

TIPS ON PASSING THE BOARD EXAMINATIONS

This section briefly discusses the philosophy and techniques of passing board examinations or any other type of medical examination. Most examinations have moved to computer-based administration. Learn whether this applies to your examination, and if so, read and use the demonstrations provided either on the Internet or elsewhere.

First, realize that you are “playing a game.” It is, of course, a very important game, but a game nevertheless. When answering each question you must ask yourself, “What is it that the examiner wants from this question?” Let us turn our attention to the most common type of question, the multiple-choice question.

What these tips provide the learner is a way to “outfox the fox.” So, how do you outfox the fox? Following these rules will maximize the chances.

RULE 1: Allocate your time appropriately. At the beginning of the examination, divide the number of questions by the time allotted. Pace yourself accordingly, and check your progress every half hour.

RULE 2: If using a computer-administered examination, take time before the examination to become familiar with the mechanics of maneuvering through the examination program. Learn whether you can return to questions you weren’t sure about, or whether this is not allowed.

RULE 3: Answer every question in order. On some computer-administered examinations you run the risk of not being able to return to an unanswered question. Although American Board of Family Medicine examinations allow you to return, not all examinations permit this. And some examinations use unfolding question sequences that do not let you return to a previous

question. On paper-administered examinations, you run the risk of mis-sequencing your answers and having all answers out of order.

RULE 4: Do not spend more than your allotted time on any one question. If you don’t know the answer and you are not penalized for wrong answers, simply guess.

RULE 5: Even if you are penalized for wrong answers (most examinations no longer do this) and you can eliminate even one choice, answer the question. Percentages dictate that you will come out ahead in the end.

RULE 6: If there is a question in which one choice is significantly longer than the others and you do not know the answer, select the long choice.

RULE 7: If you are faced with an “all of the above” choice, realize that these are right far more often than they are wrong. Choose “all of the above” if you do not know the answer.

RULE 8: Become suspicious if you have more than three choices of the same letter in a row. Two of one choice in a row is common, three is less common, and four is almost unheard of. Something is probably wrong.

RULE 9: Answer choices tend to be very evenly distributed. In other words, the number of correct “a” choices is close to the number of correct “b” choices, and so on. However, there may be somewhat more “e” choices than any other, especially if there are a fair number of “all of the above” choices. If you have time, do a quick check to provide yourself with some reassurance.

RULE 10: Never, never change an answer once you have recorded it on the computer unless you have an extraordinary reason for doing so. Many people taking multiple-choice-question examinations, especially if they have time on their hands after completing the examination, start second-guessing themselves and thinking of all kinds of unusual exceptions. Resist this temptation.

RULE 11: Before you choose an answer, always, always read each and every choice. Do not get caught by seeing what you believe is the correct answer jump out at you. Read all of the choices.

RULE 12: Scan the lead-in to the answers and the answers first, then read the clinical case/vignette. This way you will know what is being tested and will better attend to the necessary facts. Read each question carefully. Be especially careful to read words such as *not*, *except*, and so on.

Success cannot be guaranteed with these or any other rules. I do, however, believe that these rules will help you achieve better results on your board examinations.

Alfred F. Tallia, MD, MPH
Editor-in-Chief