

National Board Report

A Quarterly Newsletter of the National Board Examination Committee for Veterinary Medicine

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A Comprehensive Examination

The NAVLE Candidate Bulletin, which is provided to all NAVLE candidates and is also available on the NBEC web site, lists as one of the primary objectives of the NAVLE “to provide a comprehensive objective examination to state or provincial boards charged with the licensing of veterinarians.” Some people have interpreted the word “comprehensive” to mean that the NAVLE tests both basic science and clinical knowledge. In fact, as stated on the next page of the Bulletin, the NAVLE is designed to assess “knowledge of veterinary medicine as it relates to entry-level private clinical practice.” The NAVLE is a licensing examination and is not designed to test basic science knowledge, nor were either of its predecessor examinations, the National Board Examination or the Clinical Competency Test since at least 1992.

The year 1992 is important, because that is when the NBEC first implemented criterion referenced scoring for the NBE and CCT. At the same time, the examination blueprint was revised to delete the discipline dimension (parasitology, pathology, medicine, etc.) in favor of a new veterinary practice role dimension. This was done to ensure that all items on the examination were relevant to tasks that entry level veterinarians actually do in private practice.

So what, then, is meant by the term “comprehensive” examination? Simply, that the NAVLE assesses knowledge in a variety of animal species and practice role content areas, as defined in the NAVLE blueprint.

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Name Change Highlights Boston Meeting

At its meeting in Boston on July 17, the NBEC voted to change its name to the National Board of Veterinary Medical Examiners (NBVME). The change is being made to reflect the fact that the organization now operates as an independent board, and no longer functions as a committee. In addition, the old name was more closely associated with one of the products the NBEC used to produce, the National Board Examination.

The name change certainly represents a step forward, but it also draws on the organization’s history. When the AVMA first formed an organization to develop a national licensing examination back in the late 1940’s, the name given to it was the National Board of Veterinary Medical Examiners. The name was changed to NBEC in 1980 when the NBVME was reorganized.

The process of amending the NBEC’s Articles of Incorporation is

now underway, and once that is completed, the name change will be phased in over the next several months.

Other actions taken at the Boston meeting included fine tuning the NBEC’s Strategic Plan, reviewing updates on the PAVE examinations, finalizing the NAVLE technical report, and presenting the 2001 NBEC Award. Each of these items is addressed elsewhere in this issue of the *National Board Report*.

Dr. Norman LaFaunce assumed the office of NBEC Chair at the close of the Boston meeting, succeeding Dr. Nancy Collins, who continues on the Executive Committee as Past Chair. Dr. Jan Krehbiel, the NBEC member appointed by the Association of American Veterinary Medical Colleges, was elected Secretary-Treasurer. Dr. Roger Magnusson moved up to the position of Chair-Elect.

Strategic Plan Adopted

At a meeting in Rosemont, Illinois on June 8-9, NBEC members developed and approved a new Strategic Plan. The Plan includes the following components:

Vision: The NBEC is the recognized leader providing valid and reliable assessment instruments for veterinary medicine.

Mission: The NBEC is a nonprofit professional veterinary examination service. We serve the various licensing and certifying bodies, candidates, the veterinary profession, and the public by producing licensing and other standardized examinations.

Value: The NBEC believes that society expects, deserves, and needs competent and ethical veterinary professionals, and is committed to excellence in assessment.

Goals:

1. Assure continued improvement of assessment instruments.
2. Build effective communications and sustainable relationships with all present and future stakeholders.
3. Enhance the services of NBEC by developing new products in response to the needs of certifying bodies and the veterinary profession.
4. Build and maintain an efficient, effective, and financially stable organization that will ensure and sustain our mission.

Each of the Goals includes specific objectives; those that will receive the highest priority this year include completing development of the two PAVE exams, evaluating the NAVLE contract with the NBME, and nurturing relationships with the AVMA.

Hawe Receives NBEC Award

The NBEC honored the late Dr. Richard S. Hawe in Boston by naming him the recipient of the third NBEC Award. The Award is presented to an individual who has made a significant personal contribution to the national licensing examination program. Dr. Hawe was a member of the NBEC at the time of his death last November.

NBEC member Dr. Catherine Cross, whose own involvement with the national licensing examination program began through the efforts of Dr. Hawe, recognized her late colleague with formal remarks. "Richard Hawe was an extraordinary mentor, and a true teacher" noted Dr. Cross. "Richard's passion was to teach, and he was never too busy to create a lesson. We just had to listen."

Dr. Hawe, a 1975 graduate of the University of Georgia, was first appointed to the NBEC by the American Animal Hospital Association in 1988. He served for nine years in that capacity, and was subsequently appointed to the NBEC by the AVMA Council on Education, a position he held at the time of his death.

In lieu of a formal award, and at the request of Dr. Hawe's family and practice partner, the NBEC made a contribution to the Richard S. Hawe Quest for Excellence in Small Animal Medicine Scholarship Fund at the Virginia Maryland Regional College of Veterinary Medicine.

Previous recipients of the NBEC Award include Drs. Duane T. Albrecht and Samuel E. Strahm.

From the Past: State Board Questions

Number 2 in a Series

In the last issue of the *National Board Report*, we began a series featuring old state board questions, taken from a 1917 book, *Veterinary State Board Questions and Answers*, by V.G. Kimball. Here are some questions on bones and muscles, taken from the anatomy chapter.

1. How many bones are there in the skeleton of the horse?
2. Name the bones of the head.
3. Describe the first cervical vertebra.
4. Name the different classes of articulations and give an example of each class.
5. Describe the ligamentum nuchae, particularly as to its origin, distribution, and function.
6. Name the muscles attached to the upper third of the femur.

Answers

1. The number is subject to slight variation in different skeletons. Considering the sacrum as a single bone, the os hyoides as one, and 16 as the average number of coccygeal vertebrae, there are 191 bones in the horse's skeleton.

2. Cranium (occipital, parietal, frontal, sphenoid, ethmoid, and two temporal), two each of the superior maxillary, premaxillary, palatine, pterygoid, malar, lachrymal, nasal, superior and inferior turbinated, and three single bones (vomer, inferior maxillary, and hyoid).

3. The first cervical vertebra or atlas has no head but instead two deep concave facets which articulate with the occipital; posteriorly, is an articular surface for the odontoid process of the axis; the transverse

processes are large, flattened and incline forward and downward; there is no spinous process, but a roughened surface instead. At the base of each transverse process are two foramina which traverse it from below upward.

4. Synarthroses, *e.g.*, the occipitotemporal articulation; amphiarthroses, *e.g.*, the intervertebral articulations; and diarthroses, *e.g.*, the coxofemoral articulation.

5. The ligamentum nuchae is composed of two portions, *viz.*, a funicular portion, from the first dorsal spinous process to the summit of the head, and a lamellar portion which extends between the spinous processes of the second dorsal and the last six cervical vertebrae. It acts as a stay and support to the head and maintains the head and neck in a natural position during repose.

6. Great psoas, iliopsoas, superficial, middle and deep glutei, tensor fascia lata, vastus externus, vastus internus, pectineus, small adductor of the thigh, great adductor of the thigh, quadratus femoris, obturator externus, internal obturator, and gemelli.

Next month: internal organs.

Correction

In the last issue of the *National Board Report*, we failed to include Dr. Earl Dixon (physiology) and Dr. Charles Hendrix (parasitology) in the list of reviewers for the new Qualifying Examination. Our apologies to Drs. Dixon and Hendrix.

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The purpose of the *National Board Report* is to educate, to inform, and to communicate information about the objectives and programs of the NBEC. The opinions and views expressed in this publication do not necessarily reflect the official opinions, views, or policies of the NBEC or any of its members, unless expressly so stated.

Douglas Aspros, DVM; R.B. Baker, DVM; Nancy L. Collins, DVM, *Past Chair*; James Dalley, DVM, MS; Donald D. Draper, DVM, PhD, MBA; Michael G. Groves, DVM, PhD, DACVM; Al Hopkins, DVM; Jenna Jones, *Public Member*; Jan Krehbiel, DVM, PhD, DACVP, *Secretary-Treasurer*; Norman LaFauce, DVM, DACT, *Chair*; Roger A. Magnusson, DVM, DABVP, *Chair-Elect*; David Sandals, DVM, MSc; Mike Thomas, DVM. John R. Boyce, DVM, PhD, *Executive Director*

NBEC Membership Changes

After two years of relative stability, the NBEC membership has undergone some changes for 2001-2002.

Last November, following the untimely death of Dr. Richard Hawe, the AVMA Council on Education appointed Dr. George Cardinet to succeed Dr. Hawe. Dr. Cardinet attended the January 2001 meeting,

but subsequently resigned from the NBEC for personal reasons. He was replaced in May by Dr. Douglas Aspros (see below).

Dr. Catherine Cross completed three terms (nine years) of service on the NBEC at the July meeting in Boston as one of the two members designated by the American Animal Hospital

Association. Her successor is Dr. Mike Thomas of Indianapolis, IN.

Ms. Jenna Jones, the NBEC's public member, has indicated her intention to resign from the NBEC, because she is moving from Arizona to Texas and will no longer be a member of the Arizona Board. Her resignation is not yet official, and no successor has been named.



Front row, left to right: Drs. Al Hopkins, Norman LaFaunce, Nancy Collins, Cat Cross, and Don Draper. Back row: Drs. Douglas Aspros, David Sandals, James Dalley, Roger Magnusson, Michael Groves, R.B. Baker, Jan Krehbiel, and John Boyce. Not pictured, Ms. Jenna Jones

NBEC Member Profile: Dr. Douglas Aspros

As noted above, Dr. Douglas Aspros was appointed by the AVMA Council on Education to the NBEC in May to succeed Dr. George Cardinet. He was able to attend the NBEC's strategic planning meeting in June and attended his first regular NBEC meeting in July in Boston.

A native of New York City, Dr. Aspros graduated from the Bronx High School of Science and then did his undergraduate work at Cornell University. He received his DVM from the New York State College of Veterinary Medicine in 1975.

While he was a student at Cornell, Dr. Aspros expected to pursue a career as a veterinary epidemiologist, but after graduation he entered companion animal practice. For the last 20 years, Dr. Aspros has served as Hospital Director at the Bond Animal Hospital, an AAHA accredited small animal hospital in White Plains, New

York. He is also a managing shareholder in an emergency practice serving Westchester County.

Dr. Aspros has been active in organized veterinary medicine, serving in various leadership positions in the Westchester-Rockland County VMA and the New York State Veterinary Medical Society, including a term as President of the Society in 1997. He was elected to the AVMA Council on Education in 2000.

Dr. Aspros has been a member of the Westchester County Board of Health since 1985, and currently serves as the board's President. He is the only veterinarian in the State of New York to serve in that capacity.

His professional interests include avian and exotic animals, and he co-authored *The Basic Bird Book* with Elizabeth Randolph in 1989.



Dr. Aspros and his wife Dee have two teen age children, a champion Norfolk Terrier, a cat, and "various birds." In his spare time, he enjoys rowing, sailing, and skiing.

Audit, Technical Report Distributed

Copies of the NBEC's audit for 2000 were distributed to the NBEC's nine constituent organizations earlier this month. The audit shows revenue for the year of \$1,292,626 and expenses of \$1,086,952. Total unrestricted net assets at the end of the year were \$807,530. The NBEC has designated \$200,000 of these funds for examination research and development, and an additional \$60,000 as a security contingency fund. Additional copies of the audit are available from the NBEC office.

With the assistance of the National Board of Medical Examiners, the NBEC has prepared a Technical Report covering the first two NAVLE administrations. Copies of the report have been mailed to each licensing board and veterinary medical school in North America. Additional copies are available from the NBEC office, and a summary version of the technical report will be posted on the NBEC's web site.

PAVE Exams Update

Work on the Qualifying Examination, which will be used as part of the AAVSB's Program for the Assessment of Veterinary Education Equivalence (PAVE), is nearly finished. Plans call for the examination to be administered at Prometric testing centers on January 3 and August 15, 2002. The Qualifying Examination has been designed to cover material presented in the first three years of veterinary school, that is not covered adequately on the NAVLE. It includes five broad content areas: anatomy, physiology, pharmacology, microbiology, and pathology.

A panel of veterinarians met in Minneapolis in June to lay the ground work for the Veterinary Clinical Skills Assessment, a new hands-on practical test of clinical skills. The panel submitted a report to the NBEC last month. Further development of this examination will await the outcome of discussions between the AVMA and the AAVSB on harmonization of the ECFVG and PAVE programs.

A Comprehensive Examination (continued from page 1)

But aren't basic sciences important to competent practice? Certainly, basic sciences form the foundation for clinical practice, but because the NAVLE is a licensing examination and is not designed to evaluate a veterinary medical curriculum, it assesses basic science knowledge only indirectly. For example, the NAVLE does not include items that require candidates to evaluate histopathology slides, because that is not something that private practitioners do. However, the NAVLE might ask a candidate to interpret a pathology report from a biopsy submission, and recommend to the client an appropriate therapy. Similarly, the NAVLE requires candidates to understand the importance of antibiotic resistance when choosing a treatment regimen, but it does not include questions on the mechanism of resistance used by the particular organism.

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