

National Board Report

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Good Clients

I have said on more than one occasion that I view the licensing boards as the NBVME's clients, because the NBVME provides services for them (examinations), under the terms of a written agreement. This month, as we begin to wrap up another cycle of NAVLE applications, I am impressed again by how much work is required to administer the NAVLE program, and how many different people it takes to get the job done. Information on the examination must be disseminated, applications must be received and processed, fees must be deposited and accounted for, scheduling permits must be generated and mailed, testing appointments must be made, examinations must be administered and scored, and score reports must be generated and mailed. Did I mention that letters, telephone calls and e-mails must be answered? Clearly, there are many opportunities in this process for problems to arise. However, through the hard work of licensing board staff, the staff in our office, and staff at the National Board of Medical Examiners and Prometric, the NAVLE is delivered to over 4,000 candidates each year, with relatively few significant problems along the way. We even seem to be getting better over time!

Debbie, Anita, and I truly appreciate the opportunity we have to work with our friends and colleagues in licensing board offices around the country, and at the NEB in Ottawa. You are, certainly, good clients. We also enjoy working with the staff at the NBVME, who often go above and beyond the call of duty to get things done. People like you are what makes this a great place to work.

John R. Boyce, DVM, PhD
Executive Director

NAVLE Retake Policy Approved

At its January 22 meeting in Phoenix, the NBVME took several important actions, including approving a policy that will limit the number of times a candidate can take the NAVLE®.

NAVLE Retake Policy

For several years, the NBVME has been concerned about the possible impact on examination security and score validity when candidates repeat the NAVLE many times, a concern that is shared by licensing boards. Following its September 2004 annual meeting, the American Association of Veterinary State Boards (AAVSB) formed a task force consisting of licensing board members and executive officers to look into the retake issue. The recommendation from the task force was presented to the NBVME in January, and the board approved it.

The new policy will limit candidates to five attempts to pass the NAVLE in a five year period from the date of the first attempt. Each of the two final attempts must be at least one year from the previous attempt. The policy will be included in the 2005-06 NAVLE Letter of Agreement that the NBVME negotiates annually with each licensing board. In the event that state or provincial law specifically provides that an applicant may take the NAVLE more than five times, the law would prevail. The new limit will begin with the fall 2005 NAVLE administration, and will not apply retroactively. In other words, any attempts by a candidate prior to November-December 2005 will not count toward the five attempt limit.

Overseas Testing

Presently, the NAVLE is offered at Prometric testing centers in four countries outside North America where there is an AVMA accredited veterinary school (England, The Netherlands, New Zealand, and Australia). These sites are available only to candidates from the AVMA

accredited veterinary schools overseas. At the January meeting, the board voted to begin allowing any candidate to take the NAVLE at one of the existing overseas sites. Scheduling priority will be given to candidates from the accredited schools, and other candidates will be able to take the NAVLE at these sites on a space-available basis. The new policy will be applied beginning with the November-December 2005 administration. All candidates who want to take the NAVLE overseas must pay an additional fee of \$250.

VCSA Site

The board selected Cedar Valley College in Dallas, Texas as the site for the Veterinary Clinical Skills Assessment (VCSA). Members of the NBVME and Dr. Michael Paul, VCSA coordinator, visited Cedar Valley College and another potential site in December and January and reported their findings to the board.

Cedar Valley College is part of the Dallas County Community College system. It offers an accredited program in veterinary technology and a distance learning program developed in cooperation with the American Animal Hospital Association. The campus offers a central location for the examination, convenient access to a variety of large and small animal species, good animal facilities, and a staff eager to work with the NBVME on this project. Dr. Paul has assembled a team of veterinarians to oversee the development of the four main sections of the examination. The section heads met in Detroit in January, and will meet again in Dallas in March.

ECFVG Proposal

The board voted to submit a proposal to the Educational Commission for Foreign Veterinary Graduates (ECFVG) in response to a Request for Proposal issued by the ECFVG in December for the development of a new Step 3 examination for the ECFVG program.

Species Specific Examinations

Since 1997, the NBVME has made available to licensing boards two species specific examinations, one in companion animal medicine and one in equine medicine. Originally developed for licensing boards to use in disciplinary cases, where a licensee's knowledge of veterinary medicine was in question, the examinations are now available for boards to use for other purposes. The species specific examinations were extensively revised in 2003.

Each examination consists of 100 multiple choice questions. The items were taken from the national licensing examination item bank, and were selected to represent content that experienced practitioners would be expected to know. There are multiple forms of each examination, which allows a candidate to repeat an examination without seeing the same items again. Each form comes with an NBVME-recommended passing standard, established using a content-based standard setting process similar to that used for the NAVLE and the QE.

The cost of the species specific examination to the licensing board is \$250. The examinations are administered by the licensing board and can be given at any time. Examinations are scored by the NBVME office, usually within a day of receipt. Review copies can be sent to the licensing board upon request.

Boards interested in using the species specific examinations should contact the NBVME office.

From the Past: State Board Questions

Number 15 in a Series

The following questions are taken from *Veterinary State Board Questions and Answers* by V.G. Kimball, published in 1917. This book was made available to the NBVME by Dr. Don Hastings of Bismarck, ND. These questions continue from the surgery chapter.

Questions

1. Give the treatment of an umbilical hernia, the size of a hen's egg, in a colt one year old.
2. Give the treatment of purulent mastitis in cattle.
3. Give the symptoms, prognosis and treatment of fracture of the ulna.
4. State your opinion regarding the use of the actual cautery in the relief of equine lameness.
5. What anesthetics are commonly employed in major operations and minor operations on (a) the horse, and (b) the dog?

Answers

1. Produce an inflammatory swelling of the hernial ring by injecting into it a weak solution of silver nitrate and apply a truss. A better method is the radical operation - herniotomy and suturing of the hernial ring. Fast the animal and evacuate the bowels. Chloroform anesthesia is very desirable and more humane. Place the patient on its back, shave and disinfect the operative field. Make an incision through the skin, suture the hernial ring with silk or chromatinized catgut, with or without opening the peritoneal cavity. Close the skin wound and apply an antiseptic dressing holding

same in place with a body bandage.

2. Apply hot fomentations or poultices. Drain abscesses and disinfect. Irrigate the galactophorous sinuses with a four per cent solution of boric acid. It may be necessary to amputate one or both halves of the udder.

3. Symptoms: Supporting-leg lameness; flexion of all the joints from the elbow downward; displacement of the ulna and severe pain in this region. Crepitation may be detected.

Prognosis: Unfavorable, best to destroy. Treatment: Useless. Slings may be tried. Impossible to bandage.

4. The direct results which are attributed to the use of the actual cautery, e.g., strengthening tendons by the formation of cicatricial tissue, etc., are considerably overrated. The benefits are usually derived, indirectly, from the enforced rest following its use. Nevertheless, the actual cautery is a very valuable therapeutic agent. Puncture-firing augments local nutritive activity, converting chronic into acute processes and thus hastens their termination. Firing operations necessitate protracted rest and cause more or less immobility of the defective organs, both of which are of great benefit in bringing about a cure.

5. (a) Major: chloroform, chloral hydrate, cannabis indica. Minor: cocaine hydrochlorate, stovaine, and alypin. (c) Major: ether and morphine. Minor: cocaine hydrochlorate and stovaine.

Next Issue: Obstetrics.

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NAVLE and QE Item Development

Each year, approximately 25 NAVLE item writers and 10 QE item writers are selected to write items to be used on upcoming forms of the two examinations. The NBVME involves some new individuals in the item writing process each year, but experienced item writers are encouraged to serve at least two or three years if they wish.

New NAVLE item writers for 2005 include Drs. Elizabeth Pluhar, University of Minnesota; Saralyn Smith-Carr, Auburn University; Veronika Kiklevich, Boerne, TX; and Dianne Mawby, University of Tennessee (canine and feline); Isabelle Langlois, University of Montreal (pet bird); Loren Schultz, University of Missouri (bovine); Jeanne Lofstedt, University of Prince Edward Island; and Margo MacPherson, University of Florida (equine); and Clayton MacKay, Mississauga, ON (professional behavior, communications, and practice management). These individuals will join 21 returning

NAVLE item writers to prepare and review questions for the NAVLE in 2005.

New QE item writers for 2005 include Drs. Aslam Hassan, University of Illinois (physiology); Gina Michels, Pfizer (pharmacology); Phillip Nelson, Western University (immunology); Anne Zajac, Virginia Tech (parasitology); and Darren Wood, University of Guelph (clinical pathology). These individuals will work with returning QE item writers Drs. Bonnie Smith and Ed Murphey (anatomy), Thomas Martin-Jimenez (pharmacology), Robert Walker (bacteriology), and Sheila Grimes (pathology) to prepare and review QE items in 2005.

New NAVLE and QE item writers will participate in an item writing workshop at the offices of the National Board of Medical Examiners (NBME) in Philadelphia on February 28. Forms of the QE to be administered in 2005-06 will be reviewed and approved by all QE item writers on March 1.

New NAVLE Passing Standard Approved

Like most licensing examinations, the NAVLE uses a fixed passing standard. All candidates who achieve the passing score will pass the examination, regardless of the performance of other candidates. This approach to determining a passing standard, called content based or criterion referenced standard setting, uses the collective judgments of a panel of veterinarians who review and rate the difficulty of actual examination items.

Passing standards are reviewed periodically. The previous NAVLE passing standard was approved in January 2001, and was used for the first eight NAVLE administrations (November-December 2000 through April 2004). At its July 2004 meeting, the NBVME voted to conduct a new passing standard study.

A diverse group of 22 veterinarians, including academicians and private practitioners, met in

Philadelphia on December 14, 2004 for the standard setting workshop. The panel also included several recent graduates. During the orientation session, Dr. Raja Subhiyah, NBME staff psychometrician, helped the participants define the “minimally proficient candidate.” This is the candidate who has the minimum acceptable proficiency required to pass the examination. Next, the group went through several practice exercises, where each participant rated the difficulty of a NAVLE item, and then discussed their rating with the group. Participants then worked individually to rate 298 items from a form of the NAVLE administered in the fall of 2004, first without and then with feedback on actual candidate performance. This procedure is called the modified Angoff method. Finally, the participants made individual global estimates of examination difficulty and projected passing rates,

using a method called the Hofstee procedure.

Standard setting panel members included Drs. Douglas Aspros, James Dalley, Cheryl Dhein, Mara Doughty, Donald Draper, Benjamin Franklin, Gary Gackstetter, Reid Groman, Jay Hedrick, Sebastien Kfoury, Jeanne Lofstedt, Linda Lord, Georgie Ludwig, Clayton MacKay, Phillip Nelson, John Pascoe, Tiffany Summers, James Thorne, Rick Tubbs, Jeff Tyler, Jennifer Weisent, and Alice Wolf.

In January, after reviewing a report from the workshop, the NBVME Executive Committee approved a new passing standard for the NAVLE, which was applied beginning with the fall 2004 administration. The new standard requires candidates to answer more questions correctly in order to pass the examination. See the article on page 4 for more information.

NAVLE and QE Stats

NAVLE

A total of 3,325 candidates took the NAVLE during the November 15 - December 11, 2004 testing window. This was the most candidates for the fall administration in the five years the NAVLE has been offered. Scores were reported to licensing boards on January 26.

As noted on page 3, a new passing standard was applied to the fall 2004 examination. The passing score is still reported as 425 on the national scale (or as 70 or 75 on some local scales). However, since the new passing standard represents a somewhat higher level of performance than the standard applied to previous administrations, scores for examinations taken beginning in fall 2004 are not directly comparable to scores for prior administrations.

The fall 2004 candidate population included 2,495 criterion candidates, 208 non-criterion candidates, and 622 foreign-trained candidates. Criterion candidates are defined as senior students at AVMA

accredited schools taking the examination for the first time in English without accommodations. The passing rate for criterion candidates for the fall 2004 examination under the new passing standard was 89%. The passing rate for the same group for the previous four fall examinations ranged from 90 to 95%.

Qualifying Examination

Seventy-five candidates took the Qualifying Examination (QE) on January 20, 2005. This was the second QE administration conducted via the internet. The web-based examination was offered at 15 sites in the US, and in Puerto Rico, Scotland, and St. Kitts. Scores from the January administration will be reported by the end of February.

The next QE administration is scheduled for May 5, and at press time, 51 candidates have applied. Subsequent administrations of the QE are planned for September 15, 2005, and January 19 and May 11, 2006.

2005-06 NAVLE Agreements

Letters of Agreement between the NBVME and the individual licensing boards covering the 2005-06 NAVLE testing window will be mailed to boards in March. The main change from the previous year, other than the recommendation on limiting examination retakes mentioned on page 1, is an increase in the NAVLE fee from \$425 to \$450. The testing window dates will be November 14 - December 10, 2005 and April 10-22, 2006. The application deadlines will remain the same.

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