



Blueprinting of the assessment for the Cert Cardiology(SA) Phys

BLUEPRINT OF THE THEORY PAPERS

PREAMBLE

The purpose of the examination is to determine whether or not candidates are competent to engage in independent practice in cardiology at the level of a general cardiologist and can be expected to do so practically, preserving patient safety. It is not the purpose of the examination to probe depths of academic knowledge and the spread of questions should cover the field of cardiology widely with sampling of multiple areas of knowledge.

BASIC SCIENCES PAPER

The paper will be of three hours duration and consist of four questions each with three sections. Questions should be constructed in such a way that it is possible to answer each part of a question in 15 minutes and examiners must prepare model answers indicating how marks will be allocated for each part of the desired answer. Each part of a question should be marked out of 15 marks and a percentage calculated for the whole question

CLINICAL PAPER

The paper will be of three hours duration and consist of four questions each with three sections. Questions should be constructed in such a way that it is possible to answer each part of a question in 15 minutes and examiners must prepare model answers indicating how marks will be allocated for each part of the desired answer. Each part of a question should be marked out of 15 marks and a percentage calculated for the whole question

Each paper should be prepared in a manner that endeavors to ensure coverage of the topics in the syllabus in a balanced manner

BLUEPRINT OF THE ORAL EXAMINATION

During the oral, use of ECG's, echocardiograms, angiograms, radiographs, recordings of intracardiac or intravascular pressures or other records in everyday use in cardiology practice is encouraged. Common and/or important conditions should be chosen for discussion. The expected level is that of a competent general cardiologist.

The oral should be used to test the candidate's judgement and strategy, rather than expecting detailed knowledge of complex percutaneous coronary intervention or electrophysiological procedures.

In principle the purpose of the oral examination is to ensure that candidates have an adequate ability to interpret common investigations of common conditions in a way that will allow them to treat patients appropriately and safely. In general, areas of lack of knowledge should not be pursued relentlessly by examiners but the direction of the questioning should be changed to explore other areas of knowledge. This means that examiners need to have reserve questions available.

An attempt should.../

An attempt should be made to ensure the examination is structured:

- All candidates should be asked the same or very similar questions. This means that candidates who have completed the examination do not have contact (including cellphone contact) with those awaiting examination. Candidates should be instructed to hand in cellphones prior to the oral examination.
- Before the examination examiners and the moderator must review the questions and recordings of fellow examiners to ensure the standard is appropriate and all should agree on the interpretation of recordings.
- Ideally examiners should prepare brief written model answers or at least indicate in advance the key points that the candidate is expected to make

Each candidate should be asked to interpret and discuss (as a minimum) at least the following four recordings:

- A standard 12 lead ECG showing an important arrhythmia
- A transthoracic echocardiogram showing an important valvular lesion
- An abnormal coronary angiogram
- A recording of an intracardiac pressure trace demonstrating an important haemodynamic abnormality

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