

Exam Taking Skills

View taking exams as a challenge and a necessary part of your professional development. Questions on most exams are not ordered by degrees of difficulty or by subject area, therefore, the variability can be very challenging. You must make rapid adjustments as you move from item to item. Each question is a separate entity. Nothing replaces solid study and preparation, but the following suggestions will enhance your accuracy and efficiency in decision-making.

Pacing

- Look at the last page and determine how many questions are on the exam.
- Mark the top of the pages at the one-quarter point, the half point, and the three-quarter point.
- How much time do you have to answer all of the questions?
- Look at the clock to determine if you are close to where you wanted to be only when you reach your time markers.
- Do not check the time frequently. It may slow you down and shake your confidence.
- Allow for time at the end to go back to rethink difficult items.
- The best strategy is to answer each question in the order in which it appears.

Difficult Questions

- Don't let a difficult question throw your confidence in answering the rest of the questions.
- Do not linger too long over a difficult question. This will lower your confidence and may cause you to rush through answers on other questions that are easier.
- Under no circumstances should you allow a tough question to destroy your positive attitude and confidence as you complete the rest of the exam. Remember, you always know more than you think you do.
- If you are clueless about an item, hazard a guess. Mark your answer with an "e.g." for an educated guess, or a "w.g." to indicate a wild guess, then move on.
- **Mark your "w.g." guess selection with the same letter each time.**
- Circle the wild guess question and come back to it only if there is time.
- By keeping your wild guesses *letter-consistent*, you increase your statistical chances of hitting the right answer, and you won't waste time thinking of which letter to select. During the exam, if you think of a better answer, you will know which letter to erase if you want to correct your wild guess.

Understand the Question

- Read the question first, not the answers. Answers contain distractors.
- After reading the question stem and before reading the answers, take a second to see if you know the answer before looking at the choices. Cover up the answers with

your hand if you need to. This is especially helpful for people who tend to talk themselves into wrong answers or those who answer too quickly.

- To prevent making hasty decisions, mark each part of the stem and the answer choice. Circle the verb in the stem and in the answer choices. Underline significant qualifying words.
- Identify the emphasis of the question stem. As you read the stem, underline words that narrow or modify the answer possibilities. Be sure your answer emphasizes the same principles as the question stem.
- Read all the possible choices, even if you think the first or second choices are correct. Test writers like to put their best distractors in the first or second position to catch people who make decisions too quickly without gathering all the information.
- Block out distractors by using your pencil to underline the important features of the stem of the question and the answer choices.
- Simplify answer possibilities by marking them “yes”, “no”, or “not sure”.
- If two answer alternatives overlap or have essentially the same meaning, both may be correct, if and only if, the format allows for more than one correct answer. Both are most likely incorrect if the format allows for only one correct answer.
- Beware of reading too much into a question. Unless otherwise specified, in items that ask for the *cause* in the stem and the *result* in the answer, remember to choose the alternative that is most directly related to the effect described. For example, in the steps of a process in which A leads directly to B, which leads directly to C, which leads to D. If the stem asks what causes D, your best answer would most likely be C, and *not* A.

Qualifying Words

When marking significant words in the question stem, pay special attention to qualifying words, such as “especially”, or negative words, such as “except”, “least likely” and “will not exhibit”. These words will help narrow the choices. The following is a partial list of some significant qualifying words and their meanings that are typically found in multiple choice exams.

Acute	sudden, severe
Affect(s)	to change from one state to another
Associated (with or in)	almost always linked with the item named
Cause(s)	to lead to a result
Characterize(s) (d)	to define or identify by physical appearance, shape, or size
Chronic	long-term, mild
Demographic modifiers	age, sex, race, ethnic origin, occupation, geographic location
Effect(s)	the next thing that will happen
Function(s)	to acts to, work as, exist or be present in order to...
Indicate(s)	may mean (may involve forming a hypothesis)

Matches	are the same as
Most probable	a logical step to take, least harmful intervention
Most appropriate	next action or step to take, least harmful intervention
Reveal(s) (ed)	to show
Suggest(s)	may mean
Include(s)	identify <i>all</i> components

QUESTION FORMAT

One Best Answer --- Positive Stem

- Type of question most frequently used in exams.
- Question stem consists of either a partial statement, a direct question, or a single word, and it is followed by several (usually 5) answer choices. Although several of the answer choices may appear correct, only one includes the most specific answer for the question and is therefore, the BEST answer.
- As you look at the answer choices, mark each one "T", "F", or "?" as you go.
- Eliminate the ones that may be correct, but are less appropriate.
- Circle words that are repeated in two or more of the answer alternatives. This will help you to focus on the point of the item.
- Note contradictions and opposites of meaning such as "chronic" vs. "acute".

Example:

A unilateral lesion of the internal capsule involving the genu and the posterior limb would cause:

- Contralateral total facial paralysis.
- Contralateral limb paralysis and ipsilateral lower facial paralysis.
- Ipsilateral limb paralysis and ipsilateral lower facial paralysis.
- Contralateral limb paralysis and contralateral lower facial paralysis.
- Ipsilateral total facial paralysis and contralateral limb paralysis.

Example with important phrases and words underlined:

A unilateral lesion of the internal capsule involving the genu and the posterior limb would cause:

- "F" A. Contralateral total facial paralysis.
- "F" B. Contralateral limb paralysis and ipsilateral lower facial paralysis.
- "F" C. Ipsilateral limb paralysis and ipsilateral lower facial paralysis.
- "?" D. Contralateral limb paralysis and contralateral lower facial paralysis.
- "?" E. Ipsilateral total facial paralysis and contralateral limb paralysis

Example:

Match the antigen used in serologic diagnosis in the right hand column with the disease listed in the left hand column. An answer may be used more than once or not at all.

- | | |
|----------------------------------|------------------------|
| 1. <u>Cryptoccal</u> meningitis | A. Erythrocytes |
| 2. <u>Haemophilus</u> meningitis | B. Viable bacteria |
| 3. Poliomyelitis | C. Viable viruses |
| | D. Capsular antigens |
| | E. Attenuated protozoa |

- Notice if the question stems on the left have anything in common. Underline the qualifying words "Cryptoccal" and "Haemophilus". It is important to keep your focus on the items in the left column.
- Only if you have no idea of the correct answer should you hunt through the answer list.
- Because 1 and 2 are both forms of meningitis, they probably have the same answer, which is D. The answer to 3, is C.

Case History Type Questions

These questions assess problem-solving ability. They consist of a limited clinical situation followed by a series of questions pertaining to the case. You must analyze each part of the case history and then select the best answer.

- When reading a case history, label the sections of the case in the margin.
- Mark transition points with a double slash mark (//). Then you can go directly to the specific part of the history that applies to the question.
- Typical labels for case histories are:
 - History (*Hist*)
 - Signs (*Signs*) and Symptoms (*Sym*)
 - Lab Findings (*LbF*)
 - Treatment (*Rx or Tx*)
 - Diagnosis (*Dx*)
 - Prognosis (*Prg*)

The following is an example of a case history with labels and // marks:

(*Hist*) A 65-year-old surgeon was in good health except for a nine-year history
(*LbF*) of diabetes mellitus and hypertension (blood pressure of 160/94 mm Hg)// He
(*Signs*) experienced severe crushing pericardial pain while shoveling snow. He collapsed
and was rushed to the hospital // where he was found to be in shock, cyanotic
(*Sym*) with hypotension and a rapid, weak pulse. // The patient was given oxygen and
(*Rx*) supportive therapy. He showed improvement. His blood pressure returned to its
(*result*) previous level.// Seven days after admission, the patient died suddenly, after a (*Dx*)
bowel movement. // Found at autopsy was extensive myocardial infarction.

- The above labels and // marks will assist you in answering questions related to: direct cause of death, laboratory findings of the renal system related to the diabetes, histological features of the original infarct, etc.
- Don't overlook the seemingly unrelated aspects of the question, such as age, sex, and occupation. In this case the fact that the patient was a surgeon indicates that he had access to health care and was socially and economically advantaged.

CASE HISTORY PRACTICE SHEET

Before you look at the questions that follow, label the case and identify the transitions. Look for and mark: history, signs, symptoms, type of pain, and clinical findings.

_____ A 58-year-old woman presents with a 7 month history of
 _____ epigastric pain that begins a few hours after meals and
 _____ is relieved by the ingestion of food or antacids. The pain
 _____ often wakes her in the middle of the night. The pain,
 _____ described as a dull ache, is intermittent. There is no
 _____ radiation of the pain. On examination, you find that the
 _____ patient has a slightly tender epigastrium. In all other
 _____ respects, the examination is normal.

Circle the verbs, and notice the modifiers. Underline words that will narrow your focus on the possible answer. In the answer choices that follow, remember to change a negative stem to a positive one.

SELECT THE ONE BEST ANSWER TO THE FOLLOWING QUESTIONS:

1. The most likely diagnosis in this patient is:
 - a. nervous stomach
 - b. irritable bowel syndrome
 - c. duodenal ulcer
 - d. acute cholecystitis
 - e. gastric carcinoma
2. The patient is prescribed antacid therapy for her condition. Which of the following statements regarding antacid therapy in the treatment of the condition described above is false?
 - a. magnesium hydroxide may produce diarrhea and hypokalemia
 - b. aluminum hydroxide may produce constipation
 - c. antacids should be given 1 hour and 3 hours after meals and before bedtime
 - d. antacids in tablet form are just as effective as antacids in liquid form
 - e. antacid treatment should continue for 4-6 weeks

3. The patient described is placed on antacid therapy for the appropriate time. Her symptoms recur 2 months after stopping therapy. Which of the following is the most appropriate course of action now?

- a. perform fiberoptic gastroscopy
- b. begin antacid therapy again
- c. repeat upper gastrointestinal studies
- d. select another H₂ receptor antagonist or other anti-ulcer agent for therapy
- e. b or d

(Answers 1. = C 2. = D 3. = E)

STUDY METHODS FOR EXAM QUESTIONS

TYPE OF QUESTION	STUDY TECHNIQUES
Compare/Contrast	Labels Cell Charts
Requirements Results Cause/Effect Inhibitors/Activators	Labels Flow Charts
Function Types of Functions: Circulatory Metabolic Restorative Barrier Transmitting Motor Locomotion	Structures of Organs Drawings, Labels Organ System or Pathology Review
Clinical Implication	Structure Function Mechanism of Action Labels, Charts, Drawings

When you simply can't remember.....

Memory Jogs by Content Recall

Ask yourself: *What keeps me from answering this question?*

- Do I understand the language of the question?
- Did I pay attention to the verbs so I am sure I know what they are asking?
- Did I break the phrases of the question into parts? Did I stop to notice the commas?
- Did I mark a "T" or "F" above each phrase of the question?
- Did I diagram the process mentioned in the stem?
- Did I make a sketch of the identified structure?
- Before reading the answer options, did I summarize the question in my own words?
- Did I think about the relationship of structure, function, and mechanism of action as they relate to the question?

Memory Jogs by Study Situation

Probe your memory by recreating the circumstances in which you learned the information:

- Think about the professor's voice when they lectured on this material. Where were you sitting?
- Picture your notes. When you studied this subject, what color did you use to highlight or label your notes? Where on the page did the material appear?
- What music did you hear while studying this information?
- What were you doing immediately before and after you studied this material?

Memory Jogs by Material Context Recall

Ask yourself organizational questions about the material itself:

- Is what you are trying to remember a part of something else? What is it?
- Does X have some subtopics I can remember? What are they? What is the relationship between X and Y? What is an analogy to X? Does X lead to something else?
- Did another question on the exam give you a clue?

GUESSING

Trust Your Educated Guess

- The first guess answer is the one that comes from somewhere in the deep recesses of your unconscious memory bank: therefore, educational research tells us that your first guess has a high likelihood of being correct.
- Change the first guess answer ONLY if you have overlooked a significant qualifying word or you think of an *obvious, concrete reason* that PROVES your first choice was wrong.
- Being anxious, emotionally vulnerable and tired all contribute to a tendency to second-guess yourself into wrong answers.
- If you *think* something is false when you first read it, then trust that it is false.
- False answers are inserted into exams to test your ability to resist complex distractions.

Do Not Leave Any Answer Blank

- Guessing may make you nervous and uncomfortable, but it is better than no answer at all.
- If you don't know an answer when you come to it, you probably won't know it later. You increase your chances of raising your score when you fill in an answer and move on to the next question.
- Educational research indicates that students tend to spend the most time on questions they get wrong!
- When making a guess, remember to mark it in the margin, either "w.g." for "wild guess" or "e.g." for educated guess. You can come back to the w.g.s after completing the test. (Review page 1 of this document.)

And last, but not least, don't forget your rabbit's foot!