Multiple Choice Question Examination

The Committee for Examinations followed established procedures to create the Multiple Choice Question (MCQ) examination for August 2017 and determine the overall pass mark. The pass mark was determined through intensive standard setting exercises involving Fellows from around Australia and New Zealand.

Candidates are provided feedback as to their performance in identified curriculum areas, which may be diagnostic or clinical categories. This is the only means by which feedback is able to be broken down in any detail.

The pass rate for the 195 candidates who sat the MCQ exam across Australia and New Zealand was approximately 87%. The reliability of the MCQ examination was satisfactory.

Analysis of average scores for each curriculum area across the whole examination showed that the highest performing curriculum category in the exam was ‘Assessment’, followed by ‘Phenomenology’. However, it should be noted the number of questions included in ‘Assessment’ were limited. The curriculum categories that performed the least well were ‘Specific Areas of Practice – Child and Adolescent’ and ‘History of Psychiatry’. Performance of the cohort on CAP and non-CAP items is reported below.

Critical Analysis Problems (CAPs)

The two Critical Analysis Problems in the MCQ exam were drawn from articles about scholarship, basic sciences and medical knowledge, and treatments in psychiatry.

The cohorts’ scores for the CAPs component of the MCQ examination ranged between 30% and 90%. On average, candidates scored well in the CAP section of the MCQ examination.

The CFE would like to remind all candidates that the ability to read and interpret the professional literature is regarded as a core skill of a psychiatrist.

Non-CAP EMQs/MCQs

The performance of the non-CAP component of the MCQ exam continued to be on par with previous cohort performances with individual candidate scores ranging from a minimum of approximately 33% to a maximum of approximately 85% on these questions.

Analysis of the results showed that an area of strength for the cohort were questions about anxiety disorders and eating disorders.

Candidates may wish to direct more study towards the areas of the curriculum in which average scores for the cohort were low. These areas were: Child and Adolescent area of practice, History of Psychiatry, and Epidemiology (although the number of questions in these latter areas was small).