Psychiatry Summative Assessments:

Video Interview Write-Up & Psychiatry Shelf Exam

Dr. Schilling

Video Interview Write-Up 40 points 11.1%

Orientation immediately before exercise

- 30 minute video interview
  - Challenging patient
  - Interview is less than perfect
  - Will not have all the info you would like
  - Transcript provided to you

#### ~3 hours: write up

Video Interview Write-Up MSE section

- 1<sup>st</sup> day of Psych MSE
- Normal? Normal
  - Describe what you observed
  - Describe what you looked for but did not observe
- 10/40 points-25% of exercise
- Most students score > 9

## Video Interview Write-Up Differential diagnosis section

- Given diagnosis
  - Based on interview
  - Q: what info supports the dx?
  - Q: what info is inconsistent with, is lacking, or may even allow you to rule out dx?
  - 7 questions: (actually 9; 2 are double questions)
- Consider <u>ALL</u> the DSM-5 criteria for the dx
  - Show you know what you are looking for
  - Show if you found what you were looking for
- Explain your thinking!!
- 10/40 points-25% of exercise

## Video Interview Write-Up Treatment Plan

- End of the clerkship-show what you can do!!
- Further information provided
  - Dx: important you make note of this
  - Tx: current meds (will you continue, add to regimen, or stop one and start another?)
- 7-8 questions: A few have >1 part
- 20/40 points (50%)

## Study Strategy recs

- 1st day of clerkship; clerkship goals
  - Common and important Psych Dx
- Curriculum-sessions on
  - Anxiety dis, Substance dis, Major Depression
  - Jeopardy Boards: Bipolar, Schizophrenia
  - Shelf Prep quizzes:

MDD, BAD, Anxiety Dis (GAD, Panic dis) Schizo Spectrum (Brief psychotic, Schizophreniform, Schizophrenia, Schizoaffective, Delusional dis)

Video Interview Write Up: Summative assessment

### Study strategy recs

- Know common diagnoses well
  - Know diagnostic criteria so you can apply it
- Know common treatment(s) of common dx
  - Non-medication treatments?

Especially Substance diagnosis; MDD;

Meds?

What meds commonly used for common dx?

Study strategy recs Know a few commonly used meds well

- Anti-psychotic-SGA:
  - Quetiapine (Seroquel), Aripiprazole (Abilify)
  - Used to treat:

Schizophrenia & other psychotic illnesses Bipolar disorder

MDD-added to anti-depressant as adjunct tx

 Up-To-Date Summary info on Seroquel & Abilify Many advantages compared to other med options Fewer disadvantages compared to other med options

#### Study strategy

Know a few commonly used meds well

#### Anti-depressants

- Used to treat very common Psych Illnesses: MDD & GAD, Panic Disorder
- SSRI: sertraline or escitalopram or citalopram (Zoloft) (Lexapro) (Celexa)
- SNRI: venlafaxine (Effexor)
- Atypical: bupropion (Wellbutrin)
  - Can be combined with most other antidepressants
  - Side effect profile has advantages over other anti-depressants
  - Great for depression tx
  - Not good for anxiety tx

## Study strategy

Know a few commonly used meds well

#### Mood stabilizers:

- Li, Depakote, SGAs (already covered)
  - Commonly used in monotherapy
  - Commonly used in combination (nature of tx'ing Bipolar dis)
  - Li/Depakote + SGA/FGA
    - Monotherapy trials not working;
    - Severe manic episode
- Mania, Bipolar Depression, Maintenance
  - Lithium, Depakote, Quetiapine, others?
- Up-To-Date Summaries
  - Treatment of Bipolar Disorder
  - Bipolar Medications

### Video Interview Write-Up Treatment Plan

- Q: Given meds A, B; which do you recommend? A??
- Why do you recommend med A
   Put main focus on med A
   Provide 1, no more than 2, reasons for not recommending med B
- Advantages:
  - What desirable effect(s) does med A have? What does it treat?
     What med(s) treat all 3 phases of Bipolar?
     What med(s) + suicide risk?
     What meds treats psychosis & mood disorders?
     What meds treat severe mania?
     What treatments used for severe depression?

### Video Interview Write-Up **Treatment Plan**

Disadvantages = Side effects of med A: Serious Common SGA's: metabolic syn NMS Anti-depressants-+sex, +wt, GI Li- Many renal related issues Li toxicity DDI, polyuria, DI Depakote-liver related issues Both Li & Depakote:

Weight gain, tremor, GI

Serotonin Syn

Pancreatitis, ↑NH₄-enceph

Teratogenic

Provide one reason you did not choose the other med(s)

- Example: Med A ⇒ possible weight gain but much less likely than med B
- Example: Med A  $\Rightarrow$  no sexual side effect; med B may have sexual side effects

#### Video Interview Write-Up

#### In General

- Read the question carefully
- If the patient asked you the question, what would you tell the patient?
- Be as complete as you can
- Take advantage of the format and explain your thinking!!

Psychiatry Clerkship Shelf Exam 100 points 27.8%

- Change to the Psychiatry Shelf Exam
- Advantages:
  - Step 2 Preparation
  - UWorld as Shelf Prep
  - Match of the NBME/Shelf with clerkship textbook & curriculum Automatically there are many topics that match up well

#### Disadvantages

- Not all topic areas match up with curriculum
  - Child psych; Developmental Disorders
  - Topics that are less likely to be seen clinically
- UWorld as part of Shelf Prep vs Temptation to only do mcq's

# Preparation for

Video Interview Write Up & Shelf Exam

- Clerkship curriculum change in 2023-24
  - Shelf Prep Quizzes: Emphasis on diagnosis
- First Day of Clerkship
  - Psychiatry NBME Subject Examination Notes
     Should be much useful information
  - Know medications generic names
- LUMEN/Sakai clerkship website:
  - Recorded Lectures & Powerpoints slides
  - Up-To-Date Summaries (7)
    - Treatment of: Anxiety Disorders, Bipolar Disorder,
      - Major Depression Disorder, Substance Use Dis
    - Meds: Antidepressants, Antipsychotics, Bipolar Meds

# Preparation for

Video Interview Write Up & Shelf Exam

- Different ways to learn the material
  - Spaced Retrieval Practice & Repetition:
    - Jeopardy Boards (6) as Flash Cards
    - Schizophrenia, Bipolar, Substance, Antidepressants, Antipsychotics, Mood Stabilizers
  - Study with a peer:
    - Most studying is an individual pursuit
    - Try a little collaboration with a peer
      - Discuss Up-To-Date Summaries: ask your own questions
      - Discuss other clerkship material-Lecture Ppts
    - Share how you remember various info!
    - Encourage each other!

## Passing Standard & Shelf Exam Data

- CCA Set Minimum Passing Standard for all core clerkships @5<sup>th</sup> Percentile nationally
  - Psychiatry: 72 is minimum passing score
- Last year: 2023-24
- 8 clerkships N=164
  - 40/164 (24.4%) > 80<sup>th</sup> percentile nationally
  - 81/164 (49.4%) > 50<sup>th</sup> percentile nationally
  - 23/164 (14.0%) < 20<sup>th</sup> percentile nationally
  - 5 fails:
     71, 71, 67;
     69
     63

     remediation:
     88, 78, 73;
     not yet done
- Data looks good! You can also do well!!

# Put in the work & you too will do well on the Psychiatry Shelf Exam!!

# Good luck!