ABCN:

Preparing for the ABPP Board **Certification Examination in Clinical** Neuropsychology Part 3: Oral Examination in Ethics / Professional **Development and Fact Finding**

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ORAL EXAMS 3 SECTIONS

Practice Sample Ethics and Professional Commitment Fact Finding

the exam room and start with brief instructions.

•All examiners will be assessing your knowledge in the required areas of competency.

•Examiners are collegial and try to make the experience interesting and rewarding for you, while assessing your knowledge / reasoning.

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ORAL EXAMS THINGS YOU SHOULD KNOW

<u>Confidentiality</u>: You will be asked to sign a Statement of Confidentiality agreement, affirming that you will not discuss specifics of the exam with others at any time and that you will not reveal the identity of any other candidates present for the exam.

- •Exam Team: 1 examiner for Ethics and Professional Commitment 1 examiner for Practice Sample 1 examiner for Fact Finding
- You may (or may not) have an additional person
 1 observer (senior ABCN specialist who served as an examiner)

ORAL EXAMS THINGS YOU SHOULD KNOW

Observers and trainees do not participate in the exam or deliberations but may be called upon to clarify facts

- Each exam lasts 45-55 minutes
- Candidates may brin pen / paper to the exam
- All notes taken during the exam must be given to the examiner at the

Candidate can bring a copy of the Practice Samples to that exam, as originally submitted for the review. Samples cannot have notes or added markings on the samples.

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- ProfessionalismRelationships
- Interdisciplinary systems
 Reflective Practice/Self-Assessment/Self-Care.



Ethics Exam - What is the task?

> Two purposes

- The first is to examine the candidate's knowledge of and sensitivity to ethical issues.
- The second is to learn about the candidate's day-to-day professional practice and to evaluate her commitment to the profession.



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Ethics Portion:

- Candidate is given a brief vignette embedded with issues of professional practice and ethical considerations.
- The candidate must identify the relevant issues and explain the ethical principles involved.
- Knowing the title of an ethical principle is not necessary or sufficient; the candidate must demonstrate a clear understanding of the rationale behind the ethical principle.
- Candidates may also be asked to describe actions that could be taken to
 resolve the situation or how they would behave under similar circumstances.

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Practice Portion:

- Candidates describe their own clinical practices, continuing education activities, ethical/legal issues encountered in practice, and professional involvement.
- Candidates may be questioned about a variety of professional issues, such as their education and training background, current methods of practice, professional and scientific involvement, changes or challenges in the field, diversity issues within their practice, and the steps they take to evaluate and improve their own competencies.
- Candidates who are active in professional activities such as research, teaching, clinical supervision, administration, and/or practice management will be given opportunities to discuss their involvement in these activities and the means by which they measure and maintain effectiveness.

Ethics Exam - What is the task?

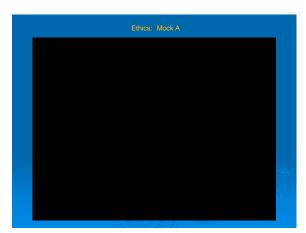
- · Read the vignette carefully issues of professional practice, behavior, and
- You must identify the relevant issues and explain the ethical principles that



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If Table – Mean A
 Dr. Smith is a neuropsychologist in private practice, who also teaches an introduction to
 neuropsychology course at a tode clobely. She encourages her undergraduate students to earn entra credit by
 administering tests to her private practice patients. Students learn to administer tests by watching a 1-hour
 video prior to testing.
 Joon arriving for the scheduled test administration session, the student examiner recognizes the
 patient as a fellow student who lives down the hall in the same domitary. The student examiner reviews the
 relefand, which reads. 'Please evaluate 18-year-of-through lemake with failing grades and determine
 reed for academic assistance. 'Alter reading the consult informator, the student examiner tests his normnate
 who is a teaching assistant to see if he know the patient and whether the patient was alleng the classes.
 The student examiner tells Dr. Smith he would be uncomfortable testing the patient since the student
 resting assistant to see if he know the patient and whether the patient was alleng the classes.
 The student examiner tells Dr. Smith he would be uncomfortable testing the patient since the know
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 measures including reading comprehension. Multiple times during the evaluation the patient adving the would
 matures the student examiner writes a bird peort. Dr. Smith instructs the student examiner to remove a
 statement that the patient appeared depressed since his conclusion was subjective and to include a diagnosis.
 The tother teppeort be student examiner for peort.
 Dr. Smith instructs the student examiner the move a
 statement that the patient appeared depressed since his conclusion was subjective and to include a diagnosis.

or a resting usedue: which is which removes the student examiner's name from the report, adds her own signature, and submits the bill to the patient's insurance company. After receiving a denial of payment from the patient's insurance company, she then sends a bill to the patient's home address, stipulating that the patient of responsible for the bill since her health insurance policy refused to pay for an 'academic evaluation'. Dr. Smith also states that her folues to relate the top turn the patient's home address.

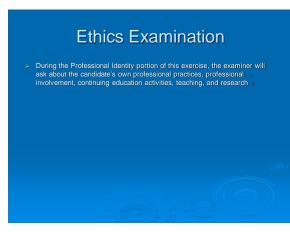


thics: Mock B

A psychologist was interested in studying substance abuse in middle school children. He got permission to distribute a survey during class asking about the students' use of alcohol and other substances. The school required that a copy of the data be turned over to the school psychologist. The psychologist submitted the findings to a peer review journal.







Let's practice some more:

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A psychologist working with children was called by a friend and encouraged to evaluate her mother, who was becoming forgetful at the age of 72. The psychologist recommended that the friend talk to her mother's physician, but the friend said that her mother was adamant that there was nothing wrong with her and would not see a doctor. The psychologist agreed to stop by the house for a visit with the daughter, where she could ask her mother some questions to determine whether she was demented. During the visit, the mother was unable to remember her doctor's name, and the psychologist advised them that the mother showed evidence of Alzheimer's disease.



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Ethical Issues

- 8.01 Institutional approval
- 8.02 Informed consent to researched
- 8.04 Client/patient and subordinate research
- participation
- 4.01 Maintaining co
- 4.05 Disclosures
- 1.03 Conflicts between ethics and organizational
- 7.04 Student disclosure of Personal Informatio

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An academic psychologist proposes to his department chair that they add a training program in Neuropsychology to their graduate offerings. The proposal is to develop a course in psychological assessment and arrange for their students to attend several workshops in Neuropsychology by experienced neuropsychologists. The department believes this plan will help them recruit more graduate students and prepares a brochure listing Neuropsychology as one of its education and training programs.

Ethical Issues

- 7.02 Descriptions of Education and Training Programs
- 5.03 Descriptions of Workshops and Non-Degree-Granting Educational Programs



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A psychologist provides therapy to Patient A, who says he wants to be a better person overall and a better partner to his girlfriend. The girlfriend begins to accompany Patient A to therapy and participates. The psychologist begins to see Patient A and the girlfriend now Patient B, together and separately. The psychologist views Patient A as the primary patient and does not have Patient B sign the customary forms such as authorization to disclose confidential information. Later the psychologist Patient A, now the Defendant, against Patient B, now the platintfif, and consults with the Defendant against Patient B now the plating the had met with both patients on more occasions than is reflected in his records. During the testimony the psychologist states that Patient B has a borderline personality disorder based on observation alone.

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Ethical Issues

- 3.05 Multiple Relationships

Ethics Examination

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Fact finding

- Candidates have no advance to denote that the damp is of the damp is of the damp is of the damp is the da
- adult case.

 The Fact Finding exercise allows every candidate to work through a similar clinical problem.
- The examiner is interested in seeing how the candidate collects information, evaluates and integrates the information that is provided, conceptualizes the case, constructs a list of differential diagnoses, and makes recommendations for managing the problem.

* The cases that are used for the Fact Finding exercise have been selected from the practices of ABCN clinical neuropsychologists. They are real cases that have been chosen because they are considered to represent the types of problem that an appropriately trained and experienced clinical neuropsychologist should be able to evaluate, diagnose, and manage.

- Candidates may only bring a pen into this part of the exam.
- Any notes made during the Fact Finding exercise must be given to the examiner when the exercise is finished.
- Although candidates are prohibited from bringing other material into the exam, there is no limit placed on what a candidate might write during the exam.
- Some candidates find it helpful to use the first few minutes of the exam to sketch a brief outline that serves to keep them focused and to guide their questions.

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- The Fact Finding exercise begins with the examiner showing the candidate two very brief descriptions of patients presenting for neuropsychological evaluations; one patient is an adult and the other is a child or adolescent.
- The candidate then chooses one of the cases for the exam.
- Candidates should envision themselves performing an initial neuropsychological consultation.
- The candidate's task is to obtain additional information by questioning the examiner, who is the information resource, so that he or she can gain a full understanding of the problem, arrive at their own evaluation of the situation, and make recommendations for managing the problem.

- The examiner has a considerable amount of information, all of which is available to the candidate.
- This information includes data that are normally available in the daily
 practice of clinical neuropsychology, such as relevant historical,
 demographic and medical data as well as neuropsychological and
 psychological test results.
- The Fact Finding exercise simulates the neuropsychological evaluation of a real patient.
- Candidates obtain whatever information they need to conduct an evaluation by asking the examiner specific questions.
- If a candidate fails to ask for a relevant or important data point, it will not be provided. The examiner is prohibited from volunteering information that has not been requested by the candidate. If a candidate's questions are too general, (s)he will be asked to make them more specific. Examinees may question the examiner as extensively as they wish, except they may not ask for the examiner's opinion or conclusions.

- During the Fact Finding exercise, it is the candidate's responsibility to It is suggested that candidates use approx 20-25 minutes to ask questions.
- conceptualization.
- Conceptionization: Requested test scores will be given to the candidate in writing to facilitate time efficiency. When the candidate is ready, or when prompted by the examiner, the candidate should plan on taking approximately 10 minutes to discuss their case conceptualization and present their conclusions and recommendations. • The candidate should identify the nature and severity of the
- The calculate should be may the fractile and severity of the neuropsychological issues, underlying neuroanatomical considerations, probable etiologies, and recommendations to the patient, family members, and/or health professionals for managing the condition.
 In presenting conclusions, it is not sufficient to simply arrive at the correct
- conceptualization.

 Candidates must demonstrate their knowledge by explaining their rationale
- Even if the case conceptualization is accurate, candidates can expect to be challenged about their conclusions and questioned about domains of knowledge related to the case.

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- behavior-condition issues
- How contextual factors and diversity issues may impact presentations, interpretations, and conclusions

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Common fears for the oral exam process

- Study

Fact Finding – What is the Task?

- Gather relevant information
 - presenting concerns
 - behavioral observations
 - testing results

- Provide recommendations

Fact Finding – Gathering

- testing results
- Ask questions wisely (not too specific, not too general...)
- Be efficient in your process of gathering

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Fact Finding – Summarizing

- Summarize / Conceptualize the case

- · Added factors contributing to the data Provide recommendations / prognosis

Fact-Finding Examination

- Be ready to explain characteristics of possible syndromes, disorders, or diseases
- Be prepared to discuss differential diagnostic
- considerations (inclusive and exclusive)
- Be prepared for the examiner to ask questions to 'stretch' your knowledge

Remember

- You want to show the examiner all that you can about your knowledge
- You want the examiner to have opportunity to examine you thoroughly
- The examiner's job is to bring to the exam team deliberation a summary of your approach to the exam, your depth of knowledge in areas assessed, and your overall fit to the competencies

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Fact-Finding Examination

- You will have only 45-55 minutes to collect the data and summarize your findings.
 - Just Time management is one of the biggest challenges for this task
 - YOU are responsible for monitoring your time
 - Although examiners might do some prompting

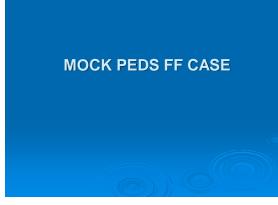
Fact Finding – Steps to Success

- Think about how to use your time
 - 5 minutes to write out your template
 - 20 minutes to collect the patient's history
 - 10 minutes to collect, review and discuss test data
 - 5-10 minutes to summarize the history, data conceptualization, & present dx conclusions.
 - 5-10 minutes to discuss other possible etiologies if the examiner provides new information to you

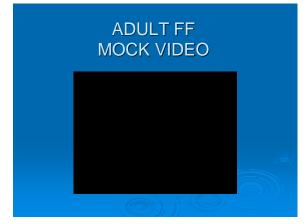
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Fact Finding – Steps to Success

- Gathering test results
- You will be given all the results in that domain, and you will be able to keep these scores for the remainder of the hour.
- Ask for clarification if you are unfamiliar with a test
- If you receive information about a test with which you are not familiar, it is OK ask the examiner to explain the test and the score(s)
- The goal of Fact Finding is not to simply figure out a patient's medical condition
- It is to show the examiner how you approach the neuropsychological evaluation









Competencies

- Professionalism

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Final Words

- You want to show the examiner all that you can about your knowledge
- thoroughly
- summary of your approach to the exam, your depth of knowledge in areas assessed, and your overall fit to the competencies assessed for oral examination.
- · We are gatherers of data regarding your knowledge.

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Thank you for your attendance!

Best of luck!

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