

Objective Structured Clinical Examination (OSCE)

OSCE is a modern method for the final assessment of professional competencies in medical educational institutions. The examination is conducted in the format of sequentially passing through stations, each of which is aimed at assessing specific practical skills, clinical reasoning, communication abilities, and the level of professional training.

Objectives of OSCE

- Assessment of the level of professional competencies acquired according to the educational program.
- Evaluation of the student's ability to apply theoretical knowledge in conditions close to real clinical practice.
- Development and enhancement of interpersonal communication skills and interaction with patients.













Methodology of OSCE

1. Organization of stations:

- Each station has clearly regulated tasks, including a description of the clinical scenario and the goal of the task.
- The duration of work at each station ranges from 5 to 15 minutes.

2. Types of stations:

- **Diagnostic:** Analysis of clinical cases, interpretation of laboratory and instrumental data.
- **Therapeutic:** Performing manual skills (e.g., catheter insertion, administering injections).
- **Communication:** Interaction with patients, standardized or simulated.

3. Assessment tools:

- Checklists containing key parameters for task performance.
- Use of simulators, mannequins, virtual technologies, and standardized patients.

Evaluation Criteria

- Objectivity of results is ensured through a unified scoring system that describes the completion of each task step.

- Assessment includes an analysis of accuracy, sequence, logic of task execution, and communication competence.

The Role of OSCE in the Educational Program

OSCE is integrated into the educational process as the final stage of training specialists. This method allows for an objective assessment of future doctors' readiness for practical activities, identifies their professional strengths, and detects gaps that require improvement.

Advantages of OSCE

- High level of objectivity due to standardized assessment.
- A systematic approach to evaluating theoretical knowledge and practical skills.
- The possibility of implementing innovative technologies (virtual reality, digital simulators).

Clinical Scenario:

"A child came to the Primary Healthcare Center with his mother, complaining of a rare dry cough for the past two days. According to the mother, the boy tried to hide his symptoms, explaining that he had choked on something. The mother insists on an examination because the boy's grandfather passed away from tuberculosis."

No	Action Parameter	Score (✓ 1 – completed, ✗ 0 – not completed, ● 0.5 – partially completed)
I. Preparatory Stage		
1	Established contact with the child (or representative), greeted them	✓ / ✗ / ●
2	Introduced themselves and stated their role	✓ / ✗ / ●
3	Identified the patient (<i>Introductory information is provided by the examiner when actions are performed</i>)	✓ / ✗ / ●
4	Inquired about the patient's well-being	✓ / ✗ / ●

№	Action Parameter	Score (✓ 1 – completed, ✗ 0 – not completed, ● 0.5 – partially completed)
5	Obtained the patient's consent for the examination (explained the procedure, clarified any questions)	✓ / ✗ / ●
6	Sanitized hands before the procedure	✓ / ✗ / ●
7	Disinfected the stethoscope's ear tips and diaphragm, properly disposed of used materials	✓ / ✗ / ●
II. Main Stage		
8	Assisted the child in undressing or undressed the child	✓ / ✗ / ●
9	Examined and properly assessed skin condition (color, cleanliness, moisture, elasticity)	✓ / ✗ / ●
10	Evaluated the patient's posture (active/passive, forced/free)	✓ / ✗ / ●
11	Performed pulse oximetry	✓ / ✗ / ●
12	Assessed nasal breathing	✓ / ✗ / ●
13	Examined the oral cavity and throat: Mucous membranes, palatine arches, tonsils, posterior pharyngeal wall	✓ / ✗ / ●
	Evaluated the condition of the teeth	✓ / ✗ / ●
14	Examined the chest: Type, shape, symmetry	✓ / ✗ / ●
	Checked for synchronous movement of the right and left halves of the chest	✓ / ✗ / ●
	Evaluated type, depth, rhythm, and respiratory rate	✓ / ✗ / ●
15	Performed chest palpation: Assessed chest resistance	✓ / ✗ / ●
	Checked vocal fremitus	✓ / ✗ / ●
16	Performed comparative percussion of the lungs and evaluated results	✓ / ✗ / ●
17	Conducted lung auscultation and correctly assessed findings	✓ / ✗ / ●
18	Properly disposed of used materials	✓ / ✗ / ●

No	Action Parameter	Score (✓ 1 – completed, ✗ 0 – not completed, ● 0.5 – partially completed)
III. Concluding Stage		
19	Concluded the examination (informed child, assisted in dressing)	✓ / ✗ / ●
20	Disinfected the stethoscope's ear tips and diaphragm, properly disposed of materials	✓ / ✗ / ●
21	Sanitized hands after the procedure	✓ / ✗ / ●
22	Correctly formulated a preliminary diagnosis based on examination results	✓ / ✗ / ●
23	Reassured the representative (parent/guardian) and informed them of no respiratory pathology	✓ / ✗ / ●
24	Ordered "Chest X-ray" at the persistent request of the representative	✓ / ✗ / ●
Final Score: _____/24		

Examiner's Full Name: _____

Signature: _____

Date: _____

Score Conversion Scale

(Rescaling the points earned by the examinee at the station into a 10-point grading scale for Evaluation Sheet (Checklist) No. 1)

Points Earned	10-Point Grading Scale
1-4	1
5-7	2
8-10	3
11-12	4
13-14	5

Points Earned	10-Point Grading Scale
15-17	6
18-21	7
22-24	8
25-27	9
28	10

Defect Report

for Evaluation Sheet (Checklist) No. ____
 (specified according to the sequential number of the case (scenario)
 for the examination station "Physical Examination of the Respiratory System in a
 Pediatric Patient"
 of the Objective Structured Clinical Examination (OSCE)
 for the academic discipline "Pediatric Diseases")

Student's Full Name: _____

Faculty: _____ Group: _____ Course: _____
 Department: _____

Practical Skill (Procedure): Physical Examination of the Respiratory System in a
 Child

List of Non-Standard and Unsafe Actions Not Included in the Evaluation Sheet
 (Checklist)

No	Non-Regulated and Unsafe Actions Not Listed in the Evaluation Sheet (Checklist)	Date	Examiner's Signature
1			
2			
3			

List of Additional Clinically Significant Actions Not Included in the Evaluation
 Sheet (Checklist)

No	Additional Actions with Clinical Significance Not Included in the Evaluation Sheet (Checklist)	Date	Examiner's Signature
1			

Recommendations for Organizing the "Physical Examination of the Respiratory System in a Pediatric Patient" OSCE Station for the Next Exam

Examiner's Full Name: _____

Date: _____
