

BEST CANDIDATE OF THE YEAR 2004: DR FIONA LEUNG

Dr Fiona Leung received her surgical training in PYNEH surgical department. She sat for the conjoint exit examination in 2004. As the best candidate for the whole year, Fiona was conferred the Li-Shields Medal in October 2005. She is currently a specialist surgeon in PYNEH.

As a distinguished 'examinee', Fiona's examination tactics and skills might be of interest to the HSTs and young members. The following is my interview with her.

How did you prepare the exit examination? Did you do the revision on your own, or did you form a study group?

I had spent a whole year preparing the examination. There are several important things you have to know before you start studying. The nugget is the examination syllabus; it helps you put the emphasis on the correct areas. On top of that, I had collected a list of textbooks and past examination questions which were found useful by my predecessors. Strictly speaking, I did not form any study group, but I did a lot of discussions with my colleagues and seniors, which helped stimulate my thinking and it served as a kind of practice on my presentation skills.

In your revision, did you put emphasis on textbooks or journal articles? In the oral examination, were there lots of questions on controversial subjects in recently published journals, or in fact most questions were standard textbook stuff with definite model answers?

Personally, I did not read many journals except those renowned ones. It's boring to read on my own and I found it much more interesting and time-saving to present and criticise the journals among colleagues. In fact, my examiner only posed very few questions on those topics that required in-depth knowledge of published journal articles.

Besides doing lots of reading, what other things should we do during preparation?

Besides reading, I also attended lots of in-house clinical meetings and open academic conferences. The x-ray meetings, mortality meetings and academic conferences help update our knowledge. They provide a good review on common topics and serve as an opportunity to answer questions.

In our hospital, there is a mock examination every six months for HSTs. The format is exactly the same as the College examination. Initially I did not see any point of doing this kind of exercise. Later I was fully aware of its merit. It helped me get used to the examination format, the environment and the kind of pressure.

Like in any other examinations, knowledge is of paramount importance but it's not the only part of the game. The way to communicate is also very important. Therefore besides book work, I also read a lot of newspapers. Yes! Read out loudly and confidently!

Which was the toughest bit, oral or clinical?

The clinical part is more difficult than the viva. One has to get control of the examiner and the patient simultaneously. One cannot 'distract' the examiner by changing the topics, as all questions and answers are pinpointing to that particular case. Don't panic, always remember the basic stuff. You can still score some marks by your examination and clinic deduction skills, but you will fail if you make a silly mistake.

Do you think doing research, writing papers, etc. will help you get through the academic viva?

Yes! Writing a paper by yourself would be better than only reading journal articles. Once you go through the process of writing a paper, you will appreciate more on how to read and criticise a paper.

Did the viva and clinical examination centre around common, bread and butter issues in everyday clinical practice? Or are the questions and cases very difficult, and rarely seen in your lifetime?

In fact, the objective of the examination is not finding elite doctors. The College aims to make sure that their fellows are capable of independent, safe clinical practice. That's why most questions are commonly seen in our daily practice. As such, the examiners are not testing your memory, but checking how clear your concept is on those subjects. Therefore, common issues may not be that easy to answer.

Tell me your tactics in answering questions in the viva. It is often difficult to know what the examiner wants at the outset; but in case we do, shall we then go straight to the point? Or shall we try to be 'global' and systematic, and carry on slowly just to kill time and avoid making further mistakes? It is said by some that this tactic will help secure a pass. But will this approach irritate the examiners?

Dr Chung, you are the better one to answer this question! I think most examiners are well 'trained'. They conveyed most questions very clearly. In answering, try to let the examiners view yourself as their working partners. Answer the most important point and your most familiar area first. Answers need not be long. You can pause for a few seconds and see their responses. I had encountered a situation like this - after attempting to answer the question, the examiner remained mute, then I asked, "May I elaborate more on the management plan?". He then posed a much more specific question on me. The point is, not only the candidates, but the examiners also need time to think and react.

So, dear HSTs, did you get something out of this?

Cliff C C CHUNG