



SGT UNIVERSITY

SHREE GURU GOBIND SINGH TRICENTENARY UNIVERSITY
(UGC Approved)

Gurugram, Delhi-NCR

Budhera, Gurugram-Badli Road, Gurugram (Haryana) – 122505 Ph. : 0124-2278183, 2278184, 2278185

REPORT ON 7th CAPACITY BUILDING WORKSHOP ON OSCE/OSPE

 **SGT UNIVERSITY**
SHREE GURU GOBIND SINGH TRICENTENARY UNIVERSITY
(UGC Approved) Gurugram, Delhi-NCR

Internal Quality Assurance Cell

Capacity Building Workshop
on
OSPE & OSCE

07th-08th May, 2018

Venue : Room No : 306, 3rd Floor, A-Block





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Foreword

IQAC is the technical reform unit of SGT University, constantly trying to produce multi-directional quality upliftment of the university in every respect, from syllabus to teaching through the result declaration including graduation, with quality par excellence.

The IQAC conducts Faculty training programme through in-house and external training agencies as well as renowned personalities frequently. IQAC, SGT University has undertaken the capacity building programme for the teachers in the field of educational technology including teaching methods, assessment methods, preparation of questions etc.

The present report pertains to the 7th in-house training of faculty members of Health related faculties of the University in the OSCE/OSPE method of examination. The faculty members were taught about the necessity of Objectivity in examinations and demonstrated how to perform the same. This training was of very high quality and my team of IQAC has put on stupendous activity with their utter sincerity and effective capability. I thank them all from the core of my heart.

The entire IQAC is incepted to the Chairman SGT University, Mr. Manmohan Singh Chawla, whose personal effort, periodic suggestion and torching has resulted in making the Capacity building programme a success.

T D Dogra
Director, IQAC,
SGT University, Gurugram



The **IQAC** has been directing its sincere efforts in reforming the teaching learning process at SGT University. To implement the changes at University level, the faculty involved in the day to day teaching and learning process is required to be trained. IQAC has been conducting Capacity Building programs for the teaching faculty in multiple areas like teaching methods, teaching tools, assessment methods etc. Till now, 6 capacity building programs have been organized. The 7th capacity building workshop on OSCE and OSPE was organized on 7th and 8th May 2018 to train the faculty members in the objective method of assessment. Since, OSCE/OSPE were primarily developed to be used in medical education, for this workshop only the faculty members of health related faculties namely medical, dental, physiotherapy, pharmacy, ayurveda, nursing, allied health sciences and clinical psychology were called.

A total of 20 nominations were received from the deans all of whom registered for the program on 7th May 2018. Due to the western disturbance and the thunderstorm risk in Delhi NCR on 8th May and non-plying of the university buses, 3 faculty members could not attend the program on the second day(8th May 2018).

The Registration form was as follows:



IQAC

7th Capacity Building workshop on OSCE & OSPE

REGISTRATION FORM

Name of the
 Faculty:.....Age.....M/F
 Faculty.....Department.....
 Whether Trained in OSCE & OSPE Earlier.....Y/N

Signature

The list of participants who completed the training program is as follows:

1) Nursing

Mr. Sunil K. Dular
Ms. Mamata Devi.

2) Medicine & Health Sciences

Dr. Mriganko Shekhar Ray, Professor, General Surgery
Dr. Prachi Saffar Aneja, Professor, Anatomy Department
Dr. Vijaylaxmi malhotra, Professor, Microbiology Department
Dr. Sheetal Kaul, Assistant Professor, General Medicine

3) Behavioural Sciences

Ms Sayma Jameel

4) Dental Sciences

Dr. Mona Prabhakar, Professor Orthodontics & Dentofacial Orthopedics
Dr. Puneeta Vohra, Reader Oral Medicine & Radiology
Dr. Pulin Saluja, Reader Oral Pathology & Microbiology
Dr. Abhinav Bhargava, Senior Lecturer Public Health Dentistry

5) Faculty of Physiotherapy

Dr Sheetal kalra
Dr Sonia

6) College of Pharmacy

Mr. Vinod Gahlot Assistant Professor
Ms Sushma Maratha Assistant Professor

7) Ayurveda

Dr. Avnish Pathak
Dr. Vikas Sharma

The participants were made to sign on the attendance sheet in the morning and afternoon
7th/8th May, 2018

S. N	Name of the Faculty	Signature Morning Session(9.30-1.15PM)	Signature Afternoon Session (2:00-3.30PM)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

The schedule for the program was as follows:

TIME SCHEDULE OF OSPE & OSCE WORKSHOP

Dated 7-8th May 2018

Day	10:00- 10:45am	10:45-11:15 AM	11:15-11:45 PM	11.46-1:00 PM	1:00 to 2:00 PM	2:00-3.30 PM	
Day 1	Ice Breaking Self Introduction Pre-Training Evaluation Ms Arvinder Kaur Pabla	T E A B R E A K	Why Objectivize Examination Prof T D Dogra	OSPE Dr Priti Agarwal	L U N C H	Demonstration of OSPE Dr Priti, Dr Astha, Dr. Amit & Dr Mohapatra	
Day 2	OSCE Dr Pankaj Abrol		Demonstration of OSCE Dr Pankaj, Dr Astha & Dr. Amit			2-3PM	3-3.30 PM
					Group work Dr Astha, Dr. Amit & Dr Mohapatra	Post Training Evaluation Valedictory session	

Team IQAC,SGT University



[Prof.TD Dogra (front), L to R: Dr. Sarju Devi, Ms. Arvinder Pabla, Dr. Astha Chaudhry, Prof.SC Mohapatra, Mr.Anil Sharma]

Under the leadership of our Director IQAC. Dr T.D Dogra, the program started with the introduction of the trainees to Dr Dogra and explanation of the concepts of examination and evaluation by Dr T.D Dogra. Dr Dogra explained about the characteristics of evaluation and about the domains of learning, the types of questions etc
The material used is as follows:

EVALUTION/EXAMINATION

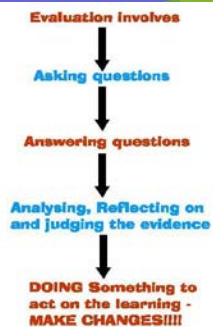
CONCEPTS OF EVALUATION/EXAMINATIONS

Basic concepts

- **Test:** measuring a sample of behavior (How well)
- **Measurement:** a numerical description (How Much)
- **Evaluation:** the learning of instructional objectives (How Good)
- **Assessment:** assessing some one of something-rating, judging, estimation-a wider term

Evaluation

Evaluation means information to draw conclusions to make new predictions.



Aims of Evaluation

- **To ...**
- evaluate achievements of students.
- measure personality
- act as a incentives
- prognosis (prediction)
- grouping
- measure fitness for promotion
- selection of competition

Reasons for Evaluation

- Motivation
- Accountability
- Equipped to handle
- Placement
- Diagnosis
- Evaluation of learning
- Prediction
- Program Evaluation

Characteristics of Evaluation tool

- **Reliability:** Same result under different but comparable conditions.
- **Validity:** actually tests what is set to test.
- **Objectivity:** In testing and scoring
- **Sensitivity:** Evaluation must be fair to all students.
- **Practicability:** In terms of cost, time taken and ease of application.

Three Types of Learning/Teaching

Benjamin S. Bloom (1956), identified three domains of

Educational activities:

- © **Cognitive:** mental skills (*Knowledge*)
- © **Affective:** growth in feelings or emotional areas (*Attitude*)
- © **Psychomotor:** manual or physical skills (*Skills*)

Taxonomy of Educational Objectives (Benjamin S. Bloom 1956)

Cognitive Domain

The cognitive domain (Bloom, 1956) involves **knowledge** and the development of **intellectual skills**



Cognitive components

- Knowledge:** Recall data or information.
- Comprehension:** Understand the meaning, interpretation of instructions and problems.
- Application:** Use a concept in a new situation.
- Analysis:** Separates material or concepts into component. Distinguishes between facts and inferences.
- Synthesis:** Put parts together to form a whole, with emphasis on creating a new meaning or structure.
- Translation**
- Evaluation:** Make judgments about the value of ideas or materials.

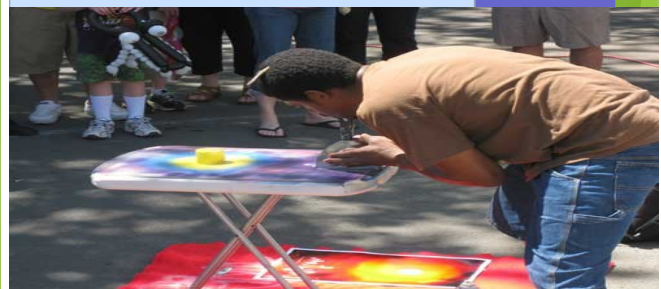
Affective Domain

The affective domain (Krathwohl, Bloom, Masia, 1973) includes the manner in which we deal with things "emotionally, such as feelings, values, appreciation, enthusiasms, motivations, and attitudes".

The five major components

- Receiving:** Awareness, willingness to hear, selected attention.
- Responding:** Active participation on the part of the learners. Attends and reacts to a particular phenomenon.
- Valuing:** The worth or value a person attaches to a particular object, phenomenon, or behavior. Valuing is based on the internalization of a set of specified values.
- Organization:** Organizes values into priorities. The emphasis is on comparing, relating, and synthesizing values.
- Internalizing values** (characterization): Has a value system that controls their behavior. The behavior is, consistent, predictable, and most importantly, characteristic of the learner.

Psychomotor Domain



includes physical movement, coordination, and use of the motor-skill areas. Development of these skills require practice and is measured in terms of speed, precision (exactness), distance, procedures, or techniques in execution

The major categories are:

Imitation: Observing and patterning behavior after someone else. Performance may be of low quality. Example: Copying a work, or cycling.

🔧 **Manipulation:** Being able to perform certain actions by following instructions and practicing. Example: Creating work on one's own, sitting on bicycle, holding handle.

🔧 **Precision:** Refining, becoming more exact. Few errors are apparent. Example: Working and reworking something, so it will be "just right."

🔧 **Articulation:** Coordinating a series of actions, achieving harmony and internal consistency. Example: Holding handle properly, peddling, balancing, etc.

🔧 **Naturalization:** Having high level performance become natural, without needing to think much about it. Riding bicycle perfectly.

TYPES OF QUESTIONS

- There are mainly three kinds of questions - Essay, short answer and objective type.

λ **Essay Type:** commonly used tools of evaluation,

- outcome of learning (e.g. organising, summarising, integrating ideas and expressing in one's own way)

λ **Examples:**

- λ **Evaluative recall** :e.g. Why did the First War of Independence in 1857 fail?
- λ **Comparison of two things** - on a single designated basis.
e.g. Compare the contributions made by Dalton and Bohr to Atomic theory.
- λ **Comparison of two things** - in general.
e.g. Compare Early Vedic Age with the Later Vedic Age.
- λ **Decision - for or against.**
e.g. Which type of examination do you think is more reliable -Oral or Written. Why?

λ **Causes or effects:** Discuss the effects of environmental pollution on our lives.

λ **Explanation :**

λ **Bringing out:** The concepts of Joint Stock Company.

λ **Summary** of some unit of the text or of some article.

λ **Analysis** (the word itself need not be involved in the question.)

λ What was the role played by Mahatma Gandhi in India's freedom struggle?

λ **Statement of relationship.**

λ e.g. Why is knowledge of Botany helpful in studying agriculture?

λ **Classification:** Classify the following into Physical change and Chemical change with explanation.

λ **Application of rules or principles in given situations.**

λ **Discussion.**

λ **Criticism** - as to the adequacy, correctness, or relevance.

λ **New methods of procedure.**

Can you solve this mathematical problem by using another method?

Describe:

λ **Justify:**

λ **Enumerate:**

λ **Short Answer Questions:**

They usually take less than five minutes to read and answer.

The size of answer, space or specific instruction such as "In not more than 20 words ..."

Examples:

- **Completion Type:** In the human eye light enters the (1) which is surrounded by the part called the (2)As the amount of light increases this part (3), but (4)a gain when the amount of light decreases. On reaching the (5) at the back of the eye the light stimulates two types of nerve cell called (6) r.and (7) c


Objective Type Questions

- λ Multiple choice,
- λ True/false,
- λ Matching block
- λ Fill in the blanks

Evaluation techniques:

- Experiments
- Oral tests
- Discussion
- Interview
- Observation
- Rating scales
- Personality tests
- Attitude and aptitude tests
- Anecdotal record: used to assess the past behavior of the student.

Challenges of Examination:

- 
- ▶ 1. Questioning: Clear cut guidelines, number of questions, weightage of marks, syllabus coverage.
 - ▶ 2. Conduct of Examination: electronic devices, strict compliances of rules or discipline.
 - 3. Evaluation: Biased, Hand writing, number of pages, Language, evaluating non teaching content scripts, less number of evaluators.

Defective Examination

- System of evaluation is limited to written examinations.
- Lack of desired level of validity and reliability
- Only cognitive domain is measured-memorization occupies dominant place.
- Questions very few measuring Comprehension and application. Analysis, synthesis and evaluation hardly find a place in the question paper.
- The test items lack variety (only essay type)
- Evaluation of co-scholastic aspects like interests, attitudes, values, appreciation, adjustments, habits.
- Personal-social qualities like, regularity, punctuality, discipline, co-operation and leadership etc are missing.
- The need for the use of other tools and techniques like interview, observation, rating scales, check lists, projects.

Other defects of Examinations

- ⊞ Examinations lack definite aim
- ⊞ Elements of chance
- ⊞ Lowering of moral standard
- ⊞ Subjectivity
- ⊞ Heavy mental strain
- ⊞ Develop frustration

OTHER REMEDIAL MEASURES

- ⊞ Introduction of new types of tests
- ⊞ Thought provoking questions
- ⊞ Viva voce tests
- ⊞ Standard of marking
- ⊞ Balanced questions
- ⊞ Cumulative records
- ⊞ Variety of evaluation techniques
- ⊞ Introduction of grade system
- ⊞ Introduction of CBCS system

Specimen of a good question paper

S.NO	Objectives	Marks	% OF MARKS
(a)	Knowledge	30	30%
(b)	Understanding	45	45%
(c)	Application	15	15%
(d)	Skill	10	10%

Weightage to form of questions

S.NO	Form of	Marks for each question	% of marks
1.	Essay type	8	32
2.	Short answer	8	40
3.	Objective	9	18
4.	Map/figure	1or2	10
			100

Expected length of each question

Long Answer upto 200 words each
 Short Answer upto 100 words each

Weightage To Difficulty Level of questions.

(a) Easy 15%
 (b) Average 70%
 (c) Difficult 15%

λ The success of any Education system depends on its Evaluation procedures.

λ Education is key for Nation's development

“Education builds a man, interns man builds a Nation.”

THANK YOU



(Dr Dogra explaining about the examination and evaluation)

Following Dr Dogra's presentation, ice breaking session was conducted by Incharge Capacity Building program Dr S.C Mohapatra and Ms Arvinder Kaur Pabla wherein all the participants were asked to pick up a slip from bowl and emulate the sound of the animal/bird written over it to find their partner for the programme. Once the pairs were formed, they were made to sit with their partners to know them better. Each pair was then called out wherein each member introduced their partner stating the common things and dissimilarities between them.



(Dr Mohapatra and Ms Arvinder Pabla explaining about the ice breaking)



(The participants picking up the slip and then sitting with their partners in pairs and discussing about their similarities and dissimilarities)



The participant explaining about her partner and sharing a candid moment.

After the tea break, the session on OSPE Objectively structured practical examination was taken by Dr Priti Agarwal, Professor, Department of Microbiology, Faculty of Medicine and Health Sciences. The session was highly interactive and the material included:

<p>Assessment of practical skills; OSPE</p> <p>Dr Priti Agarwal Professor Microbiology</p>	<h3>Contents</h3> <ul style="list-style-type: none"> • Introduction • Definitions of skill related terms • Types of skills • Assessment of skills <ul style="list-style-type: none"> ◦ Conventional examinations ◦ OSPE and OSCE • Components and formulation of OSPE • Purpose of assessment • Group task and demonstration -2pm onwards
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Introduction

- Students possess a high degree of knowledge but deficient in skills to some extent
- Need of the hour- acquisition and practice of professional skills

Need of the hour

- To define and enumerate various skills
- To feel the need of skill development
- To assess the skills acquired during teaching

- Skill
 - Application of a specific combination of abilities to a specific task
- Skill performance
 - Efficiency with which a complex activity is completed
- Skill competence
 - Ability to perform task at an expected level at a specific point of time
- Skill proficiency
 - Demonstrated competence over a period of time

- Abbat divided a broad framework of skills as
 - Psychomotor skills
 - Communication skills
 - Cognitive skills

- Psychomotor skills-
 - Manual abilities
- Communication skills-
 - Ability to communicate, strong underlying component of attitudes
- Cognitive skills-
 - Decision making and interpretation of data based on knowledge

Assessment of skills

- Conventional Examinations-
 - Arbitrary , deficient because of in built variability – student, patient and examiner related factors
 - Subjective
 - No standardisation
 - Outcome / conclusion is tested, not the process of arriving at conclusion
 - Validity is broad based and has low reliability

- Conventional examination –
 - Variables
 - Students – performance anxiety, succumb to examination pressure- alter performance
 - Examiners - gross variation in marking patterns
 - Patients – reaction and attitude toward disease and student.
 - Lack of feedback to the students thus reducing chances of improvement

Assessment of skills

- In an attempt to overcome problems Harden *et al* introduced and formulated
 - Objective structured clinical examination- for clinical subjects (**OSCE**)
 - Objective structured practical examination- for pre and paraclinical subjects (**OSPE**)

WHAT IS OSPE?

- **Objective** assessment of practical competence
- Adaptation of OSCE
- Evaluation of student's ability in performing various tasks in laboratory
- Assess 'doing' part of examination instead of 'reporting' the findings only

Components of OSCE

- **Pre-determined** decisions are made on the competencies to be assessed
- The criteria on which the performance is tested is **pre-defined** and uniform for all
- Skills to be tested are broken into steps
- **Standard** set of questions, steps, time and checklists (structured)

- Checklists incorporating skills are prepared with marks against each step
- By going through various **Pre-designed** stations on which skills are tested

Objective Structured Practical examination

- Method of examination-
 - Series of stations around on which students rotate
 - At each station student is required to undertake a well defined task
 - Structured checklists and marking sheets are provided to the examiner present at each station
 - Length of time- 5-10 mins

OSPE- Objectives

- To assess and evaluate
 - Certain practical skills
 - Ability to make correct observations
 - Analyse and interpret data

OSPE design

- A circuit of short (the usual is 5–6 minutes) stations, in which each candidate is examined on one-to-one basis
- One or two impartial examiner(s). Each station has a different examiner
- Instrument or material to perform a task (procedure)

- Two types of stations-
 - Practical based or procedural stations
 - Student performs a task, rated and marked by examiner on the checklist
 - Observed or unobserved
 - Question based or response stations
 - Question asked on the basis of information obtained on previous station
 - MCQs – to increase objectivity
 - Presence of examiner is not required

- As the name suggests, an OSPE is designed to be:
 - **Objective** – All candidates are assessed
 - using exactly the same stations and on the same set of questions
 - with the same, structured marking scheme
 - candidates get marks for each step on the mark scheme that they perform correctly (which therefore makes the assessment of skills more objective, rather than subjective)

- **structured** –
 - Stations in OSPEs have a very specific task
 - **Structured** checklists with essential steps and marks

- Instructions are carefully written to ensure that the candidate is given a very specific task to complete at each station
- The Objective structured examinations are carefully structured to include parts from all elements of the curriculum as well as a wide range of skills.

- **Practical examination –**

- Student is provided with a instrument or material and is required to answer the given questions, do the procedure at the station or interpret and calculate the results

Examples

OSPE-

- Identify the culture medium
- Inoculate sample on the culture media
- Preliminary identification by describing colony characteristics
- Preparing blood smear
- Count the RBCs, WBCs or platelets in a given square
- Identify cells under microscope
- Interpret lab reports or ECG

- Taking blood pressure



Planning of OSPE

- Location
- Length of examination
- Content of station- based on objectives
- Designing stations-
 - Procedure stations- observed or unobserved
 - Response stations- to test the results gathered on previous stations
- Appointing examiners- task and marking scheme

OSCE marking

- Marking in OSCEs is done by the examiner. using a standardized mark sheet
- Objectivity- by having a detailed mark scheme and standard set of questions (checklist)
- Provision of negative marks- MCQs

- The examiner is usually asked to rate the candidate as pass/borderline/fail or sometimes as excellent/good/pass/borderline/fail
- This is then used to determine the individual pass mark for the station

Variations in marking scheme

- Many centers allocate each station an individual pass mark. The sum of the pass marks of all the stations determines the overall pass mark for the OSPE
- Many centers also impose a minimum number of stations required to pass which ensures that a consistently poor performance is not compensated by a good performance on a small number of stations

Advantages

- Validity
- Reliability
- Objectivity
- Test product and process
- Can test large number of students
- Can use more junior examiners
- Feedback can be given to the students and staff

Disadvantages

- Difficult to arrange
- Demanding for examiners and patients

Scope of Objective Structured Examinations

- In any situation where assess students' competence
 - Stage of student
 - Final examination
 - In –course assessment
 - PG examinations

- Purpose of assessment
 - Pass/fail decision
 - Area of deficiency
 - Feedback to student
 - Selection of students with sp . skills

- Designed to test skill performance and competence in skills such as-
 - communication and interpersonal skills
 - clinical examination
 - medical procedures / prescription
 - exercise prescription
 - radiographic image evaluation and interpretation of results
 - Performance of various procedures

All these activities were carried out in room no A306, Third floor, A block.



(Dr Priti Agarwal during the interactive session on OSPE)

After the interactive session on OSPE, the lunch was served in 'Ambrosia', restaurant at Faculty of Hotel and Tourism management.

In the post lunch session, all the participants were handed over the checklist for the stations. The 20 participants were divided into 5 groups with 4 members each. Each group was made to rotate on each of the 5 stations where 1 student on each station was evaluated individually by each participant of the group according to the checklist provided. This activity was performed in room no A307, Third floor, A block.



(Station 1 showing the student interpreting the radiograph and answering the questions)



(Station 2 showing the student recording the blood pressure on the simulated patient and all the participants of the group evaluating the student individually according to the checklist)



(Station 3 showing the student performing the experiment on estimation of urine sugar and the participants of the group evaluating the student individually according to checklist)



(Station 4 showing an unobserved station where student has responded to the questions asked on the answer sheet)



(Station 5 showing the student no 5 performing the gram staining procedure and each step being evaluated according to the checklist by the participants)

The OSPE checklist was as follows:

	St -1	St-2	St-3	St-4	St-5
STATION -1 (Duration =5 minutes)					
Position of X ray (while holding it)-1					
Anatomical site-1					
Main bones and affected one-1					
Prominent finding-1					
Identification of marked area-1					
STATION -2 (Duration =5 minutes)					
Checking of zero reading on the mercury manometer-1					
Checking for the normal functioning of diaphragm of stethoscope-1					
Positioning of cuff and tubing-1					
Brachial artery is palpated at right position or not-1					
Whether the two methods of BP evaluation are done or not-1					

STATION -3 (Duration =5 minutes) Has he washed the test tube?-1					
Is he taking adequate amount of Benedict's reagent (5ml), and urine sample (8 drops) ? -1					
Proper handling of pipette? -1					
Proper time of boiling? -1					
Final result (test is positive/negative)-1					
STATION -4 (Duration =5 minutes) Blood agar -1					
Colonies- convex, opaque, B hemolytic, golden yellow- 4					
STATION -5 (Duration =5 minutes) Position of slide/smear on the rack-1					
Choice of staining reagents-1					
Timing of appropriate reagents-1					
Drying and focusing of smear-1					
Interpretation (Gram positive/negative, cocci/bacilli) -1					

In this exercise, the participants /evaluators were rotated on each station to explain the faculty members about how the stations are kept and how the checklist is made and used. But in the actual scenario, the stations and evaluators are fixed and students are made to rotate clockwise one each station with a fixed time interval given for each station and are then evaluated by the same examiner on each observed station. This causes the students to have the same tasks with same difficulty level and same time frame so that bias towards any student is minimized and the fair assessment is made possible which is reproducible and highly objective.

The detailed checklist was then discussed by the participants.

Day 2: The Day 2 started with the deliberation on OSCE Objectively structured clinical examination by Dr Pankaj Abrol, Professor and Head, Department of Pediatrics, Faculty of Medicine and Health Sciences. The session was interactive with strong inputs from Dr T.D Dogra, Director IQAC clarifying the concepts about OSCE to the participants.



(Dr Pankaj Abrol explaining about OSCE)



Our Pro-chancellor, Dr Sham Lal Singla witnessing the lecture on OSCE as a participant.



(Dr Dogra clarifying the doubts about OSCE)

The next session involves demonstration of OSCE stations. 5 stations were prepared primarily of pediatrics and the participants were divided into 4 groups with each group having atleast 1 member from FMHS so as to understand the medical scenarios at the prepared stations. The group was made to do the task this time at each station. 3 evaluators Dr Pankaj Abrol, Dr Kapoor from pediatrics and Dr S.C Mohapatra evaluated the participant group.



(Participant group performing the task of recording history from simulated patient and being evaluated by Dr Pankaj)



(Group 2 on station 2 performing the required task and being evaluated by Dr Kapoor)



(Group 3 on station 3 writing the responses being observed by Dr S.C Mohapatra)



(Group 4 on station 4 writing the required responses and dropping the responses in the box)



(Participants on station 5 writing the responses and being evaluated by Dr Kapoor)

After the demonstration exercise, the discussion about the stations was done by Dr S.C Mohapatra.



The OSCE stations along with their answers were as follows:

OSCE

Station No : 01

- 1) You are asked to counsel a mother having 9 months old infant with Acute watery diarrhoea, regarding ORT
- 2) Mother asks what to do if the baby vomits

Station No : 2

6 yrs old boy is brought for bed-wetting. His frequency in day time is normal. He is dry in the day. He is never been dry in the night.

- 1) Define this problem? What type is it?
- 2) Is it complicated or uncomplicated?
Enumerate 4 differences between complicated and uncomplicated.
- 3) Name 3 drugs and dosage for the pharmacological therapy of this condition.
Name 3 non - pharmacological measures for the management of this condition.

Answer for Station No: 01

1. Check list:

- | | |
|---|-----|
| i) Introduces himself | 0.5 |
| ii) Explains that the main treatment is ORT and explains the need for rehydration. | 1.0 |
| iii) Explains correctly the preparation of ORT whole packet in 1 liter of water. | 1.0 |
| iv) Advises feeding by spoon discourages bottle feeding. | 0.5 |
| v) Stop ORT for 5 - 10 minutes and restart feed, give slowly spoonful every 2 - 3 minutes | 0.5 |
| vi) Advise giving small aliquots of 5 - 10ml each time. | 0.5 |
| vii) Explains the danger signs of dehydration and explains when she should seek medical attention if does not become better in 3 days or develops danger Signs (Seizure / unconsciousness / rapid breathing etc). | 1.0 |
| viii) Encourages continuation of breast feeds / normal feeds / home available feeds. | 0.5 |
| ix) Checks, whether the mother has understood or not. | 0.5 |
| x) Ask the mother whether there are any doubts. | 0.5 |

2. Continue ORS, Domperidone 0.5

Total : 7

Answer for Station No : 2

- 1) Nocturnal Enuresis. Primary Nocturnal Enuresis 2
- 2) Uncomplicated 1

	Uncomplicated	Complicated
Onset	Primary	Secondary
Daytime symptoms	absent	+
Stream	Normal	Abnormal
Physical	Normal	Abnormal
Urine analysis	Normal	Abnormal

4

- 3) Drug "DOI!!!" Dose

DDAVP	10 - 40 mcg/day
	Nasal spray
Oxybutinin	10 - 20 mg/day PO
Imipramine	0.9 - 1.5 mg/kg/day
- Non-pharmacological Behavioral modification, Bladder exercises, alarm device 3

Total: 10

Station No :3

Take relevant history from this parent whose child is suspected to have urinary tract infection for the first time.

Answer for Station No : 3

Introduces himself	1
History of fever History	1
Of constipation History	0.5
Of urgency	0.5
History of malodorous urine	0.5
History of suprapubic pain	0.5
History of loin pain	0.5
Details of coevute toilet training	1.0
Wiping from back to front	0.5
History of incontinence	0.5
History of threadworm infection	0.5
Family history of renal disease/ stones	1.0
Family history of UTI/VUR	1.0
Note of thank	1.0

Total:10

Station No : 4

You have performed ICD on a child with empyema. How will you dispose the used items given below?

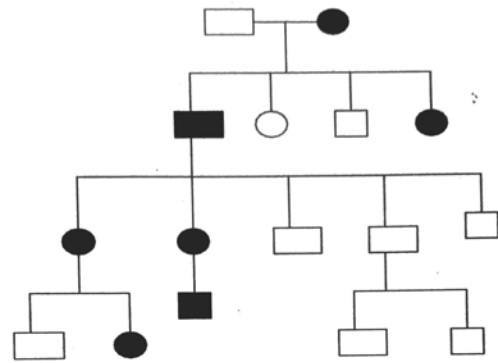
- > Scalpel blade, hypodermic needles, trochar, used ampoules
- > Cotton, gauze, linens, suture material, surgical mask, gloves
- > Pus, 3 way connector
- > Syringe, plastic covers of gloves and ICD bag cover

Station No : 5

Answer for Station No : 4

- Blue / white transparent puncture proof container 1.0
- Yellow bag 1.0
- Red bag 1.0
- Black plastic bag. 1.0

Total 4.0



- 1) Describe the pedigree
- 2) What is the mode of inheritance?
- 3) Give 4 examples.

Answer for Station No : 5

- 1) 3 generation pedigree chart showing
 - All daughters of the affected males have the disease
 - Sons of the affected males are normal
 - Affected females affect $\frac{1}{2}$ of the males and $\frac{1}{2}$ of the daughters 2.0
- 2) X- linked dominant inheritance
- 3) Hypophosphatemic rickets (Vit.D resistant)
 - Incontinentia pigmenti
 - Oro facial digital syndrome 4.0
 - Rett syndrom Total :6.0

After the lunch, All the participants were engaged in group activity wherein the faculty members pertaining to one speciality were asked to formulate stations designs that can be applicable to them whether OSCE or OSPE. All the participants prepared the stations and their respective checklist and discussed the same with Dr T.D Dogra.



(Dr Dogra discussing the prepared stations with Mr Vinod Gehlot from Pharmacy about their prepared OSPE station)



(Dr Dogra discussing about the prepared OSCE station with Dental Faculty)

Certificate Distribution

Certificates were distributed to all the Participant Faculties and facilitators by Professor T D Dogra, the Director of IQAC and Prof.S C Mohapatra.



(certificate distribution to Dr Pankaj for being facilitator for OSCE)



(Certificate distribution to Dr Mona Prabhakar as a participant)