS THE CHIEF COMPLAINT
  - TREATMENT PLAN SHOULD BE COMPREHENSIVE
- ORGANIZE YOUR THOUGHTS
  - TAKE 20 SECS TO JOT DOWN KEY ITEMS
  - PRESENT THEM IN ORDER OF IMPORTANCE
    - 1. CRITICAL HEALTH INTERVENTIONS
    - 2. SURGICAL PLAN
    - Z. JUNGICAL PLA

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## LOOK FOR DANGERS AND PITFALLS

- KOCHER GB INCISION = ABDOMINOPLASTY SLOUGH
- LOWER LID LAXITY = ECTROPION
- KNOW YOUR ACLS THERE WILL BE A MEGACODE
- DO NOT LET THE PATIENT PUSH YOU TO DO SOMETHING WRONG, EVER

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## **DEVELOP YOUR PROTOCOL**

ANSWER EVERY QUESTION IN THE SAME WAY EVERY TIME

- PRESENTATION TAKE NOTES
- TREAT EXAMINER LIKE THE PATIENT WHEN GATHERING DATA
  - SAVES TIME
- ASK FOR THE PHOTOS
- LOOK FOR CRITICAL SAFETY INTERVENTIONS

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