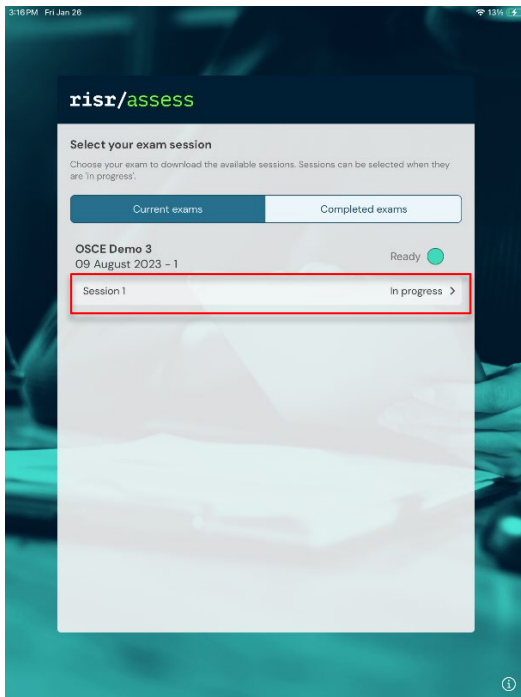
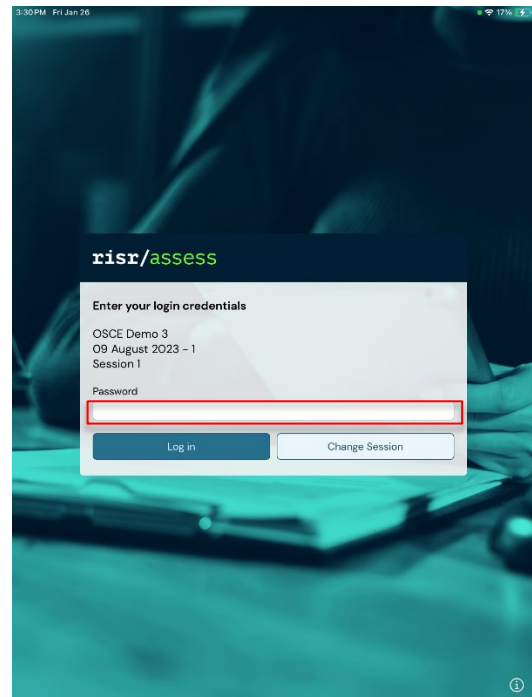


iPad instructions for OSCE examiners

iPads will be set up and configured prior to the examination. Examiners will be provided with login details before the examination begins. The iPads uses a touch screen, and the examiners will use their fingers to select, scroll, type and navigate the screen. Examiners will select the correct session on the session selection screen and then enter their credentials on the examiner login screen.

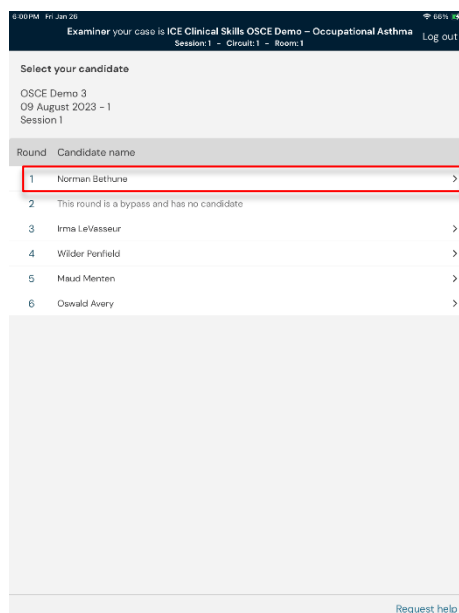


Session selection screen



Examiner login screen

Examiners will be presented with a list of the candidates they will be examining. The list of candidates is in the order in which the candidates will present themselves. When a candidate's name is selected the examiner will be brought to the marksheet for that candidate.



Candidate list

The marksheet is specific to the station the examiner is administering. The iPad can be used in portrait or landscape orientation by turning the iPad to the side.

4:23 PM Fri Jan 26
Candidate list Examiner this mark sheet is for Norman Bethune
Session: 1 - Circuit: 1 - Room: 1 Log out

Part B - Global Rating Scale

Medical expert - History taking and data collection
Acquires chronologic, medically logical description of pertinent events. Acquires information in sufficient breadth and depth to permit a clear definition of the patient's problem(s).

Unsatisfactory	Borderline	Meets Expectations	Exceeds Expectations	Outstanding
Incomplete, major omissions, lacks focus, asks irrelevant questions	Often misses several aspects of history, not well organized	Thorough, logical, organized, accurate	Proficient, organized, thorough, logical, elicits some subtle historical points	Exceptional ability to elicit relevant detail with efficient use of time

Communicator - verbal expression
Demonstrates fluency in verbal communications e.g. grammar, vocabulary, tone, volume.

Unsatisfactory	Borderline	Meets Expectations	Exceeds Expectations	Outstanding
Communicates in manner that interferes with and/or prevents understanding by patient and examiner.	Communicates in manner that interferes somewhat with understanding by patient and examiner.	Exhibits enough control of expression to be understood by an active listener (patient and examiner).	Good control of expression leading to understanding by patient and examiner.	Exhibits excellent command of expression (fluency, grammar, vocabulary, tone, volume and modulation of voice, rate of speech, pronunciation) leading to comprehension by patient and examiner.

Communicator - non-verbal expression
Demonstrates responsiveness. Demonstrates appropriate non-verbal communications e.g. eye/camera contact, gestures, facial expressions, attention, use of silence.

Unsatisfactory	Borderline	Meets Expectations	Exceeds Expectations	Outstanding
Fails to engage, frustrates and/or antagonizes the	Some difficulty engaging, mild frustration and/or	Exhibits enough control of non-verbal expression to	Good control of non-verbal expression leading	Exhibits finesse and command of non-verbal expression

Resources Mark sheet Request help

Marksheet in portrait orientation

4:23 PM Fri Jan 26
Candidate list Examiner this mark sheet is for Norman Bethune
Session: 1 - Circuit: 1 - Room: 1 Log out

Part B - Global Rating Scale

Medical expert - History taking and data collection
Acquires chronologic, medically logical description of pertinent events. Acquires information in sufficient breadth and depth to permit a clear definition of the patient's problem(s).

Unsatisfactory	Borderline	Meets Expectations	Exceeds Expectations	Outstanding
Incomplete, major omissions, lacks focus, asks irrelevant questions	Often misses several aspects of history, not well organized	Thorough, logical, organized, accurate	Proficient, organized, thorough, logical, elicits some subtle historical points	Exceptional ability to elicit relevant detail with efficient use of time

Communicator - verbal expression
Demonstrates fluency in verbal communications e.g. grammar, vocabulary, tone, volume.

Unsatisfactory	Borderline	Meets Expectations	Exceeds Expectations	Outstanding
Communicates in manner that interferes with and/or prevents understanding by patient and examiner.	Communicates in manner that interferes somewhat with understanding by patient and examiner.	Exhibits enough control of expression to be understood by an active listener (patient and examiner).	Good control of expression leading to understanding by patient and examiner.	Exhibits excellent command of expression (fluency, grammar, vocabulary, tone, volume and modulation of voice, rate of speech, pronunciation) leading to comprehension by patient and examiner.

Communicator - non-verbal expression
Demonstrates responsiveness. Demonstrates appropriate non-verbal communications e.g. eye/camera contact, gestures, facial expressions, attention, use of silence.

Unsatisfactory	Borderline	Meets Expectations	Exceeds Expectations	Outstanding
Fails to engage, frustrates and/or antagonizes the	Some difficulty engaging, mild frustration and/or	Exhibits enough control of non-verbal expression to	Good control of non-verbal expression leading	Exhibits finesse and command of non-verbal expression

Resources Mark sheet Request help

Marksheet in landscape orientation

TIP: Hold the iPad in landscape orientation to view all rating options in one row

Examiners can select the rating and the domain will collapse, hiding the rating descriptors. Deselecting the rating will bring the descriptors back into view. Once a rating is highlighted the examiner can scroll down to select the rating for the next question or criteria.

6:12 PM Fri Jan 26
Candidate list Examiner this mark sheet is for Norman Bethune
Session: 1 - Circuit: 1 - Room: 1 Log out

Part B - Global Rating Scale

Medical expert - History taking and data collection
Acquires chronologic, medically logical description of pertinent events. Acquires information in sufficient breadth and depth to permit a clear definition of the patient's problem(s).

Unsatisfactory	Borderline	Meets Expectations	Exceeds Expectations	Outstanding
		Meets Expectations		

Communicator - verbal expression
Demonstrates fluency in verbal communications e.g. grammar, vocabulary, tone, volume.

Unsatisfactory	Borderline	Meets Expectations	Exceeds Expectations	Outstanding
Communicates in manner that interferes with and/or prevents understanding by patient and examiner.	Communicates in manner that interferes somewhat with understanding by patient and examiner.	Exhibits enough control of expression to be understood by an active listener (patient and examiner).	Good control of expression leading to understanding by patient and examiner.	Exhibits excellent command of expression (fluency, grammar, vocabulary, tone, volume and modulation of voice, rate of speech, pronunciation) leading to comprehension by patient and examiner.

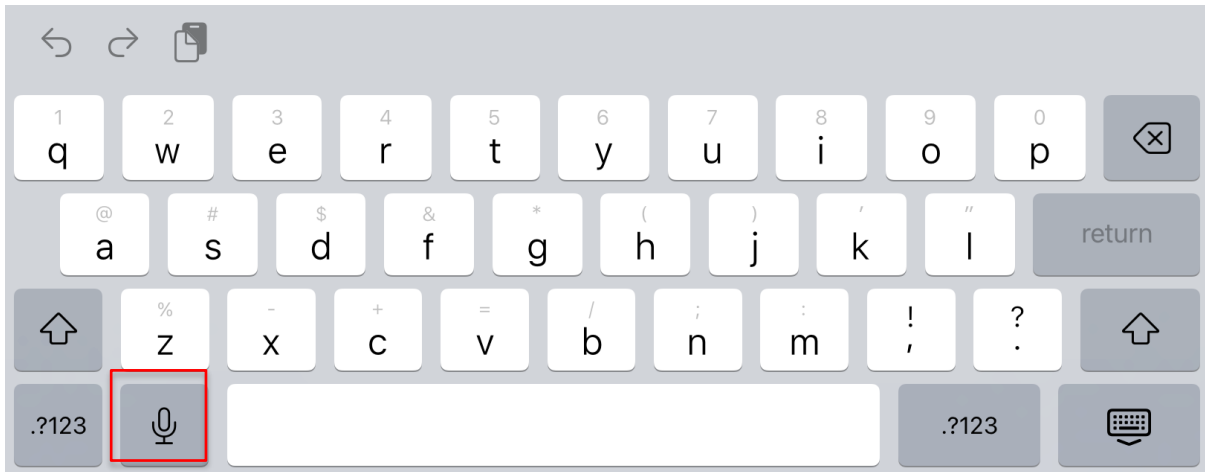
Communicator - non-verbal expression
Demonstrates responsiveness. Demonstrates appropriate non-verbal communications e.g. eye/camera contact, gestures, facial expressions, attention, use of silence.

Unsatisfactory	Borderline	Meets Expectations	Exceeds Expectations	Outstanding
Fails to engage, frustrates and/or antagonizes the patient and examiner.	Some difficulty engaging, mild frustration and/or antagonism of patient and examiner.	Exhibits enough control of non-verbal expression to engage a patient and examiner willing to overlook	Good control of non-verbal expression leading to engagement by patient and examiner.	Exhibits finesse and command of non-verbal expression (eye contact, gesture, posture, use of

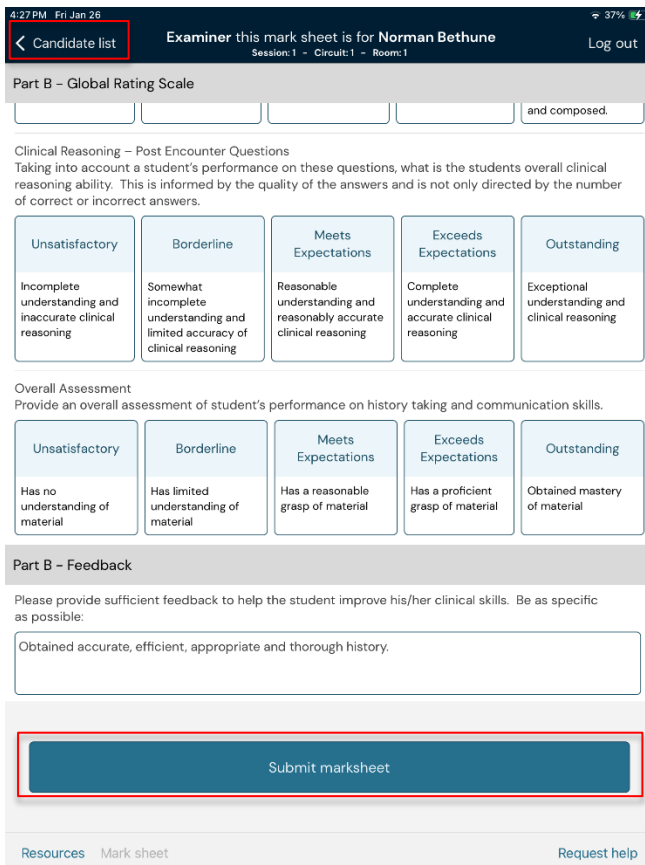
Resources Mark sheet Request help

Marksheet with a selection made

When the examiner is ready to provide feedback into the text box, they may either touch the text box and start typing the feedback using the pop-up keyboard or touch the microphone icon on the keyboard to provide the feedback verbally by speaking to the iPad. The examiner will see that their voice is converted to text. The examiner can edit the text further by typing and tap Save when finished.



Once an examiner has completed their marking for the candidate, they click “Submit marksheet” to submit the marking. They can then return to the candidates list by clicking on the top left corner “Candidate list”.



[Submit marksheet](#)

6:26 PM Fri Jan 26 74%

[Candidate list](#) Examiner this mark sheet is for Irma LeVasseur Log out

Session: 1 - Circuit: 1 - Room: 1

Part B – Global Rating Scale

Clinical Reasoning – Post Encounter Questions
Taking into account a student’s performance on these questions, what is the students overall clinical reasoning ability. This is informed by the quality of the answers and is not only directed by the number of correct or incorrect answers.

Overall Assessment
Provide an overall assessment of student’s performance on history taking and communication skills.

Part B – Feedback

Please provide sufficient feedback to help the student improve his/her clinical skills. Be as specific as possible:

Resources [Mark sheet](#) [Request help](#)

Submission confirmation

Examiners can also amend marks by selecting the candidate’s marksheet and scrolling to the bottom and selecting “Amend marksheet”.

6:31PM Fri Jan 26 75%

[Candidate list](#) Examiner this mark sheet is for Norman Bethune Log out

Session: 1 - Circuit: 1 - Room: 1

This marksheet has been submitted and received

Part B – Global Rating Scale

Clinical Reasoning – Post Encounter Questions
Taking into account a student’s performance on these questions, what is the students overall clinical reasoning ability. This is informed by the quality of the answers and is not only directed by the number of correct or incorrect answers.

Overall Assessment
Provide an overall assessment of student’s performance on history taking and communication skills.

Part B – Feedback

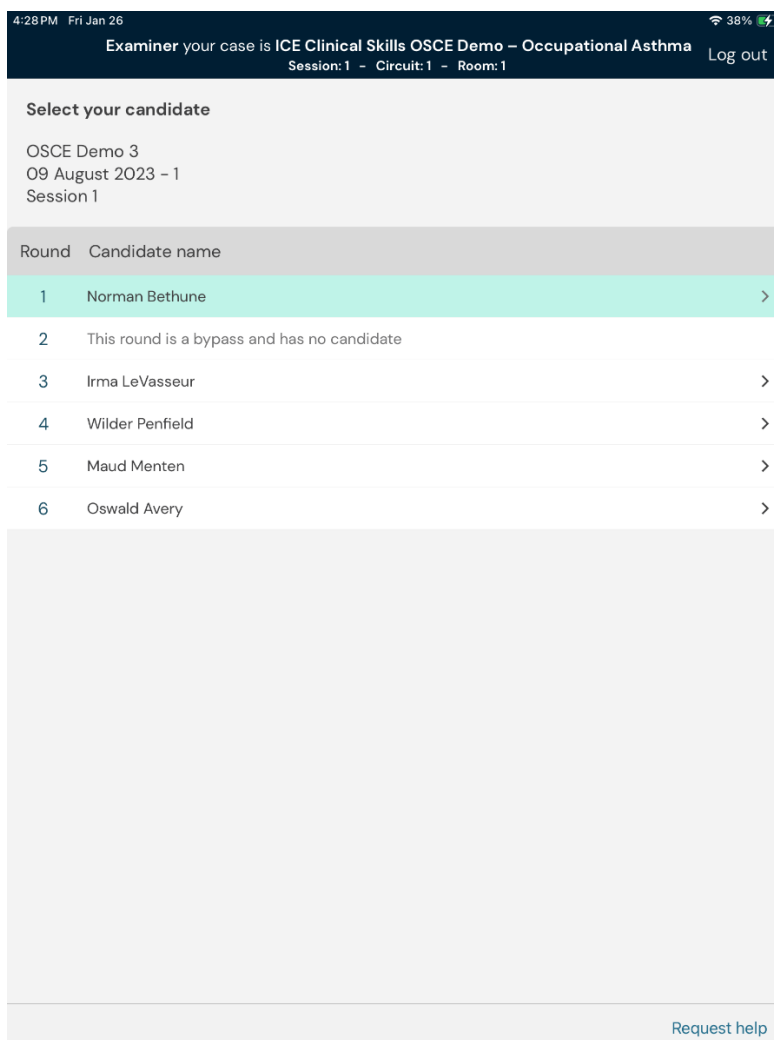
Please provide sufficient feedback to help the student improve his/her clinical skills. Be as specific as possible:

Resources [Mark sheet](#) [Request help](#)

Amend marksheet

Once the examiner has submitted their marks for the candidate, they can return to the candidate list (top left) and select the next candidate. Scored candidates with marks saved to the server will appear highlighted in green.

If candidates are highlighted in yellow there could be two reasons. The first reason could be that not all mandatory questions/criteria have been marked by the examiner. To complete the marking the examiner will return to the candidates marksheet, select any outstanding ratings and click "Submit marksheet". The second reason for the candidate being highlighted in yellow may indicate that the iPad is not connected to Wi-Fi. Reconnecting the iPad to Wi-Fi will allow all the saved marks to be uploaded at the end of the exam or during a break. If a message appears stating that there is no Wi-Fi connection, examiners should not worry, and continue marking. All marks are saved to the device and will upload to the server once a Wi-Fi connection is re-established.



Candidate list with marks submitted for the first candidate.

During the exam, examiners can also refer to electronic station resources as a back-up to paper copies. These resources can be accessed by clicking the "Resources" button at the bottom left of the screen. These resources can be opened and enlarged as needed.

Clinical Reasoning – Post Encounter Questions

Taking into account a student's performance on these questions, what is the student's overall clinical reasoning ability. This is informed by the quality of the answers and is not only directed by the number of correct or incorrect answers.

Unsatisfactory	Borderline	Meets Expectations	Exceeds Expectations	Outstanding
Incomplete understanding and inaccurate clinical reasoning	Somewhat incomplete understanding and limited accuracy of clinical reasoning	Reasonable understanding and reasonably accurate clinical reasoning	Complete understanding and accurate clinical reasoning	Exceptional understanding and clinical reasoning

Overall Assessment

Provide an overall assessment of student's performance on history taking and communication skills.

Unsatisfactory	Borderline	Meets Expectations	Exceeds Expectations	Outstanding
Uses no	Uses limited	Uses a reasonable	Uses a proficient	Obtained mastery

[Resources](#) [Mark sheet](#) [Request help](#)

Once a resource is open click on the "List" button on the top right side of the screen to return to the page displaying all resources. Click on the "Mark sheet" button at the bottom left of the screen to return to the candidate marksheet.

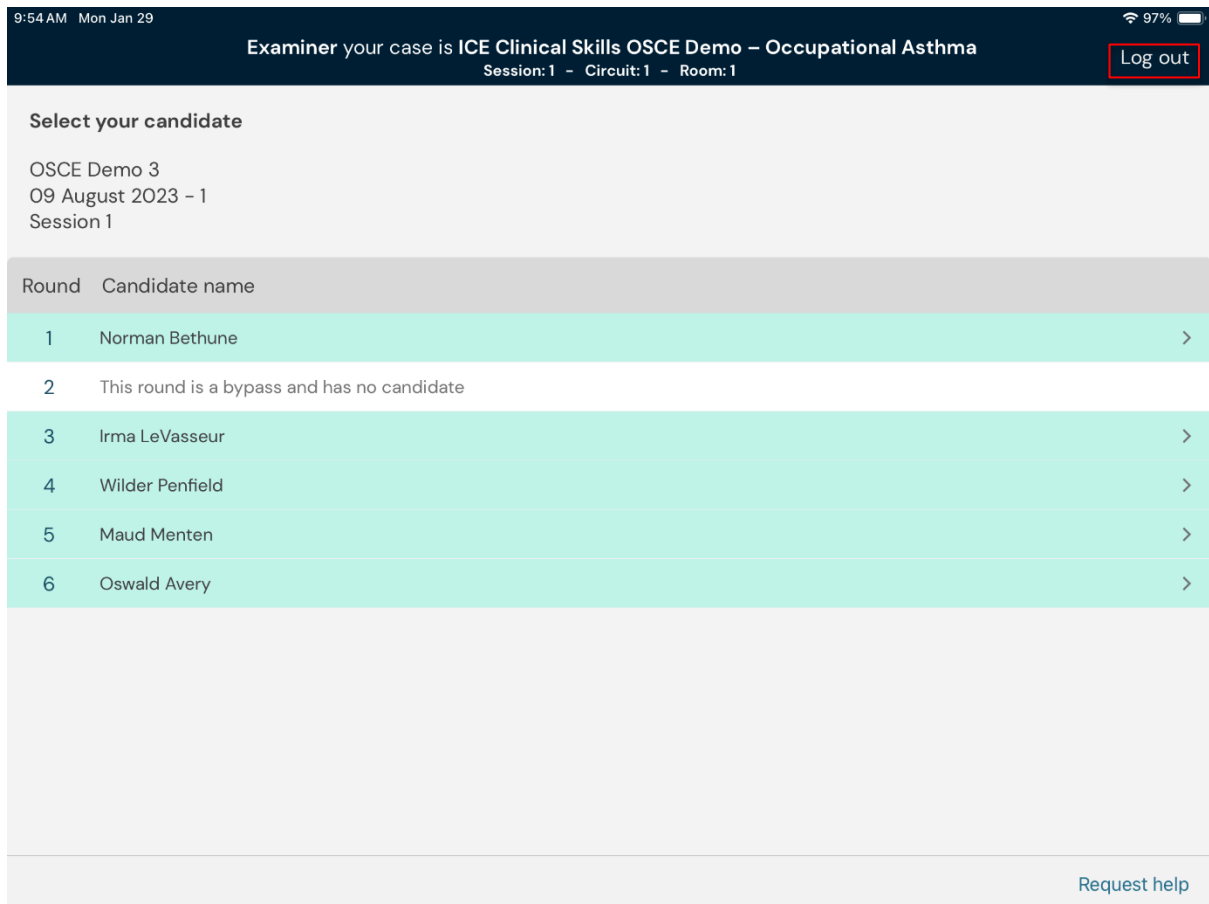
6:41 PM Fri Jan 26 78%

< Candidate list Examiner this mark sheet is for Oswald Avery Session: 1 - Circuit: 1 - Room: 1 Log out

Demo x-ray List

Resources Mark sheet Request help

Once the examiner has completed marking all candidates, they can log out of the session by clicking “Log out” at the top right of the screen. By logging back in, the examiner will have access to all of the marks and can amend them if needed.



Candidate list showing all candidates marked i.e. green background. To logout, tap ‘Log out’ at the top right corner of the screen

Once the exam administrator has ended the session, the examiner will no longer have access to their marksheets from the iPad. Marking amendments can be made in the back end of the system by the exam administrator.

The on-site administrator will check that the examiners have submitted all of their marks before excusing them from the exam site. The iPads are to be returned to the on-site administrator.

Available help and resources

Prior to the OSCE: md.oae@utoronto.ca

During the OSCE: Contact the on-site Administrator

Resources: <https://meded.temertymedicine.utoronto.ca/osce>