Is Support Waning for the ABR Core Exam?

A Survey of the Association of Program Directors in Radiology

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Introduction

- In 2013, radiology qualifying exam format changed from traditional written and oral based testing to a computer based, multiple choice examination – the Core Exam.
- We asked Program Directors to evaluate the new exam format as it relates to trainee preparedness and performance.
Methods

- A survey based questionnaire (SurveyMonkey) was distributed via email to all current members of the Association of Program Directors in Radiology.
- The survey consisted of six total statements which were ranked on a 5 point Likert scale ranging from strongly disagree (1) to strongly agree (5).
- Program directors were given 4 weeks to complete the survey with a reminder one week prior to survey closure.
- Statistical analysis was performed using a Wilcoxon Signed Rank test.
Results

- Of the 331 active APDR members who received a request to complete the survey, a total of 95 did so, for a response rate of 29%.

- Statement responses are as follows:
Statement 1: **Relative to the residents in the oral boards era, the core examination is effective in preparing residents for clinical practice.**

Notable free form responses:

- “Oral boards better evaluated what radiologists do on a daily basis: find pathology, formulate a differential, establish a diagnosis, and/or recommend next appropriate steps. Hard to replicate that with multiple choice questions.”

- “The core exam is not a basic competency exam. The old format was practical and proven. The other specialties under the ABR have kept the oral exam which is ironic.”
Statement 2: Relative to the oral boards era, I feel that the content residents are studying in their preparation for the core examination is essential to becoming a competent diagnostic radiologist.

Notable free form responses:

- "Radiologists need to prepare to practice Radiology, which means interpreting images on the spot and discussing findings with the patient's referring doctor."

- "There are a lot more test taking strategies taught like how to take multiple choice questions which really have no relevance to daily radiology practice"
Statement 3: Relative to the oral boards era, I feel that resident preparation for the core examination is focused more on learning the necessary information to pass the exam than on actually learning radiology.

Notable free form responses:

- “I tell residents we have 2 curricula: one to prepare for the Core and one to make them great practicing radiologists. Cases in practice don't come with multiple choice answers.”

- "Residents definitely study so that they pass the exam. They don't learn as much radiology. Recalls are not going to make them competent. Studying for oral boards made them competent. We should stop this right now and go back to the orals."
Statement 4: Relative to their use on previous ABR examinations, recalls are prevalent in resident preparation for the core examination.

Notable free form response:

- "The ABR repeats too many questions, which makes knowledge of prior questions a key factor in passing the exam. This has been the case for over two decades. While the case sets for the oral exams were also recalled and distributed, the examiner could change the assessment to match the candidate."
Statement 5: Relative to the residents in the oral boards era, the core examination is effective in ensuring public trust with competent diagnostic radiologists.

Notable free form responses:

- “I think we are minting lower quality radiologists with the Core Exam. There is no doubt in my mind. And we will never know just how much worse they are. We definitely did not improve public safety.”

- “The public is more compromised by the core exam's repetition of the same questions and the proliferation of recalls than the oral exam ever was. The oral exam was a more realistic assessment of the radiologist’s knowledge and skills.”

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Statement 6: Relative to the oral boards, our trainees and radiology faculty believe in the core examination.

Notable free form responses:

- "Oral boards were much closer to an actual radiologist-clinician interaction and tested ability to be a practicing radiologist rather than just regurgitating facts."

- "Many of us are disappointed in the core exam and feel the oral was a much better preparation for real life."

- "Our faculty unanimously think that the Core Exam is a terrible substitute for the Oral Exam."
Conclusions

- Overall, Program Directors believe the core exam is not as effective in preparing residents for clinical practice, does not encourage a focus on the content necessary to become a competent radiologist, does not ensure public trust, and does not earn the confidence of either the test takers or their program directors.

- There may be utility in a meeting between the ABR and APDR to discuss the core examination and the perceptions it has cultivated through the first few administrations.