Virtual Oral Exam
FREQUENTLY ASKED QUESTIONS (FAQS)

1. **How much will the exam cost?** The Oral Exam fee is currently $1,255. ABEM has one of the lowest Oral Exam fees among the 14 medical specialty boards that offer an Oral Exam.

2. **Why is the cost for the virtual exam the same as it was for the in-person exam? Isn’t administering a virtual exam cheaper?** No. The Oral Exam fee has historically been held artificially low to ease the financial burden on early career physicians. In addition, although administering the exam virtually saves on travel and lodging costs, additional expenses for software, technical support, security, and training affect the cost of administering the virtual exam.

3. **Will the Oral Exam be virtual from now on?** Yes, the Oral Exam will continue to be a virtual administration for the foreseeable future.

4. **Where can we get the sample cases and materials?** ABEM has updated the sample cases on its website at [www.abem.org/oralexam](http://www.abem.org/oralexam) to reflect the new virtual format. Both the standard single case and the structured interview case samples are available. There is also an informational webinar about the virtual Oral Exam on the same web page.

5. **What happens if I cannot take the exam on the date assigned? What if I am sick or on vacation? Will I be scheduled in the next exam administration or will I be placed at the back of the line?** If you are unable to attend your scheduled administration, you will be placed back in the pool of candidates and will be scheduled for a future administration. Candidates are randomly assigned.

6. **Will accommodations be made for nursing mothers and others who need accommodations?** Yes. Please contact Julie Renner at jrenner@abem.org to discuss needed accommodations.

7. **What is the dress code for the virtual Oral Exam?** Your examiners will be dressed in professional business attire. This may include dress slacks and a jacket and tie, dresses, and pantsuits. Exam candidates may choose to dress similarly, but there is no dress code. Attire is not a factor of the evaluation.

8. **How should I prepare for the virtual Oral Exam?** The test content should be familiar to any EM residency-trained physician. The general approach is similar to what you do every day in the ED. It follows a similar flow to ABEM’s previous in-person Oral Exam. ABEM will share material to familiarize you with this new way to take the Oral Exam virtually.

9. **Will I be provided any information in advance?** ABEM will email you the following items:
   - Candidate note sheet with body outline
   - List of normal lab values
   - Common abbreviations
   - Structured Interview (SI) format and information about scoring

These materials will be sent well in advance to give you adequate time to print them.
**Technology/IT**

10. **What Internet browser should be used?** Google Chrome is the preferred browser, but Edge and Firefox can also be used.

11. **Will the virtual exam use Zoom as the videoconferencing system?** Yes, Zoom is the videoconferencing system in use for the virtual exam. ABEM is working with an external vendor, Markey’s, for scheduling the sessions.

12. **Can I use an iPad or Chromebook to take the virtual Oral Exam?** No, the virtual Oral Exam needs to be administered on a laptop or computer with a camera and microphone. iPads and Chromebooks are not allowed.

13. **Can I take the virtual exam from home? From the hospital?** You will need to find a quiet, private location to participate in the virtual exam; you are not required to find a testing center. Note that during the candidate check-in process at the beginning of your scheduled exam session, for security purposes you will be asked to show your immediate surroundings using your computer’s camera. You will need to be alone with no additional devices (cell phones, second computers, any recording devices, smartwatches, etc.). You will need to show examiners any notes you have taken, and you will need to shred/tear up the documents on camera at the end of each case encounter session.

14. **What happens if a case is interrupted by a family member or co-worker?** You will need to find a quiet, private location for the virtual exam. If the disruption is minor, the case can continue. If the disruption is major, the case may be suspended. The Chief Examiners will determine next steps.

15. **What kind of wi-fi/bandwidth do I need to have to take the virtual Oral Exam?** You will need reliable, high-speed Internet, minimally 1.5-2 mbps download and upload for a quality video call. Please note that sometimes hospital firewalls create disruptions. You will need to pre-test the reliability of your Internet connection.

16. **Do I need to have a Zoom account/software downloaded?** Yes, you should have the Zoom software/add-in downloaded in advance. A systems check will need to be performed prior to the start of the exam with ABEM technical staff.

17. **What should I do if there is a technical problem during the exam (computer freezes, lost wi-fi)?** During scheduling, all candidates and examiners will be asked to provide their cell phone numbers. If you have a technical problem that prevents you from continuing with the exam, you may retrieve your cell phone to contact ABEM Tech Support. This will help us quickly address any immediate issues that may arise during the exam. If there is a technical problem, you will be provided with detailed instructions on next steps. Contingency appointments and back-up examiners will be available. More information will be forthcoming.

18. **Will the sessions be recorded?** Yes, all sessions are being recorded for temporary viewing for scoring and administrative verification after the case.

**Structured Interview**

19. **Why did ABEM developing a new case type?** ABEM is constantly innovating. The structured interview case format is the first time ABEM is directly measuring
clinical judgement as well as other competencies. ABEM is looking at ways to better understand a physician’s thought process. These formats will inform the future Oral Exam.

20. How is the structured interview different from the single cases? The structured interview is more like a discussion. It still follows the approach to a work-up that you do in an ED. Examiners ask questions to understand the reasoning behind actions; lots of “why” questions. During the case, you will explain your decisions.

21. Does the structured interview take the same amount of time? Yes, the structured interview case takes the same amount of time as single cases—15 minutes.

22. What kind of stimuli will be provided? The same kind of stimuli as used in the single cases can be provided (e.g., vital signs, diagnostic studies, labs) although all the images will be static, not dynamic. All candidates will be provided the same stimuli regardless of what is ordered.

Virtual Oral Exam Format

23. How many cases will I be tested on? The exam consists of seven cases: five single-patient scenarios and two structured interview cases that you must manage. There will be no triple cases.

24. How long will each case last? You will be given 15 minutes to work through each case. Total testing time will be approximately three hours.

25. How will the cases be scored? Scoring a structured interview will be based on providing information that is fundamental to working through a case. Scoring points are awarded for the history, physical, differential diagnosis, diagnostic studies, etc., as well as the rationale that you provide for your responses at these various stages of the case.

26. When will scores be available? By policy, ABEM will post scores no later than 90 days after the exam administration. However, ABEM strives to post scores 30-45 days after administration.

27. Will the exam be proctored? Yes, the exam will have proctors that move between cases. There are additional security precautions that ABEM is taking to ensure a fair examination.

28. Can I have reference material? No, you cannot use any reference materials during the exam other than the resources provided by ABEM: note sheets with body outline, laboratory normal values, and common abbreviations.

29. I use UptoDate® in my practice in real life. Why can’t I use that resource in the Oral Exam? For initial certification, including the Oral Exam, ABEM wants to measure other factors. ABEM expects you to manage the case with the information that you have. If you are unsure, explain how you would normally address this uncertainty in real life to the examiner.

30. Can I take notes and write down information as the case goes along? Yes, you will be emailed note sheets that you can print out and use during the exam. You
will be required to destroy your notes onscreen in view of the examiner upon concluding each case.

31. **Can I use my own timer or clock? Will there be a timer on the computer screen for me?** Examiners will keep time using their computer clock. You do not need to keep time. There is no bonus time past 15 minutes.

32. **Can I magnify the screen to see images?** Yes, you will be able to magnify the image on your own screen.

33. **If I need to see stimuli again, can it be shown again?** Yes, stimuli will be shown again if you request it.

34. **Will there be any videos like ultrasound? Or just static images?** No, there will not be videos or complex stimuli for the initial cases used. All stimuli will be static stimuli.

35. **Will I be monitored during the session?** Examiners will monitor your behavior during the exam. The session will be recorded. Any irregularity will be reported to Chief Examiners. The “roving proctors” will be monitoring cases for suspicious behavior.

**General**

36. **Why is the Oral Exam still a requirement?** The Oral Exam measures different competencies and dimensions than the Qualifying (written) Exam (QE). At least 36% of the knowledge, skills, and abilities that ABEM assesses are only measured by the Oral Exam.

37. **I have been practicing as an attending for more than a year. Why is the Oral Exam still necessary?** Like the QE, the Oral Exam provides independent verification that a physician has met the national standard determined by clinically active emergency physicians. This high standard accounts for any variations found with local or regional practice pattern variations that may not be widely accepted as a national standard for Emergency Medicine to become ABEM certified. The Oral Exam assesses many of the competencies that you demonstrate in clinical practice but were not assessed on the QE.

38. **Where is the evidence that the Oral Exam makes a difference in the initial certification process?** Research shows that Board certification is associated with higher-quality care; for example, ABEM certification has been associated with higher quality of care for patients with acute MIs (Wilson et al., AEM 2014:21). The validity of the Oral Exam has been extensively researched:


The Oral Exam is necessary because it measures skills that cannot be captured using a multiple-choice question exam, such as clinical reasoning, empathy, and communication skills. The Oral Exam contributes unique information to the certification decision. Additionally, every five years, ABEM re-evaluates the need for its Oral Exam and has, to date, reaffirmed that a significant percentage of the knowledge, skills, and abilities required for ABEM certification cannot be sufficiently assessed using only the Qualifying (written) Exam.

39. **Doesn’t residency test the competencies being addressed in the Oral Exam? Is residency sufficient to show that a physician has successfully demonstrated these competencies?** ABEM is a certification organization that sets a national standard and tests physicians to independently verify that they have met this standard. The overall quality of the residency program is assessed by the Accreditation Council for Graduate Medical Education. In contrast, ABEM assesses the knowledge, skills, and abilities of the individual physician by verifying that he or she meets a certifying standard.

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